

STATE OF WEST VIRGINIA



RETIREE HEALTH BENEFIT TRUST FUND

Quarterly Report
March 31, 2020

Fiscal Years 2020-2024

Report Date: July 2020

YOUR ACTUARIES FOR THE LONG-TERM!



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Finance Board
West Virginia Retiree Health Benefit Trust Fund
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Ladies and Gentlemen:

I, Dave Bond, am a Fellow of the Society of Actuaries, a Member of the American Academy of Actuaries, and the Managing Partner in the firm of Continuing Care Actuaries.

During the 2006 Regular Session of the West Virginia Legislature, House Bill 4654 was enacted creating the West Virginia Retiree Health Benefit Trust Fund (“Trust Fund” or “RHBT”) for the purpose of providing for and administering retiree post-employment health care benefits, and the respective revenues and costs of those benefits as a cost sharing multiple employer plan. The Public Employees Insurance Agency (“PEIA”), on behalf of the Public Employees Insurance Agency Finance Board (“Board”), is responsible for the day-to-day operation of the Trust Fund, including all administrative functions.

Statutory provisions governing the Trust Fund require the actuary retained by the PEIA to provide technical advice regarding the operation of the Trust Fund. Using the actuarial assumptions most recently adopted by the Board, the actuary is required to develop actuarial valuations of normal cost, actuarial liability, actuarial value of assets, and related actuarial present values for the West Virginia plan for other post-employment benefits including health insurance. Consequently, the Board has requested Continuing Care Actuaries to prepare a report separating the actuarial projections for the Trust Fund from the PEIA forecast report. The West Virginia Retiree Health Benefit Trust Fund has assumed the financial liabilities of the retiree programs previously under the PEIA effective July 1, 2006.

The provisions of the Code of West Virginia (“Code”), 1931, as amended, charge the Board with the responsibility to prepare a proposed financial plan designed to generate revenues sufficient to meet all estimated program and administrative costs of the RHBT, including incurred but unreported claims, for the fiscal year for which the plan is proposed. Continuing Care Actuaries has been retained by the RHBT to review the proposed financial plan, and as supported by our work, to render an actuarial opinion stating whether the plan may be reasonably expected to generate sufficient revenues to meet estimated insurance program and administrative costs of the plan through FY 2024. Our analysis is developed on an accrued and incurred reporting basis for a projection period of five years as required by the Code.

The Code provisions also require the Board to establish and maintain a reserve fund for PEIA for the purposes of offsetting unanticipated claim losses in any fiscal year. Beginning with the Fiscal Year 2002 plan and for each succeeding fiscal year plan, the Board shall transfer ten percent of the projected total plan costs for that year into the reserve fund, which is to be certified by the actuary and included in the final, approved financial plan submitted to the Governor and Legislature in accordance with the provisions of the Code. On March 9, 2019, the provisions had effectively ended.

Continuing Care Actuaries has provided financial report for fiscal year ending June 30, 2020 (“FY 2020”), June 30, 2021 (“FY 2021”), June 30, 2022 (“FY 2022”), June 30, 2023 (“FY 2023”) and June 30, 2024 (“FY 2024”). Our opinion of plan adequacy is based on the projections through FY 2024 using updated future revenue and plan modifications provided by the Board in the plan adopted in December 2019.

Effective July 1, 2012, RHBT has contracted with Humana to provide a Medicare Advantage Plan (“Humana MAPD”) benefit to Medicare-eligible retired employees and their Medicare-eligible dependents. Under this arrangement, Humana has assumed the financial risk of providing comprehensive medical and drug coverage with limited copayments. Non-Medicare retirees will continue enrollment in PEIA's Preferred Provider Benefit or the Managed Care Option.

Current Medicare coverages are transferred from a self-insured secondary basis by RHBT to the Humana MAPD plan. However, it should be noted that new Medicare eligible retirees, who become Medicare eligible during the calendar year, will be covered on a secondary basis by the PPB Plan until the beginning of the next calendar year.

The Medicaid / RHBT Hospital Bill (“Bill”) has been extended and is anticipated to continue to provide RHBT with hospital charge savings through discounts for all retiree non-Medicare coverages. These hospital savings are assumed to increase by the medical trend assumptions in Fiscal Year 2020 and subsequently. We are assuming that the Bill will continue throughout the five year forecast period.

In reviewing the plan, Continuing Care Actuaries utilized information concerning the plan’s prior experience, covered individuals, plan revenues, plan benefits, plan administrative costs, and other expenses. This information was developed and provided by RHBT, the plan’s third party administrators and other sources. In our review, we completely relied on the accuracy of this information and did not perform any due diligence on the information. The enclosed forecasts include anticipated changes from the federal statute Patient Protection and Affordable Care Act (“PPACA”) signed into law on March 23, 2010. Additional details of the benefit enhancements and costs can be found later in this report. In addition, it is noteworthy that some current RHBT members have become eligible for the West Virginia Children Health Insurance Plan effective in Fiscal Year 2016.

In FY 2020 the Pay-Go is equivalent to \$271 per retiree per month. In future years, the Pay Go premium may increase by a maximum of 3% per retiree per year, indexed to the initial fixed subsidy determined in FY 2013. The new Pay-Go premium formula is based on the financial plan approved by the Board in December 2019.

Under Senate Bill 419 amended West Virginia code section 11-21-96, effective February 26, 2016, notwithstanding any other provision of this code to the contrary, beginning in January of 2006, \$45 million from collections of the tax imposed by this article shall be deposited each calendar year to the credit of the Workers' Compensation fund created in article two-c, chapter twenty-three of this Enr. SB 419 code.

The transfers required by the section 11-21-96 ceased on February 1, 2016. Beginning Fiscal Year 2017, an annual amount of \$30 million from annual collections of the tax imposed by this article was dedicated for payment of the unfunded liability of the West Virginia Retiree Health Benefit Trust Fund. The \$30 million transferred pursuant to this subsection shall be transferred into the West Virginia Retiree Health Benefit Trust Fund by transferring \$5 million each month for the following months of each year: October, November, December, January, February and March, until the Governor certifies to the Legislature that an independent actuarial study has determined that the unfunded liability of West Virginia Retiree Health Benefit Trust Fund, as created in section two, article sixteen-d, chapter five of this code, has been provided for in its entirety or July 1, 2037, whichever date is later. RHBT started receiving the aforementioned \$30 million transfers in 2017. All employers would receive benefit of these contributions.

Based on our review, and subject to the conditions described herein, we believe the financial plan approved by the Board for FY 2020 through FY 2024 may be reasonably expected to generate sufficient revenues, when combined with the existing surplus, to meet estimated insurance program and administrative costs of the Trust Fund.

This conclusion is based on significant revenue increases in employer, employee, and retiree premiums in later fiscal years of the plan through FY 2024 as approved by the Board in December 2019.

The preparation of any estimate of future health costs requires consideration of a broad array of complex social and economic events. Changes in reimbursement methodology, the emergence of new and expensive medical procedures and prescription drugs options, and the continuing evolution and changes of the framework of MAPD plan and other managed care options impacting Non-Medicare retirees, as are contemplated in the Board's proposed plan, increase the level of uncertainty of such estimates. As such, the estimate costs of insurance program contain considerable uncertainty and variability and actual experience may not conform to the assumptions utilized in this report.

Respectfully,



Dave Bond, F.S.A., F.C.A., M.A.A.A.

Managing Partner



Chris Borcik, F.S.A., F.C.A., M.A.A.A.

Principal

West Virginia Retiree Health Benefit Trust Fund

Report of Independent Actuary

Financial Plan for FY 2020 – FY 2024

OVERVIEW

This report analyzes revenues and expenses related to funding the health insurance benefits of retired employees of the State of West Virginia and various local agencies, together with their dependents. This report is intended for the sole use of the Board, and any other use requires written approval by Continuing Care Actuaries.

This report was compiled utilizing claims data collected by RHBT's third party administrators through May 2020 for prescription drugs and medical claims. Enrollment data, administrative expenses, managed care capitations, and plan revenues were provided at special request from RHBT. Revenue assumptions are based on premium rates, assumed investment income and significant general and special revenue allocations provided by the Governor, some which have not been approved by the West Virginia Legislature. In addition, other information became available through presentations made at Board meetings, which has been used in arriving at our conclusions.

The Code of West Virginia establishes the actuarial reporting requirements for the Trust Fund on an incurred basis for medical claims, prescription drug claims and capitations, and on an accrued basis for administrative expenses and revenue for a period of five years. The Fund represents state and local agency retirees and their survivors. The Trust Fund is allocated its share of administrative costs from PEIA.

KEY ASSUMPTIONS

A. Enrollment Changes

The Board has requested that the projection assume retiree enrollment growth consistent with the experience of the plan. These projections assume that the Trust Fund will annually have 1,000 additional policies. We have observed a net increase of 50 policies from June 2019 to June 2020. Continuing Care Actuaries has updated the claims analysis based on the enrollment through June 2020.

In aggregate, June 2020 enrollment has increased by 50 coverages since the end of FY 2019. Aggregate Preferred Provider Benefit (“PPB”) enrollment has increased by 85 in total over the same period, while managed care enrollment continues to cover fewer participants, with a decrease of 35 coverage. For MAPD Capitations, the average of 51,530 Medicare policyholders in FY 2020 was used to calculate the capitation cost.

The following chart summarizes the current enrollment as of the selected monthly billing dates of June 2018, June 2019 and June 2020 for purposes of comparison:

Trust Fund	Coverage	Preferred Provider Benefit*			Managed Care		
		Jun-18	Jun-19	Jun-20	Jun-18	Jun-19	Jun-20
Retirees	Medicare Single	20,901	21,319	21,594	-	-	-
	Medicare Family	15,473	15,830	16,058	-	-	-
	Medicare Total	36,374	37,149	37,652	-	-	-
	Non-Medicare Single	2,849	2,583	2,396	125	130	111
	Non-Medicare Family	3,568	3,225	2,994	141	133	117
	Non-Medicare Total	6,417	5,808	5,390	266	263	228
	Retiree Total	42,791	42,957	43,042	266	263	228
	Grand Total				43,057	43,220	43,270

* The majority of PPB is capitated through Humana. As of June 2020, there are approximately 684 Medicare retiree coverages under PEIA.

B. Changes in Claim Backlog

Detail of the medical claim backlog is presented in the PEIA report titled “PEIA Quarterly Report March 31, 2020 Fiscal Years 2020-2024 Report”.

C. Trend Analysis

RHBT experienced a lower medical trend and a higher prescription drugs trend in FY 2019, but over the past few years, trends have been beneficial to the plan. Continuing Care Actuaries performed the detailed medical and prescription drugs trend analysis in the report titled, “PEIA FY 2019 Detailed Medical and Prescription Drugs Claim Trend Report”. This report includes the detailed trend analysis of PEIA experience by medical and prescription drugs. Based on the analysis, the FY 2020 medical claim trend is 8.0%, the gross prescription drugs claim trend is 12.0% and the prescription drugs rebate trend is 20.0%.

The current trend projection is shown in the following table:

Claim Type	Previous Assumption FY 2020 Trend	Updated Assumption FY 2020 Trend
Non-Medicare – Medical	8.0%	8.0%
Medicare – Medical	8.0%	8.0%
Non-Medicare – Gross Drugs	12.0%	12.0%
Medicare – Gross Drugs	12.0%	12.0%
Prescription Drugs Rebate	20.0%	20.0%

In addition, we have assumed that trends will increase by 0.5% in each successive fiscal year beginning in FY 2021. At the Board’s request, the baseline trend assumptions have been established to reflect the most likely or expected trends.

The following chart summarizes the trend results observed for the plan using data through May 2020. It is important to note that these trends ***have not*** been adjusted to reflect savings as a result of the expansion of the drug rebate program or the claim savings due to changes in provider reimbursement methodologies nor changes in the benefit structure. In developing the claim cost projection, we have reflected for benefit and reimbursement changes as an adjustment to the gross trend assumption.

Aggregate Trust Fund Historical Trends (Retirees)

<u>Fiscal Year</u>	<u>Medical Medicare</u>	<u>Medical Non-Medicare</u>	<u>Drugs Medicare</u>	<u>Drugs Non-Medicare</u>	<u>Total</u>
2004	9%	2%	3%	-2%	6%
2005	6%	-2%	16%	1%	8%
2006	6%	5%	11%	17%	8%
2007	6%	1%	6%	6%	5%
2008	N/A	6%	N/A	-1%	N/A
2009	N/A	-2%	N/A	5%	N/A
2010	N/A	3%	N/A	7%	N/A
2011	N/A	12%	N/A	16%	N/A
2012	-5%	-6%	2%	8%	-2%
2013	23%	-3%	-3%	-7%	-2%
2014	N/A	7%	N/A	6%	N/A
2015	N/A	6%	N/A	5%	N/A
2016	-10%	2%	11%	9%	3%
2017	11%	0%	10%	31%	9%
2018	12%	8%	41%	14%	12%
2019	42%	1%	-1%	20%	8%
2020*	18%	-1%	-6%	13%	3%

* Fiscal Year 2020 results are through the first eleven months ending May 2020. It should be noted that Humana's plan year starts in January 2014 in calendar year basis (not starting in July as in PEIA plan year basis) and the Medicare trends are not statistically credible in 2014 and 2015.

Effective July 1, 2007, PEIA contracted with Coventry Advantra Freedom to provide Medicare Advantage/Prescription Drug Plan ("Coventry MA and PDP") Benefits to Medicare-eligible retired employees and dependents. Under this arrangement, Coventry Advantra Freedom had assumed the financial risk of providing comprehensive medical and prescription drug coverage with limited copayments. This arrangement expired on June 30, 2010. As a result, Fiscal Year 2008 through 2011 Medicare trends are not statistically credible. RHBT left the Coventry MA and PDP program as of June 30, 2012, and RHBT assigned Medicare eligible retirees to the Humana MAPD program starting July 1, 2012.

D. Enrollment, Claim, Expense and Revenue Assumptions

Using aggregate PEIA and Trust Fund paid claim data through May 2020 for medical claims and for prescription drugs claims, average annualized incurred unit claim costs were developed for the Trust Fund for both self-funded and managed care coverages. Continuing Care Actuaries has developed the claim cost on an adjusted exposure basis using the respective expected claim cost for each coverage type. The adjusted exposure methodology weighs the expected claim cost under each coverage type for single, member and children, and family coverages based on observed differences in health care cost. For example, under this methodology single coverage types are given a weight of 1.0 exposure, whereas member and children coverages are given a greater weighting based on historical expected health care cost relationships. Based on this methodology, the projection of FY 2020 claims and expenses are summarized in the following chart. It should be noted that the chart reflects per policy information.

Fiscal Year 2020 Projection			Revenue		Expenses		
Fund	Program	Policies	Monthly Employer Premiums	Monthly Policyholder Premiums	Monthly Medical Costs	Monthly Drugs Costs*	Monthly Capitation Costs
Retiree	Medicare Humana and Express Scripts	37,589			\$68**	\$193**	\$174
	Non-Medicare	5,720			\$774	\$319	
	Total	43,309	\$0	\$160			
	Non-Medicare Managed Care	242	\$0	\$614			\$1,363
	Total	43,551					

*Net of rebates and subsidies.

** As of June 2020, there are approximately 684 Medicare coverages that were not capitated through Humana.

Projected plan revenues and administrative expenses were provided by RHBT. The following chart summarizes the Financial Plan adopted by the Board in December 2019.

Board Decisions – December 2019

Source	Fiscal Year 2020	Fiscal Year 2021	Fiscal Year 2022	Fiscal Year 2023	Fiscal Year 2024
Additional Non-Medicare Retiree Premium (Fiscal Year)	\$0	\$0	\$1,357,615	\$1,374,001	\$1,388,772
Additional Medicare Retiree Premium (Calendar Year)	\$0	\$0	\$4,812,186	\$5,148,436	\$5,508,130
General Revenue Transfer (OPEB Funding)	\$30,000,000	\$30,000,000	\$30,000,000	\$30,000,000	\$30,000,000
General Revenue Transfer (Premium Offset)	\$5,000,000	\$0	\$0	\$0	\$0
Benefit Reductions and Savings / (Increase) - Retiree Non-Medicare	(\$800,000)	\$0	\$0	\$0	\$0
Board Decision Benefit Reduction – Retiree Medicare	\$0	\$0	\$0	\$0	\$0
Benefit Reductions / (Increase) - Humana MAPD (Calendar Year)	\$0	\$0	\$0	\$0	\$0
ACA PCORI Fees (Cost)	(\$33,801)	(\$32,078)	(\$33,276)	(\$34,439)	(\$35,567)
Pay Go Premium Transfer	\$141,377,255	\$135,000,000	\$140,000,000	\$150,000,000	\$160,000,000
Actuarial Accrued Liability*	\$3,191,774,318	\$3,268,136,134	\$3,337,849,000	\$3,402,102,207	\$3,461,788,072
Funded Status	34.2%	36.3%	39.6%	43.2%	47.0%

*Projected Result

The \$800,000 of Retiree Non-Medicare benefit additions and costs in Fiscal Year 2020 is comprised of the following:

	<u>Benefit Cost/(Savings)</u>
Medical Claims	\$0.550 M
Drug Claims	\$0.250 M

A detailed list of the 2020 benefit additions and costs for the Non-Medicare Retirees as voted on by the Board consists of the following:

	<u>Non-Medicare Savings</u>
Plan A out of state coverage 80/20 for Contig Providers	\$0.400 M
Plan B out of state coverage 70/30 for Contig Providers	\$0.000 M
Remove facility fee max (RBP)	\$1.200 M
Remove \$25 copay from out of state services	\$0.400 M
End Healthy Tomorrows blood work	\$0.050 M
<u>UMR OOS Network Savings</u>	<u>(\$1.500 M)</u>
Total Medical Benefit Additions	\$0.550 M
<u>Third tier non-preferred drug appeals process</u>	<u>\$0.250 M</u>
Total Drugs Costs	\$0.250 M
Total Benefit Additions and Costs	\$0.800 M

In FY 2020, the additional administrative costs are \$500,000 for the Non-Medicare Retirees, RHBT will have no increase in Non-Medicare and Medicare retiree premiums, and RHBT will receive \$35,000,000 in general revenue transfers.

It is anticipated that RHBT would accrue and pay these fees through FY 2019. The total comparative effectiveness research fees for the financial projection are estimated to be \$0 in FY 2020.

Future fiscal year State revenue increases will require legislative appropriation. Additional retiree premiums represent premiums paid by retirees either directly or through sick and annual leave conversion credits. Additionally, RHBT management has assumed that the Retiree Premium Assistance Program will grow as a direct result from the required retiree premium increases in the financial plan. The program's cost is currently projected to grow from \$1,814,814 in FY 2020 to \$2,469,034 in FY 2024, based on the Board's direction and projected retiree enrollment growth in the financial plan.

In FY 2020 the ACA PCORI fee is \$2.54 per person per year.

PEIA has received a \$6,300,000 credit for a network guarantee between July 1, 2018 and June 30, 2019 from CVS. \$5,450,000 of the credit has been allocated between PEIA State drug and Local drug claims, and \$850,000 of the credit has been allocated between RHBT Non-Medicare drug and Medicare drug claims in FY 2020.

There is a one-time added cost in FY 2021 for the delayed benefits and pent up demand due to COVID19. \$8,500,000 has been allocated between PEIA State medical and Local medical claims, and \$920,000 has been allocated between RHBT Non-Medicare medical and Medicare medical claims in FY 2021.

E. Provider Reimbursement Changes

Effective July 1, 2012, RHBT has contracted with Humana to provide a Medicare Advantage Plan (“Humana MAPD”) benefit to Medicare-eligible retired employees and their Medicare-eligible dependents. Under this arrangement, Humana has assumed the financial risk of providing comprehensive medical and drug coverage with limited copayments. RHBT has had favorable renewals resulting in reduced MAPD capitations. However, on January 1, 2020, CMS reinstated the ACA Health Insurance Fee. This fee resulted in an increase to the existing capitations and an estimate of this increase is included in the CY 2020 capitation cost. Under current law, this fee will end on December 31, 2020. Non-Medicare retirees will continue enrollment in PEIA's Preferred Provider Benefit or the Managed Care Option.

It should be noted that RHBT left the Coventry MA and PDP program as of June 30, 2012, and RHBT assigned Medicare eligible retirees to the Humana MAPD program starting July 1, 2012.

FISCAL YEAR 2020 FORECAST

The financial forecast for FY 2020 under the Baseline scenario is presented in the Appendix. The Baseline forecast for FY 2020 projects accrued revenue of \$289,134,780 and incurred plan expenses of \$194,102,869 to produce a fiscal year surplus of \$95,031,911 after the Premium Stabilization Reserve drawdown of \$0. The PEIA local and state agencies Pay Go premiums for FY 2020 are assumed to be \$141,377,255.

FISCAL YEAR 2021 FORECAST

The financial forecast for FY 2021 under the Baseline scenario is presented in the Appendix. The Baseline forecast for FY 2021 projects accrued revenue of \$366,742,068 and incurred plan expenses of \$232,616,963 to produce a fiscal year surplus of \$134,125,105 after the Premium Stabilization Reserve drawdown of \$0. The PEIA local and state agencies Pay Go premiums for FY 2021 are assumed to be \$135,000,000.

FISCAL YEAR 2022 FORECAST

The financial forecast for FY 2022 under the Baseline scenario is presented in the Appendix. The Baseline forecast for FY 2022 projects accrued revenue of \$386,921,217 and incurred plan expenses of \$237,855,204 to produce a fiscal year surplus of \$149,066,014 after the Premium Stabilization Reserve drawdown of \$0. The PEIA local and state agencies Pay Go premiums for FY 2022 are assumed to be \$140,000,000.

FISCAL YEAR 2023 FORECAST

The financial forecast for FY 2023 under the Baseline scenario is presented in the Appendix. The Baseline forecast for FY 2023 projects accrued revenue of \$414,907,397 and incurred plan expenses of \$258,492,859 to produce a fiscal year surplus of \$156,414,538 after the Premium Stabilization Reserve drawdown of \$0. The PEIA local and state agencies Pay Go premiums for FY 2023 are assumed to be \$150,000,000.

FISCAL YEAR 2024 FORECAST

The financial forecast for FY 2024 under the Baseline scenario is presented in the Appendix. The Baseline forecast for FY 2024 projects accrued revenue of \$450,269,189 and incurred plan expenses of \$282,082,267 to produce a fiscal year surplus of \$168,186,922 after the Premium Stabilization Reserve drawdown of \$0. The PEIA local and state agencies Pay Go premiums for FY 2024 are assumed to be \$160,000,000.

LITIGATION

The forecasts presented in the attached tables do not contemplate any additional revenues or expenses to be generated from litigation activities.

SUMMARY

It should be noted that the aggregate PEIA and Trust Fund reserves will meet or exceed the 10% of program expense requirement under the Baseline Scenario assumptions. With projected changes to the plan as adopted in the Board, we are forecasting that the plan will meet the minimum 10% reserve target set by West Virginia Statute through the projection period ending with the Fiscal Year 2024. These projections are based on significant revenue increases as contained in the Financial Plan adopted by the Board in December 2019 and are contingent on legislative approval. These forecasts are based on assumptions including the estimated cost and savings of plan changes, expected trend levels and exposure levels. The continued enrollment changes of the managed care options, changes in physician, ambulatory and hospital provider reimbursement; possible changes in methodology of managed care premium calculation; and changes in the prescription drugs program, can be expected to further exacerbate the difficulty of projecting future medical and drugs claim levels and lags. These projections do not incorporate any anticipated effects of national or state health care reform, such as Medicare and Medicaid reform. As such, actual results deviating from those amounts projected in these pages should not be unexpected. With the legislatively mandated requirement of a five-year projection, it should be assumed that constant modifications would be required.

**APPENDIX - BASELINE SCENARIO
RHBT - MEDICARE AND NON-MEDICARE**

**WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST
FINANCIAL FORECAST
FISCAL YEAR 2020**

PERIOD 7/1/2019 - 6/30/2020

	7/1/2019 to 12/31/2019	1/1/2020 to 6/30/2020	TRUST Total
<u>Revenues</u>			
WV PEIA Pay Go Premiums	\$ 70,688,628	\$ 70,688,628	\$ 141,377,255
Retiree Premiums - PPB	40,775,766	42,316,598	83,092,364
Retiree Premiums - MCO	902,132	881,462	1,783,594
Annual Required Contributions	-	-	-
Non Par Premiums	1,455,282	1,455,282	2,910,563
Life Insurance	12,485,502	12,485,502	24,971,004
Investment Income	-	-	-
Transfer from Premium Stabilization Reserve	-	-	-
General Revenue Transfer (OPEB Funding)	15,000,000	15,000,000	30,000,000
General Revenue Transfer (Premium Offset)	2,500,000	2,500,000	5,000,000
Total Revenue	\$ 143,807,309	\$ 145,327,471	\$ 289,134,780
<u>Program Expenses</u>			
Non-Medicare Medical Claims	\$ 26,729,318	\$ 26,376,506	\$ 53,105,825
Gross Non-Medicare Prescription Drug Claims	17,419,862	17,505,940	34,925,801
Non-Medicare Prescription Drug Rebates	(6,512,954)	(6,545,137)	(13,058,091)
Medicare Medical Claims	760,592	247,112	1,007,703
Gross Medicare Prescription Drug Claims	3,598,777	1,192,058	4,790,835
Medicare Prescription Drug Rebates	(1,345,514)	(445,688)	(1,791,202)
Non-Medicare Managed Care Capitations	1,978,589	1,978,589	3,957,178
Humana MAPD Program	50,953,997	27,567,835	78,521,832
Administration	2,610,381	2,610,381	5,220,761
Life Insurance	12,757,323	12,757,323	25,514,645
Retiree Assistance Program	907,407	907,407	1,814,814
ACA Reinsurance Contributions	-	-	-
ACA PCORI Fees	16,900	16,900	33,801
Director's Discretionary Fund	29,483	29,483	58,966
Total Expenses	\$ 109,904,160	\$ 84,198,709	\$ 194,102,869
Fiscal Year Results	\$ 33,903,149	\$ 61,128,762	\$ 95,031,911
Beginning Restricted Reserve			\$ 1,053,554,300
Ending Restricted Reserve			\$ 1,148,586,211
Beginning Premium Stabilization Reserve			\$ 38,106,504
PSR Addition/(Drawdown)			\$ -
Ending Premium Stabilization Reserve			\$ 38,106,504
Total Beginning Plan Reserve			1,091,660,804
Total Ending Plan Reserve			\$ 1,186,692,715
Accrued Actuarial Liability (AAL)			\$ 3,191,774,318
Funded Status			34.2%

KEY ASSUMPTIONS

		Claim and Other Expense Trends		
		Eligibility	Medical	Gross Drugs
Pay Go Monthly Premium for Actives	\$ 159.90			
Additional Retiree Premiums	\$ -			
Pay Go PEPM Subsidy for Retirees	\$ 270.52			
		Non-Medicare	8.0%	12.0%
		Medicare	8.0%	12.0%
		Prescription Drug Rebates		20.0%
		Capitations		0.0%
		Administrative Expense		21.4%
Number of Net New Retirees	1,000	Pay Go Monthly Premium		-7.3%

**APPENDIX - BASELINE SCENARIO
RHBT - MEDICARE**

**WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST
FINANCIAL FORECAST
FISCAL YEAR 2020**

PERIOD 7/1/2019 - 6/30/2020

Medicare Retiree	Baseline Projection	Board Decision	Ending Projection
<u>Revenues</u>			
WV PEIA Pay Go Premiums	\$ 81,887,875		\$ 81,887,875
Employer Premiums - PPB	6,649,855	-	6,649,855
Employer Premiums - MCO	-	-	-
Retiree Premiums - PPB	47,743,983	-	47,743,983
Retiree Premiums - MCO	-	-	-
Annual Required Contributions	-	-	-
Non Par Premiums	1,814,022		1,814,022
Life Insurance	15,563,294		15,563,294
Investment Income	-		-
Transfer from Premium Stabilization Reserve	-		-
General Revenue Transfer (OPEB Funding)	18,201,692		18,201,692
General Revenue Transfer (Premium Offset)	3,033,615		3,033,615
Total Revenue	\$ 174,894,337	\$ -	\$ 174,894,337
<u>Program Expenses</u>			
Medicare Medical Claims	\$ 1,007,703	\$ -	\$ 1,007,703
Gross Medicare Prescription Drug Claims	4,790,835	-	4,790,835
Medicare Prescription Drug Rebates	(1,791,202)		(1,791,202)
Humana MAPD Program	103,132,566	(24,610,734)	78,521,832
Administration	1,927,125	-	1,927,125
Life Insurance	15,902,120		15,902,120
Retiree Assistance Program	1,131,091		1,131,091
ACA Reinsurance Contributions	-		-
ACA PCORI Fees	5,284		5,284
Director's Discretionary Fund	-		-
Total Expenses	\$ 126,105,523	\$ (24,610,734)	\$ 101,494,789
Fiscal Year Results	\$ 48,788,814		\$ 73,399,548
Beginning Restricted Reserve	\$ 574,690,061		\$ 574,690,061
Ending Restricted Reserve	<u>\$ 623,478,875</u>		<u>\$ 648,089,609</u>
Beginning Premium Stabilization Reserve	\$ 20,530,453		\$ 20,530,453
PSR Addition/(Drawdown)	\$ -		\$ -
Ending Premium Stabilization Reserve	<u>\$ 20,530,453</u>		<u>\$ 20,530,453</u>
Total Beginning Plan Reserve	595,220,514		595,220,514
Total Ending Plan Reserve	<u>\$ 644,009,328</u>		<u>\$ 668,620,062</u>
Accrued Actuarial Liability (AAL)	\$ 3,191,774,318		\$ 3,191,774,318
Funded Status	34.9%		34.9%

KEY ASSUMPTIONS

Pay Go Monthly Premium for Actives	\$ 159.90	Claim and Other Expense Trends		
Additional Retiree Premiums	\$ -	<u>Eligibility</u>	<u>Medical</u>	<u>Gross Drugs</u>
Pay Go PEPM Subsidy for Retirees	\$ 181.54	Medicare	8.0%	12.0%
		Prescription Drug Rebates		20.0%
		Capitations		0.0%
		Administrative Expense		21.4%
Number of Net New Retirees	1,200	Pay Go Monthly Premium		-7.3%

**APPENDIX - BASELINE SCENARIO
RHBT - NON-MEDICARE**

**WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST
FINANCIAL FORECAST
FISCAL YEAR 2020**

PERIOD 7/1/2019 - 6/30/2020

Non-Medicare Retiree	Baseline Projection	Board Decision	Ending Projection
<u>Revenues</u>			
WV PEIA Pay Go Premiums	\$ 59,489,380		\$ 59,489,380
Employer Premiums - PPB	9,136,395	-	9,136,395
Employer Premiums - MCO	838,449	-	838,449
Retiree Premiums - PPB	19,562,131	-	19,562,131
Retiree Premiums - MCO	945,145	-	945,145
Annual Required Contributions	-		-
Non Par Premiums	1,096,541		1,096,541
Life Insurance	9,407,710		9,407,710
Investment Income	-		-
Transfer from Premium Stabilization Reserve	-		-
General Revenue Transfer (OPEB Funding)	11,798,308		11,798,308
General Revenue Transfer (Premium Offset)	1,966,385		1,966,385
Total Revenue	\$ 114,240,443	\$ -	\$ 114,240,443
<u>Program Expenses</u>			
Non-Medicare Medical Claims	\$ 52,555,825	\$ 550,000	\$ 53,105,825
Gross Non-Medicare Prescription Drug Claims	34,675,801	250,000	34,925,801
Non-Medicare Prescription Drug Rebates	(13,058,091)		(13,058,091)
Non-Medicare Managed Care Capitations	3,957,178		3,957,178
Administration	2,793,636	500,000	3,293,636
Life Insurance	9,612,524		9,612,524
Retiree Assistance Program	683,723		683,723
ACA Reinsurance Contributions	-		-
ACA PCORI Fees	28,517		28,517
Director's Discretionary Fund	58,966		58,966
Total Expenses	\$ 91,308,079	\$ 1,300,000	\$ 92,608,079
Fiscal Year Results	\$ 22,932,364		\$ 21,632,364
Beginning Restricted Reserve	\$ 478,864,239		\$ 478,864,239
Ending Restricted Reserve	\$ 501,796,603		\$ 500,496,603
Beginning Premium Stabilization Reserve	\$ 17,576,051		\$ 17,576,051
PSR Addition/(Drawdown)	\$ -		\$ -
Ending Premium Stabilization Reserve	\$ 17,576,051		\$ 17,576,051
Total Beginning Plan Reserve	496,440,290		496,440,290
Total Ending Plan Reserve	\$ 519,372,654		\$ 518,072,654
Accrued Actuarial Liability (AAL)	\$ -		\$ -
Funded Status	N/A		N/A

KEY ASSUMPTIONS

Pay Go Monthly Premium for Actives	\$ 159.90	Claim and Other Expense Trends		
Additional Retiree Premiums	\$ -	<u>Eligibility</u>	<u>Medical</u>	<u>Gross Drugs</u>
Pay Go PEPM Subsidy for Retirees	\$ 831.59	Non-Medicare	8.0%	12.0%
		Prescription Drug Rebates		20.0%
		Capitations		0.0%
		Administrative Expense		21.4%
Number of Net New Retirees	(200)	Pay Go Monthly Premium		-7.3%

**APPENDIX - BASELINE SCENARIO
RHBT - MEDICARE AND NON-MEDICARE**

**WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST
FINANCIAL FORECAST
FISCAL YEAR 2021**

PERIOD 7/1/2020 - 6/30/2021

	7/1/2020 to 12/31/2020	1/1/2021 to 6/30/2021	TRUST Total
<u>Revenues</u>			
WV PEIA Pay Go Premiums	\$ 67,500,000	\$ 67,500,000	\$ 135,000,000
Retiree Premiums - PPB	40,479,233	40,664,988	81,144,222
Retiree Premiums - MCO	858,631	858,631	1,717,263
Annual Required Contributions	-	-	-
Non Par Premiums	1,411,623	1,411,623	2,823,246
Life Insurance	13,109,777	13,109,777	26,219,554
Investment Income	44,918,892	44,918,892	89,837,784
Transfer from Premium Stabilization Reserve	-	-	-
General Revenue Transfer (OPEB Funding)	15,000,000	15,000,000	30,000,000
General Revenue Transfer (Premium Offset)	-	-	-
Total Revenue	\$ 183,278,156	\$ 183,463,911	\$ 366,742,068
<u>Program Expenses</u>			
Non-Medicare Medical Claims	\$ 29,648,126	\$ 29,324,290	\$ 58,972,416
Gross Non-Medicare Prescription Drug Claims	20,445,541	20,592,284	41,037,825
Non-Medicare Prescription Drug Rebates	(7,893,700)	(7,932,706)	(15,826,406)
Medicare Medical Claims	769,245	253,736	1,022,981
Gross Medicare Prescription Drug Claims	3,840,150	1,291,163	5,131,314
Medicare Prescription Drug Rebates	(1,472,449)	(496,586)	(1,969,035)
Non-Medicare Managed Care Capitations	2,136,876	2,136,876	4,273,752
Humana MAPD Program	56,693,489	49,190,897	105,884,386
Administration	2,534,192	2,534,192	5,068,384
Life Insurance	13,395,189	13,395,189	26,790,377
Retiree Assistance Program	980,000	980,000	1,959,999
ACA Reinsurance Contributions	-	-	-
ACA PCORI Fees	16,039	16,039	32,078
Director's Discretionary Fund	119,446	119,446	238,892
Total Expenses	\$ 121,212,142	\$ 111,404,821	\$ 232,616,963
Fiscal Year Results	\$ 62,066,014	\$ 72,059,091	\$ 134,125,105
Beginning Restricted Reserve			\$ 1,148,586,211
Ending Restricted Reserve			\$ 1,282,711,317
Beginning Premium Stabilization Reserve			\$ 38,106,504
PSR Addition/(Drawdown)			\$ -
Ending Premium Stabilization Reserve			\$ 38,106,504
Total Beginning Plan Reserve			1,186,692,715
Total Ending Plan Reserve			\$ 1,320,817,821
Accrued Actuarial Liability (AAL)			\$ 3,268,136,134
Funded Status			36.3%

KEY ASSUMPTIONS

Pay Go Monthly Premium for Actives	\$ 152.92	Claim and Other Expense Trends		
Additional Retiree Premiums	\$ -	<u>Eligibility</u>	<u>Medical</u>	<u>Gross Drugs</u>
Pay Go PEPM Subsidy for Retirees	\$ 256.76	Non-Medicare	8.5%	12.5%
		Medicare	8.5%	12.5%
		Prescription Drug Rebates		20.0%
		Capitations		-15.9%
		Administrative Expense		3.0%
Number of Net New Retirees	1,000	Pay Go Monthly Premium		-4.5%

**APPENDIX - BASELINE SCENARIO
RHBT - MEDICARE**

**WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST
FINANCIAL FORECAST
FISCAL YEAR 2021**

PERIOD 7/1/2020 - 6/30/2021

Medicare Retiree	Baseline Projection	Board Decision	Ending Projection
<u>Revenues</u>			
WV PEIA Pay Go Premiums	\$ 58,214,851		\$ 58,214,851
Employer Premiums - PPB	9,510,815	-	9,510,815
Employer Premiums - MCO	-	-	-
Retiree Premiums - PPB	45,516,632	-	45,516,632
Retiree Premiums - MCO	-	-	-
Annual Required Contributions	-	-	-
Non Par Premiums	1,759,601		1,759,601
Life Insurance	16,341,458		16,341,458
Investment Income	47,349,164		47,349,164
Transfer from Premium Stabilization Reserve	-		-
General Revenue Transfer (OPEB Funding)	18,139,079		18,139,079
General Revenue Transfer (Premium Offset)	-		-
Total Revenue	\$ 196,831,600	\$ -	\$ 196,831,600
<u>Program Expenses</u>			
Medicare Medical Claims	\$ 1,022,981	\$ -	\$ 1,022,981
Gross Medicare Prescription Drug Claims	5,131,314	-	5,131,314
Medicare Prescription Drug Rebates	(1,969,035)		(1,969,035)
Humana MAPD Program	105,884,386		105,884,386
Administration	1,701,689		1,701,689
Life Insurance	16,697,226		16,697,226
Retiree Assistance Program	1,221,579		1,221,579
ACA Reinsurance Contributions	-		-
ACA PCORI Fees	5,625		5,625
Director's Discretionary Fund	-		-
Total Expenses	\$ 129,695,765	\$ -	\$ 129,695,765
Fiscal Year Results	\$ 67,135,836		\$ 67,135,836
Beginning Restricted Reserve	\$ 648,089,609		\$ 648,089,609
Ending Restricted Reserve	<u>\$ 715,225,444</u>		<u>\$ 715,225,444</u>
Beginning Premium Stabilization Reserve	\$ 20,530,453		\$ 20,530,453
PSR Addition/(Drawdown)	\$ -		\$ -
Ending Premium Stabilization Reserve	<u>\$ 20,530,453</u>		<u>\$ 20,530,453</u>
Total Beginning Plan Reserve	668,620,062		668,620,062
Total Ending Plan Reserve	<u>\$ 735,755,898</u>		<u>\$ 735,755,898</u>
Accrued Actuarial Liability (AAL)	\$ 3,268,136,134		\$ 3,268,136,134
Funded Status	38.4%		38.4%

KEY ASSUMPTIONS

Pay Go Monthly Premium for Actives	\$ 152.92	Claim and Other Expense Trends		
Additional Retiree Premiums	\$ -	<u>Eligibility</u>	<u>Medical</u>	<u>Gross Drugs</u>
Pay Go PEPM Subsidy for Retirees	\$ 126.66	Medicare	8.5%	12.5%
		Prescription Drug Rebates		20.0%
		Capitations		-15.9%
		Administrative Expense		3.0%
Number of Net New Retirees	1,200	Pay Go Monthly Premium		-4.5%

**APPENDIX - BASELINE SCENARIO
RHBT - NON-MEDICARE**

**WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST
FINANCIAL FORECAST
FISCAL YEAR 2021**

PERIOD 7/1/2020 - 6/30/2021

Non-Medicare Retiree	Baseline Projection	Board Decision	Ending Projection
<u>Revenues</u>			
WV PEIA Pay Go Premiums	\$ 76,785,149		\$ 76,785,149
Employer Premiums - PPB	10,039,589	-	10,039,589
Employer Premiums - MCO	1,010,274	-	1,010,274
Retiree Premiums - PPB	16,077,186	-	16,077,186
Retiree Premiums - MCO	706,988	-	706,988
Annual Required Contributions	-		-
Non Par Premiums	1,063,645		1,063,645
Life Insurance	9,878,096		9,878,096
Investment Income	42,488,619		42,488,619
Transfer from Premium Stabilization Reserve	-		-
General Revenue Transfer (OPEB Funding)	11,860,921		11,860,921
General Revenue Transfer (Premium Offset)	-		-
Total Revenue	\$ 169,910,467	\$ -	\$ 169,910,467
<u>Program Expenses</u>			
Non-Medicare Medical Claims	\$ 58,972,416	\$ -	\$ 58,972,416
Gross Non-Medicare Prescription Drug Claims	41,037,825	-	41,037,825
Non-Medicare Prescription Drug Rebates	(15,826,406)		(15,826,406)
Non-Medicare Managed Care Capitations	4,273,752		4,273,752
Administration	3,366,695		3,366,695
Life Insurance	10,093,151		10,093,151
Retiree Assistance Program	738,421		738,421
ACA Reinsurance Contributions	-		-
ACA PCORI Fees	26,453		26,453
Director's Discretionary Fund	238,893		238,893
Total Expenses	\$ 102,921,200	\$ -	\$ 102,921,200
Fiscal Year Results	\$ 66,989,267		\$ 66,989,267
Beginning Restricted Reserve	\$ 500,496,603		\$ 500,496,603
Ending Restricted Reserve	<u>\$ 567,485,870</u>		<u>\$ 567,485,870</u>
Beginning Premium Stabilization Reserve	\$ 17,576,051		\$ 17,576,051
PSR Addition/(Drawdown)	\$ -		\$ -
Ending Premium Stabilization Reserve	<u>\$ 17,576,051</u>		<u>\$ 17,576,051</u>
Total Beginning Plan Reserve	518,072,654		518,072,654
Total Ending Plan Reserve	<u>\$ 585,061,921</u>		<u>\$ 585,061,921</u>
Accrued Actuarial Liability (AAL)	\$ -		\$ -
Funded Status	N/A		N/A

KEY ASSUMPTIONS

Pay Go Monthly Premium for Actives	\$ 152.92	Claim and Other Expense Trends		
Additional Retiree Premiums	\$ -	<u>Eligibility</u>	<u>Medical</u>	<u>Gross Drugs</u>
Pay Go PEPM Subsidy for Retirees	\$ 1,160.77	Non-Medicare	8.5%	12.5%
		Prescription Drug Rebates		20.0%
		Capitations		-15.9%
		Administrative Expense		3.0%
Number of Net New Retirees	(200)	Pay Go Monthly Premium		-4.5%

**APPENDIX - BASELINE SCENARIO
RHBT - MEDICARE AND NON-MEDICARE**

**WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST
FINANCIAL FORECAST
FISCAL YEAR 2022**

PERIOD 7/1/2021 - 6/30/2022

	7/1/2021 to 12/31/2021	1/1/2022 to 6/30/2022	TRUST Total
<u>Revenues</u>			
WV PEIA Pay Go Premiums	\$ 70,000,000	\$ 70,000,000	\$ 140,000,000
Retiree Premiums - PPB	41,609,510	43,227,834	84,837,344
Retiree Premiums - MCO	912,842	912,842	1,825,684
Annual Required Contributions	-	-	-
Non Par Premiums	1,369,275	1,369,275	2,738,549
Life Insurance	13,765,266	13,765,266	27,530,532
Investment Income	49,994,554	49,994,554	99,989,108
Transfer from Premium Stabilization Reserve	-	-	-
General Revenue Transfer (OPEB Funding)	15,000,000	15,000,000	30,000,000
General Revenue Transfer (Premium Offset)	-	-	-
Total Revenue	\$ 192,651,446	\$ 194,269,771	\$ 386,921,217
<u>Program Expenses</u>			
Non-Medicare Medical Claims	\$ 32,037,015	\$ 31,759,860	\$ 63,796,875
Gross Non-Medicare Prescription Drug Claims	23,261,404	23,480,253	46,741,657
Non-Medicare Prescription Drug Rebates	(9,567,164)	(9,614,439)	(19,181,604)
Medicare Medical Claims	760,932	251,605	1,012,538
Gross Medicare Prescription Drug Claims	4,017,037	1,353,808	5,370,845
Medicare Prescription Drug Rebates	(1,640,604)	(553,296)	(2,193,900)
Non-Medicare Managed Care Capitations	2,307,826	2,307,826	4,615,652
Humana MAPD Program	48,443,780	53,506,203	101,949,984
Administration	2,610,218	2,610,218	5,220,435
Life Insurance	14,064,948	14,064,948	28,129,896
Retiree Assistance Program	1,058,400	1,058,400	2,116,799
ACA Reinsurance Contributions	-	-	-
ACA PCORI Fees	16,638	16,638	33,276
Director's Discretionary Fund	121,375	121,375	242,750
Total Expenses	\$ 117,491,804	\$ 120,363,399	\$ 237,855,204
Fiscal Year Results	\$ 75,159,643	\$ 73,906,372	\$ 149,066,014
Beginning Restricted Reserve			\$ 1,282,711,317
Ending Restricted Reserve			<u>\$ 1,431,777,330</u>
Beginning Premium Stabilization Reserve			\$ 38,106,504
PSR Addition/(Drawdown)			\$ -
Ending Premium Stabilization Reserve			<u>\$ 38,106,504</u>
Total Beginning Plan Reserve			1,320,817,821
Total Ending Plan Reserve			<u>\$ 1,469,883,834</u>
Accrued Actuarial Liability (AAL)			\$ 3,337,849,000
Funded Status			39.6%

KEY ASSUMPTIONS

Pay Go Monthly Premium for Actives	\$ 159.61	Claim and Other Expense Trends		
Additional Retiree Premiums	\$ 4,545,385	<u>Eligibility</u>	<u>Medical</u>	<u>Gross Drugs</u>
Pay Go PEPM Subsidy for Retirees	\$ 260.32	Non-Medicare	9.0%	13.0%
		Medicare	9.0%	13.0%
		Prescription Drug Rebates		20.0%
		Capitations		7.0%
		Administrative Expense		3.0%
Number of Net New Retirees	1,000	Pay Go Monthly Premium		3.7%

**APPENDIX - BASELINE SCENARIO
RHBT - MEDICARE**

**WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST
FINANCIAL FORECAST
FISCAL YEAR 2022**

PERIOD 7/1/2021 - 6/30/2022

Medicare Retiree	Baseline Projection	Board Decision	Ending Projection
<u>Revenues</u>			
WV PEIA Pay Go Premiums	\$ 69,804,219		\$ 69,804,219
Employer Premiums - PPB	9,537,263	550,967	10,088,230
Employer Premiums - MCO	-	-	-
Retiree Premiums - PPB	45,643,204	2,636,804	48,280,007
Retiree Premiums - MCO	-	-	-
Annual Required Contributions	-	-	-
Non Par Premiums	1,706,813		1,706,813
Life Insurance	17,158,531		17,158,531
Investment Income	52,699,438		52,699,438
Transfer from Premium Stabilization Reserve	-		-
General Revenue Transfer (OPEB Funding)	15,919,531		15,919,531
General Revenue Transfer (Premium Offset)	-		-
Total Revenue	\$ 212,468,999	\$ 3,187,770	\$ 215,656,769
<u>Program Expenses</u>			
Medicare Medical Claims	\$ 1,012,538	\$ -	\$ 1,012,538
Gross Medicare Prescription Drug Claims	5,370,845	-	5,370,845
Medicare Prescription Drug Rebates	(2,193,900)		(2,193,900)
Humana MAPD Program	101,949,984		101,949,984
Administration	1,752,740		1,752,740
Life Insurance	17,532,088		17,532,088
Retiree Assistance Program	1,319,305		1,319,305
ACA Reinsurance Contributions	-		-
ACA PCORI Fees	7,687		7,687
Director's Discretionary Fund	-		-
Total Expenses	\$ 126,751,287	\$ -	\$ 126,751,287
Fiscal Year Results	\$ 85,717,711		\$ 88,905,482
Beginning Restricted Reserve	\$ 715,225,444		\$ 715,225,444
Ending Restricted Reserve	\$ 800,943,156		\$ 804,130,926
Beginning Premium Stabilization Reserve	\$ 20,530,453		\$ 20,530,453
PSR Addition/(Drawdown)	\$ -		\$ -
Ending Premium Stabilization Reserve	\$ 20,530,453		\$ 20,530,453
Total Beginning Plan Reserve	735,755,898		735,755,898
Total Ending Plan Reserve	\$ 821,473,609		\$ 824,661,379
Accrued Actuarial Liability (AAL)	\$ 3,337,849,000		\$ 3,337,849,000
Funded Status	41.3%		41.4%

KEY ASSUMPTIONS

Pay Go Monthly Premium for Actives	\$ 159.61	Claim and Other Expense Trends		
Additional Retiree Premiums	\$ 3,187,770	<u>Eligibility</u>	<u>Medical</u>	<u>Gross Drugs</u>
Pay Go PEPM Subsidy for Retirees	\$ 147.26	Medicare	9.0%	13.0%
		Prescription Drug Rebates		20.0%
		Capitations		7.0%
		Administrative Expense		3.0%
Number of Net New Retirees	1,200	Pay Go Monthly Premium		3.7%

**APPENDIX - BASELINE SCENARIO
RHBT - NON-MEDICARE**

**WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST
FINANCIAL FORECAST
FISCAL YEAR 2022**

PERIOD 7/1/2021 - 6/30/2022

Non-Medicare Retiree	Baseline Projection	Board Decision	Ending Projection
<u>Revenues</u>			
WV PEIA Pay Go Premiums	\$ 70,195,781		\$ 70,195,781
Employer Premiums - PPB	9,686,821	488,209	10,175,030
Employer Premiums - MCO	1,022,525	51,535	1,074,059
Retiree Premiums - PPB	15,512,270	781,808	16,294,078
Retiree Premiums - MCO	715,561	36,064	751,625
Annual Required Contributions	-		-
Non Par Premiums	1,031,735		1,031,735
Life Insurance	10,372,001		10,372,001
Investment Income	47,289,670		47,289,670
Transfer from Premium Stabilization Reserve	-		-
General Revenue Transfer (OPEB Funding)	14,080,469		14,080,469
General Revenue Transfer (Premium Offset)	-		-
Total Revenue	\$ 169,906,833	\$ 1,357,615	\$ 171,264,448
<u>Program Expenses</u>			
Non-Medicare Medical Claims	\$ 63,796,875	\$ -	\$ 63,796,875
Gross Non-Medicare Prescription Drug Claims	46,741,657	-	46,741,657
Non-Medicare Prescription Drug Rebates	(19,181,604)		(19,181,604)
Non-Medicare Managed Care Capitations	4,615,652		4,615,652
Administration	3,467,695		3,467,695
Life Insurance	10,597,808		10,597,808
Retiree Assistance Program	797,494		797,494
ACA Reinsurance Contributions	-		-
ACA PCORI Fees	25,589		25,589
Director's Discretionary Fund	242,750		242,750
Total Expenses	\$ 111,103,917	\$ -	\$ 111,103,917
Fiscal Year Results	\$ 58,802,916		\$ 60,160,531
Beginning Restricted Reserve	\$ 567,485,870		\$ 567,485,870
Ending Restricted Reserve	\$ 626,288,786		\$ 627,646,401
Beginning Premium Stabilization Reserve	\$ 17,576,051		\$ 17,576,051
PSR Addition/(Drawdown)	\$ -		\$ -
Ending Premium Stabilization Reserve	\$ 17,576,051		\$ 17,576,051
Total Beginning Plan Reserve	585,061,921		585,061,921
Total Ending Plan Reserve	\$ 643,864,837		\$ 645,222,452
Accrued Actuarial Liability (AAL)	\$ -		\$ -
Funded Status	N/A		N/A

KEY ASSUMPTIONS

Pay Go Monthly Premium for Actives	\$ 159.61	Claim and Other Expense Trends		
Additional Retiree Premiums	\$ 1,357,615	<u>Eligibility</u>	<u>Medical</u>	<u>Gross Drugs</u>
Pay Go PEPM Subsidy for Retirees	\$ 1,100.66	Non-Medicare	9.0%	13.0%
		Prescription Drug Rebates		20.0%
		Capitations		7.0%
		Administrative Expense		3.0%
Number of Net New Retirees	(200)	Pay Go Monthly Premium		3.7%

**APPENDIX - BASELINE SCENARIO
RHBT - MEDICARE AND NON-MEDICARE**

**WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST
FINANCIAL FORECAST
FISCAL YEAR 2023**

PERIOD 7/1/2022 - 6/30/2023

	7/1/2022 to 12/31/2022	1/1/2023 to 6/30/2023	TRUST Total
<u>Revenues</u>			
WV PEIA Pay Go Premiums	\$ 75,000,000	\$ 75,000,000	\$ 150,000,000
Retiree Premiums - PPB	44,192,090	45,937,077	90,129,168
Retiree Premiums - MCO	971,833	971,833	1,943,665
Annual Required Contributions	-	-	-
Non Par Premiums	1,328,196	1,328,196	2,656,392
Life Insurance	14,453,530	14,453,530	28,907,059
Investment Income	55,635,557	55,635,557	111,271,113
Transfer from Premium Stabilization Reserve	-	-	-
General Revenue Transfer (OPEB Funding)	15,000,000	15,000,000	30,000,000
General Revenue Transfer (Premium Offset)	-	-	-
Total Revenue	\$ 206,581,205	\$ 208,326,192	\$ 414,907,397
<u>Program Expenses</u>			
Non-Medicare Medical Claims	\$ 35,316,701	\$ 35,091,214	\$ 70,407,915
Gross Non-Medicare Prescription Drug Claims	26,582,563	26,891,832	53,474,395
Non-Medicare Prescription Drug Rebates	(11,595,403)	(11,652,700)	(23,248,104)
Medicare Medical Claims	771,252	255,636	1,026,888
Gross Medicare Prescription Drug Claims	4,220,722	1,425,778	5,646,500
Medicare Prescription Drug Rebates	(1,827,962)	(616,483)	(2,444,445)
Non-Medicare Managed Care Capitations	2,492,452	2,492,452	4,984,904
Humana MAPD Program	52,693,545	58,472,036	111,165,581
Administration	2,688,524	2,688,524	5,377,048
Life Insurance	14,768,196	14,768,196	29,536,391
Retiree Assistance Program	1,143,072	1,143,072	2,286,143
ACA Reinsurance Contributions	-	-	-
ACA PCORI Fees	17,220	17,220	34,439
Director's Discretionary Fund	122,602	122,602	245,203
Total Expenses	\$ 127,393,483	\$ 131,099,376	\$ 258,492,859
Fiscal Year Results	\$ 79,187,723	\$ 77,226,816	\$ 156,414,538
Beginning Restricted Reserve			\$ 1,431,777,330
Ending Restricted Reserve			\$ 1,588,191,869
Beginning Premium Stabilization Reserve			\$ 38,106,504
PSR Addition/(Drawdown)			\$ -
Ending Premium Stabilization Reserve			\$ 38,106,504
Total Beginning Plan Reserve			1,469,883,834
Total Ending Plan Reserve			\$ 1,626,298,373
Accrued Actuarial Liability (AAL)			\$ 3,402,102,207
Funded Status			43.2%

KEY ASSUMPTIONS

Pay Go Monthly Premium for Actives	\$ 171.88	Claim and Other Expense Trends		
Additional Retiree Premiums	\$ 6,190,188	<u>Eligibility</u>	<u>Medical</u>	<u>Gross Drugs</u>
Pay Go PEPM Subsidy for Retirees	\$ 272.81	Non-Medicare	9.5%	13.5%
		Medicare	9.5%	13.5%
		Prescription Drug Rebates		20.0%
		Capitations		7.5%
		Administrative Expense		3.0%
Number of Net New Retirees	1,000	Pay Go Monthly Premium		7.1%

**APPENDIX - BASELINE SCENARIO
RHBT - MEDICARE**

**WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST
FINANCIAL FORECAST
FISCAL YEAR 2023**

PERIOD 7/1/2022 - 6/30/2023

Medicare Retiree	Baseline Projection	Board Decision	Ending Projection
<u>Revenues</u>			
WV PEIA Pay Go Premiums	\$ 90,193,810		\$ 90,193,810
Employer Premiums - PPB	10,116,249	832,418	10,948,667
Employer Premiums - MCO	-	-	-
Retiree Premiums - PPB	48,414,101	3,983,768	52,397,869
Retiree Premiums - MCO	-	-	-
Annual Required Contributions	-	-	-
Non Par Premiums	1,655,609		1,655,609
Life Insurance	18,016,458		18,016,458
Investment Income	58,645,639		58,645,639
Transfer from Premium Stabilization Reserve	-		-
General Revenue Transfer (OPEB Funding)	16,788,347		16,788,347
General Revenue Transfer (Premium Offset)	-		-
Total Revenue	\$ 243,830,212	\$ 4,816,187	\$ 248,646,399
<u>Program Expenses</u>			
Medicare Medical Claims	\$ 1,026,888	\$ -	\$ 1,026,888
Gross Medicare Prescription Drug Claims	5,646,500	-	5,646,500
Medicare Prescription Drug Rebates	(2,444,445)		(2,444,445)
Humana MAPD Program	111,165,581		111,165,581
Administration	1,805,322		1,805,322
Life Insurance	18,408,692		18,408,692
Retiree Assistance Program	1,424,849		1,424,849
ACA Reinsurance Contributions	-		-
ACA PCORI Fees	7,687		7,687
Director's Discretionary Fund	-		-
Total Expenses	\$ 137,041,074	\$ -	\$ 137,041,074
Fiscal Year Results	\$ 106,789,138		\$ 111,605,325
Beginning Restricted Reserve	\$ 804,130,926		\$ 804,130,926
Ending Restricted Reserve	<u>\$ 910,920,064</u>		<u>\$ 915,736,251</u>
Beginning Premium Stabilization Reserve	\$ 20,530,453		\$ 20,530,453
PSR Addition/(Drawdown)	\$ -		\$ -
Ending Premium Stabilization Reserve	<u>\$ 20,530,453</u>		<u>\$ 20,530,453</u>
Total Beginning Plan Reserve	824,661,379		824,661,379
Total Ending Plan Reserve	<u>\$ 931,450,517</u>		<u>\$ 936,266,704</u>
Accrued Actuarial Liability (AAL)	\$ 3,402,102,207		\$ 3,402,102,207
Funded Status	44.5%		44.5%

KEY ASSUMPTIONS

Pay Go Monthly Premium for Actives	\$ 171.88	Claim and Other Expense Trends		
Additional Retiree Premiums	\$ 4,816,187	<u>Eligibility</u>	<u>Medical</u>	<u>Gross Drugs</u>
Pay Go PEPM Subsidy for Retirees	\$ 184.66	Medicare	9.5%	13.5%
		Prescription Drug Rebates		20.0%
		Capitations		7.5%
		Administrative Expense		3.0%
Number of Net New Retirees	1,200	Pay Go Monthly Premium		7.1%

**APPENDIX - BASELINE SCENARIO
RHBT - NON-MEDICARE**

**WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST
FINANCIAL FORECAST
FISCAL YEAR 2023**

PERIOD 7/1/2022 - 6/30/2023

Non-Medicare Retiree	Baseline Projection	Board Decision	Ending Projection
<u>Revenues</u>			
WV PEIA Pay Go Premiums	\$ 59,806,190		\$ 59,806,190
Employer Premiums - PPB	9,803,108	492,444	10,295,552
Employer Premiums - MCO	1,088,775	54,693	1,143,468
Retiree Premiums - PPB	15,698,490	788,590	16,487,080
Retiree Premiums - MCO	761,923	38,274	800,197
Annual Required Contributions	-		-
Non Par Premiums	1,000,783		1,000,783
Life Insurance	10,890,601		10,890,601
Investment Income	52,625,474		52,625,474
Transfer from Premium Stabilization Reserve	-		-
General Revenue Transfer (OPEB Funding)	13,211,653		13,211,653
General Revenue Transfer (Premium Offset)	-		-
Total Revenue	\$ 164,886,997	\$ 1,374,001	\$ 166,260,998
<u>Program Expenses</u>			
Non-Medicare Medical Claims	\$ 70,407,915	\$ -	\$ 70,407,915
Gross Non-Medicare Prescription Drug Claims	53,474,395	-	53,474,395
Non-Medicare Prescription Drug Rebates	(23,248,104)		(23,248,104)
Non-Medicare Managed Care Capitations	4,984,904		4,984,904
Administration	3,571,726		3,571,726
Life Insurance	11,127,699		11,127,699
Retiree Assistance Program	861,294		861,294
ACA Reinsurance Contributions	-		-
ACA PCORI Fees	24,727		24,727
Director's Discretionary Fund	245,203		245,203
Total Expenses	\$ 121,449,759	\$ -	\$ 121,449,759
Fiscal Year Results	\$ 43,437,237		\$ 44,811,239
Beginning Restricted Reserve	\$ 627,646,401		\$ 627,646,401
Ending Restricted Reserve	<u>\$ 671,083,639</u>		<u>\$ 672,457,640</u>
Beginning Premium Stabilization Reserve	\$ 17,576,051		\$ 17,576,051
PSR Addition/(Drawdown)	\$ -		\$ -
Ending Premium Stabilization Reserve	<u>\$ 17,576,051</u>		<u>\$ 17,576,051</u>
Total Beginning Plan Reserve	645,222,452		645,222,452
Total Ending Plan Reserve	<u>\$ 688,659,689</u>		<u>\$ 690,033,691</u>
Accrued Actuarial Liability (AAL)	\$ -		\$ -
Funded Status	N/A		N/A

KEY ASSUMPTIONS

Pay Go Monthly Premium for Actives	\$ 171.88	Claim and Other Expense Trends		
Additional Retiree Premiums	\$ 1,374,001	<u>Eligibility</u>	<u>Medical</u>	<u>Gross Drugs</u>
Pay Go PEPM Subsidy for Retirees	\$ 973.95	Non-Medicare	9.5%	13.5%
		Prescription Drug Rebates		20.0%
		Capitations		7.5%
		Administrative Expense		3.0%
Number of Net New Retirees	(200)	Pay Go Monthly Premium		7.1%

**APPENDIX - BASELINE SCENARIO
RHBT - MEDICARE AND NON-MEDICARE**

**WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST
FINANCIAL FORECAST
FISCAL YEAR 2024**

PERIOD 7/1/2023 - 6/30/2024

	7/1/2023 to 12/31/2023	1/1/2024 to 6/30/2024	TRUST Total
<u>Revenues</u>			
WV PEIA Pay Go Premiums	\$ 80,000,000	\$ 80,000,000	\$ 160,000,000
Retiree Premiums - PPB	50,870,489	51,419,448	102,289,937
Retiree Premiums - MCO	967,252	967,252	1,934,504
Annual Required Contributions	-	-	-
Non Par Premiums	1,288,350	1,288,350	2,576,700
Life Insurance	15,176,206	15,176,206	30,352,411
Investment Income	61,557,818	61,557,818	123,115,637
Transfer from Premium Stabilization Reserve	-	-	-
General Revenue Transfer (OPEB Funding)	15,000,000	15,000,000	30,000,000
General Revenue Transfer (Premium Offset)	-	-	-
Total Revenue	\$ 224,860,115	\$ 225,409,073	\$ 450,269,189
<u>Program Expenses</u>			
Non-Medicare Medical Claims	\$ 39,110,502	\$ 38,949,227	\$ 78,059,729
Gross Non-Medicare Prescription Drug Claims	30,512,157	30,934,914	61,447,071
Non-Medicare Prescription Drug Rebates	(14,053,629)	(14,123,073)	(28,176,702)
Medicare Medical Claims	785,293	260,917	1,046,210
Gross Medicare Prescription Drug Claims	4,454,331	1,508,194	5,962,525
Medicare Prescription Drug Rebates	(2,036,716)	(686,885)	(2,723,602)
Non-Medicare Managed Care Capitations	2,691,849	2,691,849	5,383,697
Humana MAPD Program	57,583,956	64,195,943	121,779,900
Administration	2,769,180	2,769,180	5,538,360
Life Insurance	15,506,605	15,506,605	31,013,210
Retiree Assistance Program	1,234,517	1,234,517	2,469,034
ACA Reinsurance Contributions	-	-	-
ACA PCORI Fees	17,784	17,784	35,567
Director's Discretionary Fund	123,634	123,634	247,267
Total Expenses	\$ 138,699,461	\$ 143,382,805	\$ 282,082,267
Fiscal Year Results	\$ 86,160,654	\$ 82,026,268	\$ 168,186,922
Beginning Restricted Reserve			\$ 1,588,191,869
Ending Restricted Reserve			\$ 1,756,378,791
Beginning Premium Stabilization Reserve			\$ 38,106,504
PSR Addition/(Drawdown)			\$ -
Ending Premium Stabilization Reserve			\$ 38,106,504
Total Beginning Plan Reserve			1,626,298,373
Total Ending Plan Reserve			\$ 1,794,485,295
Accrued Actuarial Liability (AAL)			\$ 3,461,788,072
Funded Status			47.0%

KEY ASSUMPTIONS

Pay Go Monthly Premium for Actives	\$ 183.60	Claim and Other Expense Trends		
Additional Retiree Premiums	\$ 6,896,902	<u>Eligibility</u>	<u>Medical</u>	<u>Gross Drugs</u>
Pay Go PEPM Subsidy for Retirees	\$ 284.77	Non-Medicare	10.0%	14.0%
		Medicare	10.0%	14.0%
		Prescription Drug Rebates		20.0%
		Capitations		8.0%
		Administrative Expense		3.0%
Number of Net New Retirees	1,000	Pay Go Monthly Premium		6.7%

**APPENDIX - BASELINE SCENARIO
RHBT - MEDICARE**

**WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST
FINANCIAL FORECAST
FISCAL YEAR 2024**

PERIOD 7/1/2023 - 6/30/2024

Medicare Retiree	Baseline Projection	Board Decision	Ending Projection
<u>Revenues</u>			
WV PEIA Pay Go Premiums	\$ 96,206,731		\$ 96,206,731
Employer Premiums - PPB	6,993,822		6,993,822
Employer Premiums - MCO	-		-
Retiree Premiums - PPB	58,141,554	4,958,136	63,099,690
Retiree Premiums - MCO	-	-	-
Annual Required Contributions	-		-
Non Par Premiums	1,605,940		1,605,940
Life Insurance	18,917,281		18,917,281
Investment Income	64,888,316		64,888,316
Transfer from Premium Stabilization Reserve	-		-
General Revenue Transfer (OPEB Funding)	18,071,208		18,071,208
General Revenue Transfer (Premium Offset)	-		-
Total Revenue	\$ 264,824,852	\$ 4,958,136	\$ 269,782,988
<u>Program Expenses</u>			
Medicare Medical Claims	\$ 1,046,210	\$ -	\$ 1,046,210
Gross Medicare Prescription Drug Claims	5,962,525	-	5,962,525
Medicare Prescription Drug Rebates	(2,723,602)		(2,723,602)
Humana MAPD Program	121,779,900		121,779,900
Administration	1,859,482		1,859,482
Life Insurance	19,329,127		19,329,127
Retiree Assistance Program	1,538,837		1,538,837
ACA Reinsurance Contributions	-		-
ACA PCORI Fees	9,713		9,713
Director's Discretionary Fund	-		-
Total Expenses	\$ 148,802,192	\$ -	\$ 148,802,192
Fiscal Year Results	\$ 116,022,660		\$ 120,980,796
Beginning Restricted Reserve	\$ 915,736,251		\$ 915,736,251
Ending Restricted Reserve	<u>\$ 1,031,758,911</u>		<u>\$ 1,036,717,047</u>
Beginning Premium Stabilization Reserve	\$ 20,530,453		\$ 20,530,453
PSR Addition/(Drawdown)	\$ -		\$ -
Ending Premium Stabilization Reserve	<u>\$ 20,530,453</u>		<u>\$ 20,530,453</u>
Total Beginning Plan Reserve	936,266,704		936,266,704
Total Ending Plan Reserve	<u>\$ 1,052,289,364</u>		<u>\$ 1,057,247,500</u>
Accrued Actuarial Liability (AAL)	\$ 3,461,788,072		\$ 3,461,788,072
Funded Status	48.3%		48.3%

KEY ASSUMPTIONS

Pay Go Monthly Premium for Actives	\$ 183.60	Claim and Other Expense Trends		
Additional Retiree Premiums	\$ 4,958,136	<u>Eligibility</u>	<u>Medical</u>	<u>Gross Drugs</u>
Pay Go PEPM Subsidy for Retirees	\$ 191.33	Medicare	10.0%	14.0%
		Prescription Drug Rebates		20.0%
		Capitations		8.0%
		Administrative Expense		3.0%
Number of Net New Retirees	1,200	Pay Go Monthly Premium		6.7%

**APPENDIX - BASELINE SCENARIO
RHBT - NON-MEDICARE**

**WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST
FINANCIAL FORECAST
FISCAL YEAR 2024**

PERIOD 7/1/2023 - 6/30/2024

Non-Medicare Retiree	Baseline Projection	Board Decision	Ending Projection
<u>Revenues</u>			
WV PEIA Pay Go Premiums	\$ 63,793,269		\$ 63,793,269
Employer Premiums - PPB	8,720,088		8,720,088
Employer Premiums - MCO	800,245		800,245
Retiree Premiums - PPB	21,626,926	1,849,412	23,476,338
Retiree Premiums - MCO	1,044,905	89,354	1,134,259
Annual Required Contributions	-		-
Non Par Premiums	970,760		970,760
Life Insurance	11,435,131		11,435,131
Investment Income	58,227,320		58,227,320
Transfer from Premium Stabilization Reserve	-		-
General Revenue Transfer (OPEB Funding)	11,928,792		11,928,792
General Revenue Transfer (Premium Offset)	-		-
Total Revenue	\$ 178,547,436	\$ 1,938,766	\$ 180,486,202
<u>Program Expenses</u>			
Non-Medicare Medical Claims	\$ 78,059,729	\$ -	\$ 78,059,729
Gross Non-Medicare Prescription Drug Claims	61,447,071	-	61,447,071
Non-Medicare Prescription Drug Rebates	(28,176,702)		(28,176,702)
Non-Medicare Managed Care Capitations	5,383,697		5,383,697
Administration	3,678,878		3,678,878
Life Insurance	11,684,084		11,684,084
Retiree Assistance Program	930,197		930,197
ACA Reinsurance Contributions	-		-
ACA PCORI Fees	23,866		23,866
Director's Discretionary Fund	247,267		247,267
Total Expenses	\$ 133,278,087	\$ -	\$ 133,278,087
Fiscal Year Results	\$ 45,269,349		\$ 47,208,115
Beginning Restricted Reserve	\$ 672,457,640		\$ 672,457,640
Ending Restricted Reserve	<u>\$ 717,726,988</u>		<u>\$ 719,665,754</u>
Beginning Premium Stabilization Reserve	\$ 17,576,051		\$ 17,576,051
PSR Addition/(Drawdown)	\$ -		\$ -
Ending Premium Stabilization Reserve	<u>\$ 17,576,051</u>		<u>\$ 17,576,051</u>
Total Beginning Plan Reserve	690,033,691		690,033,691
Total Ending Plan Reserve	<u>\$ 735,303,039</u>		<u>\$ 737,241,805</u>
Accrued Actuarial Liability (AAL)	\$ -		\$ -
Funded Status	N/A		N/A

KEY ASSUMPTIONS

		Claim and Other Expense Trends		
		<u>Eligibility</u>	<u>Medical</u>	<u>Gross Drugs</u>
Pay Go Monthly Premium for Actives	\$ 183.60			
Additional Retiree Premiums	\$ 1,938,766			
Pay Go PEPM Subsidy for Retirees	\$ 1,080.51	Non-Medicare	10.0%	14.0%
		Prescription Drug Rebates		20.0%
		Capitations		8.0%
		Administrative Expense		3.0%
Number of Net New Retirees	(200)	Pay Go Monthly Premium		6.7%

**Attachment - Trust Fund
Historical Monthly Medical and Drug Trends
FY 2019 to FY 2020**

Fiscal Year 2019

Exposure	<u>Jul-18</u>	<u>Aug-18</u>	<u>Sep-18</u>	<u>Oct-18</u>	<u>Nov-18</u>	<u>Dec-18</u>	<u>Jan-19</u>	<u>Feb-19</u>	<u>Mar-19</u>	<u>Apr-19</u>	<u>May-19</u>	<u>Jun-19</u>
NonMed_NonDrug	15,984	16,420	16,066	15,867	15,659	15,446	15,321	15,159	14,960	14,793	14,654	14,516
Med_NonDrug	1,691	1,968	2,166	2,365	2,563	2,791	336	510	654	808	957	1,104
NonMed_Drug	14,810	15,213	14,884	14,703	14,509	14,311	14,196	14,046	13,862	13,707	13,580	13,451
Med_Drug	1,761	2,050	2,256	2,463	2,670	2,907	350	531	681	842	997	1,150
	<u>Jul-18</u>	<u>Aug-18</u>	<u>Sep-18</u>	<u>Oct-18</u>	<u>Nov-18</u>	<u>Dec-18</u>	<u>Jan-19</u>	<u>Feb-19</u>	<u>Mar-19</u>	<u>Apr-19</u>	<u>May-19</u>	<u>Jun-19</u>
NonMed_NonDrug	\$227.77	\$339.39	\$255.74	\$329.64	\$256.48	\$200.71	\$283.01	\$301.16	\$270.10	\$321.65	\$311.91	\$304.73
Med_NonDrug	180.77	185.19	236.59	188.12	193.60	233.31	736.22	399.37	407.87	355.02	376.24	231.98
NonMed_Drug	156.08	155.56	149.42	187.47	164.77	167.11	202.34	177.27	195.11	215.94	206.43	198.93
Med_Drug	<u>391.78</u>	<u>428.51</u>	<u>358.30</u>	<u>423.32</u>	<u>383.58</u>	<u>379.17</u>	<u>588.06</u>	<u>368.31</u>	<u>416.43</u>	<u>410.98</u>	<u>370.07</u>	<u>369.88</u>
Total	\$956.39	\$1,108.66	\$1,000.03	\$1,128.55	\$998.42	\$980.30	\$1,809.64	\$1,246.11	\$1,289.51	\$1,303.58	\$1,264.64	\$1,105.52
Change From Prior Year - Month to Month Analysis												
NonMed_NonDrug	24.2%	41.9%	13.8%	29.3%	-4.2%	-5.1%	-18.5%	10.1%	-12.5%	-8.9%	-10.4%	-10.6%
Med_NonDrug	1.7%	13.8%	63.4%	8.2%	31.2%	54.9%	78.2%	60.7%	19.3%	66.5%	102.9%	-11.3%
NonMed_Drug	-18.2%	9.1%	28.8%	0.5%	22.6%	29.3%	18.9%	45.9%	39.9%	35.9%	28.3%	20.5%
Med_Drug	<u>1.9%</u>	<u>14.7%</u>	<u>8.4%</u>	<u>18.0%</u>	<u>25.7%</u>	<u>25.4%</u>	<u>-4.4%</u>	<u>-31.0%</u>	<u>-6.0%</u>	<u>-12.5%</u>	<u>-6.9%</u>	<u>-14.0%</u>
Total	2.1%	20.8%	22.6%	15.9%	16.8%	23.5%	17.1%	5.8%	4.6%	9.1%	15.8%	-7.7%
Change From Prior Year - Quarter to Quarter Analysis												
NonMed_NonDrug			27.1%			7.1%			-8.1%			-9.9%
Med_NonDrug			24.2%			30.3%			53.8%			45.9%
NonMed_Drug			2.6%			15.4%			33.3%			28.1%
Med_Drug			<u>8.3%</u>			<u>22.8%</u>			<u>-13.8%</u>			<u>-11.3%</u>
Total			14.8%			18.5%			9.8%			5.4%
Change From Prior Year - Year to Year Analysis												
NonMed_NonDrug			13.2%			14.2%			10.9%			1.5%
Med_NonDrug			14.8%			17.8%			39.1%			42.1%
NonMed_Drug			2.3%			4.2%			13.2%			19.9%
Med_Drug			<u>32.1%</u>			<u>34.8%</u>			<u>8.2%</u>			<u>-1.1%</u>
Total			18.3%			20.5%			15.9%			11.4%

**Attachment - Trust Fund
Historical Monthly Medical and Drug Trends
FY 2019 to FY 2020**

Fiscal Year 2020

Exposure

	<u>Jul-19</u>	<u>Aug-19</u>	<u>Sep-19</u>	<u>Oct-19</u>	<u>Nov-19</u>	<u>Dec-19</u>	<u>Jan-20</u>	<u>Feb-20</u>	<u>Mar-20</u>	<u>Apr-20</u>	<u>May-20</u>
NonMed_NonDrug	14,745	14,846	14,782	14,697	14,478	14,336	14,177	14,203	14,029	13,876	13,698
Med_NonDrug	1,366	1,595	1,801	2,008	2,185	2,412	214	381	537	677	808
NonMed_Drug	13,665	13,757	13,698	13,619	13,417	13,285	13,139	13,164	13,002	12,860	12,694
Med_Drug	1,422	1,661	1,876	2,092	2,276	2,513	223	397	559	705	842

	<u>Jul-19</u>	<u>Aug-19</u>	<u>Sep-19</u>	<u>Oct-19</u>	<u>Nov-19</u>	<u>Dec-19</u>	<u>Jan-20</u>	<u>Feb-20</u>	<u>Mar-20</u>	<u>Apr-20</u>	<u>May-20</u>
NonMed_NonDrug	\$242.79	\$259.00	\$253.90	\$289.00	\$261.95	\$260.29	\$321.41	\$303.00	\$302.41	\$265.93	\$367.14
Med_NonDrug	288.99	228.81	229.56	238.17	269.34	215.01	1025.08	497.46	511.97	357.29	336.02
NonMed_Drug	191.88	197.16	176.81	201.83	187.09	200.33	208.68	198.59	231.62	213.99	207.09
Med_Drug	<u>334.86</u>	<u>358.07</u>	<u>345.98</u>	<u>376.08</u>	<u>345.74</u>	<u>366.29</u>	<u>393.65</u>	<u>404.88</u>	<u>544.26</u>	<u>469.74</u>	<u>369.52</u>
Total	\$1,058.52	\$1,043.03	\$1,006.26	\$1,105.08	\$1,064.12	\$1,041.92	\$1,948.82	\$1,403.92	\$1,590.25	\$1,306.95	\$1,279.77

Change From Prior Year - Month to Month Analysis

NonMed_NonDrug	6.6%	-23.7%	-0.7%	-12.3%	2.1%	29.7%	13.6%	0.6%	12.0%	-17.3%	17.7%
Med_NonDrug	59.9%	23.6%	-3.0%	26.6%	39.1%	-7.8%	39.2%	24.6%	25.5%	0.6%	-10.7%
NonMed_Drug	22.9%	26.7%	18.3%	7.7%	13.6%	19.9%	3.1%	12.0%	18.7%	-0.9%	0.3%
Med_Drug	<u>-14.5%</u>	<u>-16.4%</u>	<u>-3.4%</u>	<u>-11.2%</u>	<u>-9.9%</u>	<u>-3.4%</u>	<u>-33.1%</u>	<u>9.9%</u>	<u>30.7%</u>	<u>14.3%</u>	<u>-0.1%</u>
Total	10.7%	-5.9%	0.6%	-2.1%	6.6%	6.3%	7.7%	12.7%	23.3%	0.3%	1.2%

Change From Prior Year - Quarter to Quarter Analysis

NonMed_NonDrug	-8.2%					3.1%			8.5%		
Med_NonDrug			24.0%			17.5%			31.8%		
NonMed_Drug			22.7%			13.5%			11.2%		
Med_Drug			<u>-11.9%</u>			<u>-8.3%</u>			<u>-2.2%</u>		
Total			1.4%			3.3%			13.8%		

Change From Prior Year - Year to Year Analysis

NonMed_NonDrug	-5.5%					-6.2%			-2.1%		
Med_NonDrug			41.3%			38.0%			30.6%		
NonMed_Drug			24.8%			24.0%			18.4%		
Med_Drug			<u>-5.7%</u>			<u>-11.5%</u>			<u>-8.2%</u>		
Total			8.4%			5.3%			6.7%		