### San José Federated Postemployment Healthcare Plan



# Assumptions for June 30, 2018 OPEB Actuarial Valuation

**December 20, 2018** 

Bill Hallmark, ASA, EA, FCA, MAAA Michael Schionning, FSA, MAAA

## Agenda



- Background
- Contribution Policy Overview
- Discount Rate
- OPEB Assumptions
- Board Decisions
  - Adopt Discount Rate
  - Adopt OPEB Assumptions



## Background



- June 30, 2018 valuation:
  - Develops City contribution for FYE 2020
  - Used as basis for GASB 74/75 valuation in September for FYE
     2019
- Measure F made substantial changes to the retiree healthcare plan
  - Established VEBA for Tier 2 members and offered one-time election to Tier 1 members
    - VEBA Members on service-connected disability receive DB OPEB benefits for employee only coverage to age 65 once VEBA funds exhausted
    - Can use VEBA funds to pay self-supporting premiums for City retiree health plans
  - DB plan retired members may take a credit "in lieu" of current benefits that may be applied to future premiums
  - Active members contribute 7.5% of pay



## Two Types of Subsidies

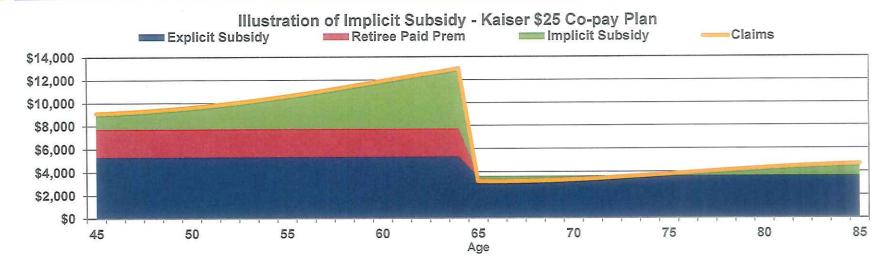


- Benefits in the plan are based on an explicit (premium) subsidy plus an implicit subsidy
- Explicit subsidy (i.e., premium subsidy)
  - The trust pays the premium for health coverage selected by the retiree, up to 100% of the premium for the lowest cost plan offered to active employees
- Implicit subsidy
  - Difference between the expected claims cost for a retiree or spouse and the total (retiree + city) premium
  - Applicable for non-Medicare retirees only



#### Illustration of Subsidies



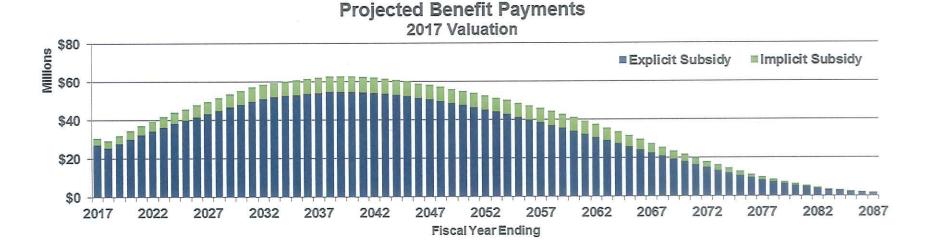


Member Age 64 Illustration										
		2018		2019	% Change					
Explicit Subsidy	\$	4,916	\$	5,340	8.6%					
Retiree Paid Premium		2,210		2,401	8.6%					
Kaiser \$25 Co-Pay Plan Premium	\$	7,126	\$	7,741	8.6%					
Implicit Subsidy		5,341		5,261	-1.5%					
Total Claims	\$	12,467	\$	13,002	4.3%					



## Projected Benefit Payments





- Even though the plan is closed, projected benefit payments extend over a long period
- The implicit subsidy is a relatively minor portion of the total benefit projected to be paid



## Contribution Policy – Set by Board

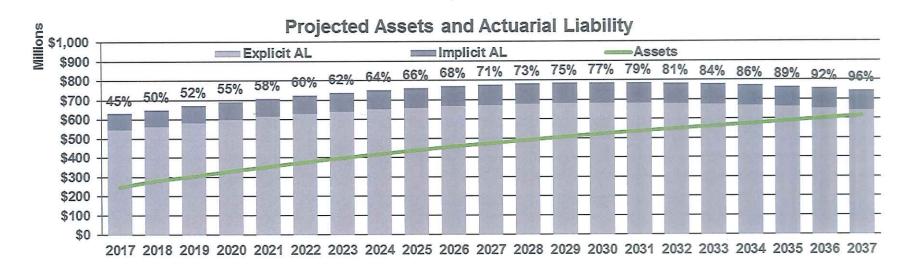


- Implicit Subsidy Pay-as-you-go
  - Paid as a part of active member medical premiums
- Explicit Subsidy Prefunded through 115
   Trust
  - City contributions equal normal cost plus level dollar amortization of UAL less member contributions
    - UAL changes are amortized over 20 years with a 3-year phase-in and out
    - City can cap its contribution at 14% of payroll

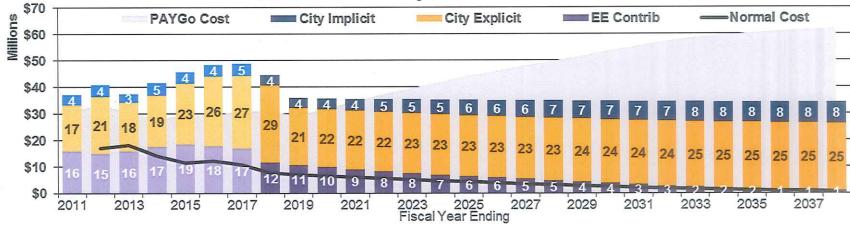


#### 2017 Valuation Results





#### **Historical and Projected Contributions**







# Assumptions



## Assumptions for 2018 Valuation



- Where applicable, the same assumptions are used as in the pension valuation
- While the assets are invested in two separate trusts, the 401(h) account will be exhausted soon
  - Discount rate is based on expected return for the 115
     Trust
- In addition, the following specific OPEB assumptions are used:
  - Claims costs
  - Plan elections
  - Dependent coverage elections
  - Health care trend rates



## Expected Return on Assets



- Meketa provided forwardlooking capital market assumptions
  - 10-Year Horizon
  - 20-Year Horizon
- Expectations are 50-60 basis points lower than for the pension trust
- Appendix shows
   Meketa's assumptions by
   asset class and the
   assumed asset allocation
- We recommend a discount rate between 6.25% and 6.75%

Expected Distribution of Average Annual Passive Returns									
Time Horizon Percentile 10 Years 20 Years									
95th	11.8%	11.1%							
75th	8.1%	8.5%							
60th	6.5%	7.4%							
55th	6.0%	7.1%							
50th	5.6%	6.8%							
45th	5.1%	6.4%							
40th	4.6%	6.1%							
25th	3.1%	5.0%							
5th	-0.4%	2.5%							



## Changes in Explicit Subsidy



	Maximum Annual Explicit Subsidy								
Year	Member Only	Member + Spouse	Member + Child(ren)	Member + Family					
2015	\$5,397	\$10,794	\$9,444	\$16,190					
2016	\$5,603	\$11,206	\$9,805	\$16,809					
2017	\$5,882	\$11,765	\$10,294	\$17,647					
2018	\$4,916	\$9,833	\$8,604	\$14,749					
2019	\$5,340	\$10,681	\$9,346	\$16,021					

- The maximum explicit subsidy is the premium for the lowest cost health plan offered to active employees
  - The lowest cost plan in 2019 remains the Kaiser \$3,000 deductible plan
- The maximum explicit subsidy paid by the City will increase from 2018 to 2019 by 8.6% for all coverage levels
  - Assumed increase was 8.0%
  - All pre-Medicare plans receive this level of subsidy
  - Some Medicare-eligible plans have premiums below the maximum subsidy



## Aggregate Claims Costs



	FYE 2	2019	FYE 2	2018	<u>% ct</u>	nange
Age	Male	Female	Male	Female	Male	Female
Medical						
50	\$9,029	\$10,301	\$8,556	\$9,758	5.5%	5.6%
55	\$10,226	\$11,123	\$9,678	\$10,525	5.7%	5.7%
60	\$12,186	\$11,877	\$11,520	\$11,227	5.8%	5.8%
64	\$14,516	\$11,809	\$13,713	\$11,156	5.9%	5.9%
65	\$4,447	\$3,923	\$4,387	\$3,870	1.4%	1.4%
70	\$4,722	\$4,000	\$4,658	\$3,945	1.4%	1.4%
75	\$5,428	\$4,498	\$5,354	\$4,437	1.4%	1.4%
80	\$6,163	\$5,101	\$6,080	\$5,032	1.4%	1.4%
85	\$6,656	\$5,574	\$6,566	\$5,499	1.4%	1.4%
		70	. 700			
Dental	\$67	75	\$67	74	0.	1%

- Claims costs are developed by age for each health plan offered
- Aggregate claims costs reflect the average cost based on plan election assumptions as of 1/1/2018
- Aggregate claims costs for FYE 2018 are higher than expected prior to Medicare eligibility and lower than expected otherwise



#### In-Lieu Elections



- Measure F added an "In-Lieu" option
  - Retirees can waive health coverage in exchange for a credit equal to 25% of the explicit subsidy for the tier of coverage for which they qualify
  - Credit can be applied to pay future premiums
- For 2017 valuation, we had no experience and assumed no one elected the "In-Lieu" option
- 2018 experience is very limited



## 2018 In-Lieu Experience



	Non- Medicare Eligible	Medicare Eligible	Total
No Coverage	23	27	50
Retiree Only	12	5	17
Retiree/ Spouse	7	1	8
Retiree/ Children	2	0	2
Family	23	2	25
Total	67	35	102

- In-Lieu option
  - 76 (out of 2,898)current retirees
  - 7 (out of 16) new retirees from vested terminated
  - 19 (out of 111)
     new retirees from active status
- About 50% did not have San José health coverage last year



## 2018 In-Lieu Assumptions



- Percentage electing In-Lieu option
  - Current retirees = No additional retirees elect In-Lieu
  - Future retirees eligible for medical coverage
    - Vested terminated members = 50%
    - Active members = 15%
- In-Lieu coverage credit
  - Non-Medicare Eligible
    - 50% Retiree only
    - 10% Retiree / Spouse
    - 40% Family
  - Medicare Eligible
    - 60% Retiree only
    - 40% Retiree / Spouse
- Duration of In-Lieu coverage
  - We have no data for this assumption yet
  - Recommend an initial assumption of 5 years



#### Plan Elections



	As	sumed Pla	an Election	s for Future Retirees*			
	2018 Enrollment	2017 Valuation	2018 Valuation		2018 Enrollment	2017 Valuation	2018 Valuation
Pre-Medicare Medical Plan	IS			Medicare-Eligible Medical I	Plans		
Kaiser DHMO	12%	14%	11%	Kaiser Senior Advantage	59%	58%	58%
Kaiser \$25 Co-pay	64%	61%	64%	BS Medicare HMO	7%	8%	8%
Kaiser HDHP	8%	6%	8%	BS Medicare PPO	34%	34%	34%
Sutter Health DHMO	1%	1%	1%				
Sutter Health \$20 Co-pay	5%	3%	4%	Dental Plans (All Retirees)	)		
Sutter Health Vista	N/A	N/A	0%	Delta Dental PPO	98%	97%	97%
BS PPO \$25 Co-pay	12%	WA	12%	DeltaCare HMO	2%	3%	3%

<sup>\*</sup> Eligible for coverage and elect coverage

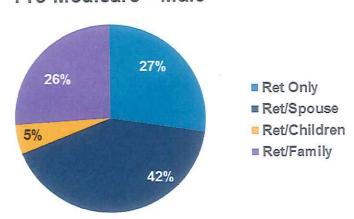
- Current enrollment for 2018 was compared to the plan election assumptions developed for the June 30, 2017 valuation
- Plan changes introduced for 2018 will impact future enrollment:
  - The Sutter Health Vista \$2,500 deductible plans were not offered in 2018
- We recommend the above minor adjustments for the June 30, 2018 valuation due to these changes



## Dependent Coverage Elections



Pre-Medicare - Male



Classic Values, Innovative Advice

Pre-Medicare - Female

12%	
9%	55%
24%	

Future Retiree Tier Elections										
Pre-Medicare Medicare										
Coverage Tier	Male	Female	Male	Female						
Retiree Only	27%	55%	32%	63%						
Retiree and Spouse	42%	24%	68%	37%						
Retiree and Children	5%	9%	0%	0%						
Retiree and Family	26%	12%	0%	0%						



#### Healthcare Trend Rates

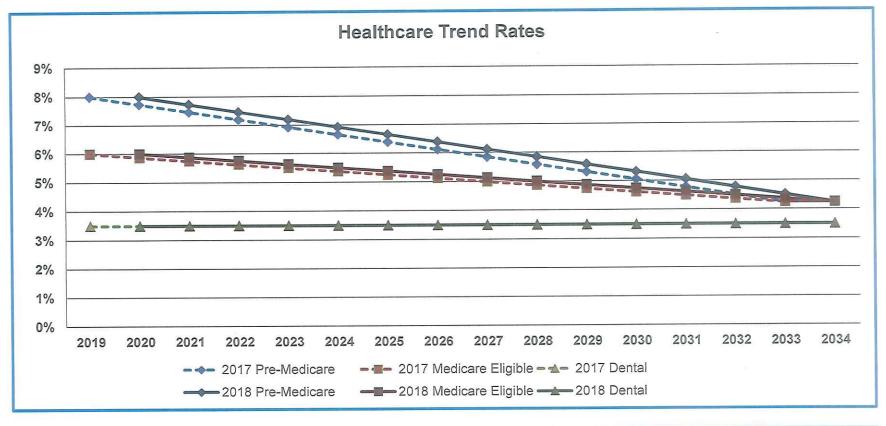


- Healthcare trend rates generally start at current trend experience and grade down to a projected GDP rate
  - Implication is that health care is a growing percentage of GDP until the ultimate rate is achieved
- We recommend re-starting the trends at the same rate as in the prior valuation
  - No change to the ultimate trend rate for medical



## Healthcare Trend Rates





	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	2034
2017 Pre-Medicare	8.00%	7.73%	7.46%	7.20%	6.93%	6.66%	6.39%	6.13%	5.86%	5.59%	5.32%	5.05%	4.79%	4.52%	4.25%	4.25%
2017 Medicare Eligible	6.00%	5.88%	5.75%	5.63%	5.50%	5.38%	5.25%	5.13%	5.00%	4.88%	4.75%	4.63%	4.50%	4.38%	4.25%	4.25%
2017 Dental	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%
2018 Pre-Medicare		8.00%	7.73%	7.46%	7.20%	6.93%	6.66%	6.39%	6.13%	5.86%	5.59%	5.32%	5.05%	4.79%	4.52%	4.25%
2018 Medicare Eligible		6.00%	5.88%	5.75%	5.63%	5.50%	5.38%	5.25%	5.13%	5.00%	4.88%	4.75%	4.63%	4.50%	4.38%	4.25%
2018 Dental		3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%



19

#### **Board Decisions**



- Adopt discount rate
- Adopt OPEB assumptions



#### Certification



- The purpose of this presentation is to present recommended assumptions for the June 30, 2018 Valuation for the City of San José Federated Postemployment Healthcare Plan.
- This presentation was prepared exclusively for the Board of Administration for the purpose described herein. Other users of this presentation are not intended users as defined in the Actuarial Standards of Practice, and Cheiron assumes no duty or liability to any other user.
- In preparing our presentation, we relied on information (some oral and some written) supplied by the Plan. This information includes, but is not limited to, the plan provisions, employee data, and financial information. We performed an informal examination of the obvious characteristics of the data for reasonableness and consistency in accordance with Actuarial Standard of Practice No. 23.
- To the best of our knowledge, this presentation has been prepared in accordance with generally recognized and accepted actuarial principles and practices which are consistent with the Code of Professional Conduct and applicable Actuarial Standards of Practice set out by the Actuarial Standards Board. Furthermore, as credentialed actuaries, we meet the Qualification Standards of the American Academy of Actuaries to render the opinion contained in this presentation. This presentation does not address any contractual or legal issues. We are not attorneys and our firm does not provide any legal services or advice.

William R. Hallmark, ASA, EA, FCA, MAAA Consulting Actuary Michael W. Schionning, FSA, MAAA Principal Consulting Actuary



#### Non-Medicare Plan Claims Costs



Age 64 Claims Costs

	, igo o i e iamile e coste							
	FYE 2	<u> 2019</u>	FYE 2	<u> 2018</u>	<u>% ch</u>	<u>ange</u>		
	Male	Female	Male	Female	Male	Female		
Medical								
Kaiser \$25 Co-Pay	\$14,359	\$11,682	\$13,774	\$11,207	4.2%	4.2%		
Kaiser DHMO	11,884	9,666	10,379	8,448	14.5%	14.4%		
Kaiser HDHP	8,320	6,771	9,750	7,935	-14.7%	-14.7%		
BS PPO \$100 Co-Pay	21,838	17,763	18,020	14,652	21.2%	21.2%		
Sutter \$20 Co-Pay	14,660	11,923	14,575	11,855	0.6%	0.6%		
Sutter DHMO	14,700	11,968	13,233	10,778	11.1%	11.0%		
Dental								
Delta PPO	\$686		\$685		0%			
DeltaCare HMO	\$3	12	\$311 0%		%			

- Claims costs had been expected to increase
  - 8.00% for non-Medicare medical costs
  - 3.50% for dental costs
- Renewal increases were
  - Higher than expected for Blue Shield PPO plans and California Kaiser plans and
  - Lower than expected for all other Plans
- Sutter \$2,500 Claim Curves go into effect 1/1/2019. For the current valuation, it is assumed that no one will elect this plan



## Medicare Eligible Plan Claim Costs



Age 65 Claims Costs

	FYE 2019		FYE	2018	<u>% change</u>	
	Male	Female	Male	Female	Male	Female
Medical						
Kaiser Senior Advantage	\$3,409	\$3,007	\$3,341	\$2,948	2.0%	2.0%
BS PPO	5,670	5,001	5,598	4,938	1.3%	1.3%
BS HMO	6,779	5,980	6,819	6,015	-0.6%	-0.6%
Dental						
Delta PPO	\$6	886	\$6	85	C	)%
DeltaCare HMO	\$312		\$311		0%	

- Claims costs had been expected to increase
  - 6.00% for Medicare medical costs
  - 3.50% for dental costs
- Renewal increases were
  - Lower than expected for all plans



## Appendix – Meketa's CMAs



#### Federated 115 Trust Portfolio Meketa's Capital Market Assumptions

		Standard	Arithmeti	c Return
Asset Class	Allocation	Deviation	10-Year	20-Year
Short-term Investment Grade Bonds	29.0%	1.5%	1.8%	3.1%
Investment Grade Bonds	0.0%	4.0%	2.8%	3.7%
TIPS	0.0%	7.5%	3.1%	3.6%
US Equity	28.0%	18.0%	7.0%	8.9%
Developed Market Equity (non-US)	13.0%	20.0%	8.1%	9.1%
Emerging Market Equity	15.0%	25.0%	12.1%	12.5%
Core Private Real Estate	10.0%	12.0%	4.8%	6.2%
Natural Resources (Public)	0.0%	23.0%	9.5%	9.8%
Commodities (naive)	5.0%	18.0%	7.0%	6.2%
Infrastructure (Public)	0.0%	18.0%	8.7%	8.8%
Total	100.0%	11.8%	6.2%	7.4%
	Geom	etric Return	5.6%	6.8%

