



# Executive Committee Meeting

Thursday, May 16, 2024

9:30 AM



Alameda County Schools Insurance Group (ACSIG)  
 5776 Stoneridge Mall Rd., Suite 130 Pleasanton, CA 94588

AGENDA  
 Executive Committee

**Date:** Thursday, May 16, 2024  
**Time:** 9:30 AM  
**Location:** Video Meeting  
 Join Zoom Meeting  
<https://us02web.zoom.us/j/7358807014?pwd=WW9PcGZvV2ZSY2hxWXI4WVJPTWVWUT09&omn=81999610238>

**Meeting ID: 735 880 7014**  
**Passcode: acsig24**

**I. Call to order 9:30 AM**

**II. Roll call**

**Executive Committee Members**

Dr. Kevin Collins	President	San Leandro USD
Danielle Krueger	Vice President	Alameda USD
Jackie Kim	Secretary	Albany USD
Leigh Ann Blessing	Board Member	ACOE
Annette Heldman	President	New Haven USD
Ruth Alahydroain	Board Member	Piedmont USD
Ahmad Sheikholeslami	Board Member	Pleasanton USD
Kimberly Dennis	Executive Director	ACSIG
Celina Flotte	Executive Assistant	ACSIG
Ron Martin	Guest	Keenan & Associates
Tara Cooper-Salaiz	Guest	Keenan & Associates
Patrice Grant	Guest	Keenan & Associates
Margot Bringas	Guest	Keenan & Associates
Michael Clark	Guest	Keenan & Associates
Hesam Fayaz	Guest	SETECH
Mark Payne	Guest	Morgan Stanley

**III. Acceptance of the Agenda**

The Executive Committee will vote on the acceptance of the agenda.

#### **IV. Public Comment on Closed Session Agenda Items**

*Pursuant to the Brown Act, each public agency must provide the public with an opportunity to speak on any matter within the subject matter jurisdiction of the agency and which is on the agency's agenda for that meeting. The Board of Directors allows speakers to speak on agendized and non-agendized matters under public comment. Comments are limited to no more than 3 minutes per speaker. By law, no action may be taken on any item raised during the public comment periods and matters may be referred to staff for placement on a future agenda of the Board of Directors.*

#### **Closed Session**

*Pursuant to Government code section 54956.95, the Executive Committee is empowered to conduct a closed session to discuss matters affecting the JPA or a member of the JPA.*

##### **A. Settlement Notification**

- Claim Numbers:

574196	Bentley
587022	Janko
590712	Barto
593657	Byrd
594276	Norton
601246	Reardon
609199	Jackson
614493	Driouch Walker

##### **B. Settlement Authorization**

- Claims Numbers: None

##### **C. Executive Director Applicant Review**

#### **Open Session**

#### **V. Public Comment on Open Session Agenda Items**

*Pursuant to the Brown Act, each public agency must provide the public with an opportunity to speak on any matter within the subject matter jurisdiction of the agency and which is on the agency's agenda for that meeting. The Board of Directors allows speakers to speak on agendized and non-agendized matters under public comment. Comments are limited to no more than 3 minutes per speaker. By law, no action may be taken on any item raised during the public comment periods and matters may be referred to staff for placement on a future agenda of the Board of Directors*

**VI. Report of Action Taken in Closed Session**

**VII. Approval of Minutes**

The Executive Committee will review the meeting minutes from February 8, 2024, March 20, 2024 and May 3, 2024.

**General**

**VIII. Executive Director Appointment**

*(page 21)*

Executive Committee will discuss appointing a candidate for the Executive Director vacancy.

*Recommendation: For action*

**IX. Executive Committee Membership**

*(page 22)*

Due to Danielle Krueger, Jackie Kim, and Annette Heldman's terms expiring, the Executive Committee will discuss continuation of terms and recruitment of new members.

*Recommendation: For discussion*

**X. Third Quarter Investment Report**

*(page 23)*

Mark Payne from Morgan Stanley will review the 2023/24 third quarter investment report. The Executive Committee will be asked to for a recommendation to the Full Board.

*Recommendation: For action*

**XI. Investment Policy**

*(page 47)*

The Executive Committee will conduct the annual review of the written investment policy and will be asked for a recommendation to the Full Board.

*Recommendation: For action*

**XII. Third Quarter Financial Report**

*(page 56)*

Laurena Grabert from SETECH will present the 2023/2024 third quarter financial report. The Executive Committee will be asked for a recommendation to the Full Board.

*Recommendation: For action*

**XIII. Budget 2024/2025**

*(page 78)*

The Executive Director will review the 2024/25 Budget. The Executive Committee will be asked for a recommendation to the Full Board.

*Recommendation: For action*

**XIV. ACSIG Salaries & Benefits**

*(page 87)*

The Executive Director will present a cost-of-living increase proposal for ACSIG staff that includes updated salary schedule and updated employment contracts.

*Recommendation: For action*

**XV. Meeting Calendar**

*(page 124)*

The Executive Committee will discuss the 2024/25 meeting calendar and will be asked for a recommendation to the Full Board.

*Recommendation: For discussion*

**XVI. ACSIG Holiday Calendar** (page 126)

The Executive Director will present a proposed ACSIG 2024/25 calendar and will be asked for a recommendation to the Full Board.

*Recommendation: For action*

**XVII. CAJPA Fall Conference 2024** (page 129)

Dates for the 2024 CAJPA Fall Conference will be given to the Executive Committee.

*Recommendation: For discussion*

### **Workers' Compensation**

**XVIII. EAP Update** (page 131)

The Executive Director will review EAP utilization with the Executive Committee.

*Recommendation: For discussion*

**XIX. Claims Trends - 5 year Point in Time** (page 146)

Michael Clark from Keenan will update the Committee regarding current claim trends by Job Classification, Age and Month.

*Recommendation: For discussion*

**XX. Workers' Compensation Claims Audit** (page 155)

The Transitional Executive Director will present a 2024 Workers' Compensation Claims Audit of Keenan & Associates. The Executive Committee will be asked for a recommendation to the Full Board.

*Recommendation: For action*

### **Dental**

**XXI. Dental Program & Rates 2024/2025** (page 210)

The Executive Director will present the 2024/2025 Dental program augmentations and rate options. The Executive Committee will be asked for a recommendation to the Full Board.

*Recommendation: For action*

**XXII. Dental Network Expansion** (page 217)

The Executive Director will present options for expanding the Dental Program's network partners. The Executive Committee will be asked for a recommendation to the Full Board.

*Recommendation: For action*

### **Vision**

- XXIII. Vision Program & Rates 2024/2025** (page 260)  
The Executive Director will present the 2024/25 Vision program augmentations & rate recommendations. The Executive Committee will be asked for a recommendation to the Full Board.  
*Recommendation: For action*

### **Property & Liability**

- XXIV. Property & Liability Rates 2024/2025** (page 267)  
The Executive Director will present the 2024/25 Property and Liability rates. The Executive Committee will be asked for a recommendation to the Full Board.  
*Recommendation: For action*

- XXV. PLCA Agreement Renewal** (page 271)  
The Transitional Executive Director will present the renewal contract for Property and Casualty Claims Administrative Services.  
*Recommendation: For action*

- XXVI. AB 218 PLCA Agreement Renewal** (page 286)  
The Executive Director will present the renewal contract for AB218 Claims Administrative Services.  
*Recommendation: For action*

- XXVII. Loss Control - ReLief Inspection Agreement Renewal** (page 288)  
The Executive Director will present the renewal contract for school inspection services.  
*Recommendation: For action*

### **Administrative**

- XXVIII. Dispute Resolution Policy** (page 302)  
The Executive Committee will conduct the annual review of the dispute resolution policy and will be asked for a recommendation the Full Board.  
*Recommendation: For action*

- XXIX. Underwriting Policy** (page 304)  
The Executive Committee will conduct the annual review of the underwriting policy and will be asked for a recommendation to the Full Board.  
*Recommendation: For action*

- XXX. Conflict of Interest Code** (page 308)  
The Executive Committee will conduct the annual review of the conflict-of-interest policy and will be asked for a recommendation to the Full Board.  
*Recommendation: For action*

- XXXI. Authorization of Signatures** (page 312)  
The Executive Committee will conduct the annual review of the authorization of signatures and will be asked for a recommendation to the Full Board.

*Recommendation: For action*

**XXXII. Posting and Mailing Address**

(page 314)

The Executive Committee will conduct the annual review of the posting and mailing address for ACSIG will be asked for a recommendation to the Full Board.

*Recommendation: For action*

**XXXIII. Future Planning**

**XXXIV. Adjournment**



**LOCATION CALL- IN SHEET  
ALAMEDA COUNTY SCHOOLS INSURANCE GROUP  
EXECUTIVE COMMITTEE MEETING**

May 16, 2024  
9:30 AM

Join Zoom Meeting

<https://us02web.zoom.us/j/7358807014?pwd=WW9PcGZvV2ZSY2hxWXI4WVJPTWVWUT09&omn=81999610238>

**Meeting ID: 735 880 7014**

**Passcode: acsig24**

This meeting will be conducted by teleconferencing in accordance with Government Code Section 54953(b). Members of the public may address the Committee from any teleconference location shown below:

**Alameda County Office of Education**

313 W Winton Ave.  
Hayward, CA 94544  
Leigh Ann Blessing (510) 670-4218

**Albany Unified School District**

819 Bancroft Way  
Berkeley, CA 94710  
Jackie Kim (510) 558-3751

**New Haven Unified School District**

34200 Alvarado-Niles Rd.  
Union City, CA 94587  
Annette Heldman (510) 471-1100 ext 60413

**Piedmont Unified School District**

760 Magnolia Ave  
Piedmont, CA 94611

Ruth Alahydroian (510) 594-2608

**Pleasanton Unified School District**

5758 W Las Positas Blvd

Pleasanton, CA 94566

Ahmad Sheikholeslami (925) 426-4307

**San Leandro Unified School District**

835 E 14<sup>th</sup> St

San Leandro, CA 94577

Dr. Kevin Collins (510) 667-3504





Alameda County Schools Insurance Group (ACSIG)  
 5776 Stoneridge Mall Rd., Suite 130 Pleasanton, CA 94588

MINUTES  
 Executive Committee

**Date:** Thursday, February 8, 2024  
**Time:** 9:30AM  
**Location:** Alameda County Office of Education  
 313 W. Winton Ave.  
 Hayward, CA 94544

**I. Kevin Collins called the meeting to order at 9:33 AM**

**II. Roll call**

**Executive Committee Members**

Dr. Kevin Collins	President	San Leandro USD
Danielle Krueger	Vice President	Alameda USD
Jackie Kim	Secretary	Albany USD
Leigh Ann Blessing	Board Member	Alameda COE
Ruth Alahydoian	Board Member	Piedmont USD
Ahmad Sheikholelami	Board Member	Pleasanton USD
Kimberly Dennis	Executive Director	Alameda County Schools Insurance
Andrew Lathrop	Transitional ED	Alameda County Schools Insurance
Celina Flotte	Executive Assistant	Alameda County Schools Insurance
Ron Martin	Guest	Keenan & Associates
Patrice Grant	Guest	Keenan & Associates
Brian Sharpes	Guest	Morgan Stanley
Laurena Grabert	Guest	SETECH

**III. Acceptance of the Agenda**

It was moved by Ahmad Sheikholeslami and seconded by Dani Krueger to approve the agenda as presented.

Ayes: Collins, Kinder, Krueger, Kim, Blessing, Sheikholeslami

Nays: None

Abstain: None

*Ruth Alahydoian joined the meeting at 9:34am*

#### **IV. Public Comment on Closed Session Agenda Items**

No public present to comment.

##### **Closed Session**

*Closed session began at 9:34am*

##### **A. Settlement Authorization**

- Claim Numbers: None**

##### **B. Settlement Notification**

- Claim Numbers:**

<b>Ramirez</b>	533380
<b>Varne</b>	540086
<b>Boggs</b>	559398
<b>Morgan</b>	578051
<b>Mangini</b>	581967
<b>Pagan</b>	590820
<b>Garcia de Monge</b>	597496
<b>Dillon-Lundie</b>	598429
<b>Torres</b>	609026
<b>Dixon</b>	614637
<b>Villalta</b>	623710

##### **Open Session**

*Open session began at 9:35am*

**V. Public Comment on Open Session Agenda Items**

*No public present to comment*

**VI. Report of Action Taken in Closed Session**

*There was no action taken in closed session*

**VII. Approval of Minutes**

It was moved by Kevin Collins and seconded by Jackie Kim to approve the meeting minutes from the October 25, 2023 Executive Committee Meeting and November 2, 2023 Full Board Meeting.

It was moved by Ruth Alahydoain and seconded by Leigh Ann Blessing to approve the agenda as presented.

Ayes: Collins, Kinder, Krueger, Kim, Blessing, Alahydoain, Sheikholeslami

Nays: None

Abstain: None

**Workers Compensation**

**VIII. Actuarial Study - Ex Mods**

The Executive Director presented the Ex-Mods as determined by the Actuarial by Jack Joyce.

MEMBER	NEW EX-MOD 12/31/23	OLD EX-MOD 12/31/22
ACOE	0.750	0.750
ALAMEDA	1.250	1.250
ALBANY	1.073	1.241
CASTRO VALLEY	0.823	0.944
DUBLIN	0.824	0.750
EDEN ROP	0.750	0.750
EMERY	0.750	0.750
FREMONT	0.996	1.065
LIVERMORE	0.988	0.895
MISSION ROP	0.750	0.878
MT. HOUSE	1.250	1.250
NEW HAVEN	1.101	0.815
NEWARK	1.214	0.963
PIEDMONT	0.750	0.750
PLEASANTON	0.750	0.951
SAN LEANDRO	1.250	1.222
SAN LORENZO	1.250	1.227
SUNOL GLEN	0.750	0.750
TRI VALLEY ROP	0.750	1.022
<b>WTD AVG</b>	<b>1.000</b>	
<b>CORRELATION COEFFICIENT:</b>		<b>0.782</b>

It was moved by Ahmad Sheikholeslami and seconded by Dani Krueger to approve the Ex-Mods as presented.

Ayes: Collins, Kinder, Krueger, Kim, Blessing, Alahydoain, Sheikholeslami

Nays: None

Abstain: None

#### **IX. Actuarial Study - Ultimate Loss**

The Executive Director presented Actuarial study of the ultimate loss of the self-insured portion of the ACSIG Workers Compensation program. Bay Actuarial estimates that ACSIG's liability for unpaid losses were \$3.7M on December 31, 2023. This report reflects claim payments in the amount of \$329,959 and a reduction in reserves of \$1,393,320.

It was moved by Dani Krueger and seconded by Jackie Kim to approve the Ultimate Loss Actuarial Study as presented.

Ayes: Collins, Kinder, Krueger, Kim, Blessing, Alahydoain, Sheikholeslami

Nays: None

Abstain: None

#### **X. EAP Update**

The Executive Director discussed an update on the EAP Program with the Executive Committee. Claremont EAP is now Uprise Health and there have been some bumps in the road as they have transitioned from a local company to a national company. Due to recent staffing changes, we are looking forward to improved services.

#### **XI. Workers Compensation Program Decisions for 2024/25**

ACSIG workers' compensation program has transitioned into a surplus position, we open the discussion with the Executive Committee to have the opportunity to review existing programs and explore new ones for the 2024-2025 year. The committee has no changes to the Skechers, EAP, post offer-pre placement program or trainings and no action was taken.

#### **XII. Preliminary Workers Compensation Rates 2024/25**

The Executive Director reviewed 2024/25 preliminary worker's compensation rates with the base rate of 2.53. The workers compensation program continues to maintain a positive fund balance, therefore the committee recommends that the base rate be lowered by .27 to 2.26.

**2024/25**  
**Workers' Compensation Rates**

	2021/2022 Actual Payroll	2022/2023 Actual Payroll	Base Rate	Ex Mod	Rate per \$100 Payroll	2024/2025 PREMIUMS
ACOE	\$25,846,167	\$ 27,533,969	2.26	0.750	1.70	\$466,701
ALAMEDA	\$81,626,997	\$ 84,583,723	2.26	1.250	2.83	\$2,389,490
ALBANY	\$31,282,396	\$ 36,093,238	2.26	1.073	2.42	\$875,254
CASTRO VALLEY	\$73,973,265	\$ 81,024,249	2.26	0.823	1.86	\$1,507,035
DUBLIN	\$100,342,259	\$ 114,154,279	2.26	0.824	1.86	\$2,125,827
EDEN ROP	\$4,896,917	\$ 5,687,746	2.26	0.750	1.70	\$96,407
EMERY	\$6,750,148	\$ 6,844,704	2.26	0.750	1.70	\$116,018
FREMONT	\$272,798,974	\$ 317,776,392	2.26	0.996	2.25	\$7,153,019
LIVERMORE	\$108,083,228	\$ 118,879,062	2.26	0.988	2.23	\$2,654,427
MISSION ROP	\$5,064,057	\$ 5,521,654	2.26	0.750	1.70	\$93,592
MT. HOUSE	\$238,837	\$ 263,797	2.26	1.250	2.83	\$7,452
NEWARK	\$42,250,847	\$ 42,874,715	2.26	1.214	2.74	\$1,176,328
NEW HAVEN	\$88,712,003	\$ 94,835,085	2.26	1.101	2.49	\$2,359,743
PIEDMONT	\$27,932,088	\$ 30,808,732	2.26	0.750	1.70	\$522,208
PLEASANTON*	\$126,324,046	\$ 130,142,003	2.26	0.750	1.70	\$2,205,907
SAN LEANDRO	\$78,608,488	\$ 87,822,002	2.26	1.250	2.83	\$2,480,972
SAN LORENZO	\$72,417,792	\$ 80,905,449	2.26	1.250	2.83	\$2,285,579
SUNOL GLEN	\$2,637,278	\$ 2,879,355	2.26	0.750	1.70	\$48,805
TRI VALLEY ROP	\$2,778,626	\$ 2,981,618	2.26	0.750	1.70	\$50,538
<b>TOTAL PREMIUMS</b>	<b>1,152,564,413</b>	<b>1,271,611,772</b>				<b>\$28,615,302</b>

Average Ex Mod

1.00000

Payrolls based upon 2022/23 Unaudited Actuals Reports provided by ACOE

\* includes apprentice program

**Executive Committee approved rate reduction of \$.27 on 8 February 2024**

It was moved by Ruth Alahydoain and seconded by Ahmad Sheikholeslami to approve the motion of buying down the WC base rate by \$.27.

Ayes: Collins, Kinder, Krueger, Kim, Blessing, Alahydoain, Sheikholeslami

Nays: None

Abstain: None

## General

### **XIII. Second Quarter Financial Report**

Laurena Grabert from SETECH presented the 2023/2024 Second Quarter Financial Report.

It was moved by Leigh Ann Blessing and seconded by Ahmad Sheikholeslami to approve the second quarter financial report.

Ayes: Collins, Kinder, Krueger, Kim, Blessing, Alahydoain, Sheikholeslami

Nays: None

Abstain: None

**Alameda County Schools Insurance Group (ACSIG)**  
**Treasurer's Report- Statement of Net Position**  
**Consolidated**  
**As of 06/30/2023 and 12/31/2023**

	Audited As of 06/30/2023	Activity 07/01/2023 - 12/31/2023	As of 12/31/2023
<b>Assets:</b>			
Current Assets			
Workers Compensation	\$ 17,399,635	(4,070,627)	\$ 13,329,008
Dental	9,486,832	710,893	10,197,725
Vision	3,682,784	(30,473)	3,652,311
Property and Liability Operations	5,755,522 263,297	(1,853,610) (76,046)	3,901,912 187,251
Cash and Cash Equivalents	<u>\$ 36,588,070</u>	<u>(5,319,863)</u>	<u>\$ 31,268,207</u>
Investments Morgan Stanley - current	--	139,899	139,899
Accounts Receivable	10,715,815	6,313,650	17,029,465
Prepaid Expense	8,465	1,175,387	1,183,852
Interfund Receivable/(payable) (1)	--	--	--
Subtotal Current Assets	<u>47,312,350</u>	<u>2,309,073</u>	<u>49,621,423</u>
Noncurrent Assets			
Investments @ FMV - Morgan Stanley (3)	26,625,917	755,882	27,381,800
Capital - Equipment, net of depreciation	--	--	--
	<u>26,625,917</u>	<u>755,882</u>	<u>27,381,800</u>
<b>Total Assets</b>	<b><u>\$ 73,938,267</u></b>	<b><u>\$ 3,064,956</u></b>	<b><u>\$ 77,003,223</u></b>
<b>Deferred Outflow of Resources:</b>			
Deferred outflow of resources - pension	555,879	--	555,879
<b>Liabilities:</b>			
Current Liabilities			
Accounts Payable	\$ 3,738,789	\$ (171,098)	\$ 3,567,691
Prefunding deposits (2)	5,111,070	--	5,111,070
Advance Contributions	--	--	--
Other Claim Liabilities - Castlepoint Reinsurance Insolvency	502,425	--	502,425
Current Portion of claims and claim adjustment	3,051,299	12,357	3,063,656
Subtotal Current Liabilities	<u>12,403,583</u>	<u>(158,741)</u>	<u>12,244,842</u>
Noncurrent Liabilities			
Unpaid claims and claim adjustment expenses less current	3,623,861	(61,220)	3,562,641
Unallocated Loss Adjustment Expense (ULAE)	403,295	--	403,295
Subtotal Noncurrent Claim Liabilities	<u>4,027,156</u>	<u>(61,220)</u>	<u>3,965,936</u>
Net Pension Liability (NPL)	816,289	42,521	858,810
<b>Total Liabilities</b>	<b><u>\$ 17,247,028</u></b>	<b><u>\$ (177,440)</u></b>	<b><u>\$ 17,069,588</u></b>
<b>Deferred Inflow of Resources:</b>			
Deferred inflow of resources - pension	202,611	--	202,611
<b>Net Position:</b>			
Undesignated Net Position - Net Assets/(Deficit)	57,044,507	3,242,396	60,286,903
Designated - Capital Assets	--	--	--
<b>Total Net Position</b>	<b><u>\$ 57,044,507</u></b>	<b><u>\$ 3,242,396</u></b>	<b><u>\$ 60,286,903</u></b>
<b>Total Liabilities, Deferred Pension, and Ending Net Position</b>	<b><u>\$ 73,938,267</u></b>	<b><u>\$ 3,064,956</u></b>	<b><u>\$ 77,003,223</u></b>

**Footnote:**

- (1) Interfund transfers net to zero on consolidated financial statements. This is an internal function used to transfer or allocate expense and income from one program to another without transfer of cash.
- (2) Estimated six weeks of dental claims funded by each member to maintain positive cash flow.
- (3) Morgan Stanley Smith Barney Investment shown at Fair Market Value, accrued interest shown as accounts receivable.

**Alameda County Schools Insurance Group (ACSIG)**  
**Workers' Compensation**  
**Statement of Revenues, Expenditures and Changes in Net Fund Assets**  
**As of 12/31/2023 and For The Six Months Then Ended**

	2022/2023		2023/2024			
	Budget	Actuals	Budget	Activity 07/01/20223 - 12/31/2023	Variance	Percentage of Budget
<b>Operating Revenue:</b>						
Premiums Paid by Members	\$ 22,060,952	\$ 22,060,954	\$ 28,057,017	\$ 14,028,509	\$ 14,028,508	50.00 %
Return of Premiums	--	318	--	--	--	--
PIPS - Accelerated Profit Commiss	--	--	--	--	--	--
Total Operating Revenue	22,060,952	22,061,272	28,057,017	14,028,509	14,028,508	50.00
<b>Operating Expenditures:</b>						
Classified Salaries	88,740	87,930	126,676	42,893	83,784	33.86
Statutory Benefits	19,196	10,598	24,027	4,113	19,914	17.12
Health & Welfare	15,800	7,800	18,725	3,413	15,312	18.23
Employer Tax Expense	1,362	1,278	1,662	782	880	47.04
Net Pension Expense	44,065	27,410	64,519	25,512	39,007	39.54
Telephone & Internet	1,045	834	1,110	577	533	51.98
Supplies Office	800	1,252	800	1,024	(224)	128.00
Supplies - Other	600	750	1,200	171	1,029	14.25
Eligibility Processing	--	--	--	--	--	--
Brokerage Fees-Dental-ACSIG	--	--	--	--	--	--
Brokerage Fees-Dental-MD	--	--	--	--	--	--
Travel and Conferences	2,350	1,406	3,000	328	2,672	10.93
Mileage	1,200	973	1,200	375	825	31.25
Dues & Memberships	900	1,152	900	45	855	5.00
Postage & Meter	340	103	340	66	274	19.41
Insurance Expense-PIPS	22,066,667	22,134,268	24,596,271	12,298,136	12,298,135	50.00
Insurance Expense-PY Adj	500,000	657,717	1,000,000	--	1,000,000	--
Utility - Operating-Rent	5,782	3,705	5,074	1,048	4,026	20.65
Advertising	--	--	--	--	--	--
Contract Services - Actuarial	10,000	9,300	10,000	--	10,000	--
Contract Services -Claim Audit	--	--	19,200	--	19,200	--
Contract Services	--	--	5,000	--	5,000	--
Audit Fees	1,650	2,228	2,300	2,269	31	98.65
Other Services/Operating Expense	1,300	806	1,300	343	957	26.38
Capital Equipment/Depreciation	500	--	500	--	500	--
Repairs & Maintenance	500	--	500	--	500	--
Legal	500	--	500	--	500	--
Accounting Services	2,472	2,472	2,550	1,273	1,277	49.92
County Courier	152	227	280	246	34	87.86
Shredding	180	186	250	58	192	23.20
Copier & Scanner	800	488	800	241	559	30.13
Claims Admin/Consult Services	92,400	92,400	87,000	63,750	23,250	73.28
Self-Insurance Fee	300,000	558,425	650,000	331,991	318,009	51.08
Claims Paid-WC	1,000,000	400,761	1,000,000	96,081	903,919	9.61
Claims Paid-PL	--	--	--	--	--	--
Physical Abilities Testing	20,000	6,083	20,000	--	20,000	--
Training	10,000	--	10,000	--	10,000	--
First-Aid Prog&Responder fees	35,000	2,307	35,000	2,137	32,863	6.11
Food Service/Sp Ed Training	--	--	--	--	--	--
Risk Mgmt Prevention Prog	250,000	74,708	250,000	227,500	22,500	91.00
EAP Program	200,000	165,508	200,000	87,428	112,572	43.71
Safety Inspections	--	--	--	--	--	--
Misc Bank Fees & WC Penalty Rel	1,000	--	1,000	10,248	(9,248)	1,024.80
Cobra Premiums	--	--	--	--	--	--
Dental Insurance Premiums	--	--	--	--	--	--
Vision Insurance Premiums	--	--	--	--	--	--
Claim Development Expense	(1,000,000)	(1,033,262)	(600,000)	(71,331)	(528,669)	11.89
Adjustment to Prefund Deposit	--	--	--	--	--	--
Total Operating Expenditures	23,675,301	23,219,813	27,541,684	13,130,717	14,410,968	47.68 %
<b>Net Increase/(Decrease)</b>						
<b>from Operations</b>	(1,614,349)	(1,158,541)	515,333	897,792	(382,460)	174.22 %
<b>Non Operating Income/(Expense)</b>						
Interest Income	150,000	597,952	400,000	172,200	227,800	43.05
Net Increase/(Decrease) in Fair Value	--	(169,531)	--	439,660	(439,660)	--
Realized Gain/(Loss) on Investments	--	(63,467)	--	196,449	(196,449)	--
Cumulative effect of GASB 68	--	--	--	--	--	--
Intrafund Transfer, Other Income	--	--	--	--	--	--
Total Non Operating Income/(Expense)	150,000	364,954	400,000	808,309	(408,309)	202.08 %
<b>Net Increase/(Decrease)</b>						
<b>in Net Position</b>	(1,464,349)	(793,587)	915,333	1,706,101	(790,769)	186.39 %
<b>Beginning Balance Prior</b>						
<b>Year End</b>	35,389,069	35,389,069	34,593,482	34,595,482	--	100.00 %
<b>Ending Balance, as of</b>						
<b>12/31/2023</b>	\$ 33,924,720	\$ 34,595,482	\$ 35,510,815	\$ 36,301,584	\$ (790,769)	<b>114</b>

#### XIV. Second Quarter Investment Report

Cary Allison presented the 2023/24 Second Quarter Investment Report.

##### *Time Weighted Performance Summary (Net of fees) – December 31, 2023*

**Total Ending Value** **\$27,714,904.40**

##### *Rolling Periods*

Quarter to Date	3.25%
Year to Date	4.69%
Last 12 Months	4.69%
Last 3 Years	0.25%
Last 5 Years	1.35%
Last 10 Years	1.12%
Since 7/12/10 Inception (annualized %)	1.17%

##### *Calendar Years*

##### *Fiscal Years*

2023 (YTD)	4.69%	2023-24 YTD	3.34%
2022	-4.11%	2022-23	0.09%
2021	-1.13%	2021-22	-4.11%
2020	3.92%	2020-21	-0.13%
2019	3.69%	2019-20	4.83%
2018	1.01%	2018-19	1.31%
2017	0.59%	2017-18	-0.42%
2016	0.99%	2016-17	-0.35%
2015	0.87%	2015-16	2.13%
2014	1.01%	2014-15	1.09%
2013	-0.03%	2013-14	1.32%
2012	2.44%	2012-13	0.48%
2011	1.91%	2011-12	1.75%
2010 (partial year)	0.29%		

It was moved by Ahmad Sheikholeslami and seconded by Ruth Alahydoain to approve the second quarter investment report.

Ayes: Collins, Kinder, Krueger, Kim, Blessing, Alahydoain, Sheikholeslami

Nays: None

Abstain: None

#### XV. Budget 2024/25

This budget was developed using year- to-date 2023/2024 data and preliminary estimates for 2024/2025 rates and costs. Because all rates are not firm at this time, estimates were used for this report.

It was moved by Ahmad Sheikholeslami and seconded by Leigh Ann Blessing to approve the budget.



Ayes: Collins, Kinder, Krueger, Kim, Blessing, Alahydoain, Sheikholeslami

Nays: None

Abstain: None

#### **XVI. Approval of 2023/ 24 Salary Schedule**

In preparation for retirement, it came to our attention that the salary schedules utilized by ACSIG are not in compliance with CalPERS requirements. While the Executive Committee and Full Board have always approved any salary augmentations, the actual salary schedule was not brought as an action item.

Additionally, there is some concern from PERS that there is only 1 position on the management salary schedule that provides longevity. PERS deems that longevity as not creditable. Kimberly will continue to work with PERS to get everything into compliance prior to the May Board meeting. It should be noted that the higher salaried amount has been reported to PERS all along and both the employee and employer have been paying the appropriate percentages on that higher amount.

#### **XVII. Cyber Breach**

In the Fall of 2023, ACSIG began experiencing interruptions in services such as our telephone system and internet. ACSIG also had a fraud alert from our bank indicating that someone was trying to cash checks against our accounts. Because we have dual signatures on our checks, no money was stolen.

In late November, our systems were accessed and email was spoofed. Correspondence was sent out that to dental members from our COBRA/Dental technician indicating that ACSIG had changed it's bank and to wire money to a new bank with account numbers. Because we are all operating in the environment of cyber breaches, our dental clients promptly alerted us to this request and we were able to prevent any erroneous wire transfers. That seemed to anger the hackers who then overloaded our emails and outgoing emails were restricted by Microsoft.

ACSIG contracted with counsel recommended by SAFER, Capriani & Werner, and Charles River Associates who are forensic investigators. Medical information is very sensitive. An extensive, forensic investigation was performed. The breach was only to our email system and no sensitive information was accessed.

#### **XVIII. Strategic Planning**

The Executive Director discussed updates and action plans for the 2024-25 year with the Committee that includes Post Offer/ Preplacement Program expansion, Human Resources connection highlighting the EAP services available, and ACSIG Board meeting electronic agenda changes.

**XIX. Future Planning**

**XX. This meeting was adjourned by Dr. Kevin Collins at 12:25 PM**



Alameda County Schools Insurance Group (ACSIG)  
 5776 Stoneridge Mall Rd., Suite 130 Pleasanton, CA 94588

**SPECIAL MEETING MINUTES**  
 Executive Committee

**Date:** Wednesday, March 20, 2024

**Time:** 9:00 AM

**Location:** Video Meeting

Join Zoom Meeting:

<https://us02web.zoom.us/j/7358807014?pwd=WW9PcGZvV2ZSY2hxWXI4WVJPTWVWU T09&omn=81999610238>

**Meeting ID: 735 880 7014**

**Passcode: acsig24**

**I. Kevin Collins called the meeting to order at 9:01 AM**

**II. Roll call**

**Executive Committee Members**

Dr. Kevin Collins	President	San Leandro USD
Danielle Krueger	Vice President	Alameda USD
Jackie Kim	Secretary	Albany USD
Annette Heldman	Board Member	New Haven USD
Ruth Alahydoian	Board Member	Piedmont USD
Ahmad Sheikholelami	Board Member	Pleasanton USD

Kimberly Dennis	Executive Director	Alameda County Schools Insurance
Andrew Lathrop	Transitional ED	Alameda County Schools Insurance
Celina Flotte	Executive Assistant	Alameda County Schools Insurance

**III. Acceptance of the Agenda**

It was moved by Annette Heldman and seconded by Dani Krueger to approve the agenda as presented.

Ayes: Collins, Krueger, Kim, Heldman, Alahydoain, Sheikholeslami

Nays: None

Abstain: None

#### **IV. Public Comment on Open Session Agenda Items**

*No public present to comment*

### **General**

#### **V. Salary Schedule CalPERS Compliance**

Beginning in 2023-24, it has been determined that the best way to address the salary issue for the Executive Director is to simply add the fixed, annual salary amount on the schedule. Longevity will no longer be a component of the salary schedule. This will require that both the salary schedule and contract are approved in open session each year. These changes will bring ACSIG into PERS compliance.

It was moved by Annette Heldman and seconded by Ruth Alahydoain to approve the Salary Schedules as presented.

Ayes: Collins, Krueger, Kim, Heldman, Alahydoain, Sheikholeslami

Nays: None

Abstain: None

#### **VI. Executive Director Contracts**

The Executive Director presented the contracts of the role of ACSIG's Executive Director and Transitional Executive Director. Because longevity will no longer be a component of the salary schedule, it is required that both the salary schedule and contract are approved in open session each year.

It was moved by Annette Heldman and seconded by Ahmad Sheikholeslami to approve the contracts as presented.

Ayes: Collins, Krueger, Kim, Heldman, Alahydoain, Sheikholeslami

Nays: None

Abstain: None

#### **VII. Future Planning**

#### **VIII. This meeting was adjourned by Dr. Kevin Collins at 9:08 AM**



Alameda County Schools Insurance Group (ACSIG)  
5776 Stoneridge Mall Rd., Suite 130 Pleasanton, CA 94588

**SPECIAL MEETING MINUTES**  
Executive Committee

**Date:** Friday, May 3, 2024

**Time:** 10:00 AM

**Location:** Video Meeting

Join Zoom Meeting:

<https://us02web.zoom.us/j/7358807014?pwd=WW9PcGZvV2ZSY2hxWXI4WVJPTWVWU T09&omn=81999610238>

**Meeting ID: 735 880 7014**

**Passcode: acsig24**

**I. Dr. Kevin Collins called the meeting to order at 10:03 AM**

**II. Roll Call**

**Executive Committee Members**

Dr. Kevin Collins	President	San Leandro USD
Jackie Kim	Secretary	Albany USD
Leigh Ann Blessing	Board Member	Alameda COE
Annette Heldman	Board Member	New Haven USD
Ruth Alahydoian	Board Member	Piedmont USD

Kimberly Dennis	Executive Director	Alameda County Schools Insurance
Andrew Lathrop	Transitional ED	Alameda County Schools Insurance
Celina Flotte	Executive Assistant	Alameda County Schools Insurance

**III. Acceptance of the Agenda**

It was moved by Ruth Alahydoian and seconded by Annette Heldman to approve the agenda as presented.

Ayes: Collins, Kim, Blessing, Heldman, Alahydoian

Nays: None

Abstain: None

**IV. Public Comment on Closed Session Agenda Items**

No public present to comment.

**Closed Session**

*Closed session began at 10:06am*

**A. Transitional Executive Director Evaluation**

**Open Session**

*Open session began at 11:36am*

**V. Public Comment on Closed Session Agenda Items**

No public present to comment.

**VI. Report of Action Taken in Closed Session**

No action was taken in closed session.

**General**

**VII. Dannis Woliver Kelley Agreement**

The Executive Director presented an agreement with Dannis Woliver Kelley. It was moved by Annette Heldman and seconded by Jackie Kim to approve the contract as presented.

Ayes: Collins, Kim, Blessing, Heldman

Nays: None

Abstain: None

**Closed Session**

*Closed session began at 11:38am*

**VIII. This meeting was adjourned by Dr. Kevin Collins at 11:45AM**



**LOCATION CALL- IN SHEET  
ALAMEDA COUNTY SCHOOLS INSURANCE GROUP  
EXECUTIVE COMMITTEE MEETING**

May 3, 2024  
10:00 AM

Join Zoom Meeting

<https://us02web.zoom.us/j/7358807014?pwd=WW9PcGZvV2ZSY2hxWXI4WVJPTWVWUT09&omn=81999610238>

**Meeting ID: 735 880 7014 Passcode: acsig24**

**Alameda County Office of Education**

313 W Winton Ave.  
Hayward, CA 94544  
Leigh Ann Blessing (510) 670-4218

**Alameda Unified School District**

2060 Challenger Drive #100  
Alameda, CA 94501  
Danielle Krueger (510) 337-7066

**Albany Unified School District**

819 Bancroft Way  
Berkeley, CA 94710  
Jackie Kim (510) 558-3751

**New Haven Unified School District**

34200 Alvarado-Niles Rd.  
Union City, CA 94587  
Annette Heldman (510) 471-1100 ext 60413

**Piedmont Unified School District**

760 Magnolia Ave  
Piedmont, CA 94611  
Ruth Alahydroian (510) 594-2608

**Pleasanton Unified School District**

5758 W Las Positas Blvd  
Pleasanton, CA 94566  
Ahmad Sheikholeslami (925) 426-4307

**San Leandro Unified School District**  
835 E 14<sup>th</sup> St  
San Leandro, CA 94577  
Kevin Collins (510) 667-3504





**Alameda County Schools Insurance Group**

P.O. Box 2487

Dublin, CA 94568

Phone (925) 225-1030

Fax (292) 225-0653

[www.acsig.com](http://www.acsig.com)

## **Executive Summary: Executive Director Appointment**

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: Executive Director Appointment

The Executive Committee will appoint the new Executive Director based upon direction in closed session.



## Alameda County Schools Insurance Group

P.O. Box 2487

Dublin, CA 94568

Phone (925) 225-1030

Fax (292) 225-0653

[www.acsig.com](http://www.acsig.com)

### **Executive Summary: Executive Committee Membership**

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: Executive Committee Membership

Alameda County Schools Insurance Group (“ACSIG”) maintains a seven-member Executive Committee.<sup>1</sup> Executive Committee members serve two-year terms, with three (3) seats expiring this year and four (4) seats expiring next year.

Last year four seats were up for 2-year renewals, and 1 vacated seat was up for a 1-year renewal. This year there are three (3) seats up for renewal (Dani Krueger, Annette Heldman, Jackie Kim). Both Dani Krueger and Jackie Kim would like to serve an additional term on the Executive Committee while Annette Heldman would like to open her seat for another ACSIG member.

The committee will discuss Executive Committee recruitment efforts and make a recommendation for the Full Board meeting.



## Alameda County Schools Insurance Group

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Dublin, CA 94568  
Phone (925) 225-1030  
Fax (925) 225-0653  
[www.acsig.com](http://www.acsig.com)

### **Executive Summary: Third Quarter Investments**

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: 2023/2024 Third Quarter Investment Report

Enclosed is ACSIG's 2023/2024 third quarter investment report. ACSIG's portfolio is benefiting from current market conditions with an increase in value this quarter. The Committee will discuss moving additional cash into the portfolio.

Mark Payne from Morgan Stanley Wealth Management will be in attendance to address this item and outline the current investment strategy. The Executive Committee will be asked to approve a recommendation to the full Board.

April 11, 2024

**Mark C. Payne**

Financial Advisor  
U.S. Government Entity Specialist

1478 Stone Point Drive  
Suite 500  
Roseville CA 95661

tel +1 916 797-7707  
mark.c.payne@morganstanley.com  
<https://www.morganstanley.com/graystone>

ACSIG – Alameda County Schools Insurance Group

Dear Board:

Please find attached your portfolio summary. Based on information available to the undersigned as of the date of this report the portfolio is compliant with your investment policy statement.

***Time Weighted Performance Summary (Net of fees) – March 31, 2024***

**Total Ending Value** **\$27,752,649.80**

*Rolling Periods*

Quarter to Date	0.18%
Year to Date	0.18%
Last 12 Months	3.10%
Last 3 Years	0.00%
Last 5 Years	1.17%
Last 10 Years	1.12%
Since 7/12/10 Inception (annualized %)	1.17%

*Calendar Years*

*Fiscal Years*

2024 (YTD)	0.18%	2023-24 YTD	3.52%
2023	4.69%	2022-23	0.09%
2022	-4.11%	2021-22	-4.11%
2021	-1.13%	2020-21	-0.13%
2020	3.92%	2019-20	4.83%
2019	3.69%	2018-19	1.31%
2018	1.01%	2017-18	-0.42%
2017	0.59%	2016-17	-0.35%
2016	0.99%	2015-16	2.13%
2015	0.87%	2014-15	1.09%
2014	1.01%	2013-14	1.32%
2013	-0.03%	2012-13	0.48%
2012	2.44%	2011-12	1.75%
2011	1.91%		
2010 (partial year)	0.29%		

Please see the projected cash flows by month for the portfolio shown on page 7 of the Western Asset report. In the next 12 months we anticipate \$4,933,000 of cash flow.

Morgan Stanley uses *Intercontinental Exchange*, formerly *Interactive Data*, for its bond pricing services. More details on the portfolio summary are attached and can also be found in the monthly statements. Please contact me with any questions.

Sincerely,

Mark C. Payne  
Financial Advisor  
U.S. Government Entity Specialist  
[www.morganstanley.com](http://www.morganstanley.com)  
[mark.c.payne@morganstanley.com](mailto:mark.c.payne@morganstanley.com)

The information and data contained in this report are from sources considered reliable, but their accuracy and completeness are not guaranteed. This report has been prepared for illustrative purposes only and is not intended to be used as a substitute for monthly transaction statements you receive on a regular basis. Please compare the data on this document carefully with your custodial monthly statements to verify its accuracy. The Company strongly encourages you to consult with your own accountants or other advisors with respect to any tax questions.



# Alameda County Schools Insurance Group

Western Asset Enhanced Cash

March 31, 2024

*Separately Managed Accounts (SMAs) are investment services provided by Franklin Templeton Private Portfolio Group, LLC (FTPPG), a federally registered investment advisor. Client portfolios are managed based on investment instructions or advice provided by one or more of the following Franklin Templeton affiliated subadvisors: Western Asset Management Company, LLC. Management is implemented by FTPPG, the designated subadvisor or, in the case of certain programs, the program sponsor or its designee.*

*\*On December 1, 2022, Legg Mason Private Portfolio Group, LLC (LMPPG) changed its name to Franklin Templeton Private Portfolio Group, LLC (FTPPG).*

*These materials are being provided for illustrative and informational purposes only. The information contained herein is obtained from multiple sources that are believed to be reliable. However, such information has not been verified, and may be different from the information included in documents and materials created by the sponsor firm in whose investment program a client participates. Some sponsor firms may require that these materials be preceded or accompanied by investment profiles or other documents or materials prepared by such sponsor firms, which will be provided upon request. For additional information, documents and/or materials, please speak to your Financial Professional or contact your sponsor firm.*



# Alameda County Schools Insurance Group

## IMPORTANT INFORMATION:

### RISKS:

*All investments involve risk, including the loss of principal, and there is no guarantee that investment objectives will be met.*

*Fixed income securities are subject to interest rate and credit risk, which is a possibility that the issuer of a security will be unable to make interest payments and repay the principal on its debt. As interest rates rise, the price of fixed income securities falls.*

*Investments may also be made in mortgage-backed, asset-backed securities and taxable municipal securities. Asset-backed securities generally decrease in value as a result of interest rate increases, but may benefit less than other fixed-income securities from declining interest rates, principally because of prepayments. Mortgage-backed securities involve additional risk over more traditional fixed-income investments, including: interest rate risk, implied call and extension risks; and the possibility of premature return of principal due to mortgage prepayment, which can reduce expected yield and lead to price volatility.*

*Foreign securities, where permitted, are subject to the additional risks of fluctuations in foreign exchange rates, changes in political and economic conditions, foreign taxation, and differences in auditing and financial standards. These risks are magnified in the case of investments in emerging markets.*

*U.S. Treasuries are direct debt obligations issued and backed by the "full faith and credit" of the U.S. government. The U.S. government guarantees the principal and interest payments on U.S. Treasuries when the securities are held to maturity. Unlike U.S. Treasuries, debt securities issued by the federal agencies and instrumentalities and related investments may or may not be backed by the full faith and credit of the U.S. government. Even when the U.S. government guarantees principal and interest payments on securities, this guarantee does not apply to losses resulting from declines in the market value of these securities.*

*For tax-exempt securities, certain investors may be subject to the Federal Alternative Minimum Tax, and state and local taxes may apply. Capital gains, if any, are fully taxable. Depends on individual tax situation.*

### TAX:

*Franklin Templeton, its affiliates, and its employees are not in the business of providing tax or legal advice to taxpayers. These materials and any tax-related statements are not intended or written to be used, and cannot be used or relied upon, by any such taxpayer for the purpose of avoiding tax penalties or complying with any applicable tax laws or regulations. Tax-related statements, if any, may have been written in connection with the "promotion or marketing" of the transaction(s) or matter(s) addressed by these materials, to the extent allowed by applicable law. Any such taxpayer should seek advice based on the taxpayer's particular circumstances from an independent tax advisor.*

### BENCHMARK:

*The Bloomberg 1-3 Year Government Bond Index is a broad measure of the performance of short-term government bonds. The index is not managed and not subject to management or brokerage commission. Income from coupon is subject to reinvestment. The FTSE 3-Month U.S. Treasury Bill Index is an index based upon the average monthly yield of the 90-day Treasury bills. U.S. Treasury bills are secured by the "full faith and credit" of the U.S. government and offer a fixed rate of return. The portfolio composition typically varies from that of the above-noted, unmanaged indices. Investors cannot invest directly in an index and unmanaged index returns do not reflect any fees, expenses or sales charges.*

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# Characteristics

## Alameda County Schools Insurance Group

March 31, 2024

Client Account	
Duration (yrs)	2.30
Average Maturity (yrs)	2.52
Yield to Worst (%)	4.70

Benchmark Characteristics	
Duration (yrs)	2.66
Average Maturity (yrs)	2.85
Yield to Worst (%)	4.53

Source: BondEdge, Western Asset

Swaps are not included in maturity years, effective duration years and coupon distribution. Forward Rate Agreements are excluded from all categories except sector.

Yield to worst (YTW) is based on a portfolio's current holdings on one specific day, is gross of all fund expenses, and calculated based on assumption that prepayment occurs if the bond has call or put provisions and the issuer can offer a lower coupon rate based on current market rates. If market rates are higher than the current yield of a bond, the YTW calculation will assume no prepayments are made, and YTW will equal the yield to maturity. The YTW will be the lowest of yield to maturity or yield to call (if the bond has prepayment provisions). The YTW of a bond fund is the market-weighted average of the YTWs of all the bonds in the portfolio.

This information does not constitute, and under no circumstances is to be construed as, investment advice or recommendations with respect to the securities listed and should not be the sole basis for any investment decision. The above summary/prices/quotes/statistics have been obtained from sources we believe to be reliable, but we cannot guarantee its accuracy or completeness. Your Client Statement is the official record of your account. Therefore, if there are any discrepancies between this report and your client statement, you should rely upon the Client Statement and call your financial professional with any questions.

**Past performance is no guarantee of future results.**



# Holdings (1/3)

## Alameda County Schools Insurance Group

March 31, 2024

Sector 1	Par (000)	Identifier	Issuer Name	Coupon	Maturity	Moody's	S&P	Price	Curr			Eff Dur		% Held	
									Yield	YTW	YTM	Avg Life	(Par)		Mkt Value
<b>CASH</b>	<b>270</b>			<b>5.30</b>	<b>0.09</b>			<b>100.00</b>	<b>5.30</b>	<b>5.30</b>	<b>5.30</b>	<b>0.08</b>	<b>0.08</b>	<b>270,000</b>	<b>0.97</b>
	270	000000CM9	CASH & EQUIVALENTS	5.30	04/28/2024	Aaa	AAA	100.00	5.30	5.30	5.30	0.08	0.08	270,000	0.97
<b>TSY</b>	<b>18,625</b>			<b>2.30</b>	<b>2.64</b>			<b>95.91</b>	<b>2.41</b>	<b>4.57</b>	<b>4.57</b>	<b>2.64</b>	<b>2.44</b>	<b>17,993,256</b>	<b>64.83</b>
	1,400	91282CGG0	UNITED STATES TREAS NTS	4.13	01/31/2025	TSY	TSY	99.19	4.16	5.12	5.12	0.83	0.81	1,397,647	5.04
	1,442	912828ZF0	UNITED STATES TREAS NTS	0.50	03/31/2025	TSY	TSY	95.64	0.52	4.98	4.98	1.00	0.98	1,382,732	4.98
	1,310	912828ZW3	UNITED STATES TREAS NTS	0.25	06/30/2025	TSY	TSY	94.42	0.27	4.88	4.88	1.25	1.22	1,237,668	4.46
	1,185	91282CAZ4	UNITED STATES TREAS NTS	0.38	11/30/2025	TSY	TSY	93.05	0.40	4.74	4.74	1.67	1.63	1,104,099	3.98
	1,268	91282CBH3	UNITED STATES TREAS NTS	0.38	01/31/2026	TSY	TSY	92.47	0.41	4.69	4.69	1.83	1.80	1,173,252	4.23
	1,483	91282CBT7	UNITED STATES TREAS NTS	0.75	03/31/2026	TSY	TSY	92.68	0.81	4.61	4.61	2.00	1.94	1,379,914	4.97
	1,438	91282CHB0	UNITED STATES TREAS NTS	3.63	05/15/2026	TSY	TSY	98.04	3.70	4.60	4.60	2.17	1.99	1,429,048	5.15
	1,801	91282CCW9	UNITED STATES TREAS NTS	0.75	08/31/2026	TSY	TSY	91.44	0.82	4.52	4.52	2.42	2.35	1,647,880	5.94
	1,650	91282CFM8	UNITED STATES TREAS NTS	4.13	09/30/2027	TSY	TSY	99.27	4.16	4.35	4.35	3.50	3.16	1,671,362	6.02
	1,349	91282CGH8	UNITED STATES TREAS NTS	3.50	01/31/2028	TSY	TSY	97.12	3.60	4.32	4.32	3.83	3.52	1,317,556	4.75
	1,950	91282CHA2	UNITED STATES TREAS NTS	3.50	04/30/2028	TSY	TSY	97.06	3.61	4.29	4.29	4.08	3.69	1,920,510	6.92
	810	91282CHQ7	UNITED STATES TREAS NTS	4.13	07/31/2028	TSY	TSY	99.43	4.15	4.27	4.27	4.33	3.90	810,615	2.92
	1,539	91282CJR3	UNITED STATES TREAS NTS	3.75	12/31/2028	TSY	TSY	97.92	3.83	4.24	4.24	4.75	4.25	1,520,972	5.48
<b>AGY</b>	<b>1,525</b>			<b>4.06</b>	<b>3.21</b>			<b>98.92</b>	<b>4.10</b>	<b>4.46</b>	<b>4.46</b>	<b>3.21</b>	<b>2.92</b>	<b>1,519,916</b>	<b>5.48</b>
	675	3130AUU36	FEDERAL HOME LOAN BANKS	4.13	03/13/2026	AGY	AA+	99.03	4.17	4.65	4.65	2.00	1.85	669,592	2.41
	850	3130AWC24	FEDERAL HOME LOAN BANKS	4.00	06/09/2028	AGY	AA+	98.83	4.05	4.31	4.31	4.17	3.76	850,324	3.06
<b>IND</b>	<b>4,699</b>			<b>2.97</b>	<b>2.52</b>			<b>97.15</b>	<b>3.06</b>	<b>4.92</b>	<b>4.92</b>	<b>2.54</b>	<b>2.26</b>	<b>4,599,608</b>	<b>16.57</b>
	268	882508BB9	TEXAS INSTRS INC	2.63	05/15/2024	Aa3	A+	99.64	2.63	5.34	5.34	0.17	0.13	269,637	0.97

Source: BondEdge, Western Asset

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# Holdings (2/3)

## Alameda County Schools Insurance Group

March 31, 2024

Sector 1	Par (000)	Identifier	Issuer Name	Coupon	Maturity	Moody's	S&P	Price	Curr			Eff Dur		% Held	
									Yield	YTW	YTM	Avg Life	(Par)		Mkt Value
	135	69371RQ25	PACCAR FINANCIAL CORP	2.15	08/15/2024	A1	A+	98.78	2.18	5.42	5.42	0.42	0.37	133,693	0.48
	137	911312BT2	UNITED PARCEL SVCS INC	2.20	09/01/2024	A2	A	98.60	2.23	5.57	5.57	0.42	0.42	135,304	0.49
	273	191216CL2	COCA COLA CO	1.75	09/06/2024	A1	A+	98.46	1.78	5.34	5.34	0.42	0.43	269,088	0.97
	273	713448EQ7	PEPSICO INC	2.25	03/19/2025	A1	A+	97.30	2.31	5.12	5.12	1.00	0.94	265,793	0.96
	270	87612EBL9	TARGET CORP	2.25	04/15/2025	A2	A	97.10	2.32	5.13	5.13	1.08	1.01	264,929	0.95
	270	437076BK7	HOME DEPOT INC	3.35	09/15/2025	A2	A	97.76	3.43	4.96	4.96	1.50	1.38	264,271	0.95
	289	110122DN5	BRISTOL-MYERS SQUIBB CO	0.75	11/13/2025	A2	A	93.47	0.80	4.99	4.99	1.67	1.58	270,927	0.98
	145	254687FV3	DISNEY WALT CO	1.75	01/13/2026	A2	A-	94.56	1.85	4.96	4.96	1.83	1.73	137,644	0.50
	296	742718FP9	PROCTER & GAMBLE CO	1.00	04/23/2026	Aa3	AA-	92.84	1.08	4.67	4.67	2.08	1.99	276,069	0.99
	273	458140AU4	INTEL CORP	2.60	05/19/2026	A3	A-	95.20	2.73	4.99	4.99	2.17	2.01	262,442	0.95
	197	023135CP9	AMAZON COM INC	4.55	12/01/2027	A1	AA	100.01	4.55	4.55	4.55	3.67	3.25	199,925	0.72
	439	20030NCA7	COMCAST CORP NEW	3.15	02/15/2028	A3	A-	94.41	3.34	4.74	4.74	3.92	3.52	416,116	1.50
	262	24422EWW7	JOHN DEERE CAPITAL CORPORAT	4.90	03/03/2028	A1	A	100.74	4.86	4.69	4.69	3.92	3.52	264,838	0.95
	276	369550BC1	GENERAL DYNAMICS CORP	3.75	05/15/2028	A3	A-	96.83	3.87	4.60	4.60	4.17	3.62	271,066	0.98
	266	24422EXB0	JOHN DEERE CAPITAL CORPORAT	4.95	07/14/2028	A1	A	100.81	4.91	4.74	4.74	4.33	3.78	270,851	0.98
	280	29379VBT9	ENTERPRISE PRODS OPER LLC	4.15	10/16/2028	A3	A-	97.29	4.27	4.82	4.82	4.58	3.91	277,633	1.00
	350	00287YBF5	ABBVIE INC	4.25	11/14/2028	A3	A-	98.24	4.33	4.68	4.68	4.67	3.97	349,384	1.26
<b>FIN</b>	<b>3,439</b>			<b>3.10</b>	<b>1.77</b>			<b>97.33</b>	<b>3.19</b>	<b>5.17</b>	<b>5.23</b>	<b>1.61</b>	<b>1.50</b>	<b>3,369,991</b>	<b>12.14</b>
	130	59156RBH0	METLIFE INC	3.60	04/10/2024	A3	A-	99.96	3.60	4.87	4.87	0.03	0.04	132,126	0.48
	265	00440EAR8	CHUBB INA HLDGS INC	3.35	05/15/2024	A3	A	99.69	3.36	5.69	5.69	0.17	0.13	267,453	0.96
	340	693475AY1	PNC FINL SVCS GROUP INC	2.20	11/01/2024	A3	A-	98.00	2.25	5.69	5.69	0.58	0.57	336,241	1.21

Source: BondEdge, Western Asset

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# Holdings (3/3)

## Alameda County Schools Insurance Group

March 31, 2024

Sector 1	Par (000)	Identifier	Issuer Name	Coupon	Maturity	Moody's	S&P	Price	Curr			Eff Dur		% Held	
									Yield	YTW	YTM	Avg Life	(Par)		Mkt Value
	280	91159HHZ6	US BANCORP	1.45	05/12/2025	A3	A	95.89	1.51	5.27	5.27	1.08	1.08	270,034	0.97
	481	46625HMN7	JPMORGAN CHASE & CO	3.90	07/15/2025	A1	A-	98.36	3.97	5.22	5.22	1.33	1.19	476,925	1.72
	343	06051GFS3	BANK AMERICA CORP	3.88	08/01/2025	A1	A-	98.44	3.94	5.09	5.09	1.33	1.28	339,764	1.22
	147	74432QCH6	PRUDENTIAL FINL INC	1.50	03/10/2026	A3	A	93.60	1.60	4.98	4.98	1.92	1.88	137,702	0.50
	275	084670BS6	BERKSHIRE HATHAWAY INC DEL	3.13	03/15/2026	Aa2	AA	96.83	3.23	4.84	4.84	2.00	1.82	266,590	0.96
	286	808513BR5	CHARLES SCHWAB CORP	1.15	05/13/2026	A2	A-	92.22	1.25	5.06	5.06	2.17	2.04	264,971	0.95
	268	06406RBJ5	BANK NEW YORK MELLON CORP	4.41	07/24/2026	A1	A	98.80	4.47	5.37	5.91	1.33	1.26	266,874	0.96
	300	857477BS1	STATE STR CORP	2.20	02/07/2028	A1	A	92.73	2.38	4.96	5.24	2.83	2.72	279,114	1.01
	324	91324PEP3	UNITEDHEALTH GROUP INC	5.25	02/15/2028	A2	A+	101.90	5.15	4.70	4.71	3.83	3.41	332,197	1.20
<b>Total:</b>	<b>28,558</b>			<b>2.63</b>	<b>2.52</b>			<b>96.49</b>	<b>2.73</b>	<b>4.70</b>	<b>4.71</b>	<b>2.50</b>	<b>2.30</b>	<b>27,752,772</b>	<b>100.00</b>

Source: BondEdge, Western Asset

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# Cash Flow (1/3)

## Alameda County Schools Insurance Group

March 31, 2024

Date	Maturity Cash Flow	Call Cash Flow	Total Interest Cash Flow	Total Principal Cash Flow	Total Cash Flow
03/31/2024	0	0	0	0	0
04/30/2024	400	0	48	400	448
05/31/2024	533	0	61	533	594
06/30/2024	0	0	52	0	52
07/31/2024	0	0	95	0	95
08/31/2024	135	0	34	135	169
09/30/2024	410	0	80	410	490
10/31/2024	0	0	44	0	44
11/30/2024	340	0	53	340	393
12/31/2024	0	0	52	0	52
01/31/2025	1,400	0	95	1,400	1,495
02/28/2025	0	0	32	0	32
03/31/2025	1,715	0	77	1,715	1,792
04/30/2025	270	0	44	270	314
05/31/2025	280	0	49	280	329
06/30/2025	1,310	0	52	1,310	1,362
07/31/2025	481	268	66	749	815
08/31/2025	343	0	32	343	375
09/30/2025	270	0	70	270	340
10/31/2025	0	0	41	0	41
11/30/2025	1,474	0	47	1,474	1,521

Source: BondEdge, Western Asset

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# Cash Flow (2/3)

## Alameda County Schools Insurance Group

March 31, 2024

Date	Maturity Cash Flow	Call Cash Flow	Total Interest Cash Flow	Total Principal Cash Flow	Total Cash Flow
12/31/2025	0	0	50	0	50
01/31/2026	1,413	0	51	1,413	1,464
02/28/2026	0	0	25	0	25
03/31/2026	2,580	0	65	2,580	2,645
04/30/2026	296	0	41	296	337
05/31/2026	1,997	0	44	1,997	2,041
06/30/2026	0	0	50	0	50
07/31/2026	0	0	47	0	47
08/31/2026	1,801	0	25	1,801	1,826
09/30/2026	0	0	40	0	40
10/31/2026	0	0	40	0	40
11/30/2026	0	0	13	0	13
12/31/2026	0	0	50	0	50
01/31/2027	0	0	47	0	47
02/28/2027	0	300	19	300	319
03/31/2027	0	0	40	0	40
04/30/2027	0	0	40	0	40
05/31/2027	0	0	13	0	13
06/30/2027	0	0	50	0	50
07/31/2027	0	0	47	0	47
08/31/2027	0	0	15	0	15

Source: BondEdge, Western Asset

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# Cash Flow (3/3)

## Alameda County Schools Insurance Group

March 31, 2024

Date	Maturity Cash Flow	Call Cash Flow	Total Interest Cash Flow	Total Principal Cash Flow	Total Cash Flow
09/30/2027	1,650	0	40	1,650	1,690
10/31/2027	0	0	40	0	40
11/30/2027	0	0	13	0	13
12/31/2027	197	0	50	197	247
01/31/2028	1,349	324	54	1,673	1,727
02/29/2028	439	0	7	439	446
03/31/2028	262	0	6	262	268
04/30/2028	1,950	0	40	1,950	1,990
05/31/2028	276	0	13	276	289
06/30/2028	850	0	46	850	896
07/31/2028	1,076	0	23	1,076	1,099
08/31/2028	0	0	0	0	0
09/30/2028	0	0	0	0	0
10/31/2028	280	0	6	280	286
11/30/2028	350	0	7	350	357
12/31/2028	1,539	0	29	1,539	1,568
	<b>27,666</b>	<b>892</b>	<b>2,313</b>	<b>28,558</b>	<b>30,871</b>

Source: BondEdge, Western Asset

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# Appendix

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12/20



## Custom Report

Prepared on April 10, 2024 for:  
**ACSIG Consolidated**

### Mark Payne

Financial Advisor  
Tel: +1 916 797-7707  
Mark.C.Payne@morganstanley.com

### Daniel Tichenor

Private Wealth Advisor  
Vice President  
Tel: +1 925 746-2931  
Dan.Tichenor@MSGraystone.com

### Brian Sharpes

Financial Advisor  
Managing Director, Wealth Mgmt  
Tel: +1 925 746-2919  
Brian.Sharpes@MSGraystone.com

### Your Branch:

1478 STONE POINT DR SUITE 500  
ROSEVILLE, CA 95661

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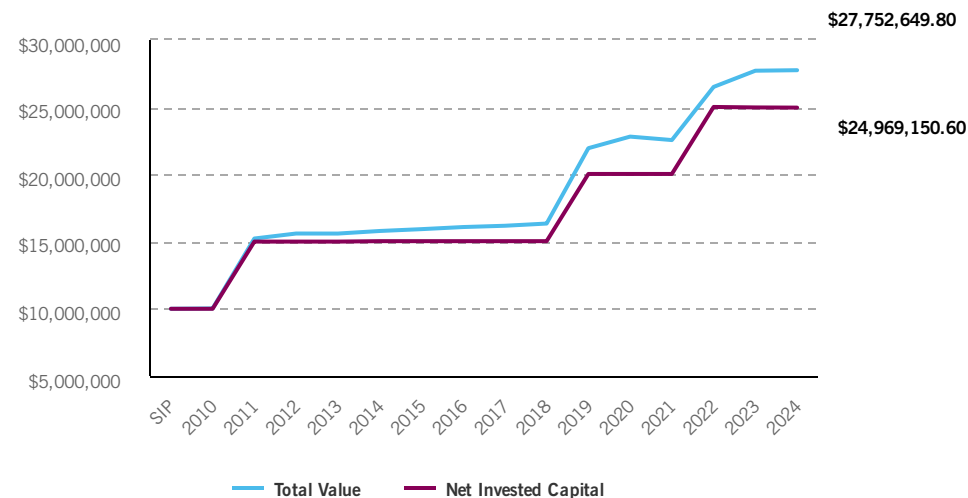
ACSIG Consolidated

As of March 31, 2024 | Reporting Currency: USD

**TWR % (NET OF FEES)<sup>‡</sup>**

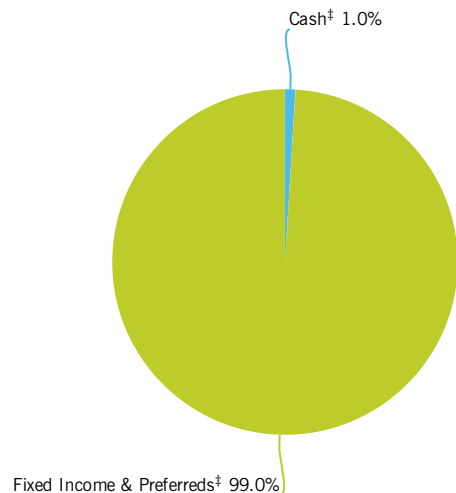
	Quarter to Date (\$) 12/31/23-03/31/24	Last 12 Months (\$) 03/31/23-03/31/24	Performance Inception (\$) 07/12/10-03/31/24
<b>Beginning Total Value</b>	<b>27,714,904</b>	<b>26,961,814</b>	<b>9,999,850</b>
Net Contributions/Withdrawals	-13,424	-44,649	14,969,301
Investment Earnings	51,169	835,484	2,783,499
<b>Ending Total Value</b>	<b>27,752,650</b>	<b>27,752,650</b>	<b>27,752,650</b>
<b>TIME WEIGHTED RATE OF RETURN (%)</b> (Annualized for periods over 12 months)			
Return % (Net of Fees)	0.18	3.10	1.17
FTSE Treasury Bill 3 Month	1.37	5.52	1.03
Bloomberg US Government 1-3 Y	0.29	2.98	1.00
BB US Agg Gov/Credit 1-5 Y	0.14	3.16	1.54

**TOTAL VALUE VS. NET INVESTED CAPITAL<sup>‡</sup>**



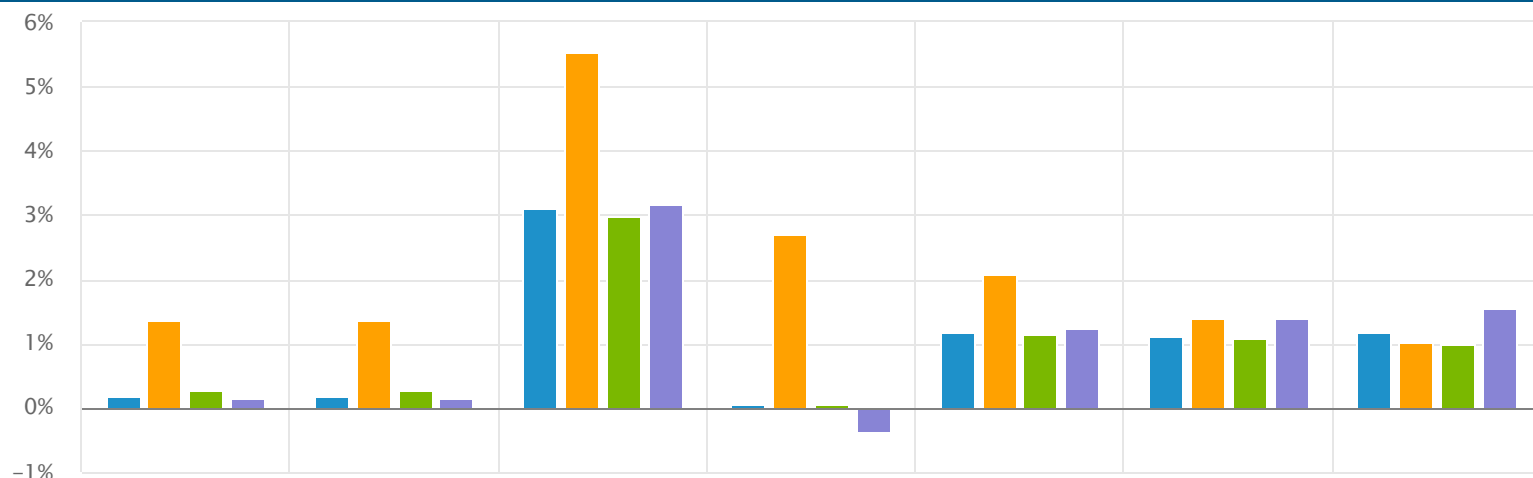
Does not include Performance Ineligible Assets.

**ASSET ALLOCATION**



The investment returns shown on this page are time-weighted measurements which exclude the effect of the timing and amount of your contributions and withdrawals.

<sup>‡</sup>Includes manually added and/or external accounts, assets and/or liabilities, as applicable, not held at Morgan Stanley Wealth Management. Please see Disclosures for more information.

RETURN % (NET OF FEES) VS. BENCHMARKS (ANNUALIZED)<sup>‡</sup>

	Quarter to Date 12/31/23 - 03/31/24	Year to Date 12/31/23 - 03/31/24	Last 12 Months 03/31/23 - 03/31/24	Last 3 Years 03/31/21 - 03/31/24	Last 5 Years 03/31/19 - 03/31/24	Last 10 Years 03/31/14 - 03/31/24	Performance Inception 07/12/10 - 03/31/24
Beginning Total Value (\$)	27,714,904.40	27,714,904.40	26,961,814.45	22,683,322.79	16,523,348.91	15,638,820.00	9,999,850.00
Net Contributions/Withdrawals (\$)	-13,423.81	-13,423.81	-44,649.12	4,936,258.15	9,936,274.85	9,969,150.60	14,969,300.60
Investment Earnings (\$)	51,169.21	51,169.21	835,484.47	133,068.86	1,293,026.04	2,144,679.20	2,783,499.20
Ending Total Value (\$)	27,752,649.80	27,752,649.80	27,752,649.80	27,752,649.80	27,752,649.80	27,752,649.80	27,752,649.80
Return % (Net of Fees)	0.18	0.18	3.10	0.00	1.17	1.12	1.17
FTSE Treasury Bill 3 Month (%)	1.37	1.37	5.52	2.71	2.07	1.39	1.03
Bloomberg US Government 1-3 Y (%)	0.29	0.29	2.98	0.03	1.14	1.07	1.00
BB US Agg Gov/Credit 1-5 Y (%)	0.14	0.14	3.16	-0.38	1.24	1.40	1.54

The investment returns shown on this page are time-weighted measurements which exclude the effect of the timing and amount of your contributions and withdrawals.

<sup>‡</sup>Includes manually added and/or external accounts, assets and/or liabilities, as applicable, not held at Morgan Stanley Wealth Management. Please see Disclosures for more information.

## TIME WEIGHTED PERFORMANCE BY PERIOD

ACSIG Consolidated

As of March 31, 2024 | Reporting Currency: USD

RETURN % (NET OF FEES) VS. BENCHMARKS<sup>‡</sup>

Period	Beginning Total Value (\$)	Net Contributions/ Withdrawals (\$)	Investment Earnings (\$)	Ending Total Value (\$)	Period Returns%			
					Portfolio (Net Of Fees)	FTSE Treasury Bill 3 Month	Bloomberg US Government 1-3 Y	BB US Agg Gov/Credit 1- 5 Y
2024 (YTD)	27,714,904.40	-13,423.81	51,169.21	27,752,649.80	0.18	1.37	0.29	0.14
2023	26,509,843.66	-36,127.82	1,241,188.56	27,714,904.40	4.69	5.26	4.32	4.89
2022	22,554,842.03	4,985,809.78	-1,030,808.15	26,509,843.66	-4.11	1.50	-3.81	-5.50
2021	22,811,869.36	0.00	-257,027.33	22,554,842.03	-1.13	0.05	-0.60	-0.97
2020	21,950,284.82	9.71	861,574.83	22,811,869.36	3.92	0.58	3.14	4.71
2019	16,342,539.30	5,000,006.99	607,738.52	21,950,284.82	3.69	2.25	3.59	5.01
2018	16,178,410.09	0.00	164,129.22	16,342,539.30	1.01	1.86	1.58	1.38
2017	16,082,980.87	0.00	95,429.22	16,178,410.09	0.59	0.84	0.45	1.27
2016	15,926,083.41	0.00	156,897.47	16,082,980.87	0.99	0.27	0.87	1.56
2015	15,789,357.87	0.00	136,725.54	15,926,083.41	0.87	0.03	0.57	0.97
2014	15,597,806.94	32,875.75	158,675.18	15,789,357.87	1.01	0.03	0.64	1.42
2013	15,600,964.10	0.00	-3,157.16	15,597,806.94	-0.03	0.05	0.37	0.28
2012	15,229,289.11	0.00	371,674.99	15,600,964.10	2.44	0.07	0.51	2.24
2011	10,028,996.97	5,000,000.00	200,292.14	15,229,289.11	1.91	0.08	1.56	3.14
2010 Performance Inception: 07/12/2010	9,999,850.00	150.00	28,996.97	10,028,996.97	0.29	0.07	0.53	1.03

The investment returns shown on this page are time-weighted measurements which exclude the effect of the timing and amount of your contributions and withdrawals.

<sup>‡</sup>Includes manually added and/or external accounts, assets and/or liabilities, as applicable, not held at Morgan Stanley Wealth Management. Please see Disclosures for more information.

ACSIG Consolidated

Reporting Currency: USD

## MORGAN STANLEY WEALTH MANAGEMENT

Account Name	Account Number	Account Type/ Manager Name	Date Opened	Perf Inception Date Perf (%) Incept - 04/09/24	Total Value (\$) 04/09/24	% of Portfolio 04/09/24
<b>Morgan Stanley Wealth Management Total</b>					<b>0.00</b>	<b>0.00</b>

EXTERNALLY HELD<sup>‡</sup>

Account Name	Account Number/ Custodian	Account Type	Exclusions	Last Updated	Perf Inception Date Perf (%) Incept - 04/09/24	Total Value (\$) 04/09/24	% of Portfolio 04/09/24
UD - ACSIG ACSIG	171-XXX340 COMERICA BANK	REG	P	03/28/24	12/21/2020 -	27,752,649.80	100.00
<b>Externally Held Total</b>						<b>27,752,649.80</b>	<b>100.00</b>
<b>Total Portfolio</b>						<b>27,752,649.80</b>	<b>100.00</b>

Investment, insurance and annuity products offered through Morgan Stanley Smith Barney LLC are: NOT FDIC INSURED | MAY LOSE VALUE | NOT BANK GUARANTEED | NOT A BANK DEPOSIT | NOT INSURED BY ANY FEDERAL GOVERNMENT AGENCY. All content within this Document applies to the accounts listed above or a subset thereof, unless otherwise indicated. The investment returns shown on this page are time-weighted measurements which exclude the effect of the timing and amount of your contributions and withdrawals. AA=Asset Allocation, P=Performance, POS=Positions & Balances, TW=Total Wealth, Q=Morgan Stanley Impact Quotient

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**Consulting Group Advisory Accounts:** Consulting Group is a business of Morgan Stanley Smith Barney LLC.

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**Important Information About Auction Rate Securities:** For certain Auction Rate Securities there is no or limited liquidity. Therefore, the price(s) for these Auction Rate Securities are indicated as not available by a dash "-". There can be no assurance that a successful auction will occur or that a secondary market exists or will develop for a particular security.

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**Asset Classification:** We classify assets based on general characteristics such as: income generation, underlying capital structure, or exposure to certain market sectors. As many assets contain characteristics of more than one asset class, allocations may be under or over inclusive. These classifications do not constitute a recommendation and may differ from the classification of instruments for regulatory or tax purposes. In addition, the Other asset class contains securities that are not included in the various asset class classifications. This can include, but is not limited to, non-traditional investments such as some Equity Unit Trusts, Index Options and Structured Investments issued outside of Morgan Stanley. Additionally, investments for which we are unable to procure market data to properly classify them will appear in the Other category.

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**External Accounts:** "External" generally refers to accounts, assets, and/or liabilities that you hold with other financial institutions and/or which may be custodied outside of Morgan Stanley (whose subsidiaries include Morgan Stanley Smith Barney LLC and Morgan Stanley & Co.) ("External Accounts"). External Accounts are not under administration or management at Morgan Stanley and are not reflected in your Morgan Stanley account statements. Information related to External Accounts is provided solely as a service to you and your Financial Advisor/Private Wealth Advisor. The information

reference is based upon information provided by external sources which we believe to be reliable. However, we do not independently verify this information. As such, we do not warrant or guarantee that such information is accurate or timely, and any such information may be incomplete or condensed.

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**Timing of Feeds:** Account and Position data for Morgan Stanley & Co. and External Accounts is obtained from sources that we believe to be reliable. However, Morgan Stanley Wealth management does not guarantee its accuracy or timeliness as such information may be incomplete, condensed, or based on differing points of time. Please refer to the "Last Update Date" for information regarding when the data was last refreshed. You should not take any action relying upon this information without confirming its accuracy and completeness.

**Performance:** Performance results are annualized for time periods greater than one year and include all cash and cash equivalents, realized and unrealized capital gains and losses, dividends, interest and income. Depending on the opening or closing date of the account or position, the performance referenced may be for a portion of the time period identified. The investment results depicted herein represent historical performance. As a result of recent market activity, current performance may vary from the figures shown. Please contact your Financial Advisor for up-to-date performance information. Past performance is not a guarantee of future results. Quotations of performance appearing in this report may include performance experienced in legacy accounts which have been closed and purged, and as such are not included on the Accounts Included in This Report page.

Market values used for performance calculation do not include Performance Ineligible Assets and thus may differ from asset allocation market values. Common examples of Performance Ineligible Assets include liabilities, life insurance and annuities as well as Manually Added and External accounts for which Morgan Stanley does not receive data necessary to calculate performance.

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For Morgan Stanley Smith Barney LLC accounts, performance information may cover the full history of the account(s) or just the performance of an account(s) since the inception of the current program(s). Performance results on individual accounts will vary and may differ from the composite returns. Your Financial Advisor can provide you with individual account portfolio composition and performance information. For investment advisory accounts, please see the Morgan Stanley Smith Barney LLC Form ADV Part 2 or applicable disclosure brochure. For brokerage accounts, please speak to your Financial Advisor for more information on commissions and other account fees and expenses. Performance inception date does not necessarily correspond to the account opening date. Where multiple accounts are included in performance calculations, the inception date is the oldest performance inception. Performance data may not be available for all periods as some accounts included in performance may have more recent performance inception dates. Consequently, the actual performance for a group of accounts may differ from reported performance. Please ask your Financial Advisor for the performance inception date for each account.

**Indices:** Benchmark indices and blends included in this material are for informational purposes only, are provided solely as a comparison tool and may not reflect the underlying composition and/or investment objective(s) associated with the account(s). In some circumstances, the benchmark index may not be an appropriate benchmark for use with the specific composite portfolio. For instance, an index may not take into consideration certain changes that may have occurred in the portfolio since the inception of the account(s), (e.g., changes from a brokerage to an advisory account or from one advisory program to another, asset class changes, or index changes for individual managers). The volatility of the index used for comparison may be materially different from that of the performance shown. Indices are unmanaged and not available for direct investment. Index returns do not take into account fees or other charges. Such fees and charges would reduce performance. Please see the Benchmark Definitions section of this material for additional information on the indices used for comparison.

**Closed or Purged Accounts:** Data from accounts which have been closed and/or purged may be included in this report, for example in performance, asset allocation, or other attributes for periods when these accounts were open. If this report does contain data from any closed or purged accounts not identified earlier in the report, those accounts are identified below.

**Closed Accounts:** 171-XXX349



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In addition, each account that is invested in a program that is eligible to purchase certain investment products, such as mutual funds, will also pay a Platform Fee (which is subject to a Platform Fee offset) as described in the applicable ADV brochure. Accounts invested in the Select UMA program may also pay a separate Sub-Manager fee, if applicable.

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## GENERAL DEFINITIONS

**Dollar-Weighted Return (Internal Rate of Return):** A return calculation that measures the actual performance of a portfolio over the reporting period. Since dollar weighted returns include the impact of client contributions and withdrawals, they should not be compared to market indices or used to evaluate the performance of a manager, but can be used to evaluate progress toward investment goals.

**Investment Earnings:** A combination of the income received and total portfolio value increase or decrease, excluding net contributions and withdrawals, over the reporting period.

**Net Contributions/Withdrawals:** The net value of cash and securities contributed to or withdrawn from the account(s) during the reporting period. Net contributions and withdrawals may include advisory fees for advisory accounts.

**Net of Fees:** Performance results depicted as "net" of fees shall mean that any wrap fee, investment management fees, trade commissions, and/or other account fees have been deducted. Any other fees or expenses associated with the account, such as third party custodian fees, may not have been deducted. Please see the Morgan Stanley Smith Barney LLC Form ADV Part 2 Brochure for advisory accounts and/or any applicable brokerage account trade confirmation statements for a full disclosure of the applicable charges, fees and expenses. Your Financial Advisor will provide those documents to you upon request.

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**Total Value:** "Total Value" represents the Market Value of the portfolio or Asset Class referenced and includes the accrual of interest and dividends. Total Value in the Asset Allocation view prior to January 2014, does not reflect the accrual of interest and dividends. Total Value for Morgan Stanley & Co. and External accounts also does not include accrued interest and dividends.

#### BENCHMARK DEFINITIONS

**Bloomberg US Government 1-3 Y:** The Bloomberg 1-3 Year Government Bond Index is composed of government bonds with maturities between one and three years.

**FTSE Treasury Bill 3 Month:** Equal dollar amounts of three-month Treasury bills are purchased at the beginning of each of three consecutive months. As each bill matures, all proceeds are rolled over or reinvested in a new three-month bill. The income used to calculate the monthly return is derived by subtracting the original amount invested from the maturity value. The yield curve average is the basis for calculating the return on the index. The index is rebalanced monthly by market capitalization. The 90-Day Treasury Bill is a short-term obligation issued by the United States government. T-bills are purchased at a discount to the full face value, and the investor receives the full value when they mature. The difference of discount is the interest earned. T-bills are issued in denominations of \$10,000 auction and \$1,000 increments thereafter.

**BB US Agg Gov/Credit 1-5 Y:** The Government/Credit Index includes securities in the Government and Credit Indices. The Government Index includes treasuries (i.e., public obligations of the U.S. Treasury that have remaining maturities of more than one year) and agencies (i.e., publicly issued debt of U.S. Government agencies, quasi-federal corporations, and corporate or foreign debt guaranteed by the U.S. Government). The Credit Index includes publicly issued U.S. corporate and foreign debentures and secured notes that meet specified maturity, liquidity, and quality requirements. This index is the 1-5 Yr component of the U.S. Government/Credit index.



## Alameda County Schools Insurance Group

P.O. Box 2487

Dublin, CA 94568

Phone (925) 225-1030

Fax (292) 225-0653

[www.acsig.com](http://www.acsig.com)

### Executive Summary: Investment Policy

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: Investment Policy

The California Association of Joint Powers Authorities (“CAJPA”) Accreditation Standards require that a JPA’s Board of Directors review and affirm its JPA’s investment Policy annually.<sup>1</sup> Accordingly, ACSIG’s Investment Policy is included in this packet and will be discussed by the committee with actions to amend if necessary. Morgan Stanley reviewed the policy on April 26, 2024, and recommended no changes.

The Executive Committee will be asked for a recommendation to the Full Board.

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<sup>1</sup> CAJPA Accreditation Manual, Appendix P (<https://www.cajpa.org/page/accreditation-documents>)

# ALAMEDA COUNTY SCHOOLS INSURANCE GROUP

## POLICY AND PROCEDURES MANUAL

### SUBJECT: INVESTMENT OF FUNDS

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#### 1.0 POLICY

It shall be the policy of Alameda County Schools Insurance Group (Authority), that the Executive Committee shall have the power to invest or cause to be invested in compliance with Section 6509.5 of the California Government Code such funds as are not necessary for the immediate operation of the Schools Insurance Group in such securities as allowed by Section 53601 of the California Government Code.

The amount of money to be retained for the day-to-day operation of the Schools Insurance Group shall be determined by the Executive Committee.

All funds shall be invested in a manner which will 1) preserve principal; 2) meet the Authority's daily cash flow needs; and 3) optimize returns while conforming to all federal, state, and local statutes governing the investment of public funds. The Authority's investment portfolio shall be a suitable blend of investment strategies which achieve the desired objectives of the Authority as stated above.

#### 2.0 SCOPE

This investment policy applies to all financial assets of the Authority. These funds are accounted for in the Authority's annual financial report and include:

## **2.1 Funds**

- 2.1.1 Dental
- 2.1.2 Operations
- 2.1.3 Property/Liability
- 2.1.4 Workers' Compensation
- 2.1.5 Vision

## **3.0 PRUDENCE**

Investments shall be made with same judgment and care, under circumstances then prevailing, which persons of prudence, discretion and intelligence exercise in the management of their own affairs, not for speculation, but for investment, considering the probable safety of capital as well as the probable income to be derived.

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Investment Policy  
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The standard of prudence to be used by the Authority's investment officials shall be the "prudent person" standard and shall be applied in the context of managing an overall portfolio. The Investment Committee, acting in accordance with written procedures and their investment policy and exercising due diligence, shall be relieved of personal responsibility for an individual security's credit risk or market price changes, provided deviations from expectations are reported in a timely fashion and appropriate action is taken to control adverse developments. The Executive Committee serves as the Investment Committee.

## **4.0 OBJECTIVE**

The primary objectives, in priority order, of the Authority's investment activities shall be:

#### **4.1 Liquidity**

The Authority's investment portfolio will remain sufficiently liquid to enable the Authority to meet all operating requirements which can be reasonably anticipated.

#### **4.2 Safety**

Safety of principal is a primary objective of the investment program. Investments of the Authority shall be undertaken in a manner that seeks to ensure the preservation of capital in the overall portfolio. To attain this objective diversification is required in order that potential losses on individual securities do not exceed the income generated from the remainder of the portfolio.

#### **4.3 Return on Investment**

The Authority's investment portfolio shall be designed with the objective of attaining a market rate of return throughout budgetary and economic cycles, taking into account the Authority's investment risk constraints and the cash flow characteristics of the portfolio.

### **5.0 DELEGATION OF AUTHORITY**

Authority to manage the Authority's investment program is derived from Government Code Sections 53601 & 53601.1. In accordance with Government Code Section 53607, Management responsibility for the investment program is hereby delegated to the Executive Committee, subject to annual review. The Executive Committee shall establish written investment program consistent with this investment policy.

Procedures should include reference to: safekeeping, PSA repurchase agreements, wire transfer agreements, collateral/depository agreements and banking service

contracts. Such procedures shall include explicit delegation of authority to persons responsible for investment transactions, except as provided under the terms of this

POLICY: 3.2

Investment Policy

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policy, and the procedures established by the Executive Committee. The Executive Committee shall be responsible for all transactions undertaken and shall establish a system of control to regulate the activities of subordinate officials.

## **6.0 ETHICS AND CONFLICTS OF INTEREST**

Officers and employees involved in the investment process shall refrain from personal business activity that could conflict with proper execution of the investment program, or which could impair their ability to make impartial investment decisions. Employees and investment officials shall disclose to the Governing Board of Directors, any material financial interests in financial institutions that conduct business within this jurisdiction, and they shall further disclose any large personal financial/investment positions that could be related to the performance of the Authority's portfolio. Employees and officers shall subordinate their personal investment transactions to those of the Authority particularly with regard to the time of purchases and sales.

## **7.0 AUTHORIZED FINANCIAL DEALERS AND INSTITUTIONS**

The ACSIG treasurer will maintain a list of financial institutions authorized to provide investment services. In addition, a list will also be maintained of approved security broker/dealers selected by credit worthiness who are authorized to provide investment services in the State of California. These may include "primary" dealers or regional dealers that qualify under Securities & Exchange

Commission Rule 15C3-1. No public deposit shall be made except in a qualified public depository as established by state laws. All financial institutions and/or broker/dealers who desire to be placed on the list of financial institutions for investment transactions must supply the Treasurer with the following: 1.) audited financial statements, 2.) proof of National Association of Security Dealers certification, 3.) trading resolution, 4.) proof of state registrations, 5.) complete broker/dealer questionnaire, 6.) certification of having read Authority's investment policy and depository contracts). A current audited financial statement is required to be on file for each financial institution and broker/dealer through which ACSIG invests.

## **8.0 AUTHORIZED & SUITABLE INVESTMENTS**

Deposit up to a maximum of 30% of the portfolio, b.) Repurchase Agreements, c.) Reverse Repurchase Agreement, d.) Corporate Obligations up to a maximum of 30% of the portfolio, e.) Money Market Accounts, f.) Local Agency Investment Fund, g.) County Treasurer. Securities eligible for investment shall be rated "A" or better at the time of purchase. \*If an investment is subsequently downgraded below "A" the Executive Director shall notify the Executive Committee upon learning of the downgrade. After review, the Executive Director shall make a recommendation to the

POLICY: 3.2

Investment Policy

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Executive Committee and a determination shall be made as to the action to be taken at either a special meeting or regular Executive Committee meeting.

## **9.0 COLLATERALIZATION**



Collateralization will be required on two types of investments: certificates of deposit and repurchase (and reverse) agreements. In order to anticipate market changes and provide a level of security for all funds, the collateralization level will be (102%) of market value of principal and accrued interest. The entity chooses to limit collateral to the following:

- Treasuries under ten years
- Agencies under ten years
- A1/P1 Commercial Paper/Bankers Acceptance

Collateral will always be held by an independent third party with whom the entity has a current custodial agreement. A clearly marked evidence of ownership (safekeeping receipt) must be supplied to the Authority and retained. The right of collateral substitution is granted.

## **10.0 SAFEKEEPING AND CUSTODY**

All security transactions, including collateral for repurchase agreements, entered into by the authority shall be conducted on a delivery-versus-payment (DVP) basis. Securities will be held by a third party custodian designated by the Executive Committee and evidenced by safekeeping receipts.

## **11.0 DIVERSIFICATION**

The Authority will diversify its investments by security type, maturity, and institution. With the exception of U.S. Treasury securities and authorized pools, no more than 50% of the entity's total investment portfolio will be invested in a single security type or with a single financial institution.

## **12.0 MAXIMUM MATURITIES**

To the extent possible, the Authority will attempt to match its investments with anticipated cash flow requirements. In accordance with Government Code Section 53601, the Board of Directors authorizes investments in U.S. Treasuries or Agencies of up to 20% of the investment portfolio in maturities over 5 years but not over 7 years. Any investment with a maturity over 5 years must be approved by two members of the Executive Committee.

POLICY: 3.2

Investment Policy

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### **13.0 INTERNAL CONTROL**

A system of internal controls shall be established and documented in writing. The controls shall be designed to prevent losses of public funds arising from fraud, misrepresentation of third parties, or imprudent actions by ACSIG employees or officers.

### **14.0 PERFORMANCE STANDARDS**

The investment portfolio will be designed to obtain a market average rate of return during budgetary and economic cycles, taking into account the Authority's investment risk constraints and cash flow needs.

#### **14.1 Market Yield (Benchmark)**

The Authority's investment strategy is passive. Given this strategy, the basis used by the Executive Committee to determine whether market yields are being achieved shall be the six-month U.S. Treasury Bill and the average Fed Funds rate.

## **15.0 REPORTING**

The Executive Director shall submit a quarterly report to the Board which complies with the requirements of Government Code Sections 53646 (b) and (c). Reports will include performance, market sector breakdown, interest earnings, portfolio market value, etc.

## **16.0 INVESTMENT POLICY ADOPTION**

The Authority's investment policy shall be adopted by the Board of Directors. The Policy shall be reviewed on an annual basis by the Executive Committee and any modifications made thereto must be approved by the Board of Directors.

APPROVED: 12/11/08  
REVISED:  
REVIEWED: 05/22/14



## Alameda County Schools Insurance Group

P.O. Box 2487  
Dublin, CA 94568  
Phone (925) 225-1030  
Fax (925) 225-0653  
[www.acsig.com](http://www.acsig.com)

### Executive Summary: 3<sup>rd</sup> Quarter Financials

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: 3<sup>rd</sup> Quarter Financials

Enclosed are the 2023/2024 ThirdQuarter financial statements for review. ACSIG is progressing in alignment with its budget. The majority of the funds are experiencing an improvement in their financial positions. This will allow the Executive Committee and Board to explore program changes in the future.

A representative from SETECH will review the financial statements with the Executive Committee. The Executive Committee will be asked to approve these statements.



# ALAMEDA COUNTY SCHOOLS INSURANCE GROUP

## TREASURER'S REPORT

### AS OF MARCH 31, 2024 AND FOR THE NINE MONTHS THEN ENDED

As mandated by Section 53646 of the California Government Code, Alameda County Schools Insurance Group is required to disclose that it is able to meet its pool's expenditure requirements for the next six months and is in complete compliance with the current Investment Policy as of the date of this report.

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President



SETECH (Service Enhancement Technologies)

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License No. 0451271

For the Executive Committee Meeting of May 16, 2024

**Alameda County Schools Insurance Group (ACSIG)**

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## **Distribution and Use of Report**

This financial management information report (Report) prepared by Service Enhancement Technologies (SETECH), a Division of Keenan & Associates, is intended solely for internal use by the Authority's Officers, Board Members, Advisory Committee Members, and for internal decision making purposes only in regards to the Authority's insurance program.

SETECH makes no representations or warranties regarding the use of this Report for any other purpose other than for the Authority's insurance program. The official version of the Report is finalized only upon approval by the Authority's Board of Directors and/or Advisory Committee in accordance with the Authority's Agreement and Bylaws following presentation by SETECH or Keenan & Associates. We understand that members may wish to provide a copy of this Report to auditors and regulatory authorities on the conditions that:

- A) The official approved Report is used,
- B) The entire Report be distributed rather than any excerpts,
- C) All recipients be made aware that a SETECH staff member is available to answer any questions regarding the contents of the Report,
- D) The recipients recognize that the furnishing of this Report is not a substitute for their own due diligence, and they place no undue reliance on the Report or the data for purposes other than for which it was created. No creation of any duty or liability of SETECH to the recipient is owed if the Report is used for purposes other than for which it was created.

SETECH may utilize actuarial projections as an integral component of this Report, as provided by the Authority's actuary and in the case of some Benefit Groups, by a staff member of the Keenan & Associates Technical Department. We may also rely upon financial data provided by the Authority's Treasurer, Accountant or County Office of Education. We have not audited this data and are not responsible for its accuracy. With any financial analysis, the accuracy and relevance of the conclusions as well as the reasonableness of the recommendations depend upon the accuracy and relevance of the underlying data. Financial information provided in this Report is subject to an annual independent financial audit.

SETECH strives to maintain the strictest confidentiality of any information for our clients. The pages of this Report indicate that the information contained in the Report is for "Client Confidential Use Only." This indicates that SETECH will only disclose information contained in these Reports to our intended clients, their members or their contracted parties.

**Alameda County Schools Insurance Group (ACSIG)**  
**Treasurer's Report- Statement of Net Position**  
**Consolidated**  
**As of 06/30/2023 and 03/31/2024**

	Audited As of 06/30/2023	Activity 07/01/2023 - 03/31/2024	As of 03/31/2024
<b>Assets:</b>			
Current Assets			
Workers Compensation	\$ 17,399,635	(287,484)	\$ 17,112,151
Dental	9,486,832	(1,875,203)	7,611,629
Vision	3,682,784	282,357	3,965,141
Property and Liability Operations	5,755,522	(669,600)	5,085,922
	263,297	165,544	428,841
Cash and Cash Equivalents	<u>\$ 36,588,070</u>	<u>(2,384,386)</u>	<u>\$ 34,203,684</u>
Investments Morgan Stanley - current	-	269,808	269,808
Accounts Receivable	10,715,815	2,667,178	13,382,993
Prepaid Expense	8,465	587,693	596,158
Interfund Receivable/(payable) (1)	-	-	-
Subtotal Current Assets	<u>47,312,350</u>	<u>1,140,293</u>	<u>48,452,643</u>
Noncurrent Assets			
Investments @ FMV - Morgan Stanley (3)	26,625,917	650,776	27,276,694
Capital - Equipment, net of depreciation	-	-	-
	<u>26,625,917</u>	<u>650,776</u>	<u>27,276,694</u>
<b>Total Assets</b>	<u><b>\$ 73,938,267</b></u>	<u><b>\$ 1,791,070</b></u>	<u><b>\$ 75,729,337</b></u>
<b>Deferred Outflow of Resources:</b>			
Deferred outflow of resources - pension	<u>555,879</u>	<u>-</u>	<u>555,879</u>
<b>Liabilities:</b>			
Current Liabilities			
Accounts Payable	\$ 3,738,789	\$ 32,029	\$ 3,770,818
Prefunding deposits (2)	5,111,070	-	5,111,070
Advance Contributions	-	-	-
Other Claim Liabilities - Castlepoint Reinsurance Insolvency	502,425	-	502,425
Current Portion of claims and claim adjustment	3,051,299	(4,235)	3,047,064
Subtotal Current Liabilities	<u>12,403,583</u>	<u>27,794</u>	<u>12,431,377</u>
Noncurrent Liabilities			
Unpaid claims and claim adjustment expenses less current	3,623,861	(1,232,391)	2,391,470
Unallocated Loss Adjustment Expense (ULAE)	403,295	(110,568)	292,727
Subtotal Noncurrent Claim Liabilities	<u>4,027,156</u>	<u>(1,342,959)</u>	<u>2,684,197</u>
Net Pension Liability (NPL)	816,289	63,781	880,070
<b>Total Liabilities</b>	<u><b>\$ 17,247,028</b></u>	<u><b>\$ (1,251,384)</b></u>	<u><b>\$ 15,995,644</b></u>
<b>Deferred Inflow of Resources:</b>			
Deferred inflow of resources - pension	<u>202,611</u>	<u>-</u>	<u>202,611</u>
<b>Net Position:</b>			
Undesignated Net Position - Net Assets/(Deficit)	57,044,507	3,042,454	60,086,961
Designated - Capital Assets	-	-	-
<b>Total Net Position</b>	<u><b>\$ 57,044,507</b></u>	<u><b>\$ 3,042,454</b></u>	<u><b>\$ 60,086,961</b></u>
<b>Total Liabilities, Deferred Pension, and Ending Net Position</b>	<u><b>\$ 73,938,267</b></u>	<u><b>\$ 1,791,070</b></u>	<u><b>\$ 75,729,337</b></u>

**Footnote:**

- (1) Interfund transfers net to zero on consolidated financial statements. This is an internal function used to transfer or allocate expense and income from one program to another without transfer of cash.
- (2) Estimated six weeks of dental claims funded by each member to maintain positive cash flow.
- (3) Morgan Stanley Smith Barney Investment shown at Fair Market Value, accrued interest shown as accounts receivable.



**Alameda County Schools Insurance Group (ACSIG)**  
**Consolidated**  
**Statement of Revenues, Expenditures and Changes in Net Position**  
**As of 03/31/2024 and For The Nine Months Then Ended**

	2022/2023		2023/2024			
	Budget	Actuals	Budget	Activity 07/01/20223 - 03/31/2024	Variance	Percentage of Budget
<b>Operating Revenue:</b>						
Premiums Paid by Members	\$ 160,217,008	\$ 177,306,476	\$ 189,153,110	\$ 140,231,550	\$ 48,921,560	74.14 %
Return of Premiums/Rebate	--	318	--	(129,940)	--	--
PIPS - Accelerated Profit Commission	--	--	--	--	--	--
Total Operating Revenue	160,217,008	177,306,794	189,153,110	140,101,610	48,921,560	74.07
<b>Operating Expenditures:</b>						
Classified Salaries	412,449	384,482	536,598	340,794	195,804	63.51
Statutory Benefits	77,994	47,360	91,725	47,759	43,965	52.07
Health & Welfare	56,750	48,750	66,500	39,813	26,688	59.87
Employer Tax Expense	6,438	5,917	7,439	5,716	1,723	76.84
Net Pension Expense	229,772	104,548	278,325	127,562	150,763	45.83
Telephone & Internet	10,451	5,563	11,100	5,373	5,727	48.40
Supplies Office	8,000	8,347	8,000	3,347	4,653	41.83
Supplies - Other	6,000	5,003	12,000	5,540	6,460	46.16
Eligibility Processing	250,000	226,419	255,000	176,269	78,731	69.13
Brokerage Fees-Dental-ACSIG	325,000	312,447	340,000	216,003	123,997	63.53
Brokerage Fees-Dental-MD	725,000	712,220	750,000	650,378	99,622	86.72
Travel and Conferences	22,925	9,376	29,100	12,163	16,937	41.80
Mileage	11,850	6,488	11,850	5,500	6,350	46.41
Dues & Memberships	8,550	7,680	8,550	300	8,250	3.51
Postage & Meter	7,330	2,059	7,330	1,729	5,601	23.59
Insurance Expense-PIPS&NCR	24,334,504	24,232,011	26,947,045	20,210,284	6,736,761	75.00
Insurance Expense-PY Adj	500,000	657,717	1,000,000	2,824,928	(1,824,928)	282.49
Utility - Operating-Rent	57,820	37,046	50,740	27,408	23,332	54.02
Advertising	--	--	--	--	--	--
Contract Services - Actuarial	20,500	14,300	17,500	9,640	7,860	55.09
Contract Services -Claim Audit	--	--	19,200	--	19,200	--
Contract Services	--	--	15,000	--	15,000	--
Audit Fees	16,500	14,850	23,000	15,125	7,875	65.76
Other Services/Operating Expenses	12,300	5,376	12,300	12,504	(204)	101.66
Capital Equipment/Depreciation	9,500	--	9,500	--	9,500	--
Repairs & Maintenance	5,000	--	5,000	--	5,000	--
Legal	6,750	--	6,750	14,650	(7,900)	217.04
Accounting Services	16,480	16,480	17,000	8,487	8,513	49.92
County Courier	1,519	1,513	2,800	1,639	1,161	58.53
Shredding	900	1,242	1,600	788	812	49.23
Copier & Scanner	17,900	9,759	17,900	7,109	10,791	39.72
Claims Administration Services	111,400	104,469	107,000	93,262	13,738	87.16
Self-Insurance Fee	300,000	558,425	650,000	331,991	318,009	51.08
Claims Paid-WC	1,000,000	400,761	1,000,000	145,113	854,887	14.51
Claims Paid-PL	100,000	151,492	100,000	55,553	44,447	55.55
Physical Abilities Testing	20,000	6,083	20,000	5,136	14,864	25.68
Training	10,000	--	10,000	--	10,000	--
First-Aid Prog&Responder Fees	35,000	2,307	35,000	5,247	29,753	14.99
Food Service Training	--	--	--	--	--	--
Risk Mgmt Prev Program	250,000	74,708	250,000	227,500	22,500	91.00
EAP Program	200,000	165,508	200,000	87,428	112,572	43.71
Safety Inspections	19,000	--	20,000	--	20,000	--
Bank Charge & WC Penalty Reimb	6,000	2,243	6,000	10,408	(4,408)	173.47
Cobra Premiums	300,000	186,045	300,000	112,953	187,047	37.65
Dental Insurance Premiums	127,590,000	138,206,038	146,190,000	107,685,230	38,504,770	73.66
Vision Insurance Premiums	5,521,000	7,551,360	8,000,000	6,365,851	1,634,149	79.57
Claim Development Expense	(700,000)	(1,158,832)	(300,000)	(1,347,195)	1,047,195	449.07
Adjustment to Prefund Deposit	--	182,870	--	--	--	--
Total Operating Expenditures	161,920,582	173,310,428	187,146,852	138,549,284	48,597,568	74.03 %
<b>Net Increase/(Decrease) from Operations</b>	<b>(1,703,574)</b>	<b>3,996,366</b>	<b>2,006,258</b>	<b>1,552,326</b>	<b>323,992</b>	<b>77.37 %</b>
<b>Non Operating Income/(Expense)</b>						
Interest Income	199,000	885,441	639,000	620,506	18,496	97.11
Net Increase/(Decrease) in Fair Value	--	(225,155)	--	492,006	(492,006)	--
Realized Gain/(Loss) on Investments	--	(84,292)	--	377,616	(377,616)	--
Cumulative effect of GASB 68	--	--	--	--	--	--
Interfund Trans, Other Inc/Exp	--	--	--	--	--	--
Total Non Operating Income/(Expense)	199,000	575,994	639,000	1,490,128	(851,126)	233.20 %
<b>Net Increase/(Decrease) in Net Position</b>	<b>\$ (1,504,574)</b>	<b>\$ 4,572,360</b>	<b>2,645,258</b>	<b>\$ 3,042,454</b>	<b>\$ (527,134)</b>	<b>115.02 %</b>
<b>Beginning Balance Prior Year End</b>	<b>\$ 52,472,148</b>	<b>\$ 52,472,148</b>	<b>57,044,507</b>	<b>\$ 57,044,507</b>	<b>\$ --</b>	<b>100.00 %</b>
<b>Ending Balance, as of 03/31/2024</b>	<b>\$ 50,967,574</b>	<b>\$ 57,044,507</b>	<b>\$ 59,689,766</b>	<b>\$ 60,086,961</b>	<b>\$ (527,134)</b>	

**Alameda County Schools Insurance Group (ACSIG)**  
**Treasurer's Report- Statement of Net Assets**  
**Workers' Compensation**  
**As of 06/30/2023 and 03/31/2024**

	Audited As of <u>06/30/2023</u>	Activity 07/01/2023 - 03/31/2024	As of <u>03/31/2024</u>
<b>Assets:</b>			
Current Assets			
Funds with County - WC - #44906	\$ 12,929,929	(58,365)	\$ 12,871,564
Funds in Transit - #44906 to Morgan Stanley Investments	--	--	--
Funds with County - Retention Fund #44904	19,068	279	19,347
Union Bank Claims - #0129	709,141	(390,671)	318,470
Union Bank Claims Trust Account - #0600	228,324	118,216	346,540
Local Agency Investment Funds (L.A.I.F.)	3,462,210	94,020	3,556,230
Money Market - Morgan Stanley	50,963	(50,963)	0
Cash and Cash Equivalents	<u>\$ 17,399,635</u>	<u>(287,484)</u>	<u>\$ 17,112,151</u>
Investments Morgan Stanley - current	--	269,808	269,808
Accounts Receivable	171,037	(579,399)	(408,362)
Prepaid Expense	--	--	--
Interfund Receivable/(payable)	<u>2,063,656</u>	<u>(135,568)</u>	<u>1,928,088</u>
Subtotal Current Assets	<u>19,634,328</u>	<u>(732,643)</u>	<u>18,901,685</u>
Noncurrent Assets			
Investments Morgan Stanley	20,035,483	435,938	20,471,422
Capital - Equipment, net of depreciation	--	--	--
	<u>20,035,483</u>	<u>435,938</u>	<u>20,471,422</u>
<b>Total Assets</b>	<b><u>\$ 39,669,811</u></b>	<b><u>\$ (296,704)</u></b>	<b><u>\$ 39,373,107</u></b>
<b>Deferred Outflow of Resources:</b>			
Deferred outflow of resources - pension	<u>137,991</u>	<u>--</u>	<u>137,991</u>
<b>Liabilities:</b>			
Current Liabilities			
Accounts Payable	\$ 1,101	\$ (1,101)	\$ --
Prefunding deposits	--	--	--
Advance Contributions	--	--	--
Other Claim Liabilities - Castlepoint Reinsurance Insolvency	502,425	--	502,425
Current Portion of claims and claim adjustment	616,080	--	616,080
Subtotal Current Liabilities	<u>1,119,606</u>	<u>(1,101)</u>	<u>1,118,505</u>
Noncurrent Liabilities			
Unpaid claims and claim adjustment expenses less current	3,515,682	(1,228,926)	2,286,756
Unallocated Loss Adjustment Expense (ULAE)	324,101	(110,568)	213,533
Subtotal Noncurrent Claim Liabilities	<u>3,839,783</u>	<u>(1,339,494)</u>	<u>2,500,289</u>
Net Pension Liability (NPL)	202,635	19,134	221,769
<b>Total Liabilities</b>	<b><u>\$ 5,162,024</u></b>	<b><u>\$ (1,321,461)</u></b>	<b><u>\$ 3,840,563</u></b>
<b>Deferred Inflow of Resources:</b>			
Deferred inflow of resources - pension	<u>50,296</u>	<u>--</u>	<u>50,296</u>
<b>Net Position:</b>			
Undesignated Net Position - Net Assets/(Deficit)	34,595,482	1,024,757	35,620,239
Designated - Capital Assets	<u>--</u>	<u>--</u>	<u>--</u>
<b>Total Net Position</b>	<b><u>\$ 34,595,482</u></b>	<b><u>\$ 1,024,757</u></b>	<b><u>\$ 35,620,239</u></b>
<b>Total Liabilities, Deferred Pension, and Ending Net Position</b>	<b><u>\$ 39,669,811</u></b>	<b><u>\$ (296,704)</u></b>	<b><u>\$ 39,373,107</u></b>

**Alameda County Schools Insurance Group (ACSIG)  
Workers' Compensation  
Statement of Revenues, Expenditures and Changes in Net Fund Assets  
As of 03/31/2024 and For The Nine Months Then Ended**

	2022/2023		2023/2024			
	Budget	Actuals	Budget	Activity	Variance	Percentage
				07/01/20223 - 03/31/2024		of Budget
<b>Operating Revenue:</b>						
Premiums Paid by Members	\$ 22,060,952	\$ 22,060,954	\$ 28,057,017	\$ 21,042,763	\$ 7,014,254	75.00 %
Return of Premiums	--	318	--	--	--	--
PIPS - Accelerated Profit Commissi	--	--	--	--	--	--
Total Operating Revenue	22,060,952	22,061,272	28,057,017	21,042,763	7,014,254	75.00
<b>Operating Expenditures:</b>						
Classified Salaries	88,740	87,930	126,676	80,392	46,284	63.46
Statutory Benefits	19,196	10,598	24,027	11,897	12,130	49.52
Health & Welfare	15,800	7,800	18,725	6,826	11,899	36.45
Employer Tax Expense	1,362	1,278	1,662	1,324	338	79.65
Net Pension Expense	44,065	27,410	64,519	38,268	26,251	59.31
Telephone & Internet	1,045	834	1,110	806	304	72.61
Supplies Office	800	1,252	800	502	298	62.75
Supplies - Other	600	750	1,200	831	369	69.25
Eligibility Processing	--	--	--	--	--	--
Brokerage Fees-Dental-ACSIG	--	--	--	--	--	--
Brokerage Fees-Dental-MD	--	--	--	--	--	--
Travel and Conferences	2,350	1,406	3,000	1,824	1,176	60.80
Mileage	1,200	973	1,200	825	375	68.75
Dues & Memberships	900	1,152	900	45	855	5.00
Postage & Meter	340	103	340	86	254	25.29
Insurance Expense-PIPS	22,066,667	22,134,268	24,596,271	18,447,203	6,149,068	75.00
Insurance Expense-PY Adj	500,000	657,717	1,000,000	2,824,928	(1,824,928)	282.49
Utility - Operating-Rent	5,782	3,705	5,074	2,741	2,333	54.02
Advertising	--	--	--	--	--	--
Contract Services - Actuarial	10,000	9,300	10,000	9,640	360	96.40
Contract Services -Claim Audit	--	--	19,200	--	19,200	--
Contract Services	--	--	5,000	--	5,000	--
Audit Fees	1,650	2,228	2,300	2,269	31	98.65
Other Services/Operating Expense:	1,300	806	1,300	1,876	(576)	144.31
Capital Equipment/Depreciation	500	--	500	--	500	--
Repairs & Maintenance	500	--	500	--	500	--
Legal	500	--	500	2,198	(1,698)	439.60
Accounting Services	2,472	2,472	2,550	1,273	1,277	49.92
County Courier	152	227	280	246	34	87.86
Shredding	180	186	250	118	132	47.20
Copier & Scanner	800	488	800	355	445	44.38
Claims Admin/Consult Services	92,400	92,400	87,000	85,284	1,716	98.03
Self-Insurance Fee	300,000	558,425	650,000	331,991	318,009	51.08
Claims Paid-WC	1,000,000	400,761	1,000,000	145,113	854,887	14.51
Claims Paid-PL	--	--	--	--	--	--
Physical Abilities Testing	20,000	6,083	20,000	5,136	14,864	25.68
Training	10,000	--	10,000	--	10,000	--
First-Aid Prog&Responder fees	35,000	2,307	35,000	5,247	29,753	14.99
Food Service/Sp Ed Training	--	--	--	--	--	--
Risk Mgmt Prevention Prog	250,000	74,708	250,000	227,500	22,500	91.00
EAP Program	200,000	165,508	200,000	87,428	112,572	43.71
Safety Inspections	--	--	--	--	--	--
Misc Bank Fees & WC Penalty Reu	1,000	--	1,000	10,248	(9,248)	1,024.80
Cobra Premiums	--	--	--	--	--	--
Dental Insurance Premiums	--	--	--	--	--	--
Vision Insurance Premiums	--	--	--	--	--	--
Claim Development Expense	(1,000,000)	(1,033,262)	(600,000)	(1,339,495)	739,495	223.25
Adjustment to Prefund Deposit	--	--	--	--	--	--
Total Operating Expenditures	23,675,301	23,219,813	27,541,684	20,994,925	6,546,759	76.23 %
<b>Net Increase/(Decrease) from Operations</b>	<b>(1,614,349)</b>	<b>(1,158,541)</b>	<b>515,333</b>	<b>47,838</b>	<b>467,495</b>	<b>9.28 %</b>
<b>Non Operating Income/(Expense)</b>						
Interest Income	150,000	597,952	400,000	322,135	77,865	80.53
Net Increase/(Decrease) in Fair Value	--	(169,531)	--	370,458	(370,458)	--
Realized Gain/(Loss) on Investments	--	(63,467)	--	284,326	(284,326)	--
Cumulative effect of GASB 68	--	--	--	--	--	--
Interfund Transfer, Other Income	--	--	--	--	--	--
Total Non Operating Income/(Expense)	150,000	364,954	400,000	976,919	(576,919)	244.23 %
<b>Net Increase/(Decrease) in Net Position</b>	<b>(1,464,349)</b>	<b>(793,587)</b>	<b>915,333</b>	<b>1,024,757</b>	<b>(109,424)</b>	<b>111.95 %</b>
<b>Beginning Balance Prior Year End</b>	<b>35,389,069</b>	<b>35,389,069</b>	<b>34,595,482</b>	<b>34,595,482</b>	<b>--</b>	<b>100.00 %</b>
<b>Ending Balance, as of 03/31/2024</b>	<b>\$ 33,924,720</b>	<b>\$ 34,595,482</b>	<b>\$ 35,510,815</b>	<b>\$ 35,620,239</b>	<b>\$ (109,424)</b>	<b>63</b>

**Alameda County Schools Insurance Group (ACSIG)**  
**Treasurer's Report- Statement of Net Assets**  
**Dental**  
**As of 06/30/2023 and 03/31/2024**

	<b>Audited</b>	<b>Activity</b>	<b>As of</b>
	<b>As of</b>	<b>07/01/2023 -</b>	<b>As of</b>
	<b>06/30/2023</b>	<b>03/31/2024</b>	<b>03/31/2024</b>
<b>Assets:</b>			
Current Assets			
Cash with County ACSIG #44901	\$ 2,221,247	2,179,539	\$ 4,400,786
Union Bank - Eligibility #9938	7,051,347	(3,849,455)	3,201,892
Union Bank - Expense #2064	171,058	(217,956)	(46,898)
Union Bank - Cobra Trust #0273	43,180	12,669	55,849
Union Bank - zero balance accounts	--	--	--
Cash and Cash Equivalents	<b>\$ 9,486,832</b>	<b>(1,875,203)</b>	<b>\$ 7,611,629</b>
Investments Morgan Stanley - current	--	--	--
Accounts Receivable	9,890,532	2,724,738	12,615,270
Prepaid Expense	--	--	--
Interfund Receivable/(payable)	2,840,105	408,248	3,248,353
Subtotal Current Assets	<b>22,217,469</b>	<b>1,257,783</b>	<b>23,475,252</b>
Noncurrent Assets			
Investments - Morgan Stanley	5,523,360	180,052	5,703,412
Capital - Equipment, net of depreciation	--	--	--
	5,523,360	180,052	5,703,412
<b>Total Assets</b>	<b>\$ 27,740,829</b>	<b>\$ 1,437,835</b>	<b>\$ 29,178,664</b>
<b>Deferred Outflow of Resources:</b>			
Deferred outflow of resources - pension	322,978	--	322,978
	322,978	--	322,978
<b>Liabilities:</b>			
Current Liabilities			
Accounts Payable	\$ 2,890,104	\$ --	\$ 2,890,104
Prefunding deposits	4,533,115	--	4,533,115
Advance Contributions	--	--	--
Other Claim Liabilities	--	--	--
Current Portion of claims and claim adjustment	1,758,000	--	1,758,000
Subtotal Current Liabilities	9,181,219	--	9,181,219
Noncurrent Liabilities			
Unpaid claims and claim adjustment expenses less current	--	--	--
Subtotal Noncurrent Claim Liabilities	--	--	--
Net Pension Liability (NPL)	474,281	31,890	506,171
<b>Total Liabilities</b>	<b>\$ 9,655,500</b>	<b>\$ 31,890</b>	<b>\$ 9,687,390</b>
<b>Deferred Inflow of Resources:</b>			
Deferred inflow of resources - pension	117,721	--	117,721
	117,721	--	117,721
<b>Net Position:</b>			
Undesignated Net Position - Net Assets/(Deficit)	18,290,586	1,405,945	19,696,531
Designated - Capital Assets	--	--	--
<b>Total Net Position</b>	<b>\$ 18,290,586</b>	<b>\$ 1,405,945</b>	<b>\$ 19,696,531</b>
<b>Total Liabilities, Deferred Pension, and Ending Net Position</b>	<b>\$ 27,740,829</b>	<b>\$ 1,437,835</b>	<b>\$ 29,178,664</b>

**Alameda County Schools Insurance Group (ACSIG)**

**Dental**

**Statement of Revenues, Expenditures and Changes in Net Fund Assets**

**As of 03/31/2024 and For The Nine Months Then Ended**

	2022/2023		2023/2024			
	Budget	Actuals	Budget	Activity 07/01/20223 - 03/31/2024	Variance	Percentage of Budget
<b>Operating Revenue:</b>						
Premiums Paid by Members	\$ 130,000,000	\$ 144,699,773	\$ 150,000,000	\$ 110,491,720	\$ 39,508,280	73.66 %
Return of Premiums/Rebate	--	--	--	(129,940)	--	--
Other Income	--	--	--	--	--	--
Total Operating Revenue	130,000,000	144,699,773	150,000,000	110,361,780	39,508,280	73.57
<b>Operating Expenditures:</b>						
Classified Salaries	261,270	235,269	322,594	204,653	117,940	63.44
Statutory Benefits	48,547	29,178	54,324	27,563	26,761	50.74
Health & Welfare	35,100	35,100	39,975	27,951	12,025	69.92
Employer Tax Expense	4,113	3,738	4,614	3,471	1,143	75.23
Net Pension Expense	154,702	58,462	170,189	63,780	106,409	37.48
Telephone & Internet	7,838	3,894	8,325	3,761	4,564	45.18
Supplies Office	6,000	5,843	6,000	2,343	3,657	39.05
Supplies - Other	4,500	3,502	9,000	3,878	5,122	43.09
Eligibility Processing	250,000	226,419	255,000	176,269	78,731	69.13
Brokerage Fees-Dental-ACSIG	325,000	312,447	340,000	216,003	123,997	63.53
Brokerage Fees-Dental-MD	725,000	712,220	750,000	650,378	99,622	86.72
Travel and Conferences	17,625	6,563	22,500	8,514	13,986	37.84
Mileage	9,000	4,541	9,000	3,850	5,150	42.78
Dues & Memberships	6,750	5,376	6,750	210	6,540	3.11
Postage & Meter	6,300	1,853	6,300	1,557	4,743	24.71
Insurance Expense	--	--	--	--	--	--
Insurance Expense - PY Adj	--	--	--	--	--	--
Net, Operating-Rent	43,365	27,784	38,055	20,556	17,499	54.02
Advertising	--	--	--	--	--	--
Contract Services - Actuarial	4,000	4,000	--	--	--	--
Contract Services -Claim Audit	--	--	--	--	--	--
Contracted Services	--	--	10,000	--	10,000	--
Audit Fees	12,375	10,395	17,250	10,588	6,662	61.38
Other Services/Operating Expense:	10,000	3,763	10,000	8,753	1,247	87.53
Capital Equipment/Depreciation	7,500	--	7,500	--	7,500	--
Repairs & Maintenance	3,750	--	3,750	--	3,750	--
Legal	5,000	--	5,000	10,255	(5,255)	205.10
Accounting Services	11,536	11,536	11,900	5,941	5,959	49.92
County Courier	1,140	1,059	2,100	1,147	953	54.63
Shredding	600	869	1,125	551	574	48.98
Copier & Scanner	16,200	8,783	16,200	6,399	9,801	39.50
Claims Administration Services	--	--	--	--	--	--
Self-Insurance Fee	--	--	--	--	--	--
Claims Paid-WC	--	--	--	--	--	--
Claims Paid-PL	--	--	--	--	--	--
Physical Abilities Testing	--	--	--	--	--	--
Training	--	--	--	--	--	--
First-Aid Program	--	--	--	--	--	--
Food Service Training	--	--	--	--	--	--
Special Ed Training	--	--	--	--	--	--
Incentives	--	--	--	--	--	--
Safety Inspections	--	--	--	--	--	--
Bank Charge	5,000	2,243	5,000	160	4,840	3.20
Cobra Premiums	300,000	186,045	300,000	112,953	187,047	37.65
Dental Insurance Premiums	127,590,000	138,206,038	146,190,000	107,685,230	38,504,770	73.66
Vision Insurance Premiums	--	--	--	--	--	--
Claim Development Expense	300,000	(388,000)	300,000	--	300,000	--
Adjustment to Prefund Deposit	--	100,000	--	--	--	--
Total Operating Expenditures	130,172,211	139,818,921	148,922,451	109,256,714	39,665,737	73.36 %
<b>Net Increase/(Decrease) from Operations</b>	(172,211)	4,880,852	1,077,549	1,105,066	(157,457)	102.55 %
<b>Non Operating Income/(Expense)</b>						
Interest Income	10,000	165,818	120,000	120,825	(825)	100.69
Net Increase/(Decrease) in Fair Value	--	(46,618)	--	101,868	(101,868)	--
Realized Gain/(Loss) on Investments	--	(17,452)	--	78,184	(78,184)	--
Cumulative effect of GASB 68	--	--	--	--	--	--
I Transfer, YE Close, Rebate	--	--	--	--	--	--
Total Non Operating Income/(Expense)	10,000	101,748	120,000	300,877	(180,877)	250.73 %
<b>Net Increase/(Decrease) in Net Position</b>	(162,211)	4,982,600	1,197,549	1,405,943	(338,334)	117.40 %
<b>Beginning Balance Prior Year End</b>	13,307,986	13,307,986	18,290,587	18,290,587	--	100.00 %
<b>Ending Balance, as of 03/31/2024</b>	<b>\$ 13,145,775</b>	<b>\$ 18,290,586</b>	<b>\$ 19,488,136</b>	<b>\$ 19,696,531</b>	<b>\$ (338,334)</b>	

**Alameda County Schools Insurance Group (ACSIG)**  
**Treasurer's Report- Statement of Net Assets**  
**Vision**  
**As of 06/30/2023 and 03/31/2024**

	<u>Audited</u> <u>As of</u> <u>06/30/2023</u>	<u>Activity</u> <u>07/01/2023 -</u> <u>03/31/2024</u>	<u>As of</u> <u>03/31/2024</u>
<b>Assets:</b>			
Current Assets			
Cash with County #44902	\$ 3,682,784	282,357	\$ 3,965,141
Funds in Transit - #44902 to Morgan Stanley Investments	--	--	--
Cash and Cash Equivalents	<u>3,682,784</u>	<u>282,357</u>	<u>3,965,141</u>
Investments Morgan Stanley - current	--	--	--
Accounts Receivable	646,419	1,871	648,290
Prepaid Expense	--	--	--
Interfund Receivable/(payable)	<u>(50,667)</u>	<u>(61,281)</u>	<u>(111,948)</u>
Subtotal Current Assets	<u>4,278,536</u>	<u>222,947</u>	<u>4,501,483</u>
Noncurrent Assets			
Investments - Morgan Stanley	1,067,074	34,786	1,101,860
Capital - Equipment, net of depreciation	--	--	--
	<u>1,067,074</u>	<u>34,786</u>	<u>1,101,860</u>
<b>Total Assets</b>	<b><u>\$ 5,345,610</u></b>	<b><u>\$ 257,733</u></b>	<b><u>\$ 5,603,343</u></b>
<b>Deferred Outflow of Resources:</b>			
Deferred outflow of resources - pension	<u>51,831</u>	<u>--</u>	<u>51,831</u>
<b>Liabilities:</b>			
Current Liabilities			
Accounts Payable	\$ 812,533	\$ 38,646	\$ 851,179
Prefunding deposits	577,955	--	577,955
Advance Contributions	--	--	--
Other Claim Liabilities	--	--	--
Current Portion of claims and claim adjustment	545,000	--	545,000
Subtotal Current Liabilities	<u>1,935,488</u>	<u>38,646</u>	<u>1,974,134</u>
Noncurrent Liabilities			
Unpaid claims and claim adjustment expenses less current	--	--	--
Subtotal Noncurrent Claim Liabilities	--	--	--
Net Pension Liability (NPL)	76,113	6,378	82,491
<b>Total Liabilities</b>	<b><u>\$ 2,011,601</u></b>	<b><u>\$ 45,024</u></b>	<b><u>\$ 2,056,625</u></b>
<b>Deferred Inflow of Resources:</b>			
Deferred inflow of resources - pension	<u>18,892</u>	<u>--</u>	<u>18,892</u>
<b>Net Position:</b>			
Undesignated Net Position - Net Assets/(Deficit)	3,366,948	212,709	3,579,657
Designated - Capital Assets	--	--	--
<b>Total Net Position</b>	<b><u>\$ 3,366,948</u></b>	<b><u>\$ 212,709</u></b>	<b><u>\$ 3,579,657</u></b>
<b>Total Liabilities, Deferred Pension, and Ending Net Position</b>	<b><u>\$ 5,345,610</u></b>	<b><u>\$ 257,733</u></b>	<b><u>\$ 5,603,343</u></b>

**Alameda County Schools Insurance Group (ACSIG)**

**Vision**

**Statement of Revenues, Expenditures and Changes in Net Fund Assets**

**As of 03/31/2024 and For The Nine Months Then Ended**

	2022/2023		2023/2024			
	Budget	Actuals	Budget	Activity	Variance	Percentage
				07/01/20223 - 03/31/2024		of Budget
<b>Operating Revenue:</b>						
Premiums Paid by Members	\$ 5,600,000	\$ 7,989,687	\$ 8,200,000	\$ 6,524,997	\$ 1,675,003	79.57 %
Retrun of Premiums	--	--	--	--	--	--
Other Income	--	--	--	--	--	--
Total Operating Revenue	5,600,000	7,989,687	8,200,000	6,524,997	1,675,003	79.57
<b>Operating Expenditures:</b>						
Classified Salaries	36,139	34,636	47,971	31,104	16,867	64.84
Statutory Benefits	6,306	4,573	7,721	4,706	3,015	60.95
Health & Welfare	3,900	3,900	4,875	3,250	1,625	66.67
Employer Tax Expense	564	522	664	518	146	78.06
Net Pension Expense	17,945	9,939	23,715	12,756	10,959	53.79
Telephone & Internet	1,045	556	1,110	537	573	48.38
Supplies Office	800	835	800	335	465	41.88
Supplies - Other	600	500	1,200	554	646	46.17
Eligibility Processing	--	--	--	--	--	--
Brokerage Fees-Dental-ACSIG	--	--	--	--	--	--
Brokerage Fees-Dental-MD	--	--	--	--	--	--
Travel and Conferences	2,350	938	3,000	1,216	1,784	40.53
Mileage	1,200	649	1,200	550	650	45.83
Dues & Memberships	900	768	900	30	870	3.33
Postage & Meter	340	103	340	86	254	25.29
Insurance Expense	--	--	--	--	--	--
Insurance Expense - PY Adj	--	--	--	--	--	--
Utility - Operating-Rent	5,782	3,705	5,074	2,741	2,333	54.02
Advertising	--	--	--	--	--	--
Contract Services - Actuarial	1,500	1,000	--	--	--	--
Contract Services -Claim Audit	--	--	--	--	--	--
Contract Services	--	--	--	--	--	--
Audit Fees	1,650	1,485	2,300	1,513	787	65.78
Other Services/Operating Expense:	1,000	538	1,000	1,250	(250)	125.00
Capital Equipment/Depreciation	1,000	--	1,000	--	1,000	--
Repairs & Maintenance	500	--	500	--	500	--
Legal	1,000	--	1,000	1,465	(465)	146.50
Accounting Services	1,648	1,648	1,700	849	851	49.94
County Courier	152	151	280	164	116	58.57
Shredding	80	124	150	79	71	52.67
Copier & Scanner	800	488	800	355	445	44.38
Claims Administration Services	--	--	--	--	--	--
Self-Insurance Fee	--	--	--	--	--	--
Claims Paid-WC	--	--	--	--	--	--
Claims Paid-PL	--	--	--	--	--	--
Physical Abilities Testing	--	--	--	--	--	--
Training	--	--	--	--	--	--
First-Aid Program	--	--	--	--	--	--
Food Service Training	--	--	--	--	--	--
Special Ed Training	--	--	--	--	--	--
Incentives	--	--	--	--	--	--
Safety Inspections	--	--	--	--	--	--
Bank Charge & WC Penalty Reimb	--	--	--	--	--	--
Cobra Premiums	--	--	--	--	--	--
Dental Insurance Premiums	--	--	--	--	--	--
Vision Insurance Premiums	5,521,000	7,551,360	8,000,000	6,365,851	1,634,149	79.57
Claim Development Expense	--	154,000	--	--	--	--
Adjustment to Prefund Deposit	--	82,870	--	--	--	--
Total Operating Expenditures	5,608,201	7,855,288	8,107,300	6,429,909	1,677,390	79.31 %
<b>Net Increase/(Decrease) from Operations</b>	(8,201)	134,399	92,700	95,088	(2,387)	102.58 %
<b>Non Operating Income/(Expense)</b>						
Interest Income	30,000	65,082	60,000	82,835	(22,835)	138.06
Net Increase/(Decrease) in Fair Value	--	(9,006)	--	19,680	(19,680)	--
Realized Gain/(Loss) on Investments	--	(3,373)	--	15,106	(15,106)	--
Cumulative effect of GASB 68	--	--	--	--	--	--
Interfund Transfer	--	--	--	--	--	--
Total Non Operating Income/(Expense)	30,000	52,703	60,000	117,621	(57,621)	196.04 %
<b>Net Increase/(Decrease) in Net Position</b>	21,799	187,102	152,700	212,709	(60,008)	139.30 %
<b>Beginning Balance Prior Year End</b>	3,179,847	3,179,847	3,366,949	3,366,949	--	100.00 %
<b>Ending Balance, as of 03/31/2024</b>	<b>\$ 3,201,646</b>	<b>\$ 3,366,948</b>	<b>\$ 3,519,649</b>	<b>\$ 3,579,657</b>	<b>\$ (60,008)</b>	

**Alameda County Schools Insurance Group (ACSIG)**  
**Treasurer's Report- Statement of Net Assets**  
**Property and Liability**  
**As of 06/30/2023 and 03/31/2024**

	<u>Audited</u> <u>As of</u> <u>06/30/2023</u>	<u>Activity</u> <u>07/01/2023 -</u> <u>03/31/2024</u>	<u>As of</u> <u>03/31/2024</u>
<b>Assets:</b>			
Current Assets			
Cash with County - #44903	\$ 5,617,607	(604,097)	\$ 5,013,510
Funds in Transit - #44903 to Morgan Stanley Investments	--	--	--
Union Bank - Checking #0311	116,369	(47,488)	68,881
Union Bank - Claims Trust #1186	21,546	(18,015)	3,531
Cash and Cash Equivalents	<u>\$ 5,755,522</u>	<u>(669,600)</u>	<u>\$ 5,085,922</u>
Investments Morgan Stanley - current	--	--	--
Accounts Receivable	7,827	519,968	527,795
Prepaid Expense	--	587,693	587,693
Interfund Receivable/(payable)	<u>(4,607,975)</u>	<u>(42,446)</u>	<u>(4,650,421)</u>
Subtotal Current Assets	<u>1,155,374</u>	<u>395,615</u>	<u>1,550,989</u>
Noncurrent Assets			
Investments - Morgan Stanley	--	--	--
Capital - Equipment, net of depreciation	--	--	--
	<u>--</u>	<u>--</u>	<u>--</u>
<b>Total Assets</b>	<b><u>\$ 1,155,374</u></b>	<b><u>\$ 395,615</u></b>	<b><u>\$ 1,550,989</u></b>
<b>Deferred Outflow of Resources:</b>			
Deferred outflow of resources - pension	43,079	--	43,079
<b>Liabilities:</b>			
Current Liabilities			
Accounts Payable	\$ 3,077	\$ (2,107)	\$ 970
Prefunding deposits	--	--	--
Advance Contributions	--	--	--
Other Claim Liabilities	--	--	--
Current Portion of claims and claim adjustment	132,219	(4,235)	127,984
Subtotal Current Liabilities	<u>135,296</u>	<u>(6,342)</u>	<u>128,954</u>
Noncurrent Liabilities			
Unpaid claims and claim adjustment expenses less current	108,179	(3,465)	104,714
Unallocated Loss Adjustment Expense (ULAE)	79,194	--	79,194
Subtotal Noncurrent Claim Liabilities	<u>187,373</u>	<u>(3,465)</u>	<u>183,908</u>
Net Pension Liability (NPL)	63,260	6,379	69,639
<b>Total Liabilities</b>	<b><u>\$ 385,929</u></b>	<b><u>\$ (3,428)</u></b>	<b><u>\$ 382,501</u></b>
<b>Deferred Inflow of Resources:</b>			
Deferred inflow of resources - pension	15,702	--	15,702
<b>Net Position:</b>			
Undesignated Net Position - Net Assets/(Deficit)	796,822	399,043	1,195,865
Designated - Capital Assets	--	--	--
<b>Total Net Position</b>	<b><u>\$ 796,822</u></b>	<b><u>\$ 399,043</u></b>	<b><u>\$ 1,195,865</u></b>
<b>Total Liabilities, Deferred Pension, and Ending Net Position</b>	<b><u>\$ 1,155,374</u></b>	<b><u>\$ 395,615</u></b>	<b><u>\$ 1,550,989</u></b>



**Alameda County Schools Insurance Group (ACSIG)**  
**Property and Liability**  
**Statement of Revenues, Expenditures and Changes in Net Fund Assets**  
**As of 03/31/2024 and For The Nine Months Then Ended**

	2022/2023		2023/2024			
	Budget	Actuals	Budget	Activity 07/01/20223 - 03/31/2024	Variance	Percentage of Budget
<b>Operating Revenue:</b>						
Premiums Paid by Members	\$ 2,556,056	\$ 2,556,062	\$ 2,896,093	\$ 2,172,070	\$ 724,023	75.00 %
Return of Premiums	--	--	--	--	--	--
Other Income	--	--	--	--	--	--
Total Operating Revenue	2,556,056	2,556,062	2,896,093	2,172,070	724,023	75.00
<b>Operating Expenditures:</b>						
Classified Salaries	26,300	26,647	39,357	24,644	14,713	62.62
Statutory Benefits	3,945	3,011	5,653	3,594	2,059	63.58
Health & Welfare	1,950	1,950	2,925	1,786	1,139	61.06
Employer Tax Expense	399	379	499	403	96	80.69
Net Pension Expense	13,060	8,737	19,902	12,758	7,144	64.10
Telephone & Internet	523	279	555	269	286	48.40
Supplies Office	400	417	400	167	233	41.66
Supplies - Other	300	251	600	277	323	46.13
Eligibility Processing	--	--	--	--	--	--
Brokerage Fees-Dental-ACSIG	--	--	--	--	--	--
Brokerage Fees-Dental-MD	--	--	--	--	--	--
Travel and Conferences	600	469	600	609	(9)	101.54
Mileage	450	325	450	275	175	61.11
Dues & Memberships	--	384	--	15	(15)	--
Postage & Meter	350	--	350	--	350	--
Insurance Expense-NCR	2,267,837	2,097,743	2,350,774	1,763,081	587,693	75.00
Insurance Expense-PY Adj	--	--	--	--	--	--
Utility - Operating-Rent	2,891	1,852	2,537	1,370	1,167	54.00
Advertising	--	--	--	--	--	--
Contract Services - Actuarial	5,000	--	7,500	--	7,500	--
Contract Services -Claim Audit	--	--	--	--	--	--
Contract Services	--	--	--	--	--	--
Audit Fees	825	742	1,150	755	395	65.65
Other Services/Operating Expenses	--	269	--	625	(625)	--
Capital Equipment/Depreciation	500	--	500	--	500	--
Repairs & Maintenance	250	--	250	--	250	--
Legal	250	--	250	732	(482)	--
Accounting Services	824	824	850	424	426	49.88
County Courier	75	76	140	82	58	58.31
Shredding	40	63	75	40	35	52.93
Copier & Scanner	100	--	100	--	100	--
Claims Administration Services	19,000	12,069	20,000	7,978	12,022	39.89
Self-Insurance Fee	--	--	--	--	--	--
Claims Paid-WC	--	--	--	--	--	--
Claims Paid-PL	100,000	151,492	100,000	55,553	44,447	55.55
Physical Abilities Testing	--	--	--	--	--	--
Training	--	--	--	--	--	--
First-Aid Program	--	--	--	--	--	--
Food Service Training	--	--	--	--	--	--
Special Ed Training	--	--	--	--	--	--
Incentives	--	--	--	--	--	--
Safety Inspections	19,000	--	20,000	--	20,000	--
Bank Charge & WC Penalty Reimb	--	--	--	--	--	--
Cobra Premiums	--	--	--	--	--	--
Dental Insurance Premiums	--	--	--	--	--	--
Vision Insurance Premiums	--	--	--	--	--	--
Claim Development Expense	--	108,430	--	(7,700)	7,700	--
Adjustment to Prefund Deposit	--	--	--	--	--	--
Total Operating Expenditures	2,464,869	2,416,406	2,575,417	1,867,736	707,681	72.52 %
<b>Net Increase/(Decrease) from Operations</b>	91,187	139,656	320,676	304,334	16,342	94.90 %
<b>Non Operating Income/(Expense)</b>						
Interest Income	9,000	56,589	59,000	94,709	(35,709)	160.52
Net Increase/(Decrease) in Fair Value	--	--	--	--	--	--
Realized Gain/(Loss) on Investments	--	--	--	--	--	--
Cumulative effect of GASB 68	--	--	--	--	--	--
Interfund Transfer, Other Income	--	--	--	--	--	--
Total Non Operating Income/(Expense)	9,000	56,589	59,000	94,709	(35,709)	160.52 %
<b>Net Increase/(Decrease) in Net Position</b>	100,187	196,245	379,676	399,043	(19,367)	105.10 %
<b>Beginning Balance Prior Year End</b>	600,577	600,577	796,822	796,822	--	100.00 %
<b>Ending Balance, as of 03/31/2024</b>	<b>\$ 700,764</b>	<b>\$ 796,822</b>	<b>\$ 1,176,498</b>	<b>\$ 1,195,865</b>	<b>\$ (19,367)</b>	

**Alameda County Schools Insurance Group (ACSIG)**  
**Treasurer's Report- Statement of Net Assets**  
**Operations**  
**As of 06/30/2023 and 03/31/2024**

	<u>Audited</u> <u>As of</u> <u>06/30/2023</u>	<u>Activity</u> <u>07/01/2023 -</u> <u>03/31/2024</u>	<u>As of</u> <u>03/31/2024</u>
<b>Assets:</b>			
Current Assets			
Union Bank - Payroll #0176	\$ 147,342	171,553	\$ 318,895
Union Bank Checking Account #1521	115,955	(6,009)	109,946
Cash and Cash Equivalents	<u>\$ 263,297</u>	<u>165,544</u>	<u>\$ 428,841</u>
Investments Morgan Stanley - current	--	--	--
Accounts Receivable	--	--	--
Prepaid Expense	8,465	--	8,465
Interfund Receivable/(payable)	<u>(245,119)</u>	<u>(168,953)</u>	<u>(414,072)</u>
Subtotal Current Assets	<u>26,643</u>	<u>(3,409)</u>	<u>23,234</u>
Noncurrent Assets			
Investments - Morgan Stanley	--	--	--
Capital - Equipment, net of depreciation	<u>--</u>	<u>--</u>	<u>--</u>
	<u>--</u>	<u>--</u>	<u>--</u>
<b>Total Assets</b>	<u><b>\$ 26,643</b></u>	<u><b>\$ (3,409)</b></u>	<u><b>\$ 23,234</b></u>
<b>Deferred Outflow of Resources:</b>			
Deferred outflow of resources - pension	<u>--</u>	<u>--</u>	<u>--</u>
<b>Liabilities:</b>			
Current Liabilities			
Accounts Payable	\$ 31,974	\$ (3,409)	\$ 28,565
Prefunding deposits	--	--	--
Advance Contributions	--	--	--
Other Claim Liabilities	--	--	--
Current Portion of claims and claim adjustment	<u>--</u>	<u>--</u>	<u>--</u>
Subtotal Current Liabilities	<u>31,974</u>	<u>(3,409)</u>	<u>28,565</u>
Noncurrent Liabilities			
Unpaid claims and claim adjustment expenses less current	<u>--</u>	<u>--</u>	<u>--</u>
Subtotal Noncurrent Claim Liabilities	<u>--</u>	<u>--</u>	<u>--</u>
Net Pension Liability (NPL)	<u>--</u>	<u>--</u>	<u>--</u>
<b>Total Liabilities</b>	<u><b>\$ 31,974</b></u>	<u><b>\$ (3,409)</b></u>	<u><b>\$ 28,565</b></u>
<b>Deferred Inflow of Resources:</b>			
Deferred inflow of resources - pension	<u>--</u>	<u>--</u>	<u>--</u>
<b>Net Position:</b>			
Undesignated Net Position - Net Assets/(Deficit)	(5,331)	--	(5,331)
Designated - Capital Assets	<u>--</u>	<u>--</u>	<u>--</u>
<b>Total Net Position</b>	<u><b>\$ (5,331)</b></u>	<u><b>\$ --</b></u>	<u><b>\$ (5,331)</b></u>
<b>Total Liabilities, Deferred Pension, and Ending Net Position</b>	<u><b>\$ 26,643</b></u>	<u><b>\$ (3,409)</b></u>	<u><b>\$ 23,234</b></u>

**Alameda County Schools Insurance Group (ACSIG)**

**Operations**

**Statement of Revenues, Expenditures and Changes in Net Fund Assets**

As of 03/31/2024 and For The Nine Months Then Ended

	2022/2023		2023/2024			
	Budget	Actuals	Budget	Activity	Variance	Percentage
				07/01/20223 - 03/31/2024		of Budget
<b>Operating Revenue:</b>						
Contributions	\$ --	\$ --	\$ --	\$ --	\$ --	-- %
Offset to Rent - Sub Lease	--	--	--	--	--	--
Total Operating Revenue	--	--	--	--	--	--
<b>Operating Expenditures:</b>						
Classified Salaries	--	--	--	--	--	--
Statutory Benefits	--	--	--	--	--	--
Health & Welfare	--	--	--	--	--	--
Employer Tax Expense	--	--	--	--	--	--
Net Pension Expense	--	--	--	--	--	--
Telephone & Internet	--	--	--	--	--	--
Supplies Office	--	--	--	--	--	--
Supplies - Other	--	--	--	--	--	--
Eligibility Processing	--	--	--	--	--	--
Brokerage Fees-Dental-ACSIG	--	--	--	--	--	--
Brokerage Fees-Dental-MD	--	--	--	--	--	--
Travel and Conferences	--	--	--	--	--	--
Mileage	--	--	--	--	--	--
Dues & Memberships	--	--	--	--	--	--
Postage & Meter	--	--	--	--	--	--
Insurance Expense	--	--	--	--	--	--
Utility - Operating-Rent	--	--	--	--	--	--
Advertising	--	--	--	--	--	--
Contract Services - Actuarial	--	--	--	--	--	--
Contract Services -Claim Audit	--	--	--	--	--	--
Contract Services	--	--	--	--	--	--
Audit Fees	--	--	--	--	--	--
Other Services/Operating Expense:	--	--	--	--	--	--
Capital Equipment/Depreciation	--	--	--	--	--	--
Repairs & Maintenance	--	--	--	--	--	--
Legal	--	--	--	--	--	--
Accounting Services	--	--	--	--	--	--
County Courier	--	--	--	--	--	--
Shredding	--	--	--	--	--	--
Copier & Scanner	--	--	--	--	--	--
Claims Administration Services	--	--	--	--	--	--
Self-Insurance Fee	--	--	--	--	--	--
Claims Paid-WC	--	--	--	--	--	--
Claims Paid-PL	--	--	--	--	--	--
Physical Abilities Testing	--	--	--	--	--	--
Training	--	--	--	--	--	--
First-Aid Program	--	--	--	--	--	--
Food Service Training	--	--	--	--	--	--
Special Ed Training	--	--	--	--	--	--
Incentives	--	--	--	--	--	--
Safety Inspections	--	--	--	--	--	--
Bank Charge & WC Penalty Reimb	--	--	--	--	--	--
Cobra Premiums	--	--	--	--	--	--
Dental Insurance Premiums	--	--	--	--	--	--
Insurance - Vision	--	--	--	--	--	--
Claim Development Expense	--	--	--	--	--	--
ACA Fees	--	--	--	--	--	--
Total Operating Expenditures	--	--	--	--	--	-- %
<b>Net Increase/(Decrease)</b>						
<b>from Operations</b>	--	--	--	--	--	-- %
<b>Non Operating Income/(Expense)</b>						
Interest Income	--	--	--	--	--	--
Net Increase/(Decrease) in Fair Value	--	--	--	--	--	--
Realized Gain/(Loss) on Investments	--	--	--	--	--	--
Cumulative effect of GASB 68	--	--	--	--	--	--
Interfund Transfer & YE Close	--	--	--	--	--	--
Total Non Operating						
Income/(Expense)	--	--	--	--	--	-- %
<b>Net Increase/(Decrease)</b>						
<b>in Net Position</b>	--	--	--	--	--	-- %
<b>Beginning Balance Prior</b>						
<b>Year End</b>	(5,331)	(5,331)	(5,331)	(5,331)	--	100.00 %
<b>Ending Balance, as of</b>						
<b>03/31/2024</b>	<b>\$ (5,331)</b>	<b>\$ (5,331)</b>	<b>\$ (5,331)</b>	<b>\$ (5,331)</b>	<b>\$ --</b>	

**Alameda County Schools Insurance Group (ACSIG)  
Schedule of Claim Liabilities for Workers' Compensation  
As of 03/31/2024**

	Self-Insured Program Years												Totals to Page 7A
	1978/1979	1984/1985	1985/1986	1986/1987	1987/1988	1988/1989	1989/1990	1990/1991	1991/1992	1992/1993	1993/1994	1994/1995	
Paid Claims	\$ 916,273	\$ 1,828,533	\$ 2,880,000	\$ 2,719,803	\$ 2,895,548	\$ 4,021,587	\$ 2,948,835	\$ 5,562,596	\$ 5,166,999	\$ 4,282,745	\$ 3,732,209	\$ 4,811,368	\$ 41,766,496
Reserves	--	--	22,584	9,877	--	--	--	3,302	--	--	24,053	122,590	182,406
Incurred Claims	<u>916,273</u>	<u>1,828,533</u>	<u>2,902,584</u>	<u>2,729,680</u>	<u>2,895,548</u>	<u>4,021,587</u>	<u>2,948,835</u>	<u>5,565,898</u>	<u>5,166,999</u>	<u>4,282,745</u>	<u>3,756,262</u>	<u>4,933,958</u>	<u>41,948,902</u>
Incurred But Not Reported (IBNR)	--	--	(22,584)	10,320	1,347	3,413	2,165	44,102	13,001	13,255	33,738	46,042	144,799
Non- Discounted Estimated Ultimate Incurred (1)	916,273	1,828,533	2,880,000	2,740,000	2,896,895	4,025,000	2,951,000	5,610,000	5,180,000	4,296,000	3,790,000	4,980,000	42,093,701
Anticipated Investment Income (Discount) (2)	--	--	--	(848)	(67)	(208)	(147)	(4,314)	(1,378)	(1,591)	(7,108)	(23,946)	(39,607)
Discounted Estimated Ultimate (1-2)	<u>916,273</u>	<u>1,828,533</u>	<u>2,880,000</u>	<u>2,739,152</u>	<u>2,896,828</u>	<u>4,024,792</u>	<u>2,950,853</u>	<u>5,605,686</u>	<u>5,178,622</u>	<u>4,294,409</u>	<u>3,782,892</u>	<u>4,956,054</u>	<u>42,054,094</u>
Paid Claims	<u>(916,273)</u>	<u>(1,828,533)</u>	<u>(2,880,000)</u>	<u>(2,719,803)</u>	<u>(2,895,548)</u>	<u>(4,021,587)</u>	<u>(2,948,835)</u>	<u>(5,562,596)</u>	<u>(5,166,999)</u>	<u>(4,282,745)</u>	<u>(3,732,209)</u>	<u>(4,811,368)</u>	<u>(41,766,496)</u>
Remaining Estimated Unpaid Claim Liabilities	<u>\$ --</u>	<u>\$ --</u>	<u>\$ --</u>	<u>\$ 19,349</u>	<u>\$ 1,280</u>	<u>\$ 3,205</u>	<u>\$ 2,018</u>	<u>\$ 43,090</u>	<u>\$ 11,623</u>	<u>\$ 11,664</u>	<u>\$ 50,683</u>	<u>\$ 144,686</u>	<u>\$ 287,598</u>

(1) Per Bay Actuarial Consultants actuarial study dated January 2024.

(2) Discounted at 2%, 06/30/2012, 1.5%, 2014, 2015, 2016, 2017, 2018 1.75%, 2019 1.50%, 2020 .75%, 2021-2022 1.5%, 2022-2023 & 2023-2024 3.5%.

Historical Discounted Estimated Ultimate Incurred:														
As of 06/30/2015	10	959,745	1,828,378	2,944,649	2,957,392	2,916,153	4,077,607	2,993,338	5,759,425	5,259,555	4,304,405	3,847,149	5,130,367	42,978,163
As of 06/30/2016	9	919,585	1,828,378	2,935,792	2,958,911	2,907,220	4,065,869	2,966,210	5,750,806	5,315,636	4,278,349	3,855,186	5,114,027	42,895,969
As of 06/30/2017	8	947,318	1,828,378	2,876,895	2,952,342	2,907,650	4,084,897	2,985,063	5,734,186	5,316,245	4,408,281	3,947,076	5,151,520	43,139,851
As of 06/30/2018	7	947,015	1,828,378	2,876,710	2,988,624	2,945,002	4,094,286	2,994,624	5,743,707	5,315,284	4,422,773	3,926,130	5,110,111	43,192,644
As of 06/30/2019	6	916,273	1,828,533	2,887,520	3,031,167	2,934,013	4,038,122	2,940,000	5,678,821	5,314,160	4,358,612	4,009,428	5,051,755	42,988,404
As of 06/30/2020	5	916,273	1,828,533	2,887,952	2,996,520	2,916,419	4,056,820	2,958,440	5,698,048	5,288,270	4,370,463	3,958,606	4,958,067	42,834,411
As of 06/30/2021	4	916,273	1,828,533	2,879,283	2,974,319	2,918,168	4,058,164	2,951,436	5,655,461	5,274,915	4,294,424	3,796,118	4,979,092	42,526,186
As of 06/30/2022	3	916,273	1,828,533	2,869,705	2,975,766	2,909,009	4,024,862	2,951,508	5,626,654	5,189,704	4,307,451	3,758,617	4,975,724	42,333,806
As of 06/30/2023	2	916,273	1,828,533	2,870,331	2,739,122	2,909,277	4,024,781	2,951,785	5,578,416	5,186,668	4,304,089	3,791,589	4,972,203	42,073,067
As of 03/31/2024	1	916,273	1,828,533	2,880,000	2,739,152	2,896,828	4,024,792	2,950,853	5,605,686	5,178,622	4,294,409	3,782,892	4,956,054	42,054,094
Increase/Decrease	--	--	9,669	30	(12,449)	11	(932)	27,270	(8,046)	(9,680)	(8,697)	(16,149)	(18,973)	

**Alameda County Schools Insurance Group (ACSIG)**  
**Schedule of Claim Liabilities for Workers' Compensation**  
**As of 03/31/2024**

	Totals From Page 7	Self-Insured Program Years							Totals To Page 7B
		1995/1996	1996/1997	1997/1998	1998/1999	1999/2000	2000/2001	2001/2002	
Paid Claims	\$ 41,766,496	\$ 5,413,386	\$ 7,278,965	\$ 6,832,454	\$ 9,455,148	\$ 7,676,557	\$ 10,976,306	\$ 11,937,058	\$ 101,336,370
Reserves	182,406	25,216	39,269	87,057	491,884	240,243	168,971	205,862	1,440,908
Incurred Claims	<u>41,948,902</u>	<u>5,438,602</u>	<u>7,318,234</u>	<u>6,919,511</u>	<u>9,947,032</u>	<u>7,916,800</u>	<u>11,145,277</u>	<u>12,142,920</u>	<u>102,777,278</u>
Incurred But Not Reported (IBNR)	<u>144,799</u>	<u>41,398</u>	<u>61,766</u>	<u>70,489</u>	<u>82,968</u>	<u>(6,800)</u>	<u>84,723</u>	<u>117,080</u>	<u>596,423</u>
Non- Discounted Estimated Ultimate Incurred (1)	42,093,701	5,480,000	7,380,000	6,990,000	10,030,000	7,910,000	11,230,000	12,260,000	103,373,701
Anticipated Investment Income (Discount) (2)	(39,607)	(10,658)	(18,388)	(31,982)	(116,120)	(48,556)	(50,485)	(62,974)	(378,770)
Discounted Estimated Ultimate (1-2)	<u>42,054,094</u>	<u>5,469,342</u>	<u>7,361,612</u>	<u>6,958,018</u>	<u>9,913,880</u>	<u>7,861,444</u>	<u>11,179,515</u>	<u>12,197,026</u>	<u>102,994,931</u>
Paid Claims	<u>(41,766,496)</u>	<u>(5,413,386)</u>	<u>(7,278,965)</u>	<u>(6,832,454)</u>	<u>(9,455,148)</u>	<u>(7,676,557)</u>	<u>(10,976,306)</u>	<u>(11,937,058)</u>	<u>(101,336,370)</u>
Remaining Estimated Unpaid Claim Liabilities	<u>\$ 287,598</u>	<u>\$ 55,956</u>	<u>\$ 82,647</u>	<u>\$ 125,564</u>	<u>\$ 458,732</u>	<u>\$ 184,887</u>	<u>\$ 203,209</u>	<u>\$ 259,968</u>	<u>\$ 1,658,561</u>

(1) Per Bay Actuarial Consultants actuarial study dated January 2024.

(2) Discounted at 2%, 06/30/2012, 1.5%, 2014, 2015, 2016, 2017, 2018 1.75%, 2019 1.50%, 2020 .75%, 2021-2022 1.5%, 2022-2023 & 2023-2024 3.5%.

Historical Discounted Estimated Ultimate Incurred:										
As of 06/30/2015	10	42,978,163	5,752,631	7,584,812	7,808,635	10,993,497	8,806,657	11,818,771	13,083,683	108,826,849
As of 06/30/2016	9	42,895,969	5,607,306	7,562,358	7,660,593	11,011,641	8,642,537	11,753,128	12,959,861	108,093,393
As of 06/30/2017	8	43,139,851	5,583,200	7,705,812	7,670,526	10,717,018	8,299,131	11,947,119	13,121,523	108,184,180
As of 06/30/2018	7	43,192,644	5,757,037	7,747,776	7,706,207	10,642,853	8,365,742	11,833,334	12,979,529	108,225,122
As of 06/30/2019	6	42,988,404	5,664,384	7,601,234	7,424,100	10,662,982	8,032,099	11,618,299	13,001,162	106,992,664
As of 06/30/2020	5	42,834,411	5,634,661	7,480,498	7,198,242	10,419,193	7,937,956	11,512,128	12,486,864	105,503,953
As of 06/30/2021	4	42,526,186	5,588,222	7,517,698	7,234,673	10,272,484	7,884,610	11,507,738	12,494,816	105,026,427
As of 06/30/2022	3	42,333,806	5,564,872	7,341,123	7,019,957	10,163,012	7,936,810	11,185,494	12,371,630	103,916,704
As of 06/30/2023	2	42,073,067	5,561,662	7,351,993	7,013,725	10,093,338	7,906,054	11,271,672	12,275,325	103,546,836
As of 03/31/2024	1	42,054,094	5,469,342	7,361,612	6,958,018	9,913,880	7,861,444	11,179,515	12,197,026	102,994,931
Increase/Decrease		(18,973)	(92,320)	9,619	(55,707)	(179,458)	(44,610)	(92,157)	(78,299)	(551,905)

**Alameda County Schools Insurance Group (ACSIG)**  
**Schedule of Claim Liabilities for Workers' Compensation**  
**As of 03/31/2024**

	Totals From Page 7A	Self-Insured Program Years								As of 03/31/2024 Totals	Activity	
		2002/2003	2003/2004	2004/2005	2005/2006	2006/2007	2007/2008	2008/2009	As of 06/30/2023 Totals		07/01/2023 - 03/31/2024	
Paid Claims	\$ 101,336,370	\$ 10,355,823	\$ 6,088,550	\$ 5,768,094	\$ 8,837,031	\$ 8,727,894	\$ 8,780,820	\$ 9,007,780	\$ 158,902,362	\$ 158,757,249	\$ 145,113	
Reserves	1,440,908	17,467	111,491	110,275	296,948	136,600	99,291	105,971	2,318,951	2,400,418	(81,467)	
Incurred Claims	<u>102,777,278</u>	<u>10,373,290</u>	<u>6,200,041</u>	<u>5,878,369</u>	<u>9,133,979</u>	<u>8,864,494</u>	<u>8,880,111</u>	<u>9,113,751</u>	<u>161,221,313</u>	<u>161,157,667</u>	<u>63,646</u>	
Incurred But Not Reported (IBNR)	596,423	126,710	69,959	91,631	126,021	65,506	119,889	136,249	1,332,388	2,810,139	(1,477,751)	
Non- Discounted Estimated Ultimate Incurred (1)	103,373,701	10,500,000	6,270,000	5,970,000	9,260,000	8,930,000	9,000,000	9,250,000	162,553,701	163,967,806	(1,414,105)	
Anticipated Investment Income (Discount) (2)	(378,770)	(30,710)	(39,193)	(45,429)	(97,706)	(46,686)	(52,603)	(57,406)	(748,503)	(1,078,795)	330,292	
Discounted Estimated Ultimate (1-2)	<u>102,994,931</u>	<u>10,469,290</u>	<u>6,230,807</u>	<u>5,924,571</u>	<u>9,162,294</u>	<u>8,883,314</u>	<u>8,947,397</u>	<u>9,192,594</u>	<u>161,805,198</u>	<u>162,889,011</u>	<u>(1,083,813)</u>	
Paid Claims	<u>(101,336,370)</u>	<u>(10,355,823)</u>	<u>(6,088,550)</u>	<u>(5,768,094)</u>	<u>(8,837,031)</u>	<u>(8,727,894)</u>	<u>(8,780,820)</u>	<u>(9,007,780)</u>	<u>(158,902,362)</u>	<u>(158,757,249)</u>	<u>(145,113)</u>	
Remaining Estimated Unpaid Claim Liabilities	\$ 1,658,561	\$ 113,467	\$ 142,257	\$ 156,477	\$ 325,263	\$ 155,420	\$ 166,577	\$ 184,814	\$ 2,902,836	\$ 4,131,762	\$ (1,228,926)	
<b>(1) Per Bay Actuarial Consultants actuarial study dated January 2024.</b>									Estimated Current Portion /Short-Term Liability (1)	(616,080)		
									Estimated Non-Current portion of Claim Liabilities	\$ 2,286,756		
<b>(2) Discounted at 2%, 06/30/2012, 1.5%, 2014, 2015, 2016, 2017, 2018 1.75%, 2019 1.50%, 2020 .75%, 2021-2022 1.5%, 2022-2023 &amp; 2023-2024 3.5%.</b>												
<b>Historical Discounted Estimated Ultimate Incurred:</b>												
As of 06/30/2015	10	108,826,849	10,457,705	6,920,842	6,214,866	10,347,509	9,539,023	9,859,233	10,469,961	172,635,988		
As of 06/30/2016	9	108,093,393	10,531,877	6,860,336	6,223,567	10,366,713	9,216,061	9,639,692	10,101,017	171,032,656		
As of 06/30/2017	8	108,184,180	10,716,918	6,817,755	5,896,649	10,214,975	9,198,996	9,520,490	9,943,375	170,493,338		
As of 06/30/2018	7	108,225,122	10,697,201	6,689,784	6,028,771	10,128,423	9,250,450	9,475,767	9,593,861	170,089,379		
As of 06/30/2019	6	106,992,664	10,865,794	6,590,938	6,129,435	9,825,431	9,213,395	9,194,958	9,526,850	168,339,465		
As of 06/30/2020	5	105,503,953	10,632,710	6,438,165	6,018,634	9,707,983	9,117,968	9,129,259	9,527,330	166,119,058		
As of 06/30/2021	4	105,026,427	10,875,378	6,415,468	6,291,921	9,629,398	9,091,729	9,158,853	9,558,695	166,047,869		
As of 06/30/2022	3	103,916,704	10,734,521	6,229,163	6,219,994	9,353,771	9,031,538	9,058,613	9,362,025	163,906,329		
As of 06/30/2023	2	103,546,836	10,367,271	6,244,921	6,161,995	9,255,903	8,982,904	9,017,075	9,312,106	162,889,011		
As of 03/31/2024	1	102,994,931	10,469,290	6,230,807	5,924,571	9,162,294	8,883,314	8,947,397	9,192,594	161,805,198		
Increase/Decrease		(551,905)	102,019	(14,114)	(237,424)	(93,609)	(99,590)	(69,678)	(119,512)	(1,083,813)		

Claim Development Expense	
Claim Liabilities	\$ (1,228,926)
ULAE	(110,568)
Castlepoint	
Reinsurance	
Insolvency	0
	<u>\$ (1,339,494)</u>

**Alameda County Schools Insurance Group (ACSIG)  
Schedule of Claim Liabilities for Property Liability  
As of 03/31/2024**

	10	9	8	7	6	5	4	3	2	1	As of 03/31/2024	Activity	
	2014/2015	2015/2016	2016/2017	2017/2018	2018/2019	2019/2020	2020/2021	2021/2022	2022/2023	2023/2024		As of 06/30/2023	07/01/2023 - 03/31/2024
Paid Claims	\$ 18,078	\$ 47,777	\$ 20,000	\$ 44,853	\$ 69,144	\$ 40,000	\$ 20,000	\$ 157,499	\$ 26,655	\$ 1,852	\$ 445,858	\$ 387,996	\$ 57,862
Reserves	(0)	0	--	(0)	(0)	--	8,345	11,017	98,345	80,000	197,705	220,605	(22,900)
Incurred Claims	<u>18,078</u>	<u>47,777</u>	<u>20,000</u>	<u>44,853</u>	<u>69,144</u>	<u>40,000</u>	<u>28,344</u>	<u>168,516</u>	<u>125,000</u>	<u>81,852</u>	<u>643,563</u>	<u>608,601</u>	<u>34,962</u>
Incurred But Not Reported (IBNR)	--	(0)	--	0	0	--	24,454	11,484	5,000	(1,055)	39,884	24,846	15,038
Non- Discounted Estimated Ultimate Incurred (1)	18,078	47,777	20,000	44,853	69,144	40,000	52,798	180,000	130,000	80,797	683,447	633,447	50,000
Anticipated Investment Income (Discount) (2)	--	--	--	0	--	--	(578)	(474)	(2,177)	(1,662)	(4,891)	(5,053)	162
Discounted Estimated Ultimate (1-2)	<u>18,078</u>	<u>47,777</u>	<u>20,000</u>	<u>44,853</u>	<u>69,144</u>	<u>40,000</u>	<u>52,220</u>	<u>179,526</u>	<u>127,823</u>	<u>79,135</u>	<u>678,556</u>	<u>628,394</u>	<u>50,162</u>
Paid Claims	<u>(18,078)</u>	<u>(47,777)</u>	<u>(20,000)</u>	<u>(44,853)</u>	<u>(69,144)</u>	<u>(40,000)</u>	<u>(20,000)</u>	<u>(157,499)</u>	<u>(26,655)</u>	<u>(1,852)</u>	<u>(445,858)</u>	<u>(387,996)</u>	<u>(57,862)</u>
Remaining Estimated Unpaid Claim Liabilities	\$ --	\$ --	\$ --	\$ --	\$ --	\$ --	\$ 32,220	\$ 22,027	\$ 101,168	\$ 77,283	\$ 232,698	\$ 240,398	\$ (7,700)
											Estimated Current Portion /Short-Term Liability (1), paid claims factor of .65	(127,984)	
											Estimated Non-Current portion of Claim Liabilities		
											Current portion of Claim Liabilities	\$ 104,714	
<p>(1) Per Bay Actuarial Consultants actuarial study dated April 2022.  (2) Discounted at 1.0% 06/30/2020, .2% at 06/30/2021, &amp; 1.5% at 06/30/2022 &amp; 2023.  (3) Adjusted for negative IBNR, based upon Actuarial report, maybe adjusted at year end if incurred has not been reduced.</p>													
<b>Historical Estimated Ultimate Incurred:</b>													
As of 06/30/2015	10	32,843	--	--	--	--	--	--	--	--	32,843		
As of 06/30/2016	9	7,843	25,000	--	--	--	--	--	--	--	32,843		
As of 06/30/2017	8	18,078	51,345	54,069	--	--	--	--	--	--	123,492		
As of 06/30/2018	7	18,078	72,777	40,968	63,000	--	--	--	--	--	194,823		
As of 06/30/2019	6	18,078	72,777	20,000	94,492	99,010	--	--	--	--	304,357		
As of 06/30/2020	5	18,078	52,777	20,000	64,491	79,010	70,000	--	--	--	304,356		
As of 06/30/2021	4	18,078	47,777	20,000	44,853	62,301	85,130	53,843	--	--	331,982		
As of 06/30/2022	3	18,078	47,777	20,000	44,853	62,301	40,000	49,595	109,640	--	392,244		
As of 06/30/2023	2	18,078	47,777	20,000	44,853	69,144	40,000	53,595	200,000	140,000	633,447		
As of 03/31/2024	1	18,078	47,777	20,000	44,853	69,144	40,000	52,798	180,000	130,000	80,797	683,447	
Increase/Decrease		--	--	--	--	--	--	(797)	(20,000)	(10,000)	80,797	50,000	

Claim Development Expense	
Claim Liabilities and ULAE	\$ (7,700)
Increase	<u>\$ (7,700)</u>

California State Treasurer  
**Fiona Ma, CPA**



Local Agency Investment Fund  
P.O. Box 942809  
Sacramento, CA 94209-0001  
(916) 653-3001

April 30, 2024

[LAIF Home](#)  
[PMIA Average Monthly Yields](#)

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ALAMEDA COUNTY SCHOOLS INSURANCE GROUP

RISK MANAGER  
P.O. BOX 2487  
DUBLIN, CA 94568

[Tran Type Definitions](#)

**Account Number:** 35-01-001

March 2024 Statement

**Account Summary**

Total Deposit:	0.00	Beginning Balance:	3,556,230.42
Total Withdrawal:	0.00	Ending Balance:	3,556,230.42





April 25, 2024

State Controller's Office  
Division of Accounting & Reporting  
Local Government Reporting Section  
P. O. Box 942850  
Sacramento, CA 94250

RE: Special Districts Compensation Report

To Whom It May Concern:

By notice received by Alameda County Schools Insurance Group (ACSIG) regarding the filing of the Calendar Year 2023 Special Districts Compensation Report. The actual report was filed electronically via Data Exchange Portal (DEP).

If you have any questions regarding information in this report, please call me at (916) 859-7160 extension 4250.

Sincerely,

Laurena Grabert  
Vice President

LG/jbm  
Enclosures

cc: ACSIG Board of Directors

*P.O. Box 4328  
Torrance, CA 90510  
Phone: (310) 212-2550  
Fax: (310) 212-0300  
License No. 0451271*



## Alameda County Schools Insurance Group

P.O. Box 2487

Dublin, CA 94568

Phone (925) 225-1030

Fax (292) 225-0653

[www.acsig.com](http://www.acsig.com)

### **Executive Summary: Budget 2024-2025**

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: Budget 2024-2025

The proposed ACSIG budget is included in this packet for review. The Transitional Executive Director developed this budget using year-to-date (FY 23-24) data and updated estimates for 2024/2025 rates and cost.

The budget contains a list of major contracts/service providers, assumptions and calculations, and a detailed budget for each major program. This budget incorporates the \$.27 WC rate reduction approved by the Executive Committee on February 8, 2024.

The Executive Director will present the budget with discussion by the committee. Additionally, the Executive Committee will be asked for a recommendation to the Full Board.

**Alameda County Schools Insurance Group (ACSIG)  
Consolidated  
2024/2025 Budget**

	Budget			2023/24 Budget	2022/23 Actuals	2021/2022 Actuals	2020/2021 Actuals	2019/2020 Actuals	2018/2019 Actuals	2017/2018 Actuals	
	2024/2025	Allocations	Change in Accruals								
<b>Audited - Beginning Net Position, as of 07/01/2024</b>											
Beginning Cash	\$ 59,651,470			\$ 59,651,470							
<b>Operating Revenue:</b>											
Premiums Paid by Members	\$ 196,036,124	\$ --	\$ --	\$ 196,036,124	189,153,110	177,306,794	165,555,533	161,037,627	\$ 143,824,407	\$ 158,713,739	164,546,182
Total Operating Revenue	196,036,124	--	--	196,036,124	189,153,110	177,306,794	165,555,533	161,037,627	143,824,407	158,713,739	164,546,182
<b>Operating Expenditures:</b>											
Classified Salaries	477,404	--	--	477,404	536,598	384,482	357,350	331,598	323,830	295,213	286,178
Statutory Benefits	71,611	--	--	71,611	91,725	47,360	36,941	28,746	36,288	22,941	31,954
Health & Welfare	85,750	--	--	85,750	66,500	48,750	47,125	65,039	47,741	42,912	47,510
Employer Tax Expense	8,647	--	--	8,647	7,439	5,917	5,347	5,219	5,048	4,550	4,443
Net Pension Expense	234,001	--	--	234,001	278,325	104,548	151,505	(202,608)	365,809	199,053	(191,171)
Telephone & Internet	10,600	--	--	10,600	11,100	5,563	6,523	6,453	4,625	5,739	6,102
Supplies Office	9,000	--	--	9,000	8,000	8,347	397	8,541	3,593	2,148	1,885
Supplies - Other	12,000	--	--	12,000	12,000	5,003	3,803	1,467	1,181	5,141	3,276
Eligibility Processing	265,000	--	--	265,000	255,000	226,419	219,791	210,615	210,724	203,801	218,600
Brokerage Fees-Dental-ACSIG	340,000	--	--	340,000	340,000	312,447	303,141	290,054	281,605	279,662	293,050
Brokerage Fees-Dental-MD	800,000	--	--	800,000	750,000	712,220	694,592	607,679	500,851	470,289	410,333
Travel and Conferences	30,000	--	--	30,000	29,100	9,376	5,043	2,842	13,770	10,118	10,458
Mileage	12,000	--	--	12,000	11,850	6,488	6,500	6,051	7,255	7,119	6,756
Dues & Memberships	8,550	--	--	8,550	8,550	7,680	685	2,077	7,635	885	1,635
Postage & Meter	7,000	--	--	7,000	7,330	2,059	2,458	6,338	2,963	2,764	3,875
Insurance Expense-PIPS&NCR	27,402,303	--	--	27,402,303	26,947,045	24,232,011	23,847,452	24,013,869	22,199,152	21,043,123	21,028,823
PIPS payroll adjustment	1,000,000	--	--	1,000,000	1,000,000	657,717	86,069	584,688	476,909	(233,378)	749,186
Utility - Operating-Rent	47,856	--	--	47,856	50,740	37,046	49,440	41,919	38,074	31,366	36,395
Advertising	--	--	--	--	--	--	--	--	--	5,535	--
Contract Services	43,325	--	--	43,325	17,500	14,300	14,020	--	15,750	18,096	8,272
Contract Services - Actuarial	17,000	--	--	17,000	19,200	--	15,750	18,670	8,570	--	--
Contract Services - Claims	2,000	--	--	2,000	15,000	--	--	--	12,150	--	15,570
Audit Fees	23,275	--	--	23,275	23,000	14,850	14,575	14,300	14,249	13,750	13,500
Other Services/Operating Expenses	10,000	--	--	10,000	12,300	5,376	5,764	3,236	10,386	6,137	5,614
Capital Equipment/Depreciation	20,000	--	--	20,000	9,500	--	595	592	1,462	--	--
Repairs & Maintenance	5,000	--	--	5,000	5,000	--	--	--	--	--	--
Legal	5,000	--	--	5,000	6,750	--	--	--	--	928	--
Accounting Services	20,000	--	--	20,000	17,000	16,480	16,000	15,500	15,000	14,850	14,420
County Courier	3,040	--	--	3,040	2,800	1,513	4,163	32	5,604	3,872	3,567
Shredding	1,500	--	--	1,500	1,600	1,242	227	619	1,413	813	848
Copier & Scanner	10,000	--	--	10,000	17,900	9,759	7,558	12,465	7,676	11,058	10,277
Claims Administration Services	117,000	--	--	117,000	107,000	104,469	118,870	139,411	140,232	166,650	166,909
Self-Insurance Fee	700,000	--	--	700,000	650,000	558,425	281,372	388,794	432,095	337,468	297,811
Claims Paid-WC	500,000	--	--	500,000	1,000,000	400,761	537,775	936,718	725,255	1,022,116	1,001,753
Claims Paid-PL	110,000	--	--	110,000	100,000	151,492	25,205	10,263	82,411	57,219	53,650
Physical Ability Testing	50,000	--	--	50,000	20,000	6,083	9,660	3,403	4,165	6,031	26,449
Training	10,000	--	--	10,000	10,000	--	--	--	--	6,031	12,445
First-Aid Program	5,000	--	--	5,000	35,000	2,307	3,749	1,208	8,384	26,579	28,559
Risk Mgmt Prevention Program	300,000	--	--	300,000	250,000	74,708	97,500	27,610	85,115	15,989	--
EAP	250,000	--	--	250,000	200,000	165,508	162,038	119,315	29,602	--	--
Safety Inspection	22,000	--	--	22,000	20,000	--	12,819	12,819	12,445	--	--
Bank Charge & WC Penalty Reimb	6,000	--	--	6,000	6,000	2,243	--	112	4,144	1,943	21,071
Cobra Premiums	300,000	--	--	300,000	300,000	186,045	218,392	268,395	225,931	224,938	246,832
Dental Insurance Premiums	152,768,550	--	--	152,768,550	146,190,000	138,206,038	131,487,423	123,344,909	106,421,564	122,360,987	129,945,472
Vision Insurance Premiums	8,480,000	--	--	8,480,000	8,000,000	7,551,360	6,304,171	5,022,017	3,676,970	4,234,168	4,066,932
Claim Development Expense	80,252	--	--	80,252	(300,000)	(1,158,832)	(2,989,709)	(992,480)	(3,540,853)	(2,823,823)	(357,335)
Prior Year Adjustment	--	--	--	--	--	182,870	651,600	--	--	--	--
Total Operating Expenditures	194,680,663	--	--	194,680,663	187,146,852	173,310,430	162,823,679	155,356,495	132,926,773	148,117,225	158,531,903
<b>Net Increase/(Decrease) from Operations</b>	1,355,461	--	--	1,355,461	2,006,258	3,996,364	2,731,854	5,681,132	10,897,634	10,596,514	6,014,279
<b>Non Operating Income/(Expense)</b>											
Interest Income	692,873	--	--	692,873	639,000	885,440	526,681	640,000	734,153	681,271	499,738
Change in FMV	--	--	--	--	--	(225,155)	(2,305,443)	663,387	663,387	342,202	(341,266)
Realized Gain/(Loss)	--	--	--	--	--	(84,292)	940,339	--	--	--	644
GASB 68	--	--	--	--	--	--	--	--	--	--	--
Total Non Operating Income/(Expense)	692,873	--	--	692,873	639,000	575,993	(838,423)	640,000	1,397,540	1,023,473	159,116
Ending Cash	\$ 61,699,804	--	--	\$ 61,699,804							
<b>Net Increase/(Decrease) in Net Position</b>	\$ --	\$ --	\$ --	\$ 2,048,334	2,645,258	4,572,357	1,893,431	6,321,132	\$ 12,295,174	\$ 11,619,987	6,173,395

**Alameda County Schools Insurance Group (ACSIG)  
Workers' Compensation  
2024/2025 Budget**

	Budget		Change in	Budget		2023/2024	2022/2023	2021/2022	2020/2021	2019/2020	2018/2019	2017/2018
	2024/2025	Allocations		Accruals	2024/2025							
<b>Audited - Beginning Net Position, as of 07/01/2024</b>	\$ 35,504,270											
Beginning Cash and Investments	\$ 35,504,270					\$ 34,588,937	\$ 35,389,069	\$ 32,362,967	\$ 29,551,572	\$ 20,412,478	\$ 11,018,268	26,712,774
<b>Operating Revenue:</b>												
Premiums Paid by Members	\$ 28,615,302	\$ --	\$ --	\$ 28,615,302		28,057,017	22,060,954	23,053,472	25,917,135	\$ 27,017,696	\$ 26,942,763	26,712,774
PIPS Contribution Adjustment	--	--	--	--		--	318	549,925	--	7,093	--	--
Total Operating Revenue	28,615,302	--	--	28,615,302		28,057,017	22,061,272	23,603,397	25,917,135	27,024,789	26,942,763	26,712,774
<b>Operating Expenditures:</b>												
Classified Salaries	113,527	--	--	113,527		126,676	87,930	82,294	77,693	76,063	69,349	65,608
Statutory Benefits	17,029	--	--	17,029		24,027	10,598	8,506	9,279	7,970	5,100	8,266
Health & Welfare	18,900	--	--	18,900		18,725	7,800	7,313	19,512	14,322	12,873	14,253
Employer Tax Expense	1,947	--	--	1,947		1,662	1,278	1,144	1,151	1,110	1,010	959
Net Pension Expense	61,886	--	--	61,886		64,519	27,410	45,451	(45,843)	62,112	59,717	44,672
Telephone & Internet	1,060	--	--	1,060		1,110	834	978	968	694	861	915
Supplies Office	900	--	--	900		800	1,252	60	981	539	322	283
Supplies - Other	1,200	--	--	1,200		1,200	750	571	220	177	771	491
Utility - Rent	4,786	--	--	4,786		5,074	3,705	4,945	6,288	5,711	--	5,459
Brokerage Fees-Dental-ACSIG	--	--	--	--		--	--	--	--	--	--	--
Brokerage Fees-Dental-MD	--	--	--	--		--	--	--	--	--	--	--
Travel and Conferences	3,000	--	--	3,000		3,000	1,406	756	426	2,065	1,518	1,569
Mileage	1,200	--	--	1,200		1,200	973	975	908	1,088	1,068	1,013
Dues & Memberships	900	--	--	900		900	1,152	103	328	1,145	133	245
Postage & Meter	280	--	--	280		340	103	123	311	148	138	194
Insurance Expense-PIPS	24,387,902	--	--	24,387,002		24,596,271	22,134,268	21,859,934	22,078,042	20,501,321	19,679,728	19,857,950
PIPS Contribution Adjustment	1,000,000	--	--	1,000,000		1,000,000	657,717	86,069	584,688	476,909	(233,378)	749,186
Advertising	--	--	--	--		--	--	--	--	--	5,535	--
Contract Services - Actuarial	12,000	--	--	12,000		10,000	9,300	8,970	8,770	8,570	8,396	8,272
Contract Services - Claims Audit	--	--	--	--		19,200	--	15,750	--	15,750	--	15,570
Contract Services	3,183	--	--	3,183		5,000	--	--	--	--	--	--
Audit Fees	2,328	--	--	2,328		2,300	2,228	2,186	2,145	2,104	2,063	2,025
Other Services/Operating Expenses	1,000	--	--	1,000		1,300	806	865	485	1,462	917	842
Capital Equipment/Depreciation	2,000	--	--	2,000		500	--	--	--	--	--	--
Repairs & Maintenance	500	--	--	500		500	--	--	--	--	--	--
Legal	500	--	--	500		500	--	--	--	--	--	--
Accounting Services	2,000	--	--	2,000		2,550	2,472	2,400	2,325	2,250	2,228	2,163
County Courier	320	--	--	320		280	227	624	--	592	581	535
Shredding	150	--	--	150		250	186	34	98	145	122	128
Copier & Scanner	400	--	--	400		800	488	378	623	396	553	514
Claims Administration Services	85,000	--	--	85,000		87,000	92,400	106,400	135,000	135,000	154,000	154,000
Self-Insurance Fee	700,000	--	--	700,000		650,000	558,425	281,372	388,794	432,095	337,468	297,811
Claims Paid-WC	500,000	--	--	500,000		1,000,000	400,761	537,775	936,718	725,255	1,022,116	1,001,753
Claims Paid-PL	--	--	--	--		--	--	--	--	--	--	--
Physical Abilities Testing	50,000	--	--	50,000		20,000	6,083	9,660	3,403	4,165	11,180	14,004
Training	10,000	--	--	10,000		10,000	--	--	--	--	6,031	--
First-Aid Program	5,000	--	--	5,000		35,000	2,307	3,749	1,208	8,384	26,579	23,953
Risk Management Prevention Program	300,000	--	--	300,000		250,000	74,708	97,500	27,610	85,115	15,989	28,559
EAP Program	250,000	--	--	250,000		200,000	165,508	162,038	119,315	29,602	--	--
Bank Charge & WC Penalty Reimb	1,000	--	--	1,000		1,000	--	--	--	--	--	--
Cobra Premiums	--	--	--	--		--	--	--	--	--	--	--
Dental Insurance Premiums	--	--	--	--		--	--	--	--	--	--	--
Vision Insurance Premiums	--	--	--	--		--	--	--	--	--	--	--
Claim Development Expense	(509,748)	--	--	(509,748)		(600,000)	(1,033,262)	(3,054,012)	(1,305,544)	(3,472,220)	(2,926,804)	378,826
Prior Year Adjustment	--	--	--	--		--	--	--	--	--	--	--
Total Operating Expenditures	27,029,249	--	--	27,029,249		27,541,684	23,219,813	20,274,911	23,055,902	19,130,039	18,266,164	21,833,022
<b>Net Increase/(Decrease) from Operations</b>	1,586,053	--	--	1,586,053		515,333	(1,158,541)	3,328,486	2,861,233	7,894,750	8,676,599	4,879,752
<b>Non Operating Income/(Expense)</b>												
Interest Income	415,724	--	--	415,724		400,000	597,952	402,626	150,163	574,538	515,929	356,625
Change in FMV	--	--	--	--		--	(169,531)	(1,413,042)	--	469,365	201,303	200,752
Realized Gain/(Loss)	--	--	--	--		--	(63,467)	708,031	--	441	379	379
GASB 68	--	--	--	--		--	--	--	--	--	--	--
Interfund Transfer	--	--	--	--		--	--	--	--	--	--	--
Total Non Operating Income/(Expense)	415,724	\$ --	\$ --	415,724		400,000	364,954	(302,385)	150,163	1,044,344	717,611	156,252
Ending Cash	\$ 37,506,046											
<b>Net Increase/(Decrease) in Net Position</b>				2,001,776		915,333	(793,587)	3,026,101	3,011,396	8,939,094	9,394,210	5,036,004
			\$ --	\$ 37,506,046		\$ 35,504,270	\$ 34,595,482	\$ 35,389,068	\$ 32,362,968	\$ 29,351,572	\$ 20,412,478	31,748,778

**Alameda County Schools Insurance Group (ACSIG)  
Dental  
2024/2025 Budget**

	<b>Budget</b>			<b>Change in Accruals</b>	<b>Budget</b>			<b>2023-2024 Budget</b>	<b>2022-2023 Actuals</b>	<b>2021-2022 Actuals</b>	<b>2020-2021 Actuals</b>	<b>2019/2020 Actuals</b>	<b>2018/2019 Actuals</b>	<b>2017/2018 Actuals</b>	
	<b>2024/2025</b>				<b>2024/2025</b>										
	<b>Allocations</b>														
<b>Audited - Beginning Net Position, as of 07/01/2024</b>					\$ 19,465,014										
Beginning Cash and Investments	\$ 19,465,014				\$ 18,267,465	\$ 13,307,986	\$ 14,373,978	\$ 11,924,643	9,322,655	\$ 8,251,136				5,318,251	
<b>Operating Revenue:</b>															
Premiums Paid by Members	\$ 155,500,000	\$ --	\$ --	\$ 155,500,000	\$ 150,000,000	\$ 144,699,773	\$ 133,236,138	\$ 127,610,386	110,572,228	\$ 125,810,680				132,187,282	
Rebate													(999,989)		
Total Operating Revenue	155,500,000	--	--	155,500,000	150,000,000	144,699,773	133,236,138	127,610,386	110,572,228	124,810,691				132,187,282	
<b>Operating Expenditures:</b>															
Classified Salaries	285,298	--	--	285,298	\$ 322,594	\$ 235,269	217,812	199,873	194,904	177,761				174,771	
Statutory Benefits	42,795	--	--	42,795	\$ 54,324	\$ 29,178	22,427	13,471	22,637	14,236				18,051	
Health & Welfare	53,600	--	--	53,600	\$ 39,975	\$ 35,100	34,288	32,519	23,871	21,456				23,755	
Employer Tax Expense	5,341	--	--	5,341	\$ 4,614	\$ 3,738	3,396	3,259	3,158	2,833				2,809	
Net Pension Expense	130,048	--	--	130,048	\$ 170,189	\$ 58,462	75,752	(124,689)	257,464	99,526				115,435	
Telephone & Internet	7,950	--	--	7,950	\$ 8,325	\$ 3,894	4,566	4,517	3,238	4,017				4,272	
Supplies Office	6,750	--	--	6,750	\$ 6,000	\$ 5,843	278	4,579	2,515	1,504				1,319	
Supplies - Other	9,000	--	--	9,000	\$ 9,000	\$ 3,502	2,662	1,027	826	3,599				2,293	
Eligibility Processing	265,000	--	--	265,000	\$ 255,000	\$ 226,419	219,791	210,615	205,013	203,801				213,141	
Brokerage Fees-Dental-ACSIG	340,000	--	--	340,000	\$ 340,000	\$ 312,447	303,141	290,054	281,605	279,662				293,050	
Brokerage Fees-Dental-MD	800,000	--	--	800,000	\$ 750,000	\$ 712,220	694,592	607,679	500,851	470,289				410,333	
Travel and Conferences	22,500	--	--	22,500	\$ 22,500	\$ 6,563	3,530	1,989	9,639	7,082				7,320	
Mileage	9,000	--	--	9,000	\$ 9,000	\$ 4,541	4,550	4,235	5,078	4,983				4,729	
Dues & Memberships	6,750	--	--	6,750	\$ 6,750	\$ 5,376	480	1,530	5,345	620				1,145	
Postage & Meter	6,300	--	--	6,300	\$ 6,300	\$ 1,853	2,212	5,608	2,667	2,488				3,487	
Insurance Expense	--	--	--	--	\$ --	\$ --	--	--	--	--				--	
Net, Operating-Rent	35,892	--	--	35,892	\$ 38,055	\$ 27,784	37,080	29,344	26,652	25,831				25,476	
Advertising	--	--	--	--	\$ --	\$ --	--	--	--	--				--	
Contract Services - Actuarial	5,000	--	--	5,000	\$ --	\$ 4,000	--	3,500	--	5,000				--	
Contract Services - PL - Investigation	--	--	--	--	\$ --	\$ --	--	--	--	--				--	
Contract Services	23,869	--	--	23,869	\$ 10,000	\$ --	--	--	12,150	--				--	
Audit Fees	17,456	--	--	17,456	\$ 17,250	\$ 10,395	10,203	10,010	9,818	9,625				9,450	
Other Services/Operating Expenses	7,500	--	--	7,500	\$ 10,000	\$ 3,763	4,035	2,265	6,821	4,303				3,930	
Capital Equipment/Depreciation	15,000	--	--	15,000	\$ 7,500	\$ --	--	--	--	--				--	
Repairs & Maintenance	3,750	--	--	3,750	\$ 3,750	\$ --	--	--	--	--				--	
Legal	3,750	--	--	3,750	\$ 5,000	\$ --	--	--	--	928				--	
Accounting Services	15,000	--	--	15,000	\$ 11,900	\$ 11,536	11,200	10,850	10,500	10,395				10,094	
County Courier	2,400	--	--	2,400	\$ 2,100	\$ 1,059	2,914	--	2,762	2,710				2,497	
Shredding	1,125	--	--	1,125	\$ 1,125	\$ 869	159	456	676	569				593	
Copier & Scanner	9,000	--	--	9,000	\$ 16,200	\$ 8,783	6,802	11,219	7,135	9,952				9,249	
Claims Administration Services	--	--	--	--	\$ --	\$ --	--	--	--	--				--	
Self-Insurance Fee	--	--	--	--	\$ --	\$ --	--	--	--	--				--	
Claims Paid-WC	--	--	--	--	\$ --	\$ --	--	--	--	--				--	
Claims Paid-PL	--	--	--	--	\$ --	\$ --	--	--	--	--				--	
Physical Abilities Testing	--	--	--	--	\$ --	\$ --	--	--	--	--				--	
Training	--	--	--	--	\$ --	\$ --	--	--	--	--				--	
First-Aid Program	--	--	--	--	\$ --	\$ --	--	--	--	--				--	
Food Service Training	--	--	--	--	\$ --	\$ --	--	--	--	--				--	
Special Ed Training	--	--	--	--	\$ --	\$ --	--	--	--	--				--	
Bank Charge	5,000	--	--	5,000	\$ 5,000	\$ 2,243	--	112	4,144	1,943				21,071	
Cobra Premiums	300,000	--	--	300,000	\$ 300,000	\$ 186,045	218,392	268,395	225,931	224,938				246,832	
Dental Insurance Premiums	152,768,550	--	--	152,768,550	\$ 146,190,000	\$ 138,206,038	131,487,423	123,344,909	106,421,564	122,360,987				129,945,472	
Vision Insurance Premiums	--	--	--	--	\$ --	\$ --	--	--	--	--				--	
Claim Development Expense	300,000	--	--	300,000	\$ 300,000	\$ (388,000)	--	227,000	--	20,000				--	
Prefund Deposit	--	--	--	--	\$ --	\$ 100,000	465,500	--	--	--				--	
Total Operating Expenditures	155,503,623	--	--	155,503,623	148,922,451	139,818,920	133,833,185	125,164,326	108,246,964	123,971,037				131,319,704	
<b>Net Increase/(Decrease) from Operations</b>	(3,623)	--	--	(3,623)	1,077,549	4,880,853	(597,047)	2,446,060	2,325,264	839,654				867,578	
<b>Non Operating Income/(Expense)</b>															
Interest Income	138,575	--	--	138,575	\$ 120,000	\$ 165,818	84,270	3,273	101,795	113,557				103,017	
Change in FMV	--	--	--	--	\$ --	\$ (46,618)	(747,910)	--	162,607	118,086				117,763	
Realized Gain/(Loss)	--	--	--	--	\$ --	\$ (17,452)	194,694	--	171	222				222	
GASB 68															
Interfund Transfer & YE Close Oper	--	--	--	--	\$ --	\$ --	--	--	--	--				0	
Total Non Operating Income/(Expense)	138,575	--	--	138,575	120,000	101,748	(468,946)	3,273	264,573	231,865				14,524	
Ending Cash	\$ 19,599,965														
<b>Net Increase/(Decrease) in Net Position</b>				134,951	1,197,549	4,982,601	(1,065,993)	2,449,333	2,589,837	1,071,519				853,054	
				\$ 19,599,965	19,465,014	18,290,587	13,307,985	14,373,976	11,912,492	9,322,655				6,171,305	

**Alameda County Schools Insurance Group (ACSIG)**

**Vision  
2024/2025 Budget**

	Budget		Change in Accruals	Budget		2023/2024 Budget	2022/2023 Actuals	2021/2022 Actuals	2020/2021 Actuals	2019/2020 Actuals	2018/2019 Actuals	2017/2018 Actuals					
	2024/2025	Allocations		2024/2025	2024/2025												
<b>Audited - Beginning Net Position, as of 07/01/2024</b>				\$	3,513,271												
Beginning Cash and Investments	\$	3,513,271				\$	3,360,571	\$	3,179,847	\$	3,171,366	3,112,862	\$	2,527,944	\$	2,297,478	2,094,297
<b>Operating Revenue:</b>																	
Premiums Paid by Members	\$	8,683,520	\$	--	\$	8,683,520	8,200,000	7,989,687	6,640,269	5,158,675	\$	4,261,486	\$	4,485,790	\$	4,356,498	
<b>Total Operating Revenue</b>		8,683,520	--	--	8,683,520	8,200,000	7,989,687	6,640,269	5,158,675	4,261,486	4,485,790	4,356,498					
<b>Operating Expenditures:</b>																	
Classified Salaries	34,949	--	--	34,949	47,971	34,636	32,198	30,370	29,664	26,856	25,991						
Statutory Benefits	5,242	--	--	5,242	7,721	4,573	3,512	2,712	3,391	2,111	3,010						
Health & Welfare	5,650	--	--	5,650	4,875	3,900	3,738	6,504	4,774	4,291	4,751						
Employer Tax Expense	588	--	--	588	664	522	469	468	451	403	392						
Net Pension Expense	19,819	--	--	19,819	23,715	9,939	15,150	(18,311)	30,363	19,906	17,461						
Telephone & Internet	1,060	--	--	1,060	1,110	556	652	645	463	574	610						
Supplies Office	900	--	--	900	800	835	40	654	359	215	188						
Supplies - Other	1,200	--	--	1,200	1,200	500	380	147	118	514	328						
Eligibility Processing	--	--	--	--	--	--	--	--	--	--	--						
Brokerage Fees-Dental-ACSIG	--	--	--	--	--	--	--	--	--	--	--						
Brokerage Fees-Dental-MD	--	--	--	--	--	--	--	--	--	--	--						
Travel and Conferences	3,000	--	--	3,000	3,000	938	504	284	1,377	1,012	1,046						
Mileage	1,200	--	--	1,200	1,200	649	650	605	725	712	676						
Dues & Memberships	900	--	--	900	900	768	69	219	764	89	164						
Postage & Meter	210	--	--	210	340	103	123	311	148	138	194						
Insurance Expense	--	--	--	--	--	--	--	--	--	--	--						
Utility - Operating-Rent	4,786	--	--	4,786	5,074	3,705	4,945	4,192	3,807	3,691	3,639						
Advertising	--	--	--	--	--	--	--	--	--	--	--						
Contract Services	6,183	--	--	6,183	--	1,000	--	1,500	--	--	--						
Contract Services - PL - Investigation	--	--	--	--	--	--	--	--	--	--	--						
Contract Services - PL - Legal	--	--	--	--	--	--	--	--	--	--	--						
Audit Fees	2,328	--	--	2,328	2,300	1,485	1,458	1,430	1,403	1,375	1,350						
Other Services/Operating Expenses	1,000	--	--	1,000	1,000	538	576	324	974	611	561						
Capital Equipment/Depreciation	2,000	--	--	2,000	1,000	--	--	--	--	--	--						
Repairs & Maintenance	500	--	--	500	500	--	--	--	--	--	--						
Legal	500	--	--	500	1,000	--	--	--	--	--	--						
Accounting Services	2,000	--	--	2,000	1,700	1,648	1,600	1,550	1,500	1,485	1,442						
County Courier	160	--	--	160	280	151	416	--	395	387	357						
Shredding	150	--	--	150	150	124	23	65	97	81	85						
Copier & Scanner	300	--	--	300	800	488	378	623	396	553	514						
Claims Administration Services	--	--	--	--	--	--	--	--	--	--	--						
Self-Insurance Fee	--	--	--	--	--	--	--	--	--	--	--						
Claims Paid-WC	--	--	--	--	--	--	--	--	--	--	--						
Claims Paid-PL	--	--	--	--	--	--	--	--	--	--	--						
Physical Abilities Testing	--	--	--	--	--	--	--	--	--	--	--						
Training	--	--	--	--	--	--	--	--	--	--	--						
First-Aid Program	--	--	--	--	--	--	--	--	--	--	--						
Food Service Training	--	--	--	--	--	--	--	--	--	--	--						
Special Ed Training	--	--	--	--	--	--	--	--	--	--	--						
Bank Charge & WC Penalty Reimb	--	--	--	--	--	--	--	--	--	--	--						
Cobra Premiums	--	--	--	--	--	--	--	--	--	--	--						
Dental Insurance Premiums	--	--	--	--	--	--	--	--	--	--	--						
Vision Insurance Premiums	8,480,000	--	--	8,480,000	8,000,000	7,551,360	6,304,171	5,022,017	3,676,970	4,234,168	4,066,932						
Claim Development Expense	175,000	--	--	175,000	--	154,000	--	69,000	--	22,000	--						
Refund Deposit	--	--	--	--	--	82,870	186,100	--	--	0	--						
<b>Total Operating Expenditures</b>		8,749,623	--	8,749,623	8,107,300	7,855,288	6,557,152	5,125,309	3,758,139	4,321,172	4,094,769						
<b>Net Increase/(Decrease) from Operations</b>		(66,103)	--	(66,103)	92,700	134,399	83,117	33,366	503,347	164,618	261,729						
<b>Non Operating Income/(Expense)</b>																	
Interest Income	69,287			69,287	60,000	65,081	32,240	25,138	50,124	42,992	33,652						
Change in FMV	--	--	--	--	--	(9,006)	(144,491)	--	31,415	22,813	22,751						
Realized Gain/(Loss)	--	--	--	--	--	(3,373)	37,614	--	33	43	43						
GASB 68	--	--	--	--	--	--	--	--	--	--	--						
Interfund Transfer	--	--	--	--	--	--	--	--	--	--	--						
<b>Total Non Operating Income/(Expense)</b>		69,287	\$	--	69,287	60,000	52,702	(74,637)	25,138	81,572	65,848	10,944					
Ending Cash	\$	3,516,455															
<b>Net Increase/(Decrease) in Net Position</b>					3,184	152,700	187,101	8,480	58,504	\$	584,919	\$	230,466	272,673			
<b>0 \$</b>		<b>3,516,455</b>			<b>3,513,271</b>	<b>3,366,948</b>	<b>3,179,846</b>	<b>3,171,366</b>	<b>\$</b>	<b>3,112,863</b>	<b>\$</b>	<b>2,527,944</b>	<b>\$</b>	<b>2,366,970</b>			

**Alameda County Schools Insurance Group (ACSIG)  
Property and Liability  
2024/2025 Budget**

	Budget		Change in Accruals	Budget	2023/2024	2022/2023	2021/2022	2020/2021	2019/2020	2018/2019	2017/2018
	2024/2025	Allocations		2024/2025	Budget	Actuals	Actuals	Actuals	Actuals	Actuals	Actuals
<b>Audited - Beginning Net Position, as of 07/01/2024</b>				\$ 1,168,915							
Beginning Cash and Investments	\$ 1,168,915				789,239	600,577	\$ 675,143	325,945	\$ 126,990	\$ 207,692	\$ 193,468
<b>Operating Revenue:</b>											
Premiums Paid by Members	\$ 3,237,302	\$ --	\$ --	\$ 3,237,302	2,896,093	2,556,062	2,075,729	2,351,431	\$ 1,972,997	\$ 1,474,506	\$ 1,289,628
Total Operating Revenue	3,237,302	--	--	3,237,302	2,896,093	2,556,062	2,075,729	2,351,431	1,972,997	1,474,506	\$ 1,289,628
<b>Operating Expenditures:</b>											
Classified Salaries	43,629	--	--	43,629	39,357	26,647	25,046	23,662	23,199	21,247	\$ 19,808
Statutory Benefits	6,544	--	--	6,544	5,653	3,011	2,496	3,284	2,290	1,494	\$ 2,627
Health & Welfare	7,600	--	--	7,600	2,925	1,950	1,786	6,504	4,774	4,292	\$ 4,751
Employer Tax Expense	771	--	--	771	499	379	338	341	329	304	\$ 283
Net Pension Expense	22,249	--	--	22,249	19,902	8,737	15,152	(13,765)	15,870	19,904	\$ (13,603)
Telephone & Internet	530	--	--	530	555	279	327	323	230	287	\$ 305
Supplies Office	450	--	--	450	400	417	19	327	180	107	\$ 95
Supplies - Other	600	--	--	600	600	251	190	73	60	257	\$ 164
Eligibility Processing	--	--	--	--	--	--	--	--	--	--	\$ -
Brokerage Fees-Dental-ACSIG	--	--	--	--	--	--	--	--	--	--	\$ -
Brokerage Fees-Dental-MD	--	--	--	--	--	--	--	--	--	--	\$ -
Travel and Conferences	1,500	--	--	1,500	600	469	253	143	689	506	\$ 523
Mileage	600	--	--	600	450	325	325	303	364	356	\$ 338
Dues & Memberships	--	--	--	--	--	384	33	--	381	43	\$ 81
Postage & Meter	210	--	--	210	350	--	--	108	--	--	\$ -
Insurance Expense-NCR	3,015,301	--	--	3,015,301	2,350,774	2,097,743	1,987,518	1,935,827	1,697,831	1,363,395	\$ 1,170,873
Utility - Operating-Rent	2,393	--	--	2,393	2,537	1,852	2,470	2,095	1,904	1,844	\$ 1,821
Advertising	--	--	--	--	--	--	--	--	--	--	\$ -
Contract Services	10,091	--	--	10,091	7,500	--	5,050	4,900	--	4,700	\$ -
Contract Services -PL-Investigation	1,000	--	--	1,000	--	--	--	--	--	--	\$ -
Contract Services-PL-Legal	1,000	--	--	1,000	--	--	--	--	--	--	\$ -
Audit Fees	1,164	--	--	1,164	1,150	742	728	715	700	687	\$ 675
Other Services/Operating Expenses	500	--	--	500	--	269	288	162	487	306	\$ 281
Capital Equipment/Depreciation	1,000	--	--	1,000	500	--	--	--	--	--	\$ -
Repairs & Maintenance	250	--	--	250	250	--	--	--	--	--	\$ -
Legal	250	--	--	250	250	--	--	--	--	--	\$ -
Accounting Services	1,000	--	--	1,000	850	824	800	775	750	742	\$ 721
County Courier	160	--	--	160	140	76	209	32	197	194	\$ 178
Shredding	75	--	--	75	75	63	11	--	48	41	\$ 42
Copier & Scanner	300	--	--	300	100	--	--	--	--	--	\$ -
Claims Administration Services	32,000	--	--	32,000	20,000	12,069	12,470	4,411	5,232	12,650	\$ 12,909
Self-Insurance Fee	--	--	--	--	--	--	--	--	--	--	\$ -
Claims Paid - WC	--	--	--	--	--	--	--	--	--	--	\$ -
Claims Paid - PL	110,000	--	--	110,000	100,000	151,492	25,205	10,263	82,411	57,219	\$ 53,650
Safety Inspection	22,000	--	--	22,000	20,000	--	12,819	12,819	12,446	12,446	\$ 12,445
Training	--	--	--	--	--	--	--	--	--	--	\$ -
First-Aid Program	--	--	--	--	--	--	--	--	--	--	\$ -
Food Service Training	--	--	--	--	--	--	--	--	--	--	\$ -
Special Ed Training	--	--	--	--	--	--	--	--	--	--	\$ -
Bank Charge & WC Penalty Reimb	--	--	--	--	--	--	--	--	--	--	\$ -
Cobra Premiums	--	--	--	--	--	--	--	--	--	--	\$ -
Dental Insurance Premiums	--	--	--	--	--	--	--	--	--	--	\$ -
Vision Insurance Premiums	--	--	--	--	--	--	--	--	--	--	\$ -
Claim Development Expense	115,000	--	--	115,000	--	108,430	64,303	17,064	(68,633)	60,981	\$ 21,491
Prior Year Adjustment	--	--	--	--	--	--	--	--	--	--	\$ -
Total Operating Expenditures	3,398,168	--	--	3,398,168	2,575,417	2,416,409	2,157,836	2,010,366	1,781,739	1,564,002	\$ 1,290,457
<b>Net Increase/(Decrease) from Operations</b>	(160,866)	--	--	(160,866)	320,676	139,653	(82,107)	341,065	191,258	(89,496)	(829)
<b>Non Operating Income/(Expense)</b>											
Interest Income	69,287	--	--	69,287	59,000	56,589	7,543	8,133	7,696	8,793	\$ 6,444
Change in FMV	--	--	--	--	--	--	--	--	--	--	\$ -
Realized Gain/(Loss)	--	--	--	--	--	--	--	--	--	--	\$ -
GASB 68	--	--	--	--	--	--	--	--	--	--	\$ -
Interfund Transfer	--	--	--	--	--	--	--	--	--	--	\$ -
Total Non Operating Income/(Expense)	69,287	\$ --	\$ --	69,287	59,000	56,589	7,543	8,133	7,696	8,793	6,444
Ending Cash	\$ 1,077,337										
<b>Net Increase/(Decrease) in Net Position</b>				(91,578)	379,676	196,242	(74,564)	349,198	198,954	(80,703)	5,615
				0 \$ 1,077,337	1,168,915	796,819	600,579	675,143	\$ 325,944	\$ 126,989	199,083

**Alameda County Schools Insurance Group (ACSIG)**  
**Operations**  
**2022/2023 Budget**

	Cash Activity		Change in Accruals	Balance Year to Date	2019/2020 Budget	2018/2019 Budget
	2024/2025	Allocations				
	1/0/00					
<b>Audited - Beginning Net Position, as of 07/01/2024</b>				\$ --		
Beginning Cash and Investments	\$				\$ --	\$ --
<b>Operating Revenue:</b>						
Offset to Rent - Sub Lease	\$	\$	\$ --	\$ --	\$	\$
Total Operating Revenue	--	--	--	--	--	--
<b>Operating Expenditures:</b>						
Classified Salaries						--
Statutory Benefits						--
Health & Welfare						--
Employer Tax Expense						--
Telephone & Internet						--
Supplies Office						
Supplies - Other						
Eligibility Processing						--
Brokerage Fees-Dental-ACSIG						--
Brokerage Fees-Dental-MD						--
Travel and Conferences						--
Mileage						--
Dues & Memberships						--
Postage & Meter						--
Insurance Expense						--
Utility - Operating-Rent						--
Advertising						--
Contract Services - Actuarial						--
Contract Services -PL-Investigation						--
Contract Services-PL-Legal						--
Audit Fees						--
Other Services/Operating Expenses						--
Capital Equipment/Depreciation						
Repairs & Maintenance						
Legal						
Accounting Services						
County Courier						
Shredding						--
Copier & Scanner						--
Claims Administration Services						--
Self-Insurance Fee	--	--	--	--	--	--
Claims Paid-WC	--	--	--	--	--	--
Claims Paid-PL	--	--	--	--	--	--
Physical Abilities Testing	--	--	--	--	--	--
Training	--	--	--	--	--	--
First-Aid Program	--	--	--	--	--	--
Food Service Training	--	--	--	--	--	--
Special Ed Training	--	--	--	--	--	--
Bank Charge & WC Penalty Reimb	--	--	--	--	--	--
Cobra Premiums	--	--	--	--	--	--
Dental Insurance Premiums	--	--	--	--	--	--
Insurance - Vision	--	--	--	--	--	--
Claim Development Expense	--	--	--	--	--	--
Prior Year Adjustment	--	--	--	--	--	--
Total Operating Expenditures	--	--	--	--	--	--
<b>Net Increase/(Decrease) from Operations</b>	--	--	--	--	--	--
<b>Non Operating Income/(Expense)</b>						
Interest Income					--	
Change in FMV					--	
Realized Gain/(Loss)					--	
Interfund Transfer & YE Close						
Total Non Operating Income/(Expense)	--	\$ --	\$ --	--		--
Ending Cash	\$ --					
<b>Net Increase/(Decrease) in Net Position</b>				\$ --	\$ --	\$ --
				0 \$ --	\$ --	\$ --



	Name	Classification	Salary	Health Coverage	Statutory Benefits	Employer Tax Expense	CalPers Liability
<b>ACSIG Staff</b>	Vacant	Executive Director + 2 months Andrew + 2 months Kimberly	\$ 349,491	\$ 31,500.00	\$ 52,423.63	\$ 5,878.50	\$ 97,857.44
	Fund Contribution %	50% From Dental Fund	\$ 174,745	\$ 15,750.00	\$ 26,211.82	\$ 2,939.25	\$ 48,928.72
		30% From WC	\$ 104,847	\$ 9,450.00	\$ 15,727.09	\$ 1,763.55	\$ 29,357.23
		10% From Vision	\$ 34,949	\$ 3,150.00	\$ 5,242.36	\$ 587.85	\$ 9,785.74
		10% From P&L	\$ 34,949	\$ 3,150.00	\$ 5,242.36	\$ 587.85	\$ 9,785.74
	Celina Flotte	Executive Assistant	\$ 86,800	\$ 19,500.00	\$ 13,019.96	\$ 1,835.81	\$ 24,303.92
	Fund Contribution %	80% From Dental Fund	\$ 69,440	\$ 15,600.00	\$ 10,415.96	\$ 1,468.65	\$ 19,443.13
		10% From WC	\$ 8,680	\$ 1,950.00	\$ 1,302.00	\$ 183.58	\$ 2,430.39
		10% From P&L	\$ 8,680	\$ 1,950.00	\$ 1,302.00	\$ 183.58	\$ 2,430.39
	Amy Perry	Claims Assistant	\$ 41,113	\$ 9,750.00	\$ 6,166.97	\$ 932.71	\$ 11,511.67
Fund Contribution %	100% Dental (COBRA)	\$ 41,113	\$ 9,750.00	\$ 6,166.97	\$ 932.71	\$ 11,511.67	
<b>Retirees</b>	Kimberly Dennis	Retiree	\$ -	\$ 25,000.00	\$ -	\$ -	\$ -
	Fund Contribution %	50% From Dental Fund		\$ 12,500.00			
		30% From WC		\$ 7,500.00			
		10% From Vision		\$ 2,500.00			
		10% From P&L		\$ 2,500.00			
	PERS Unfunded Liab.	Misc. PERS Unfunded Liab.					\$ 99,702.00
	Payment % by Fund	50% From Dental Fund					\$ 50,164.00
		30% From WC					\$ 30,098.40
		10% From Vision					\$ 10,032.80
		10% From P&L					\$ 10,032.80

Fund / Type	Personnel Totals				
	Salary	Health Coverage	Statutory Benefits	Employer Tax Expense	CalPers Liability
Dental	\$ 285,298.30	\$ 53,600.00	\$ 42,794.74	\$ 5,340.61	\$ 130,047.52
WC	\$ 113,527.23	\$ 18,900.00	\$ 17,029.08	\$ 1,947.13	\$ 61,886.02
Vision	\$ 34,949.09	\$ 5,650.00	\$ 5,242.36	\$ 587.85	\$ 19,818.54
P&L	\$ 43,629.06	\$ 7,600.00	\$ 6,544.36	\$ 771.43	\$ 22,248.94

**Expense Categories**

Default Apportionment	WC	Dental	Vision	P&L
	10%	75%	10%	5%

Telephone & Internet	\$ 10,600.00	\$ 1,060	\$ 7,950	\$ 1,060	\$ 530
Supplies Office	\$ 9,000.00	\$ 900	\$ 6,750	\$ 900	\$ 450
Supplies - Other	\$ 12,000.00	\$ 1,200	\$ 9,000	\$ 1,200	\$ 600
Eligibility Processing	\$ 265,000.00	100% Dental	\$ -	\$ 265,000	\$ -
Brokerage Fees-Dental-ACSIG	\$ 340,000.00	100% Dental	\$ -	\$ 340,000	\$ -
Brokerage Fees-Dental-HMD	\$ 800,000.00	100% Dental	\$ -	\$ 800,000	\$ -
Travel and Conferences	\$ 30,000.00	\$ 3,000	\$ 22,500	\$ 3,000	\$ 1,500
Mileage	\$ 12,000.00	\$ 1,200	\$ 9,000	\$ 1,200	\$ 600
Dues & Memberships	\$ 9,000.00	\$ 900	\$ 6,750	\$ 900	\$ 450
Postage & Meter	\$ 7,000.00	4%, 90%, 3%, 3%	\$ 280	\$ 6,300	\$ 210
PIPS payroll adjustment	\$ 1,000,000.00	100% WC	\$ 1,000,000	\$ -	\$ -
Utility - Operating-Rent	\$ 47,856.00	\$ 4,786	\$ 35,892	\$ 4,786	\$ 2,393
Advertising	\$ -	\$ -	\$ -	\$ -	\$ -
Contract Services	\$ 31,825.00	\$ 3,183	\$ 23,869	\$ 3,183	\$ 1,591
Contract Services - Vision Actuarial	\$ 3,000.00	100% Vision	\$ -	\$ 3,000	\$ -
Contract Services - Dental Actuarial	\$ 5,000.00	100% Dental	\$ -	\$ 5,000	\$ -
Contract Services - WC Actuarial	\$ 12,000.00	100% WC	\$ 12,000	\$ -	\$ -
Contract Services - P&L Actuarial	\$ 8,500.00	100% P&L	\$ -	\$ -	\$ 8,500
Contract Services - WC Claims Audit	\$ -	100% WC	\$ -	\$ -	\$ -
Contract Services - PL - Investigation	\$ 1,000.00	100% P&L	\$ -	\$ -	\$ 1,000
Contract Services - PL - Legal	\$ 1,000.00	100% P&L	\$ -	\$ -	\$ 1,000
Audit Fees	\$ 23,275.00	\$ 2,328	\$ 17,456	\$ 2,328	\$ 1,164
Other Services/Operating Expenses	\$ 10,000.00	\$ 1,000	\$ 7,500	\$ 1,000	\$ 500
Capital Equipment/Depreciation	\$ 20,000.00	\$ 2,000	\$ 15,000	\$ 2,000	\$ 1,000
Repairs & Maintenance	\$ 5,000.00	\$ 500	\$ 3,750	\$ 500	\$ 250
Legal	\$ 5,000.00	\$ 500	\$ 3,750	\$ 500	\$ 250
Accounting Services	\$ 20,000.00	\$ 2,000	\$ 15,000	\$ 2,000	\$ 1,000
Courier Services	\$ 3,200.00	\$ 320	\$ 2,400	\$ 320	\$ 160
Shredding	\$ 1,500.00	\$ 150	\$ 1,125	\$ 150	\$ 75
Copier & Scanner	\$ 10,000.00	4%, 90%, 3%, 3%	\$ 400	\$ 9,000	\$ 300
Claims Administration Services - PL	\$ 22,000.00	100% P&L	\$ -	\$ -	\$ 22,000
Claims Administration Services - WC	\$ 85,000.00	100% WC	\$ 85,000	\$ -	\$ -
Safety Inspections	\$ 22,000.00	100% P&L	\$ -	\$ -	\$ 22,000
Physical Ability Testing	\$ 50,000.00	100% WC	\$ 50,000	\$ -	\$ -
Accreditation	\$ -	\$ -	\$ -	\$ -	\$ -

Total Other Expenses	WC	Dental	Vision	PL
	\$ 1,172,706	\$ 1,612,992	\$ 28,536	\$ 67,523

**Investment Income - Morgan Stanley**

Amount under Management	Estimated Returns	60%, 20%, 10%, 10%	WC	Dental	Vision	PL
\$ 27,714,904.40	\$ 692,872.61		\$ 415,724	\$ 138,575	\$ 69,287	\$ 69,287

Estimated Growth\* 2.50%

\*Based on Quarterly Portfolio Summary

**Misc. Assumptions**

- CalPers Liability calculated at 28% <https://www.calpers.ca.gov/page/employers/policies-and-procedures/circular-letters/200-021-23>
- Estimated COLA: 0.76% <https://www.calpers.ca.gov/page/employers/actuarial-resources/employer-contributions/public-agency-contributions>
- WC self-insurance fee increase about 7.5% by DIR
- Non-health benefits @ 15%
- New IT support & equipment
- SKETCHERS expansion
- EAP enhancements
- P&L Insurance @ 10% (Anticipate Harder renewal for the excess layer(s))
- AB218 Claim added to PLCA amount

**Contracts / Service Providers**

**Fiscal Year**

Vendor	Services Type	21/22	22/23	23/24	24/25
ACOE - Poney Mail	Courier	\$ 4,200	\$ 1,520	\$ 2,800	\$ 3,200
Bay Actuarial	WC Actuary	\$ 10,000	\$ 10,000	\$ 10,000	\$ 12,000
Bay Actuarial	PL Actuary	\$ 5,000	\$ 5,000	\$ 7,500	\$ 8,500
Healthcare Actuaries	Dental Actuary	\$ -	\$ 4,000	\$ -	\$ 5,000
Healthcare Actuaries	Vision Actuary	\$ -	\$ 1,500	\$ -	\$ 3,000
Keenan	PL claims handling (PLCA)	\$ 18,000	\$ -	\$ -	\$ 22,000
Keenan	WC runoff claims handling	\$ 106,400	\$ 92,400	\$ 87,000	\$ 85,000
Sharp	Copier	\$ 8,500	\$ 6,820	\$ 10,000	\$ 10,000
Keenan	SETECH	\$ 15,500	\$ 16,480	\$ 17,000	\$ 20,000
Shred-It	Secure Shreading	\$ 1,500	\$ 800	\$ 1,500	\$ 1,500
Pitney Bowes	Postage Machine	\$ 3,400	\$ 3,695	\$ 3,500	\$ 3,500
CMS	Phone	\$ 1,300	\$ 1,500	\$ 1,500	\$ 2,000
Steve Wright	Website	\$ 1,000	\$ 1,200	\$ 1,000	\$ 1,500
Keenan	Loss Control - Safety Ins.	\$ 18,819	\$ 19,000	\$ 20,000	\$ 22,000
USI	WC Claims Audit	\$ -	\$ -	\$ 16,100	\$ -
Christy White	Audit	\$ 14,475	\$ 16,500	\$ 23,000	\$ 23,275
AT&T Mobility	Cell Phone	\$ 1,980	\$ 2,000	\$ 4,500	\$ 5,000
Paychex	Payroll	\$ 2,400	\$ 2,400	\$ 2,400	\$ 3,200
Leone & Alberts	Legal	\$ 5,000	\$ 5,000	\$ 5,000	\$ 5,000
Alliant	Dental Underwriting	\$ 293,760	\$ 325,000	\$ 340,000	\$ 340,000
PBIA	Dental Processing	\$ 235,620	\$ 250,000	\$ 255,000	\$ 265,000
Ability USA	Post Offer Program	\$ 50,000	\$ 50,000	\$ 14,000	\$ 50,000
Triuam Partners	Rent	\$ 42,150	\$ 47,820	\$ 40,296	\$ 42,856
All Safe Storage	Storage	\$ 2,725	\$ 3,000	\$ 3,200	\$ 3,500
Comcast	Internet	\$ 3,060	\$ 3,200	\$ 3,600	\$ 3,600
Avast	Subscription anti-virus	\$ 90	\$ 125	\$ 125	\$ 125
Ed Lockhart	IT Support	\$ -	\$ -	\$ -	\$ 20,000
CAJAPA	Accreditation	\$ -	\$ -	\$ 7,500	\$ -

Rent Calculation	July 2024 - October 2024	\$8,000	\$ 32,000
	November 2024 - June 2025	\$8,320	\$ 66,560
	Sublease	-\$4,642	\$ (55,704)
			\$ 42,856



## Alameda County Schools Insurance Group

P.O. Box 2487

Dublin, CA 94568

Phone (925) 225-1030

Fax (292) 225-0653

[www.acsig.com](http://www.acsig.com)

### Executive Summary: ACSIG Salaries & Benefits

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: ACSIG Salaries & Benefits

In 2019, the Executive Committee established the following formula for annual ACSIG compensation schedule increases:

*The schedule will be adjusted each July 1 at a minimum of 50% of the State funded Cost of Living Adjustment ("COLA") in the Governor's budget for that fiscal year. At April 30 of each fiscal year, the weighted average of the salary/benefit increases settled with the teachers' union by member agencies will be calculated. If the annualized weighted average is greater than the previously calculated increase (50% of the State Funded COLA), the schedule will be adjusted to match the annualized weighted average calculation retroactive to July 1 of that program year. Prior year certified enrollment count will be used in the weighted average calculation.*

The Governor's 2023-2024 budget funded COLA at 8.22%.<sup>1</sup> ACSIG increased its 2023-2024 salary schedule by 4.07% on July 1, 2024, except for the Executive Assistant Schedule, which was raised by 10% to conclude a series of superseding adjustments dictated by a 21/22 classification study.

The member's weighted average was 7.06% as calculated by the Alameda County Office of Education.

Based on those numbers, ACSIG Staff recommends a 7.06% increase. Proposed pay schedules are included in this packet.

The Executive Committee will be asked for a recommendation to the Full Board.

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<sup>1</sup> <https://www.cde.ca.gov/fg/aa/pa/lcffcola.asp>

**ACSIG Salary Schedule  
2023/24**

effective 7/1/2023

	1	2	3	4	5
Executive Director - per contract					
annual	\$ 262,541				
monthly	\$ 21,878.42				
Transitional Executive Director - per contract					
annual	\$ 219,777				
monthly	\$ 18,314.75				
Claims Assistant					
annual	\$ 67,138	\$ 70,494	\$ 74,019	\$ 77,720	\$ 81,606
monthly	\$ 5,594.79	\$ 5,874.53	\$ 6,168.26	\$ 6,476.67	\$ 6,800.50
Claims Examiner					
Executive Assistant to Executive Director					
annual	\$ 72,019	\$ 75,002	\$ 78,051	\$ 81,169	\$ 86,145
monthly	\$ 6,001.58	\$ 6,250.17	\$ 6,504.25	\$ 6,764.08	\$ 7,178.75
Clerical/Office Ass	\$ 32.28	per hour			

Board approved increase of 7.06%

## 2023/2024 Retro Salary Calculation

Funded COLA for 23-24 is 8.13%. Therefore, payrolls increased by 50% (4.07%) of that amount.

Executive Assistant increased 10%

### Voluntary Deductions

**Calculated Increase as of 4/30/24                      7.06%**

Kimberly	22/23 salary	\$245,228.00		
	23/24 salary (July)	\$255,209.00		
	23/24 Salary Recalculated	\$262,541.10		
	Retro Amount	\$7,332.10		\$586.57
Andrew	23/24 Salary (Jan - June)	\$106,698.00		
	23/24 Salary Recalculated	\$109,888.27		
	Retro Amount	\$3,190.27		\$255.22
Celina	no increase as calculation < 10%			
Amy	22/23 salary	\$38,112.50		
	23/24 salary (July)	\$39,664.00		
	23/24 Salary Recalculated	\$40,803.24		
	Retro Amount	\$1,139.24		\$88.29

PERS

	Salary	Benefits	Total
Total cost	\$25,972.12	\$5,973.59	\$31,945.71
Cost less advance	\$11,661.61	\$2,682.17	\$14,343.78

Alameda USD							
	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
2018-19	5.04%						
2019-20		2.00%					
2019-20 Contingency		1.00%					
2020-21 Contingency		0.50%					
2020-21			8.00%				
2021-22				1.00%			
2022-23					6.53%		
2023-24						6.50%	
2024-25							
Total	5.04%	3.50%	8.00%	1.00%	6.53%	6.50%	
Albany USD							
	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
2018-19	0.00%						
2019-20		0.00%					
2020-21			0.00%				
2021-22							
2022-23					9.50%		
2023-24							
2024-25							
Total	0.00%	0.00%	0.00%	0.00%	9.50%	0.00%	
Castro Valley USD							
	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
2018-19	0.00%						
2019-20							
2020-21			0.00%				
2021-22				3.85%			
2022-23					7.00%		
2023-24						8.56%	
2024-25							
Total	0.00%	0.00%	0.00%	3.85%	7.00%	8.56%	
Dublin USD							
	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
2018-19	0.00%						
2019-20		0.00%					
2020-21			0.00%				
2021-22							
2022-23					9.5600%		
2023-24							
2024-25							
Total	0.00%	0.00%	0.00%	0.00%	9.56%	0.00%	
Emery USD							
	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
2018-19	0.00%						
2019-20		0.00%					
2020-21			0.00%				
2021-22							
2022-23					2%		
2023-24							
2024-25							
Total	0.00%	0.00%	0.00%	0.00%	2.00%	0.00%	
Fremont USD							
	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
2018-19	1.00%						
2018-19	0.75%						
2019-20		1.00%					
2019-20		0.75%					
2020-21							
2021-22							
2022-23					6.00%		
2023-24						7.22%	
2024-25							
Total	1.75%	1.75%	0.00%	0.00%	6.00%	7.22%	
Livermore Valley USD							
	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
2018-19	2.00%						
2019-20		1.00%					
2019-20		1.00%					
2020-21							
2021-22				3.00%			
2022-23					7.00%		
2023-24						9.00%	
2024-25							
Total	2.00%	2.00%	0.00%	3.00%	7.00%	9.00%	
Mountain House USD							
	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
2018-19	0.00%						
2019-20		0.00%					

6.0% on schedule + .53% equivalent benefit increase  
6% retro to 7/1 + 1% retro to 1/1/24

Benefit increase estimated at 1.56%

1.5% Effective 1/1/19

1.5% effective 1/1/20

2% Effective 1/1/20

6% 3/1/23 + 3% 7/1/23

2020-21			0.00%				
2021-22							
2022-23							
2023-24							
2024-25							
Total	0.00%	0.00%	0.00%	0.00%			

New Haven USD							
	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
2018-19	1.50%						
2019-20		1.00%					
2020-21			0.00%				
2021-22				2.50%			
2022-23					7.00%		
2023-24						4.00%	
2024-25							
Total	1.50%	1.00%	0.00%	2.50%	7.00%	4.00%	

3% effective 1/1/19

Newark USD							
	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
2018-19	0.50%						
2019-20		1.00%					
2019-20		0.58%					
2020-21			1.00%				
2021-22				1.00%			
2021-22				0.88%			
2022-23					10.00%		
2023-24						4.00%	
2024-25							
Total	0.50%	1.58%	1.00%	1.88%	10.00%	4.00%	

1% effective 2/1/20  
1% effective 2/1/22  
2% 7/1/23 + 4% 1/1/24

Piedmont USD							
	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
2018-19	0.00%						
2019-20		0.00%					
2020-21			0.00%				
2021-22				2.50%			
2022-23					7.50%		
2023-24							
2024-25							
Total	0.00%	0.00%	0.00%	2.50%	7.50%	0.00%	

Pleasanton USD							
	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
2018-19	0.00%						
2019-20		0.00%					
2020-21			0.00%				
2021-22				4.50%			
2022-23					5.50%		
2023-24						7.00%	
2024-25							
Total	0.00%	0.00%	0.00%	4.50%	5.50%	7.00%	

3.5% on schedule + 2% equivalent benefit increase  
4.5% 7/1/23 + 5% 1/1/24

San Leandro USD							
	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
2018-19	0.00%						
2019-20		0.00%					
2020-21			0.00%				
2021-22				4.50%			
2022-23					10.25%		
2023-24						10.00%	
2024-25							
Total	0.00%	0.00%	0.00%	0.00%	10.25%	10.00%	

San Lorenzo USD							
	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
2018-19	0.00%						
2019-20		0.00%					
2020-21			0.00%				
2021-22							
2022-23					15%		
2023-24						5.00%	
2024-25							
Total	0.00%	0.00%	0.00%	0.00%	15.00%	5.00%	

Sunol Glen USD							
	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
2018-19	0.00%						
2019-20		0.00%					
2020-21			0.00%				
2021-22							
2022-23							
2023-24						6.00%	
2024-25							
Total	0.00%	0.00%	0.00%	0.00%	0.00%	6.00%	

Salary Increases - ACSIG				
<b>School District</b>	<b>2023-24 Salary Increase Settlement</b>	<b>2022-23 Enrollment</b>	<b>Amount</b>	
Alameda Unified (see attached)	6.50%	8,830	573.95	
Albany City Unified	0.00%		0.00	3529
Castro Valley Unified	8.56%	9,207	788.12	
Dublin Unified	0.00%		0.00	12557
Emery Unified	0.00%		0.00	627
Fremont Unified (see attached)	7.22%	32,706	2,361.37	
Livermore Valley Joint Unified (see attached)	9.00%	12,956	1,166.04	
Mountain House Unified				21
New Haven Unified (see attached)	4.00%	10,235	409.40	
Newark Unified (see attached)	4.00%	4,955	198.20	
Piedmont Unified	0.00%		0.00	2336
Pleasanton Unified	7.00%	13,876	971.32	
San Leandro Unified	10.00%	8,624	862.40	
San Lorenzo Unified	5.00%	8,477	423.85	
Sunol Glen Unified	6.00%	268	16.08	
<b>Total</b>		<b>110,134</b>	<b>7,770.73</b>	
<b>Weighted Average</b>			<b>7.06%</b>	



## AGREEMENT

This Agreement is made on July 1, 2023, by and between the ALAMEDA COUNTY SCHOOLS' INSURANCE GROUP, a joint powers authority pursuant to the laws of the State of California, (hereinafter "ACSIG") and Kimberly Dennis (hereinafter "Executive Director"). As established in its chartering Joint Powers Agreement, ACSIG is governed by a Joint Powers Board with a standing Executive Committee responsible for on-going operations.

### 1. TERM OF AGREEMENT

ACSIG hereby engages the services of Executive Director from July 1, 2023 – June 30, 2024, subject to the terms and conditions of this Agreement. This Agreement will be evaluated by June 30, 2024. This Agreement may be renewed automatically for succeeding terms of three (3) years each with a positive evaluation of the Executive Director given by the Executive Committee. Agreement may be terminated by either party by written notice given to the other at least three months prior to its termination date. If any such notice shall be given, this Agreement shall terminate on the next succeeding June 30.

The Executive Director shall be subject to the control and direction of the ACSIG Joint Powers Board as implemented through the ACSIG Executive Committee.

### 2. SALARY

The Executive Director's annualized salary shall be \$262,541.

The schedule will be adjusted each July 1 at a minimum of 50% of the State funded Cost of Living Adjustment (COLA) in the Governor's budget for that fiscal year. At April 30 of each fiscal year, the weighted average of the salary/benefit increases settled with the teachers' union by member agencies will be calculated. If the annualized weighted average is greater than the previously calculated increase (50% of the State Funded COLA), the schedule will be adjusted to match the annualized weighted average calculation retroactive to July 1 of that program year. Prior year certified enrollment count will be used in the weighted average calculation.

### 3. DUTIES AND RESPONSIBILITIES

The Executive Director shall perform all duties of the Executive Director as described in the job description attached here as Exhibit "A" and incorporated herein by this reference. The Executive Director shall be subject to those personnel policies that do not conflict with the terms of this Agreement

#### 4. PROFESSIONAL DEVELOPMENT

The Executive Director is expected to actively pursue professional development. This includes formal and informal training as well as attendance at appropriate professional meetings at local, state and national levels. The Executive Director will seek advance approval of the Executive Committee for professional development and periodically report to the Executive Committee on the appraisal of such opportunities.

#### 5. MEMBERSHIP

ACSIG will support individual membership in approved professional organizations, not to exceed \$2,000 per year. The Executive Director shall submit requests for membership(s) to the Executive Committee.

#### 6. EXPENSE REIMBURSEMENT

ACSIG will reimburse the Executive Director for actual necessary expenses she incurred within the scope of her employment so long as such expenses are permitted by ACSIG policy or incurred with prior approval of the Executive Committee.

#### 7. AUTOMOBILE EXPENSES

The Executive Director is required to have a vehicle available at all times to exercise the powers and to perform the duties of the position. Therefore, the Executive Director shall be entitled to a \$500.00 monthly vehicle allowance as reimbursement for reasonable transportation expenses incurred during employment-related travel within the geographic confines of Alameda County. Reimbursement for the required travel outside the confines of ACSIG will be paid in accordance with the term of ACSIG policy.

#### 8. FRINGE BENEFITS

The Executive Director shall be entitled to receive an amount not to exceed \$19,500 annually to purchase health, dental and vision benefits as are provided to other ACSIG employees consistent with current ACSIG policy or the equivalent of the cost of premiums for such benefits as salary, to the extent permitted by law.

#### 9. RETIREE BENEFITS

Upon retirement and after 10 years of service, ACSIG will provide the Executive Director single-member medical, dental and vision coverage until age 65.

## 10. SICK LEAVE

The Executive Director shall earn (8) hours of sick leave each month, which may be carried forward from year to year.

## 11. VACATION LEAVE/HOLIDAYS

The Executive Director shall be required to render twelve months of full and regular service to ACSIG one and eighty-three hundredths (1.83) days of vacation with pay per month, to a maximum of accrual of twenty-five (25) days. The Executive Director will also be entitled to all ACSIG holidays as designated by the ACSIG Executive Committee. If this Agreement is terminated, the Executive Director shall be compensated for all unused accrued vacation at the salary rate effective at the time of termination, approval of the Board President shall be obtained prior to the use of vacation time.

## 12. EVALUATION

At the end of the first six months after the hiring date, the Executive Committee of ACSIG shall evaluate and assess in writing the performance of the Executive Director.

The Executive Committee of ACSIG shall subsequently evaluate and assess in writing the performance of the Executive Director at least once a year during the term of this Agreement. The evaluation period shall be from July 1 to June 30 of each year and shall be reasonably related to the job description of the Executive Director and the goals and objectives of the Executive Director for the year in question.

In the event that the Executive Committee, collectively, determines that the performance of the Executive Director is unsatisfactory, it shall describe in writing said unsatisfactory performance. The evaluation shall include recommendations as to areas of improvement where the Executive Committee deems performance to be unsatisfactory and all other instances where the Executive Committee deems such to be necessary or appropriate.

A copy of the written evaluation shall be delivered to the Executive Director and the Executive Director shall have the right to make a written response to the evaluation, which shall become a permanent attachment to the Executive Director's personnel file. Within thirty (30) days of the delivery of the written evaluation of the Executive Director, the Board shall meet with the Executive Director to discuss the evaluation.

In the event that the Executive Committee's evaluation of the Executive Director's performance is unsatisfactory, the Executive Director shall be given a reasonable time to

correct her performance. If the Executive Committee determines that the Executive Director's performance continues to be unsatisfactory, it may make a recommendation to the Joint Powers Board to terminate this Agreement by giving sixty (60) days notice to the Executive Director.

### 13. CHANGES OR TERMINATION OF AGREEMENT

The agreement is subject to modification by mutual written agreement at any time. This Agreement may be terminated by any of the following events:

- a. Mutual written agreement of the parties
- b. Retirement or death of the Executive Director
- c. Disqualifying disability of the Executive Director. The Executive Director may be removed from the position by ACSIG should the Executive Director be unable to perform the essential function of this position due to physical and/or mental condition as documented in a written evaluation by a licensed physician selected by ACSIG that indicates: (1) the inability of the Executive Director to further serve; or (2) the inability to serve for at least six (6) months as Executive Director; or (3) that the Executive Director is eligible for ACSIG disability policy.
- d. Severability. If any provision of this Agreement is held to be invalid or unenforceable by a court of competent jurisdiction, the remaining provisions of the Agreement shall continue in force and effect.

IN WITNESS WHEREOF, the parties hereto enter into this Agreement.

ON BEHALF OF THE GOVERNING BOARD OF THE ALAMEDA COUNTY SCHOOLS' INSURANCE GROUP

By: \_\_\_\_\_  
Kevin Collins, President

Date: \_\_\_\_\_

I hereby accept this offer of employment and agree to comply with the conditions thereof and to fulfill all of the duties of employment of the Executive Director.

By: \_\_\_\_\_  
Kimberly Dennis, Executive Director

Date: \_\_\_\_\_

## Exhibit "A"

### Alameda County Schools Insurance Group "A Joint Powers Authority"

#### DUTIES OF THE EXECUTIVE DIRECTOR

The Executive Director provides leadership for the Alameda County Schools Insurance Group ("ACSIG"). Under the general direction of the Joint Powers Authority ("JPA") Executive Committee, the Executive Director plans, organizes, manages and directs the insurance programs for participating JPA members; coordinates, supervises, and provides staff support services including management of programs of workers' compensation, property, liability, and employee dental and vision benefits as well as supervision and review of third-party claims processing. The Executive Director provides advisory services to members of the JPA; supervises staff; and performs various related duties.

#### DUTIES

Duties may include, but are not limited to, the following:

1. Administers all affairs of ACSIG, including preparation of agendas and minutes for Board of Director and Executive Committee meetings and maintains all necessary files and records.
2. Plans, develops, recommends, and enforces policies, regulations, operational procedures.
3. Supervises activities of JPA employees
4. Prepares and administers annual budget and assumes financial accountability for JPA funds.
5. Serves as a member of all JPA committees.
6. Acts as a spokesperson for the JPA to member districts, governing boards, related industry contacts, the media, and the public.
7. Plans, develops and recommends procedures for the administrative operations of the comprehensive risk management program.
8. Establishes and maintains a countywide loss control program with emphasis on accident prevention.
9. Evaluates existing coverage's and recommends additional coverage or cost effective changes.
10. Monitors insurance programs to ensure effectiveness of brokers or claims administrators.
11. Analyzes exposure of JPA members to various types of casualty losses.
12. Analyzes risk associated with member districts and recommends and obtains insurance as appropriate.
13. Provides on-going studies of feasibility of alternate programs.

14. Conducts continuous analyses to determine areas in which self insurance would be advantageous.
15. Keeps abreast of changes in the field of risk management and incorporates changes as appropriate.
16. Manages the program for workers' compensation, property, and liability insurance, and employee dental and vision benefits.
17. Negotiates rates, administrative fee schedules, administrative agreements, premiums, policy terms, and claims processing with insurance brokers and administrators.
18. Works with various staff to ensure employee safety.
19. Assists with employee safety and loss control programs.
20. Supervises the development and implementation of systematic claims processing records and control program.
21. Develops standards and procedures.
22. Provides technical expertise.
23. Works with a third-party administrator.
24. Performs various related duties.

## QUALIFICATIONS

### Demonstrated knowledge of:

1. Principles, practices, procedures and laws governing JPA operations.
2. Preparation, analysis, and review of JPA financial statements and budgets in accordance with Governmental Accounting Standards.
3. Self-insured and other alternative risk financed workers' compensation programs.
4. Principles and procedures of liability claims processing.
5. Principles of supervision, training, and performance evaluation.
6. Financial and other statistical analysis.
7. Budgeting procedures and techniques.
8. Modern office procedures, methods, and computer equipment.
9. Program development, operations, funding and maintenance.
10. Excellent interpersonal and meeting facilitation skills.
11. Working for or with school districts.

### Demonstrated ability to:

1. Design work and programs with conceptualization and creativity.
2. Organize, direct and implement comprehensive risk managements, general insurance, and liability claims programs.
3. Organize and deliver presentations to school boards and related type meetings.
4. Supervise, train and evaluate assigned staff.
5. Interpret and make decisions in accordance with appropriate laws, rules and priorities.
6. Evaluate complex claims and establish adequate reserves.
7. Compile and maintain accurate and complete records and reports.
8. Communicate clearly and concisely both orally and in writing.

9. Establish and maintain cooperative working relationships with those contacted in the course of work.

**Education and Experience:**

1. A Bachelor's Degree from an accredited college or University with major coursework in public or business administration or a related field.
2. Five years of on-the-job management experience of increasing responsibility in an organization of similar size and scope is required.

## EMPLOYMENT AGREEMENT

This Agreement is made on November 13, 2023 by and between the ALAMEDA COUNTY SCHOOLS' INSURANCE GROUP, a joint powers authority pursuant to the laws of the State of California, (hereinafter "ACSIG") and Andrew Scott Lathrop ("Executive Director").

This Agreement establishes the terms and conditions of the Executive Director's employment with ACSIG. Whereas the Executive Director shall be subject to the control and direction of the ACSIG Joint Powers Board as implemented through the ACSIG Executive Committee. As Established in its chartering Joint Powers Agreement, ACSIG is governed by a Joint Powers Board with a standing Executive Committee responsible for on-going operations.

In this Agreement ACSIG and the Executive Director are collectively referred to as the "parties".

### **1. TERM**

On January 1, 2024, ACSIG hereby engages the services of Executive Director to perform duties outlined in Exhibit A subject to the terms and conditions of the Agreement. By June 30 of each year, ACSIG's Executive Committee will evaluate this agreement and issue an evaluation to the Executive Director. With a positive evaluation of the Executive Director, this Agreement may be renewed automatically for an additional term of one year from July 1 through June 30. This Agreement may be terminated by either party by written notice given to the other at least three months prior to its termination date. If any such notice shall be given, this Agreement shall terminate on the next succeeding June 30. The Executive Director shall be subject to the control and direction of the ACSIG Joint Powers Board as implemented through the ACSIG Executive Committee.

### **2. SALARY**

The schedule for the Executive Director's annualized salary shall be in accordance with Exhibit B. The Executive Director's initial annualized salary will begin at \$219,777.

The schedule will be adjusted each July 1 at a minimum of 50% of the State funded Cost of Living Adjustment (COLA) in the Governor's budget for that fiscal year. At April 30 of each fiscal year, the weighted average of the salary/benefit increases settled with the teachers' union by member agencies will be calculated. If the annualized weighted average is greater than the previously calculated increase (50% of the State Funded COLA), the schedule will be adjusted to match the annualized weighted average calculation retroactive to July 1 of that program year. Prior year certified enrollment count will be used in the weighted average calculation.

### **3. DUTIES AND RESPONSIBILITIES**



The Executive Director shall perform all duties of the Executive Director as described in the job description attached here as Exhibit "A" and incorporated herein by this reference. The Executive Director shall be subject to those personnel policies that do not conflict with the terms of this Agreement

**4. PROFESSIONAL DEVELOPMENT**

The Executive Director is expected to actively pursue professional development. This includes formal and informal training as well as attendance at appropriate professional meetings at local, state and national levels. The Executive Director will seek advance approval of the Executive Committee for professional development and periodically report to the Executive Committee on the appraisal of such opportunities.

**5. MEMBERSHIP**

ACSIG will support individual membership in approved professional organizations, not to exceed \$2,000 per year. The Executive Director shall submit requests for membership(s) to the Executive Committee.

**6. EXPENSE REIMBURSEMENT**

ACSIG will reimburse the Executive Director for actual necessary expenses incurred within the scope of employment so long as such expenses are permitted by ACSIG policy or incurred with prior approval of the Executive Committee.

**7. AUTOMOBILE EXPENSES**

The Executive Director is required to have a vehicle available at all times to exercise the powers and to perform the duties of the position. Therefore, the Executive Director shall be entitled to a \$500.00 monthly vehicle allowance as reimbursement for reasonable transportation expenses incurred during employment-related travel within the geographic confines of Alameda County. Reimbursement for the required travel outside the confines of ACSIG will be paid in accordance with the term of ACSIG policy.

**8. FRINGE BENEFITS**

The Executive Director shall be entitled to receive an amount not to exceed \$19,500 annually to purchase health, dental and vision benefits as are provided to other ACSIG employees consistent with current ACSIG policy . In the event the Executive Director has health benefits provided outside of ACSIG, the equivalent of the cost of premiums

for such benefits (not to exceed \$19,500 annually) will be treated as salary, to the extent permitted by law.

**9. SICK LEAVE**

The Executive Director shall earn (8) hours of sick leave each month, which may be carried forward from year to year.

**10. VACATION LEAVE/HOLIDAYS**

The Executive Director shall be required to render twelve months of full and regular service to ACSIG one and eighty-three hundredths (1.50) days of vacation with pay per month, to a maximum of accrual of twenty-five (25) days. After 5 years of employment, vacation leave will be earned at one and sixty seven hundredths (1.67) days of vacation with pay per month. After 10 years of employment, vacation leave will be earned at one and eighty three hundredths (1.83) days of vacation with pay per month. After 15 years of employment, vacation leave will be earned at two and eight three thousandths (2.083) days of vacation with pay per month.

The Executive Director will also be entitled to all ACSIG holidays as designated by the ACSIG Executive Committee and three (3) floating holidays per year. If this Agreement is terminated, the Executive Director shall be compensated for all unused accrued vacation at the salary rate effective at the time of termination. Vacation approval of the Board President shall be obtained prior to the use of vacation time exceeding 5 days.

**11. EVALUATION**

At the end of the first six months after the hiring date, the Executive Committee of ACSIG shall evaluate and assess in writing the performance of the Executive Director. The Executive Committee of ACSIG shall subsequently evaluate and assess in writing the performance of the Executive Director at least once a year during the term of this Agreement. The evaluation period shall be from July 1 to June 30 of each year and shall be reasonably related to the job description of the Executive Director and the goals and objectives of the Executive Director for the year in question.

In the event that the Executive Committee, collectively, determines that the performance of the Executive Director is unsatisfactory, it shall describe in writing said unsatisfactory performance. The evaluation shall include recommendations as to areas of improvement where the Executive Committee deems performance to be unsatisfactory and all other instances where the Executive Committee deems such to be necessary or appropriate.

A copy of the written evaluation shall be delivered to the Executive Director and the Executive Director shall have the right to make a written response to the evaluation, which shall become a permanent attachment to the Executive Director's personnel file. Within thirty (30) days of the delivery of the written evaluation of the Executive Director, the Board shall meet with the Executive Director to discuss the evaluation.

In the event that the Executive Committee's evaluation of the Executive Director's performance is unsatisfactory, the Executive Director shall be given a reasonable time to correct performance. If the Executive Committee determines that the Executive Director's performance continues to be unsatisfactory, it may make a recommendation to the Joint Powers Board to terminate this Agreement by giving sixty (60) days notice to the Executive Director.

**12. CHANGES OR TERMINATION OF AGREEMENT**

The agreement is subject to modification by mutual written agreement at any time. This Agreement may be terminated by any of the following events:

- a. Mutual written agreement of the parties
- b. Retirement or death of the Executive Director
- c. Disqualifying disability of the Executive Director. The Executive Director may be removed from the position by ACSIG should the Executive Director be unable to perform the essential function of this position due to physical and/or mental condition as documented in a written evaluation by a licensed physician selected by ACSIG that indicates: (1) the inability of the Executive Director to further serve; or (2) the inability to serve for at least six (6) months as Executive Director; or (3) that the Executive Director is eligible for ACSIG disability policy.
- d. Severability. If any provision of this Agreement is held to be invalid or unenforceable by a court of competent jurisdiction, the remaining provisions of the Agreement shall continue in force and effect.

IN WITNESS WHEREOF, the parties hereto enter into this Agreement.

ON BEHALF OF THE GOVERNING BOARD OF THE ALAMEDA COUNTY SCHOOLS' INSURANCE GROUP

By: \_\_\_\_\_  
Kevin Collins, President

Date: \_\_\_\_\_

I hereby accept this offer of employment and agree to comply with the conditions thereof and to fulfill all of the duties of employment of the Executive Director.

By: \_\_\_\_\_  
Andrew Lathrop, Executive Director

Date: \_\_\_\_\_

# Exhibit A

## Alameda County Schools Insurance Group “A Joint Powers Authority”

### DUTIES OF THE EXECUTIVE DIRECTOR

The Executive Director provides leadership for the Alameda County Schools Insurance Group (ACSIG). Under the general direction of the Joint Powers Authority (JPA) Executive Committee, the Executive Director plans, organizes, manages and directs the insurance programs for participating JPA members; coordinates, supervises and provides staff support services including management of programs of workers' compensation, property, liability and employee dental and vision benefits as well as supervision and review of third-party claims processing. The Executive Director provides advisory services to members of the JPA; supervises support staff; and performs various related duties.

### DUTIES

Duties may include, but are not limited to, the following:

1. Administers all affairs of ACSIG, including preparation of agendas and minutes for Board of Directors and Executive Committee meetings and maintains all necessary files and records
2. Plans, develops, recommends and enforces policies, regulation and operational procedures
3. Supervises activities of JPA employees
4. Prepares and administers annual budget and assumes financial accountability for JPA funds
5. Serves as a member of all JPA committees
6. Acts as a spokesperson for the JPA to members districts, governing boards, related industry contact, the media and the public
7. Plans, develops and recommends procedures for the administrative operations of the comprehensive risk management program.
8. Establishes and maintains a countywide loss control program with emphasis on accident prevention.
9. Evaluates existing coverages and recommends additional coverage or cost-effective changes.

10. Monitors insurance programs to ensure effectiveness of brokers or claims administrators
11. Analyzes exposure of JPA members to various types of casualty losses
12. Analyzes risk associated with member districts and recommends and obtains insurance as appropriate
13. Provides on-going studies of the feasibility of alternate programs
14. Conducts continuous analyses to determine areas in which self-insurance would be advantageous
15. Keeps abreast of changes in the field of risk management and incorporates changes as appropriate
16. Manages the program for workers' compensation, property and liability insurance and employee dental and vision benefits
17. Negotiates rates, administrative fee schedules, administrative agreements, premiums, policy terms, and claims processing with insurance brokers and administrators
18. Manages state-wide Dental and Vision programs including monitoring accuracy of billings and payments
19. Works with Delta Dental and VSP to ensure all programs meet the needs of membership
20. Markets Dental and Vision Coalitions to prospective agencies
21. Works with various staff to ensure employee safety
22. Researches and implements innovative programs to address employee safety
23. Assists with implementation of prevention programs
24. Supervises the development and implementation of systematic claims processing records and control program
25. Develops standards and procedures
26. Provides technical expertise
27. Works with a third-party administrator
28. Performs various related duties.

#### QUALIFICATIONS:

##### Demonstrated knowledge of:

1. Principles, practices, procedures and laws governing JPA operations.
2. Preparation, analysis and review of JPA financial statements and budgets in accordance with Governmental Accounting Standards
3. Self-insured and other alternative risk financed workers' compensation programs.
4. Principles and procedures of liability claims processing.
5. Principles of supervision, training and performance evaluations.
6. Financial and other statistical analysis
7. Budgeting procedures and techniques.
8. Modern office procedures, methods and computer equipment
9. Program development, operations, funding and maintenance.
10. Excellent interpersonal and meeting facilitation skills.
11. Working for or with school districts.

Demonstrated Ability to:

1. Design work and programs with conceptualization and creativity
2. Organize, direct and implement comprehensive risk management, general insurance and liability claims programs.
3. Organize and deliver presentations to school boards and related type meetings.
4. Supervise, train and evaluate assigned staff
5. Interpret and make decisions in accordance with appropriate laws, rules and priorities.
6. Evaluate complex claims and establish adequate reserves.
7. Compile and maintain accurate and complete records and reports.
8. Communicate clearly and concisely, both orally and in writing.
9. Establish and maintain cooperative working relationships with those contacted in the course of work.

EDUCATION AND EXPERIENCE:

1. A Bachelor's Degree from an accredited college or university with major coursework in public or business administration or a related field.
2. Five years of on-the-job management experience of increasing responsibility in an organization of similar size and scope is required.

# Exhibit B

## ACSIG Salary Schedule 2023/24

effective 7/1/2023

		1	2	3	4	5
Executive Director - per contract						
	annual	\$ 262,541				
	monthly	\$ 21,878.42				
Transitional Executive Director - per contract						
	annual	\$ 219,777				
	monthly	\$ 18,314.75				
Claims Assistant						
	annual	\$ 67,138	\$ 70,494	\$ 74,019	\$ 77,720	\$ 81,607
	monthly	\$ 5,594.79	\$ 5,874.53	\$ 6,168.26	\$ 6,476.67	\$ 6,800.50
Claims Examiner						
Executive Assistant to Executive Director						
	annual	\$ 72,019	\$ 75,002	\$ 78,051	\$ 81,169	\$ 86,145
	monthly	\$ 6,001.58	\$ 6,250.17	\$ 6,504.25	\$ 6,764.08	\$ 7,178.75
Clerical/Office Assistant		\$ 31.38	per hour			



## Alameda County Schools Insurance Group

P.O. Box 2487

Dublin, CA 94568

Phone (925) 225-1030

Fax (925) 225-0653

[www.acsig.com](http://www.acsig.com)

### **Executive Summary: Meeting Calendar 2024-2025**

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subject: Meeting Calendar 2024-2025

The proposed ACSIG Meeting Calendar is included in this packet for review. The Executive Director developed this Calendar based on past calendars and the ACOE's business office calendar.

The Executive Committee will be asked for a recommendation to the Full Board.





## 2024/ 2025 Calendar DRAFT

November 14, 2024    **Executive Committee**    9:30am – 12:00pm

November 21, 2024    **Full Board**    12:00pm – 3:00pm

February 13, 2025    **Executive Committee**    9:30am – 12:00pm

May 15, 2025    **Executive Committee**    9:30am – 12:00pm

May 22, 2025    **Full Board**    12:00pm – 3:00pm



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**Executive Summary: ACSIG Calendar 2024-2025**

To: ACSIG Executive Committee  
 From: Kimberly Dennis  
 Date: May 16, 2024  
 Subj.: ACSIG Calendar 2024-2025

The proposed ACSIG Calendar is included in this packet for review. The Executive Director developed this calendar based on past calendars and the ACOE’s 2024-2025 Holiday calendar for Management Employees.

Proposed ACSIG holidays are:

<b>Date(s)</b>	<b>Description</b>
Thursday July 4	Independence Day
Monday September 2	Labor Day
Monday November 11	Veterans Day
Thursday November 28	Thanksgiving Day
Friday November 29	Thanksgiving Holiday
Tuesday December 24	Christmas Eve
Wednesday December 25	Christmas Day
Thur Dec 26 – Tue Dec 31	Winter Closure
Wednesday January 1	New Year’s Day
Monday January 20	Martin Luther King Jr. Day
Friday February 14	Lincoln Day
Monday February 17	Washington Day
Monday May 26	Memorial Day
Thursday June 19	Juneteenth

The Executive Committee will be asked for a recommendation to the Full Board.

# 2024/25 Fiscal Year Calendar

July 2024						
Su	Mo	Tu	We	Th	Fr	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

August 2024						
Su	Mo	Tu	We	Th	Fr	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

September 2024						
Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

October 2024						
Su	Mo	Tu	We	Th	Fr	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

November 2024						
Su	Mo	Tu	We	Th	Fr	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

December 2024						
Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

January 2025						
Su	Mo	Tu	We	Th	Fr	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

February 2025						
Su	Mo	Tu	We	Th	Fr	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	

March 2025						
Su	Mo	Tu	We	Th	Fr	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

April 2025						
Su	Mo	Tu	We	Th	Fr	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

May 2025						
Su	Mo	Tu	We	Th	Fr	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

June 2025						
Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

## ACSIG holidays 2024/25

Jul 4, 2024	Independence Day	Nov 28, 2024	Thanksgiving Day	Jan 1, 2025	New Year's Day	Feb 17, 2025	Washington Day
Sep 2, 2024	Labor Day	Dec 24, 2024	Christmas Eve	Jan 20, 2025	Martin L. King Day	May 26, 2025	Memorial Day
Nov 11, 2024	Veterans Day	Dec 25, 2024	Christmas Day	Feb 14, 2025	Lincoln Day	Jun 19, 2025	Juneteenth

\*Winter Closure Thursday December 26 through Tuesday December 31

**ALAMEDA COUNTY OFFICE OF EDUCATION**

313 West Winton Avenue, Hayward, CA 94544-1136

**2024-25 CALENDAR FOR CSEA - MANAGEMENT EMPLOYEES**

MONTH	WORK DAYS**	HOLIDAYS*	DATE	DESCRIPTION
July	22	1	Thursday, July 4	Independence Day
August	22	0		
September	20	1	Monday, September 2	Labor Day
October	23	0		
November	18	3	Monday, November 11	Veterans Day
			Thursday, November 28	Thanksgiving Day
			Friday, November 29	Thanksgiving Holiday
December	20	2	Tuesday, December 24	Christmas Eve
			Wednesday, December 25	Christmas Day
<b>Winter Closure: Tuesday, December 24 - Wednesday, January 1</b>				
<i>For December 26th - 31st:</i>				
CSEA Staff are required to use Four (4) vacation days (per Article X - VACATION PLAN 10.3.5 of the CSEA collective bargaining agreement).				
Certificated Staff must schedule non work days.				
Classified Management may use vacation days.				
CSEA Probationary Employees will be extended up to four (4) vacation days.				
January	21	2	Wednesday, January 1	New Year's Day
			Monday, January 20	Martin Luther King Jr. Day
February	18	2	Friday, February 14	Lincoln Day
			Monday, February 17	Washington Day
March	21	0		
April	22	0		
May	21	1	Monday, May 26	Memorial Day
June	20	1	Thursday, June 19	Juneteenth National
				Independence Day
<b>TOTAL</b>	<b>248</b>	<b>13</b>		

\* Pending employee unit agreements

\*\* Classified only

**Certificated Management:** 221 workdays

**Classified Management, Confidential, and CSEA employees:** 261 workdays

**Note:** For Student Programs and Services Department, please refer to the appropriate calendar for your site.



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### **Executive Summary: CAJPA Fall Conference 2024**

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: CAJPA Fall Conference

The California Association of Joint Powers Authorities (“CAJPA”) is an association that serves as an information and education network for public-sector risk pools. CAJPA’s 2024 Annual Conference will take place from September 10 through September 13 in South Lake Tahoe. Full details are available here: <https://conference.cajpa.org/>.

ACSIG will cover cost for Executive Committee members who attend the conference. Those interested should contact ACSIG Executive Assistant Celina Flotte for additional registration information.

# 2024 CAJPA Fall Conference

Tuesday, September 10, 2024 - Friday, September 13, 2024



Location: Tahoe Blue Events Center

75 U.S. 50 Stateline, Nevada 89449



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Dublin, CA 94568

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Fax (925) 225-0653

[www.acsig.com](http://www.acsig.com)

## **Executive Summary: Employee Assistance Program** **("EAP") Update**

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: EAP Update

ACSIG contracts with Claremont Behavioral Services, Inc. to provide Employee Assistance Services to interested ACSIG members. This service falls under ACSIG's Workers' Compensation program and was originally developed as part of the December 2019 ACSIG Strategic Plan. ACSIG's current agreement with Claremont runs through 6/30/26.

Current participating members are Alameda County Office of Education, Alameda USD, Albany, Dublin, Fremont, Mission Valley ROP, New Haven, Piedmont, Pleasanton, San Leandro, San Lorenzo, Sunol Glen, and Tri-Valley ROP. Utilization reports for each member are included in this packet.

The Executive Director will present the program with discussion by the committee.

# uprisehealth EAP Dashboard

## ALAMEDA COUNTY SCHOOL INSURANCE GROUP

If you have specific questions, please contact your account manager **Mona Reese**

### Overview

This dashboard is a valuable tool to understand details about your program with Uprise Health. It provides details for total cases, demographics, services, utilization, and top presenting problems. If total cases are too low, some data will be hidden due to member confidentiality policies.

Uprise app data updated on Mar-31-2024 and Case management data updated on Mar-30-2024

#### Total cases

220

Any member contact which includes but is not limited to: traditional EAP requests, employer services, and monthly active users of digital self-guided tools and resources.

#### Utilization

2.3%

Total cases divided by primary members calculated over the selected period.  
Current annual projection: **2.3%**

#### Primary Members

9,500

Definition: Number of primary members reported to your Client Success manager.

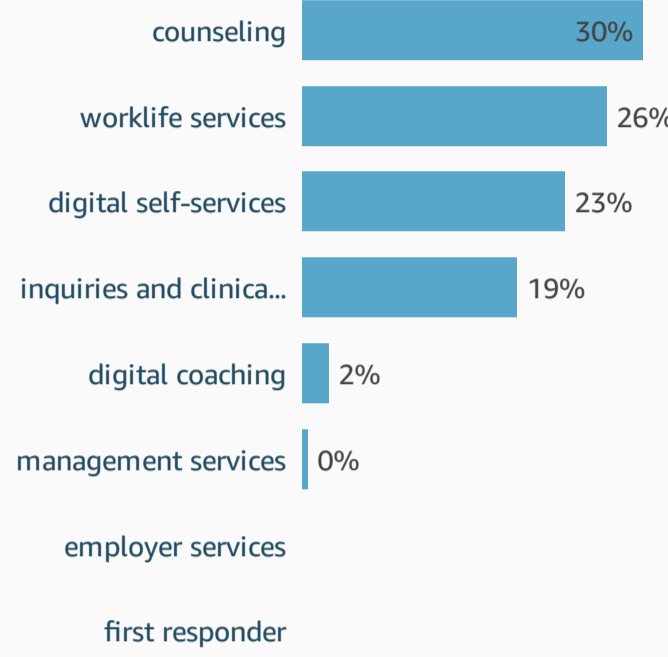
#### Top Problems

- **stress/anxiety** with 14 cases
- **relationship/family/couple** with 10 cases
- **emotional/psychological** with 6 cases

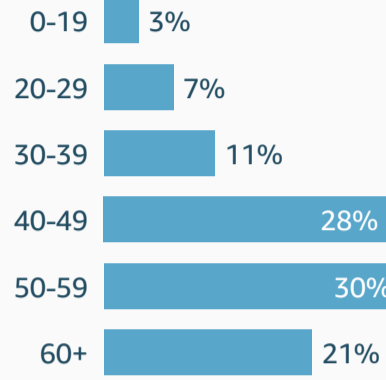
#### Cases by month



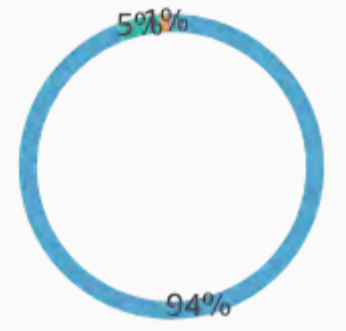
#### Cases by type



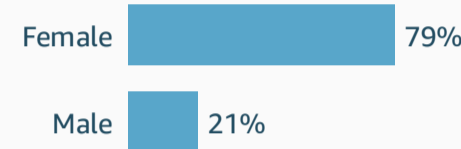
#### Cases by age



#### Cases by relationship



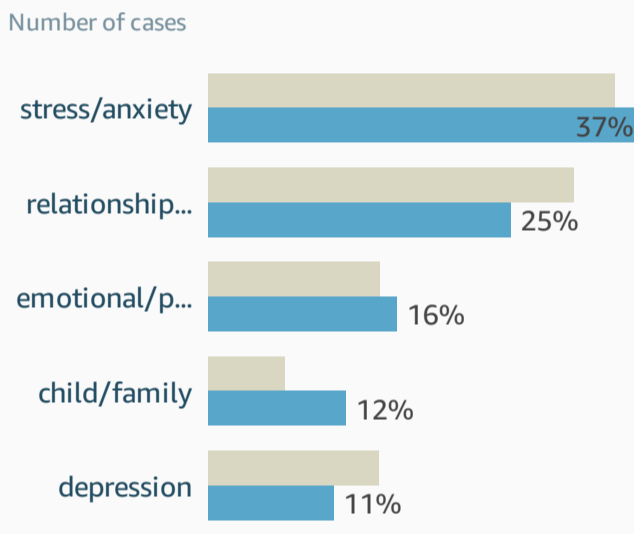
#### Cases by gender



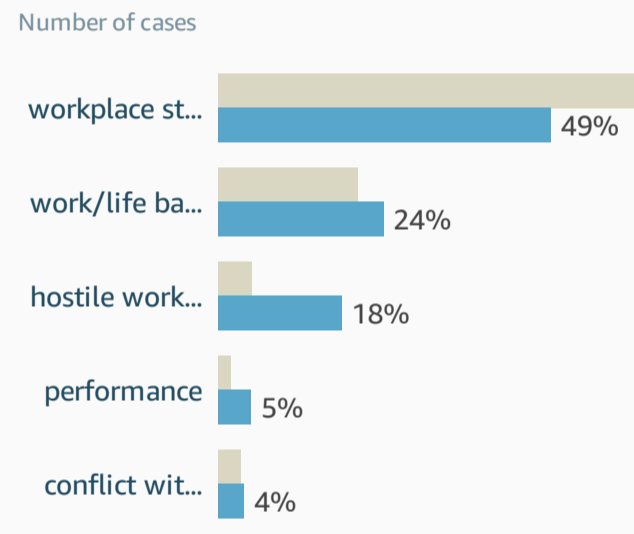
### Counseling Services

The following is a summary of short-term counseling services. The data shown covers the mental health and work-life topics that were presented by members and the session delivery type. Data for peer support groups is also provided to report the types of groups that were attended by members.

#### Personal problems



#### Work related problems



#### Delivery types

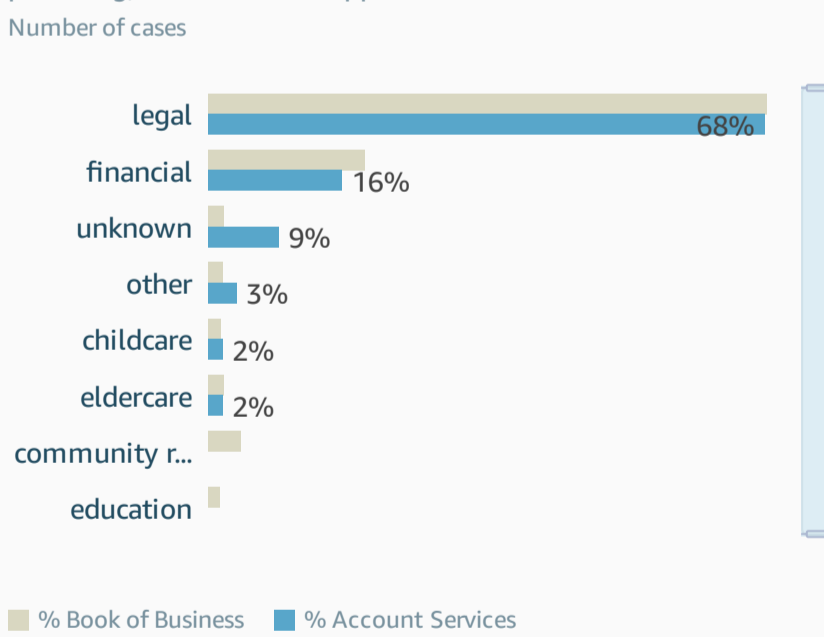


#### Peer support groups

No data  
There was no data found for the visual

### Work-life Services

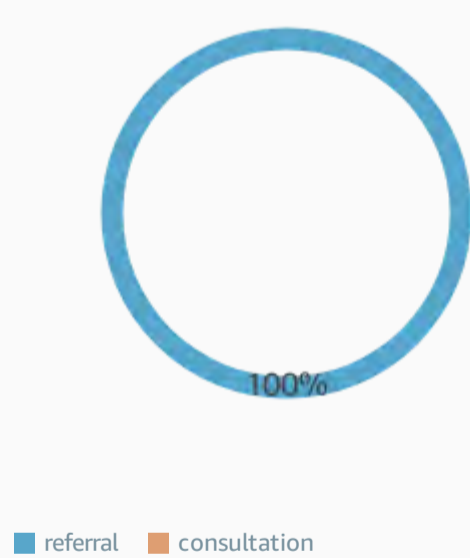
Uprise Health provides work-life services to help members better manage issues and concerns that impact their work and home. Services include legal, financial, budget planning, child and parenting, and eldercare support.



### Management Services

These graphs show data on support Uprise Health provided to managers who have identified and documented employee performance issues. The following graphs show phone consultations to support managers with identifying and documenting performance issues

#### Cases by type



#### Referral problems

No data  
There was no data found for the visual

### Employer Services

Employer services includes webinars, critical incidents support, and health fairs. There may be some additional delay in reporting of this section.

Employer Services data updated on Apr-01-2024

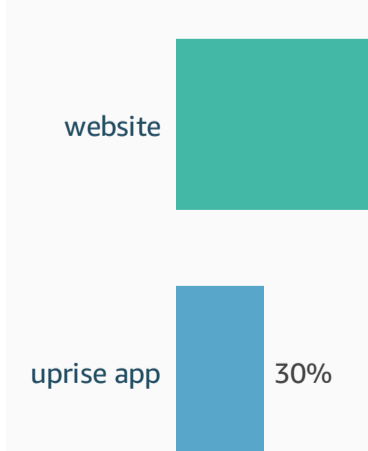
No data  
There was no data found for the visual

### Digital Self-Services

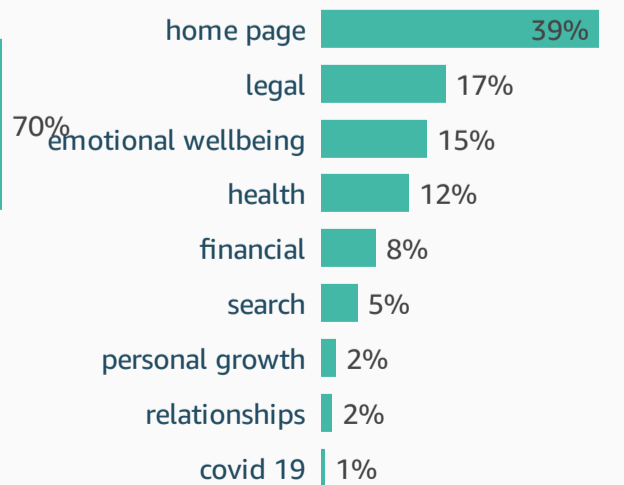
Uprise Health provides an online work-life portal that provides members access to online resources for work-life, training, and on-demand webinars. This section is updated monthly.

Website data updated on Feb-2024 ; Uprise app data updated on Mar-31-2024

#### Cases by type



#### Visits by website sections



Showing  
Parent Account All  
State All  
Account All  
Month 202403, 202402, 202401, 202312, 202311, 202310, 202309, 202308 and 4 more...  
Service Type All



## Overview

This dashboard is a valuable tool to understand details about your program with Uprise Health. It provides details for total cases, demographics, services, utilization, and top presenting problems. If total cases are too low, some data will be hidden due to member confidentiality policies.

Uprise app data updated on Mar-31-2024 and Case management data updated on Mar-30-2024

### Total cases

13

Any member contact which includes but is not limited to: traditional EAP requests, employer services, and monthly active users of digital self-guided tools and resources.

### Utilization

6.2%

Total cases divided by primary members calculated over the selected period.  
Current annual projection: **6.7%**

### Primary Members

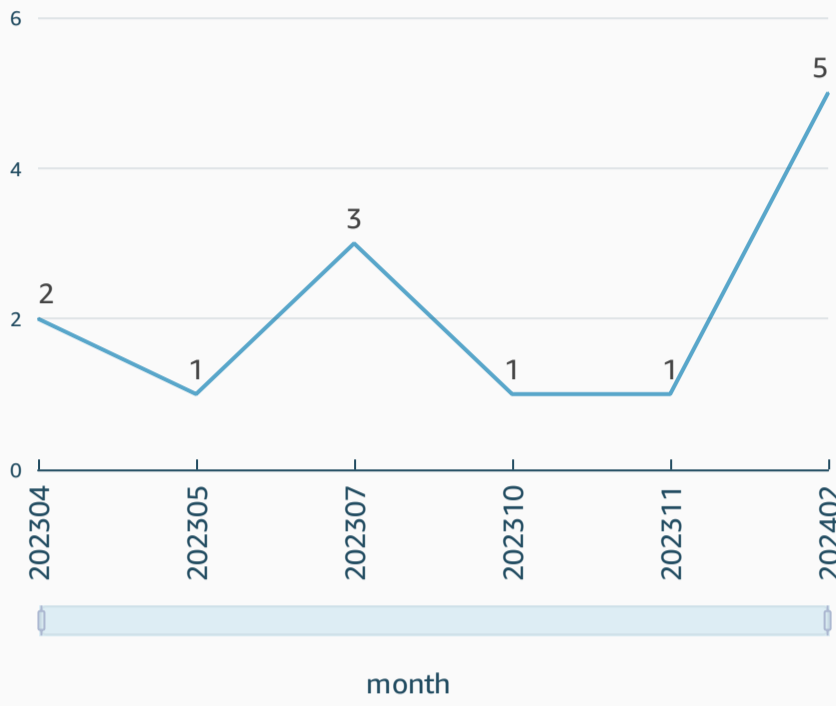
211

Definition: Number of primary members reported to your Client Success manager.

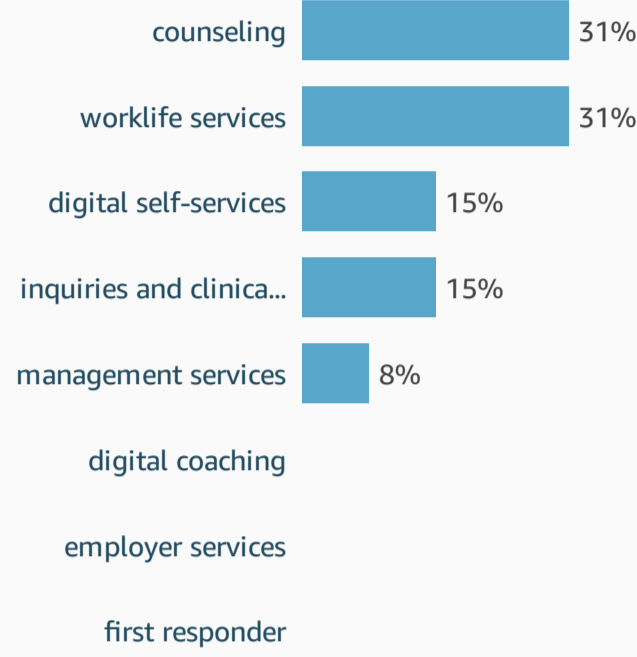
### Top Problems

- **relationship/family/couple** with 2 cases
- **emotional/psychological** with 1 cases
- **grief/ bereavement** with 1 cases

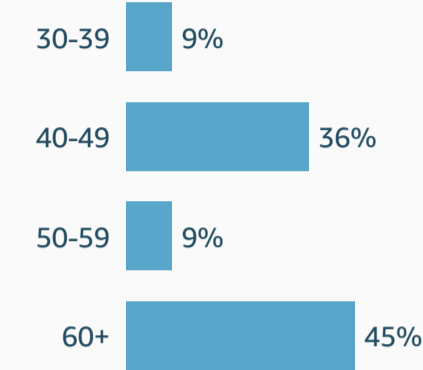
### Cases by month



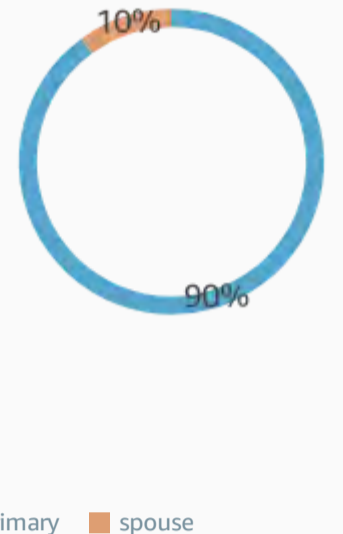
### Cases by type



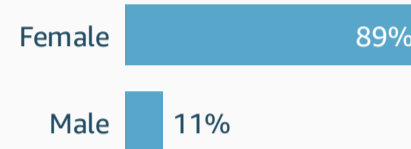
### Cases by age



### Cases by relationship



### Cases by gender



## Counseling Services

The following is a summary of short-term counseling services. The data shown covers the mental health and work-life topics that were presented by members and the session delivery type. Data for peer support groups is also provided to report the types of groups that were attended by members.

### Personal problems

Number of cases

Top 5

No data

There was no data found for the visual

### Work related problems

Number of cases

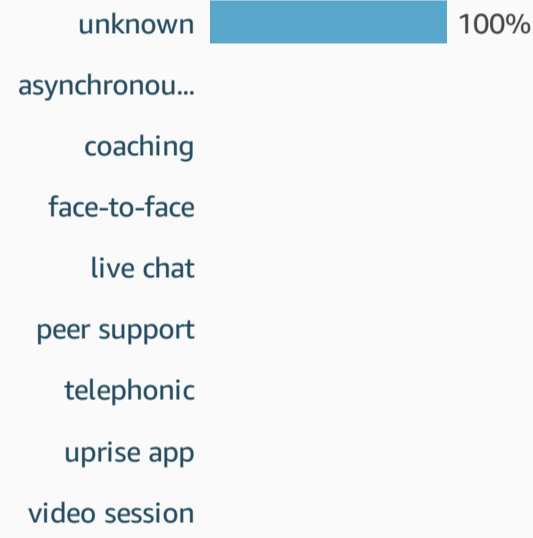
Top 5

No data

There was no data found for the visual

### Delivery types

Number of cases



### Peer support groups

Number of cases

No data

There was no data found for the visual

## Work-life Services

Uprise Health provides work-life services to help members better manage issues and concerns that impact their work and home. Services include legal, financial, budget planning, child and parenting, and eldercare support.

Number of cases

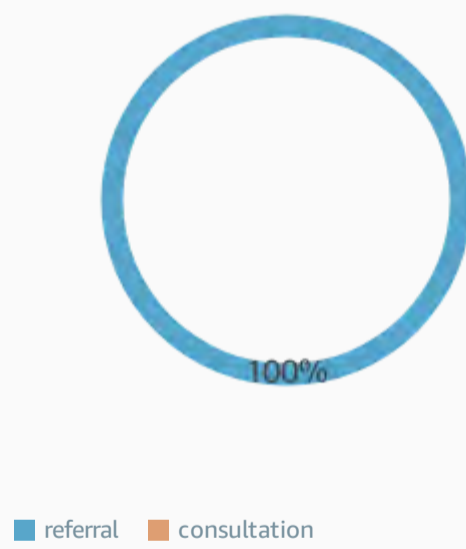
No data

There was no data found for the visual

## Management Services

These graphs show data on support Uprise Health provided to managers who have identified and documented employee performance issues. The following graphs show phone consultations to support managers with identifying and documenting performance issues

### Cases by type



### Referral problems

Number of cases

Top 5

No data

There was no data found for the visual

## Employer Services

Employer services includes webinars, critical incidents support, and health fairs. There may be some additional delay in reporting of this section.

Employer Services data updated on Apr-01-2024

No data

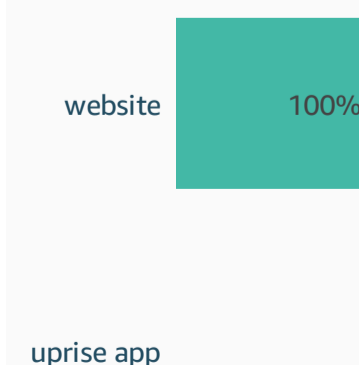
There was no data found for the visual

## Digital Self-Services

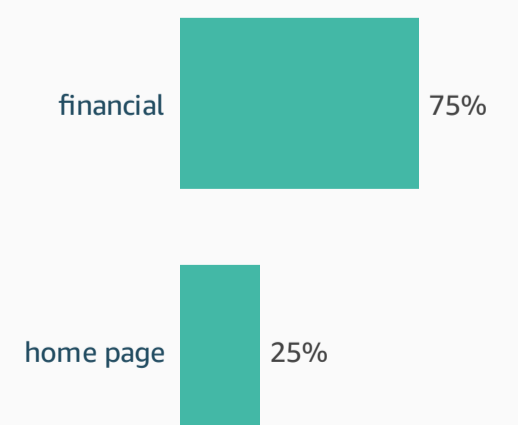
Uprise Health provides an online work-life portal that provides members access to online resources for work-life, training, and on-demand webinars. This section is updated monthly.

Website data updated on Feb-2024 ; Uprise app data updated on Mar-31-2024

### Cases by type



### Visits by website sections



# uprisehealth EAP Dashboard

ALAMEDA UNIFIED SCHOOL DISTRICT

If you have specific questions, please contact your account manager **Mona Reese**

## Overview

This dashboard is a valuable tool to understand details about your program with Uprise Health. It provides details for total cases, demographics, services, utilization, and top presenting problems. If total cases are too low, some data will be hidden due to member confidentiality policies.

Uprise app data updated on Mar-31-2024 and Case management data updated on Mar-30-2024

Total cases

43

Any member contact which includes but is not limited to: traditional EAP requests, employer services, and monthly active users of digital self-guided tools and resources.

Utilization

4.3%

Total cases divided by primary members calculated over the selected period.  
Current annual projection: **8.6%**

Primary Members

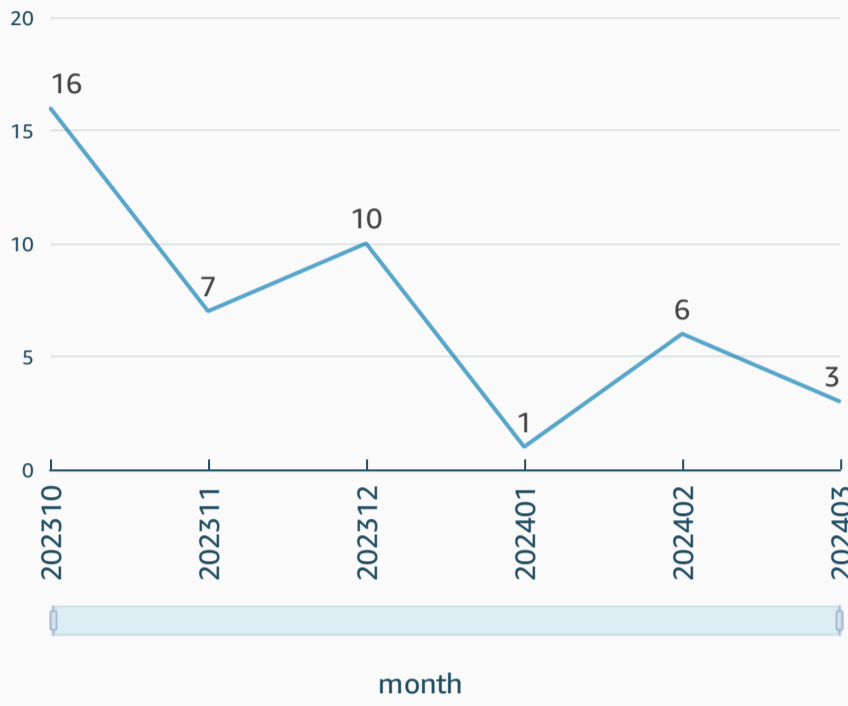
1,006

Definition: Number of primary members reported to your Client Success manager.

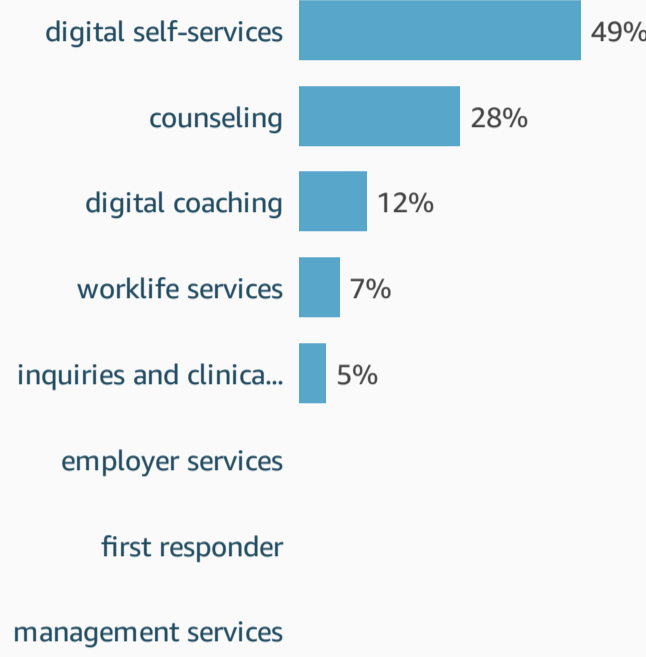
Top Problems

- stress/anxiety with 2 cases
- trauma/ptsd with 2 cases
- emotional/psychological with 2 cases

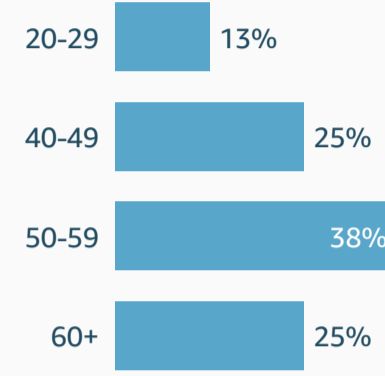
## Cases by month



## Cases by type



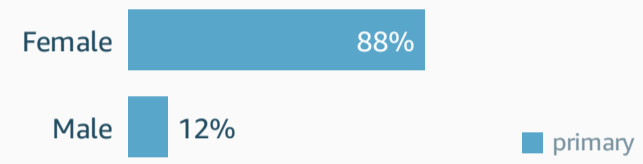
## Cases by age



## Cases by relationship



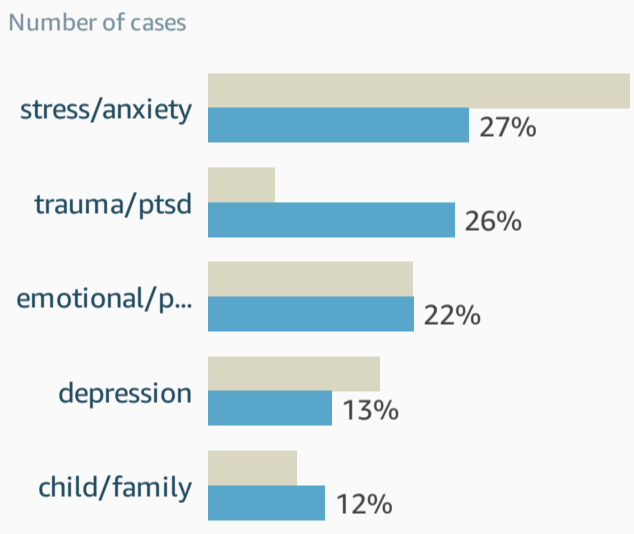
## Cases by gender



## Counseling Services

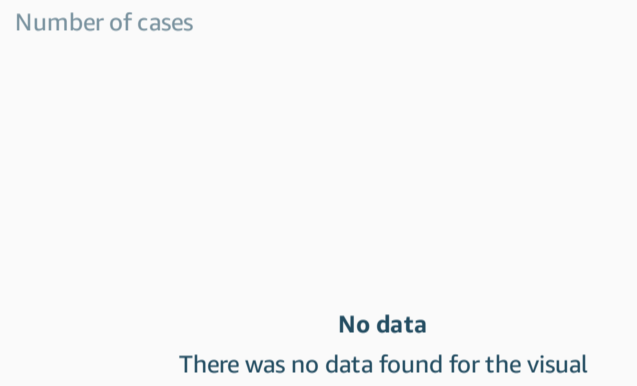
The following is a summary of short-term counseling services. The data shown covers the mental health and work-life topics that were presented by members and the session delivery type. Data for peer support groups is also provided to report the types of groups that were attended by members.

### Personal problems



% Book of Business % Account Services

### Work related problems



### Delivery types

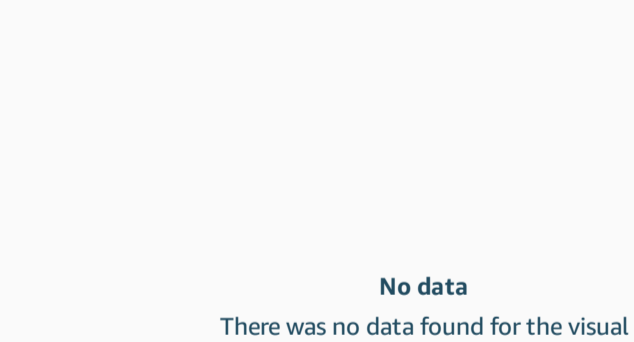


### Peer support groups



## Work-life Services

Uprise Health provides work-life services to help members better manage issues and concerns that impact their work and home. Services include legal, financial, budget planning, child and parenting, and eldercare support.



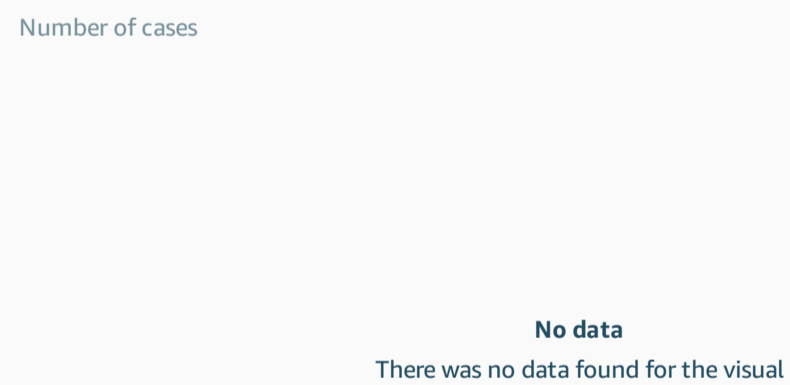
## Management Services

These graphs show data on support Uprise Health provided to managers who have identified and documented employee performance issues. The following graphs show phone consultations to support managers with identifying and documenting performance issues

### Cases by type



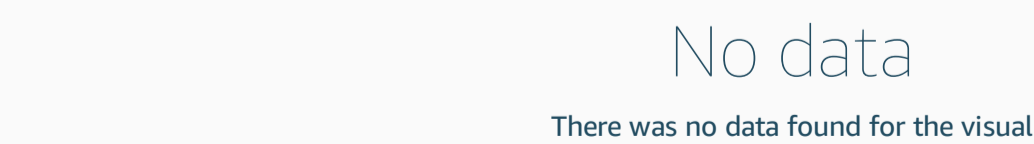
### Referral problems



## Employer Services

Employer services includes webinars, critical incidents support, and health fairs. There may be some additional delay in reporting of this section.

Employer Services data updated on Apr-01-2024

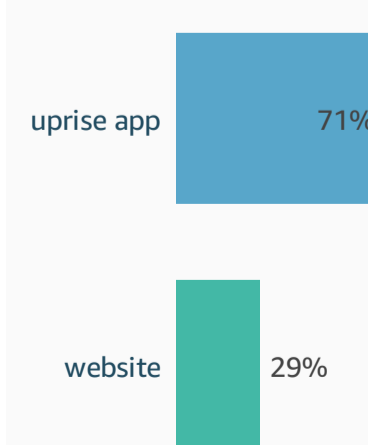


## Digital Self-Services

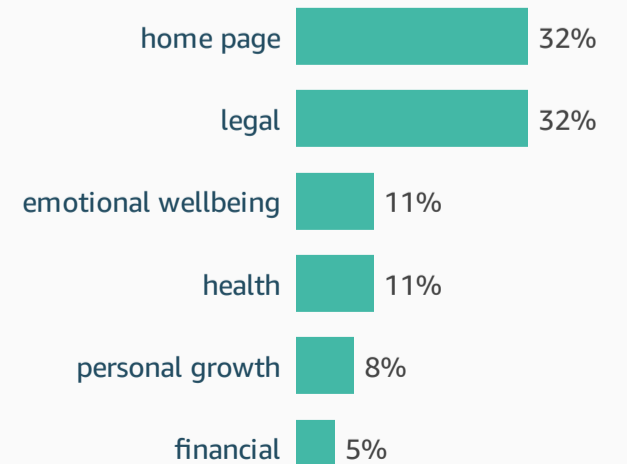
Uprise Health provides an online work-life portal that provides members access to online resources for work-life, training, and on-demand webinars. This section is updated monthly.

Website data updated on Feb-2024 ; Uprise app data updated on Mar-31-2024

### Cases by type



### Visits by website sections



Showing  
Parent Account All  
State All  
Account ALAMEDA UNIFIED SCHOOL DISTRICT  
Month 202403, 202402, 202401, 202312, 202311, 202310, 202309, 202308 and 4 more...  
Service Type All

# uprisehealth EAP Dashboard

ALBANY UNIFIED SCHOOL DISTRICT

If you have specific questions, please contact your account manager **Mona Reese**

## Overview

This dashboard is a valuable tool to understand details about your program with Uprise Health. It provides details for total cases, demographics, services, utilization, and top presenting problems. If total cases are too low, some data will be hidden due to member confidentiality policies.

*Uprise app data updated on Mar-31-2024 and Case management data updated on Mar-30-2024*

**Total cases**

7

Any member contact which includes but is not limited to: traditional EAP requests, employer services, and monthly active users of digital self-guided tools and resources.

**Utilization**

1.7%

Total cases divided by primary members calculated over the selected period.  
Current annual projection: **2.2%**

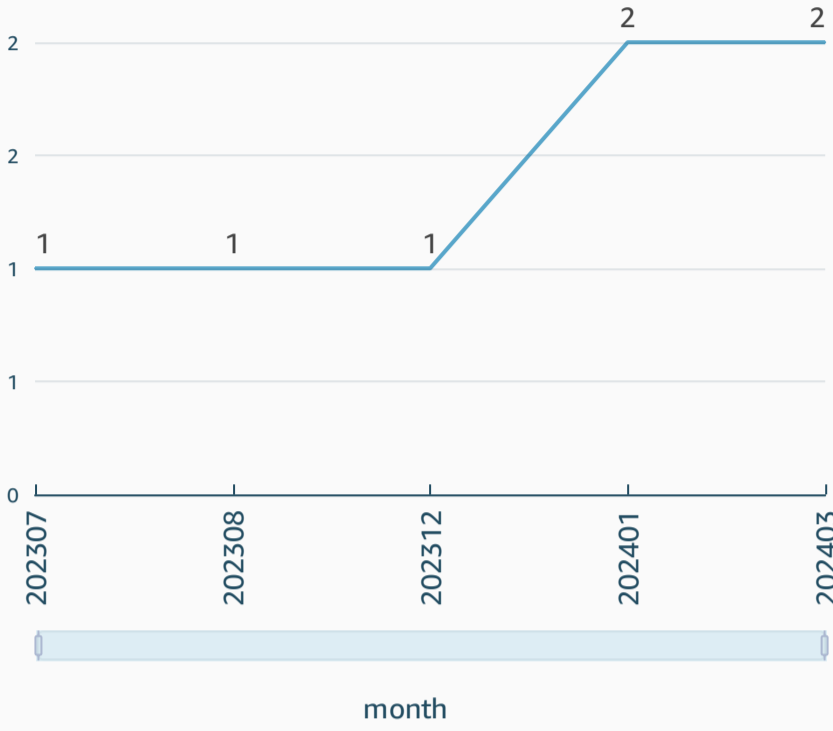
**Primary Members**

420

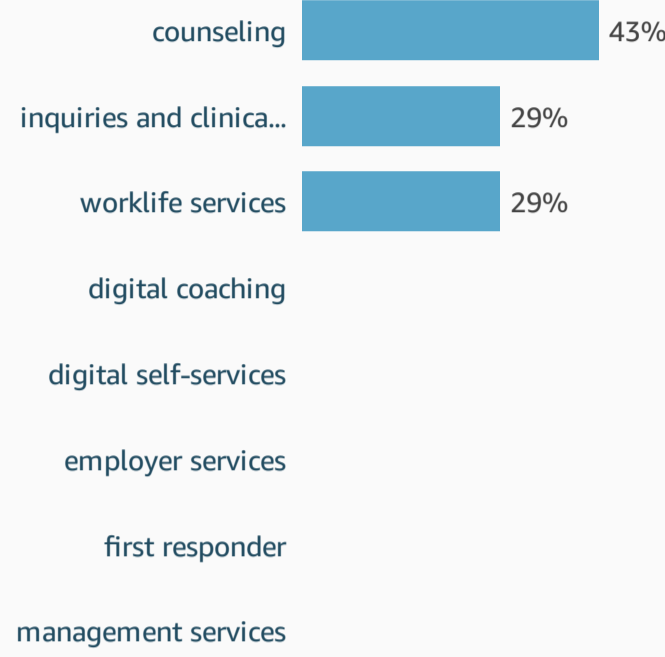
Definition: Number of primary members reported to your Client Success manager.

**Top Problems**

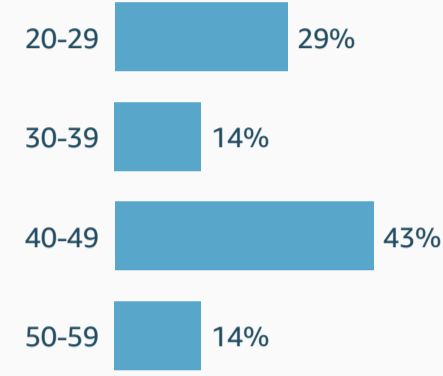
### Cases by month



### Cases by type



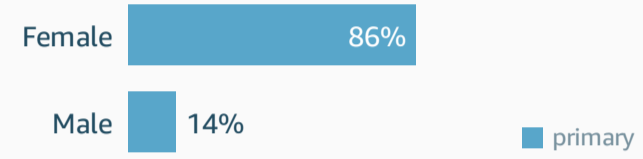
### Cases by age



### Cases by relationship



### Cases by gender



## Counseling Services

The following is a summary of short-term counseling services. The data shown covers the mental health and work-life topics that were presented by members and the session delivery type. Data for peer support groups is also provided to report the types of groups that were attended by members.

### Personal problems

Number of cases

Top 5

No data

There was no data found for the visual

### Work related problems

Number of cases

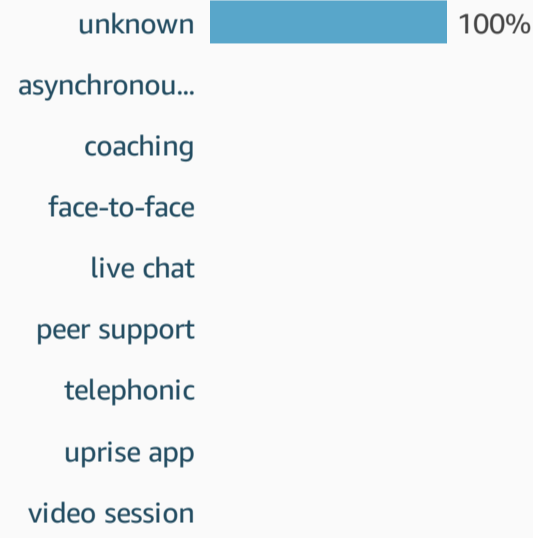
Top 5

No data

There was no data found for the visual

### Delivery types

Number of cases



### Peer support groups

Number of cases

No data

There was no data found for the visual

## Work-life Services

Uprise Health provides work-life services to help members better manage issues and concerns that impact their work and home. Services include legal, financial, budget planning, child and parenting, and eldercare support.

Number of cases

No data

There was no data found for the visual

## Management Services

These graphs show data on support Uprise Health provided to managers who have identified and documented employee performance issues. The following graphs show phone consultations to support managers with identifying and documenting performance issues

### Cases by type



### Referral problems

Number of cases

Top 5

No data

There was no data found for the visual

## Employer Services

Employer services includes webinars, critical incidents support, and health fairs. There may be some additional delay in reporting of this section.

*Employer Services data updated on Apr-01-2024*

No data

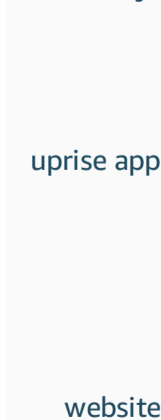
There was no data found for the visual

## Digital Self-Services

Uprise Health provides an online work-life portal that provides members access to online resources for work-life, training, and on-demand webinars. This section is updated monthly.

*Website data updated on Feb-2024 ; Uprise app data updated on Mar-31-2024*

### Cases by type



### Visits by website sections

No data  
There was no data found for the visual

## Overview

This dashboard is a valuable tool to understand details about your program with Uprise Health. It provides details for total cases, demographics, services, utilization, and top presenting problems. If total cases are too low, some data will be hidden due to member confidentiality policies.

Uprise app data updated on Mar-31-2024 and Case management data updated on Mar-30-2024

### Total cases

23

Any member contact which includes but is not limited to: traditional EAP requests, employer services, and monthly active users of digital self-guided tools and resources.

### Utilization

2.2%

Total cases divided by primary members calculated over the selected period.  
Current annual projection: **2.4%**

### Primary Members

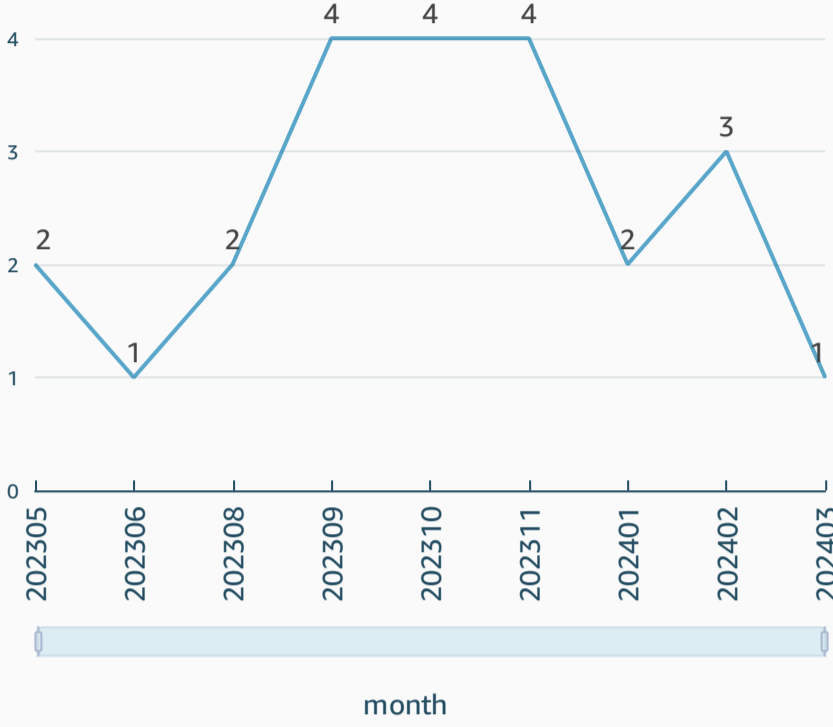
1,050

Definition: Number of primary members reported to your Client Success manager.

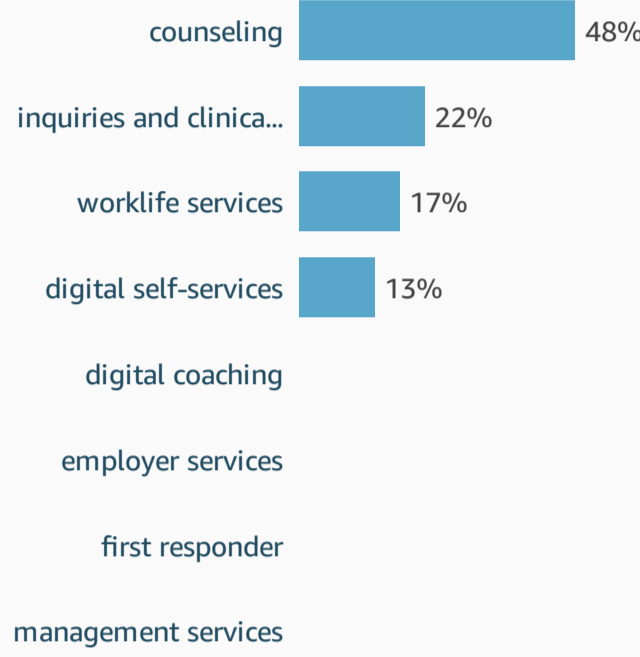
### Top Problems

- **relationship/family/couple** with 3 cases
- **stress/anxiety** with 2 cases
- **child/family** with 1 cases

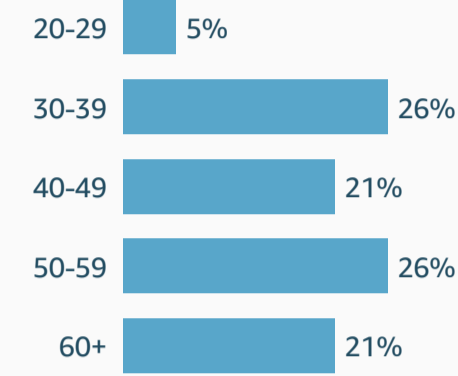
### Cases by month



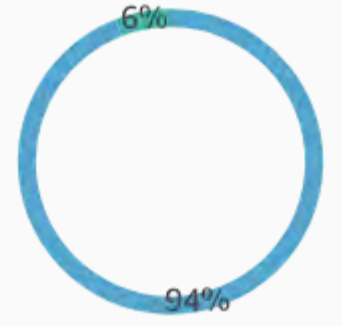
### Cases by type



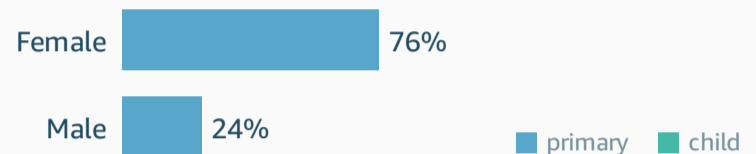
### Cases by age



### Cases by relationship



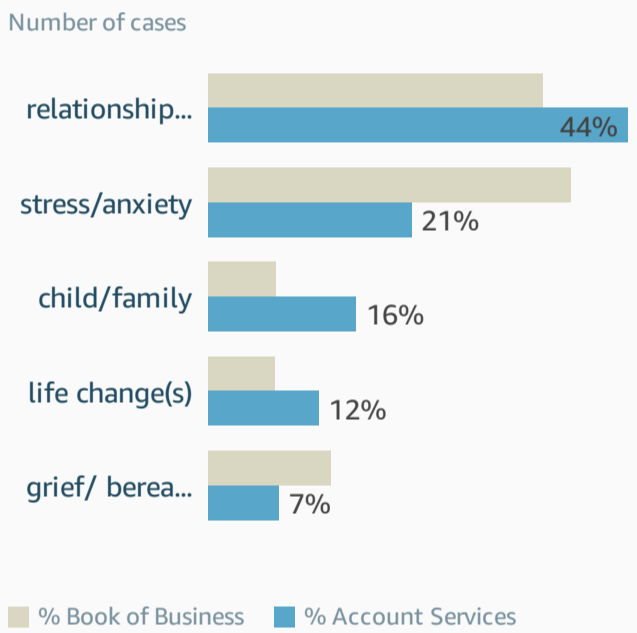
### Cases by gender



## Counseling Services

The following is a summary of short-term counseling services. The data shown covers the mental health and work-life topics that were presented by members and the session delivery type. Data for peer support groups is also provided to report the types of groups that were attended by members.

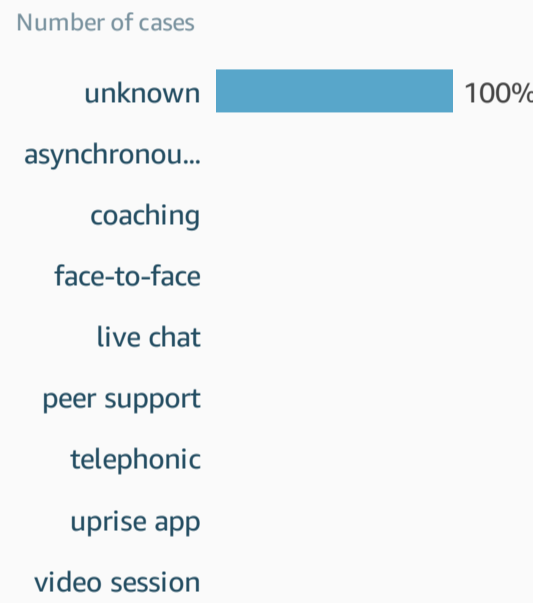
### Personal problems



### Work related problems



### Delivery types

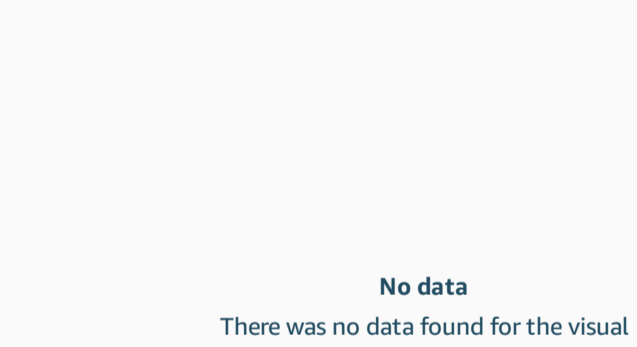


### Peer support groups



## Work-life Services

Uprise Health provides work-life services to help members better manage issues and concerns that impact their work and home. Services include legal, financial, budget planning, child and parenting, and eldercare support.



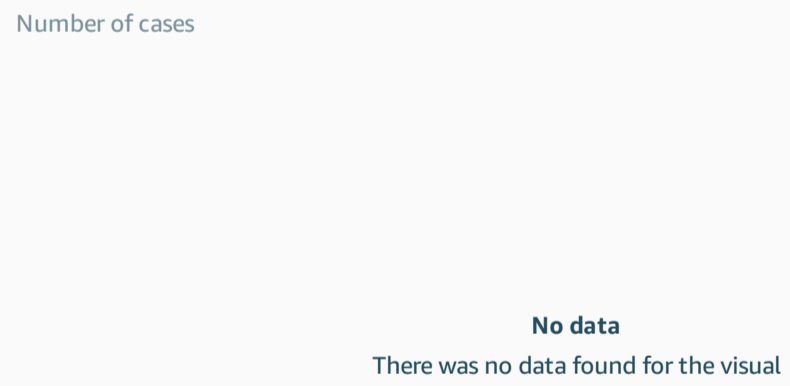
## Management Services

These graphs show data on support Uprise Health provided to managers who have identified and documented employee performance issues. The following graphs show phone consultations to support managers with identifying and documenting performance issues

### Cases by type



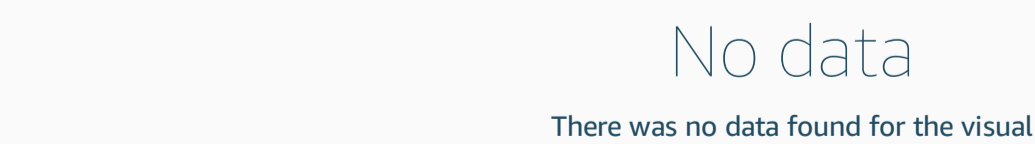
### Referral problems



## Employer Services

Employer services includes webinars, critical incidents support, and health fairs. There may be some additional delay in reporting of this section.

Employer Services data updated on Apr-01-2024

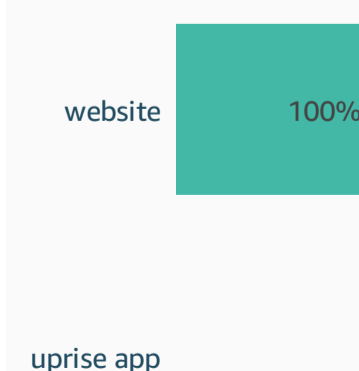


## Digital Self-Services

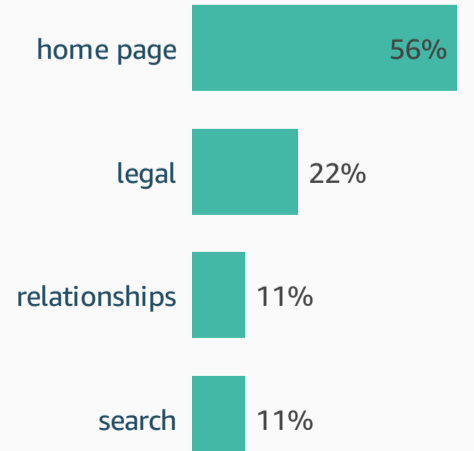
Uprise Health provides an online work-life portal that provides members access to online resources for work-life, training, and on-demand webinars. This section is updated monthly.

Website data updated on Feb-2024 ; Uprise app data updated on Mar-31-2024

### Cases by type



### Visits by website sections



# uprisehealth EAP Dashboard

## FREMONT UNIFIED SCHOOL DISTRICT

If you have specific questions, please contact your account manager **Mona Reese**

### Overview

This dashboard is a valuable tool to understand details about your program with Uprise Health. It provides details for total cases, demographics, services, utilization, and top presenting problems. If total cases are too low, some data will be hidden due to member confidentiality policies.

Uprise app data updated on Mar-31-2024 and Case management data updated on Mar-30-2024

#### Total cases

28

Any member contact which includes but is not limited to: traditional EAP requests, employer services, and monthly active users of digital self-guided tools and resources.

#### Utilization

1.5%

Total cases divided by primary members calculated over the selected period.  
Current annual projection: **1.7%**

#### Primary Members

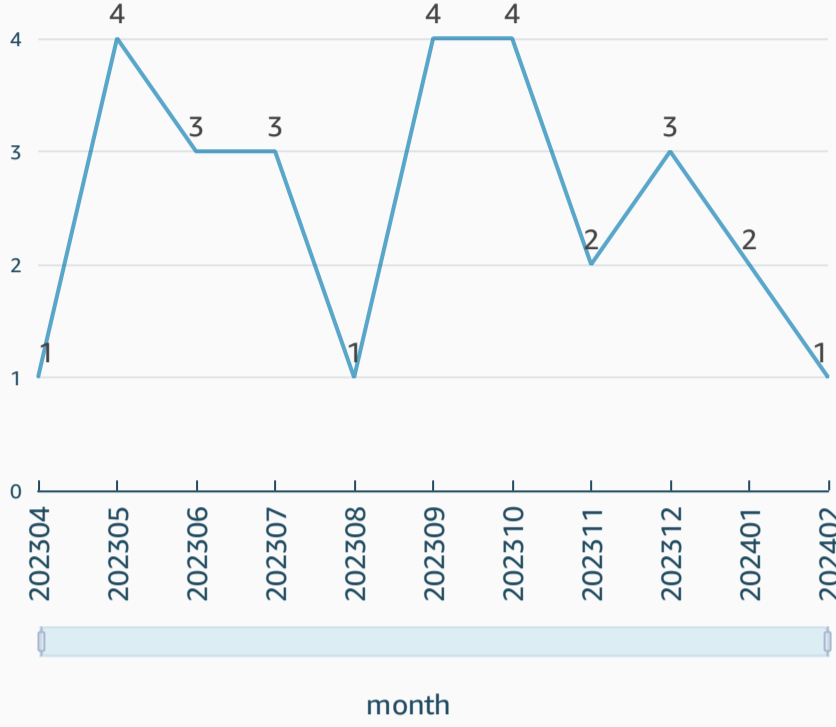
1,815

Definition: Number of primary members reported to your Client Success manager.

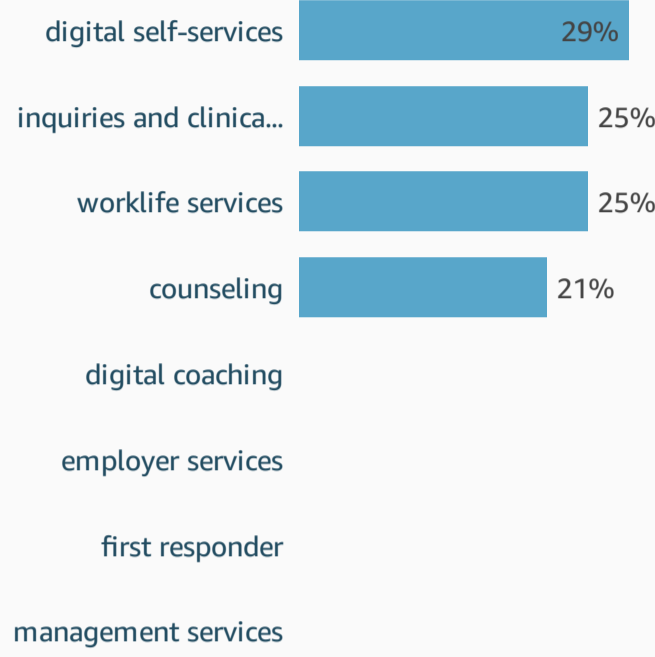
#### Top Problems

- relationship/family/couple with 2 cases
- grief/ bereavement with 1 cases
- depression with 1 cases

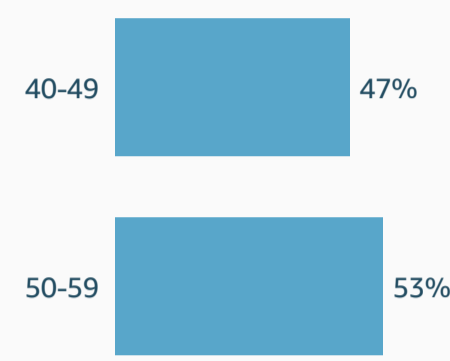
#### Cases by month



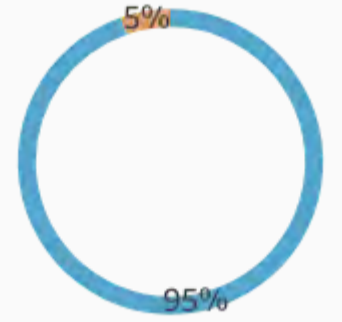
#### Cases by type



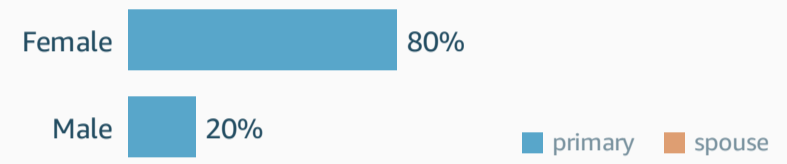
#### Cases by age



#### Cases by relationship



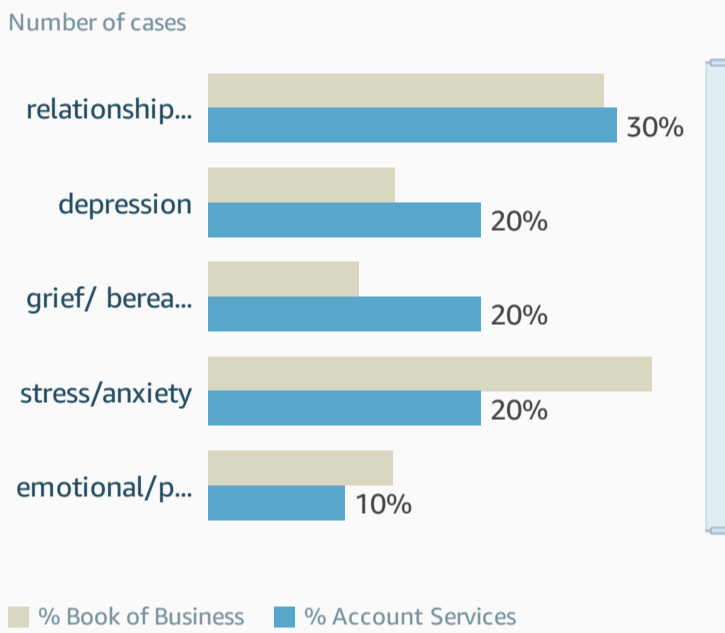
#### Cases by gender



### Counseling Services

The following is a summary of short-term counseling services. The data shown covers the mental health and work-life topics that were presented by members and the session delivery type. Data for peer support groups is also provided to report the types of groups that were attended by members.

#### Personal problems



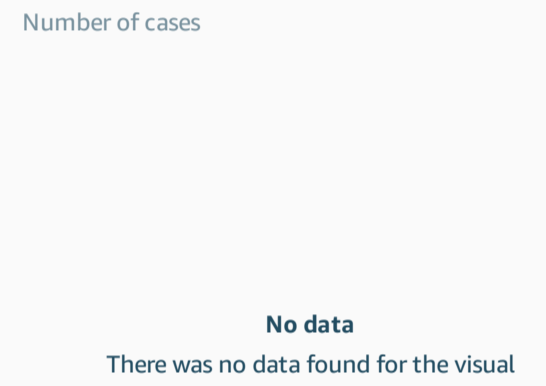
#### Work related problems



#### Delivery types

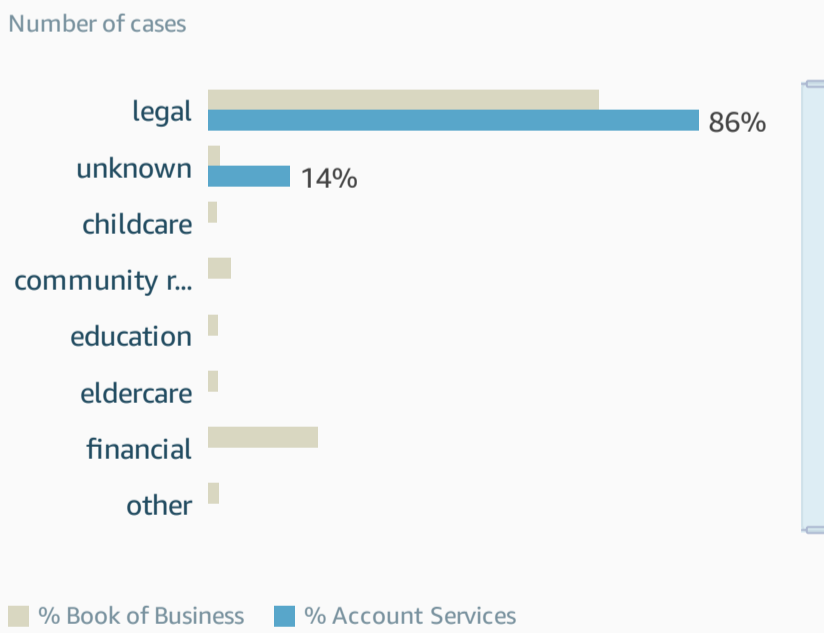


#### Peer support groups



### Work-life Services

Uprise Health provides work-life services to help members better manage issues and concerns that impact their work and home. Services include legal, financial, budget planning, child and parenting, and eldercare support.



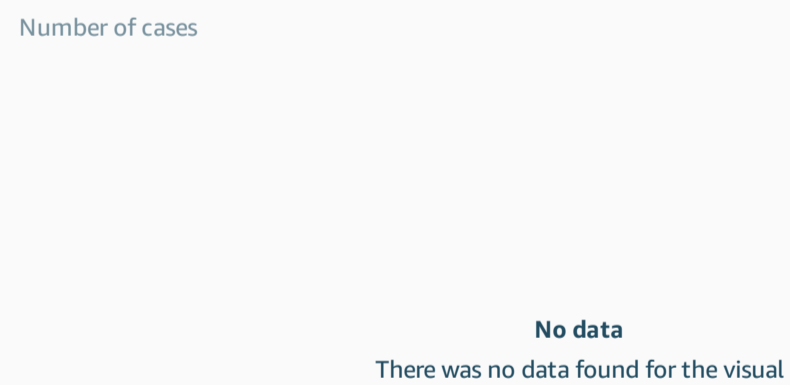
### Management Services

These graphs show data on support Uprise Health provided to managers who have identified and documented employee performance issues. The following graphs show phone consultations to support managers with identifying and documenting performance issues

#### Cases by type



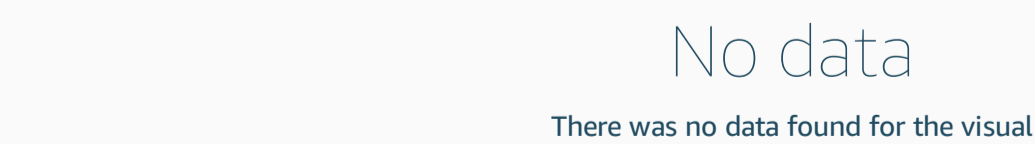
#### Referral problems



### Employer Services

Employer services includes webinars, critical incidents support, and health fairs. There may be some additional delay in reporting of this section.

Employer Services data updated on Apr-01-2024

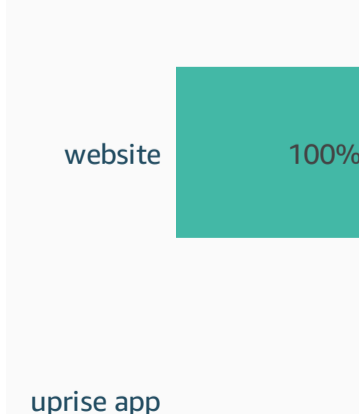


### Digital Self-Services

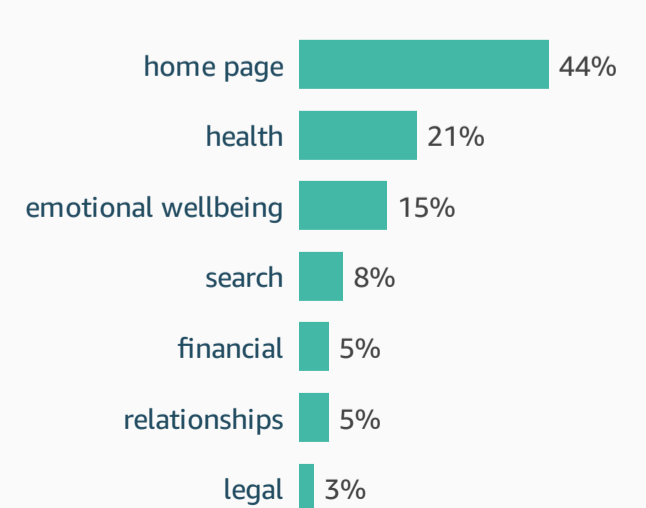
Uprise Health provides an online work-life portal that provides members access to online resources for work-life, training, and on-demand webinars. This section is updated monthly.

Website data updated on Feb-2024 ; Uprise app data updated on Mar-31-2024

#### Cases by type



#### Visits by website sections



## Overview

This dashboard is a valuable tool to understand details about your program with Uprise Health. It provides details for total cases, demographics, services, utilization, and top presenting problems. If total cases are too low, some data will be hidden due to member confidentiality policies.

Uprise app data updated on Mar-31-2024 and Case management data updated on Mar-30-2024

### Total cases

8

Any member contact which includes but is not limited to: traditional EAP requests, employer services, and monthly active users of digital self-guided tools and resources.

### Utilization

13.3%

Total cases divided by primary members calculated over the selected period.  
Current annual projection: **22.7%**

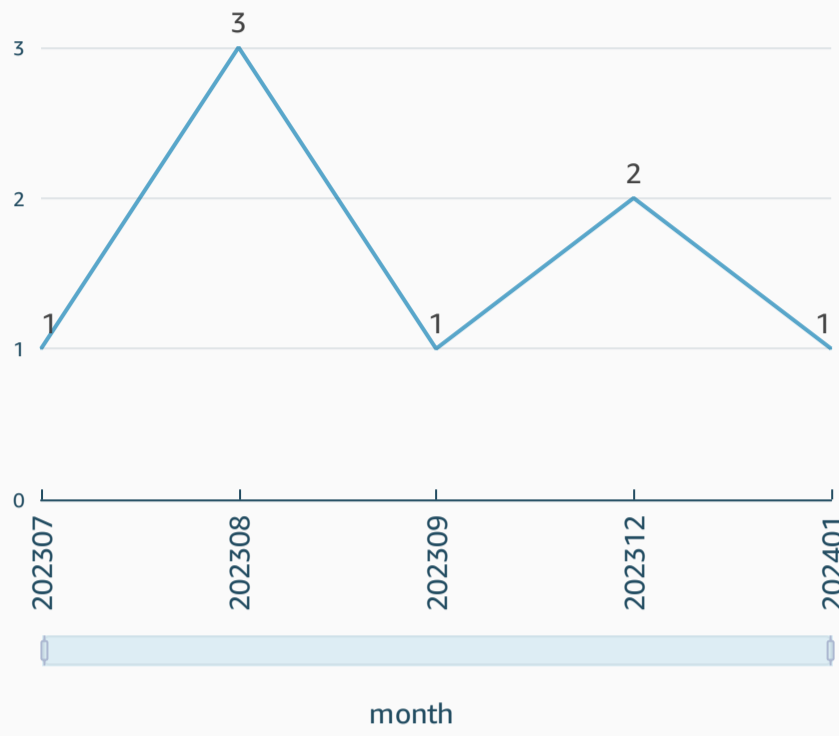
### Primary Members

60

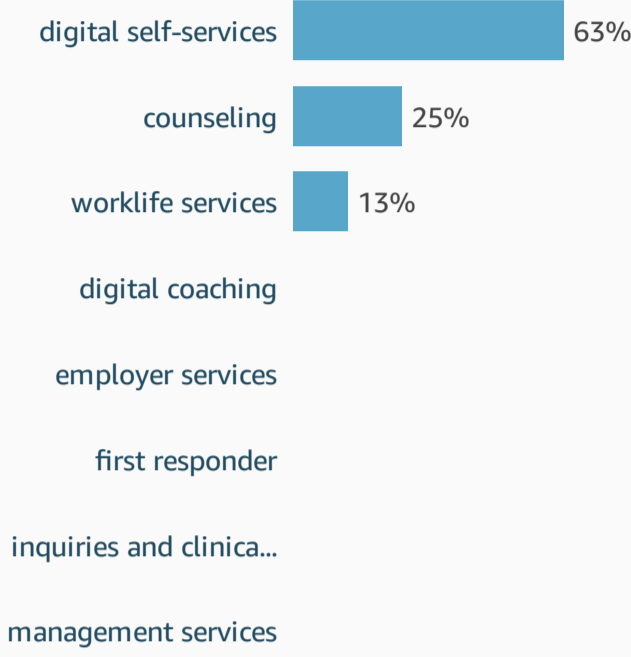
Definition: Number of primary members reported to your Client Success manager.

### Top Problems

### Cases by month



### Cases by type



### Cases by age

No data  
There was no data found for the visual

### Cases by relationship



### Cases by gender

No data  
There was no data found for the visual

## Counseling Services

The following is a summary of short-term counseling services. The data shown covers the mental health and work-life topics that were presented by members and the session delivery type. Data for peer support groups is also provided to report the types of groups that were attended by members.

### Personal problems

Number of cases

Top 5

No data  
There was no data found for the visual

### Work related problems

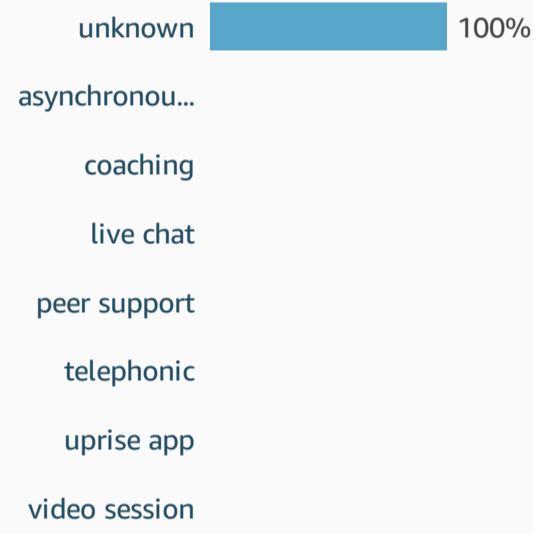
Number of cases

Top 5

No data  
There was no data found for the visual

### Delivery types

Number of cases



### Peer support groups

Number of cases

No data  
There was no data found for the visual

## Work-life Services

Uprise Health provides work-life services to help members better manage issues and concerns that impact their work and home. Services include legal, financial, budget planning, child and parenting, and eldercare support.

Number of cases

No data  
There was no data found for the visual

## Management Services

These graphs show data on support Uprise Health provided to managers who have identified and documented employee performance issues. The following graphs show phone consultations to support managers with identifying and documenting performance issues

### Cases by type

■ consultation ■ referral

### Referral problems

Number of cases

Top 5

No data  
There was no data found for the visual

## Employer Services

Employer services includes webinars, critical incidents support, and health fairs. There may be some additional delay in reporting of this section.

Employer Services data updated on Apr-01-2024

No data

There was no data found for the visual

## Digital Self-Services

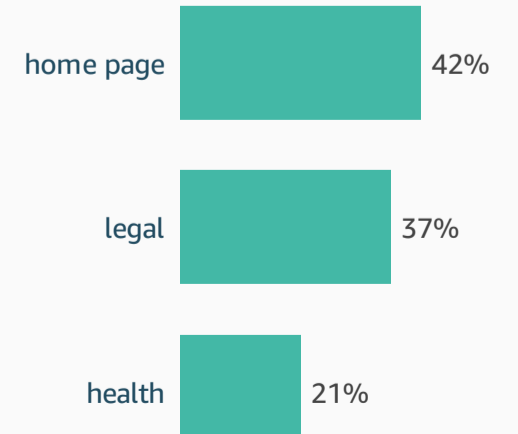
Uprise Health provides an online work-life portal that provides members access to online resources for work-life, training, and on-demand webinars. This section is updated monthly.

Website data updated on Feb-2024 ; Uprise app data updated on Mar-31-2024

### Cases by type



### Visits by website sections



# uprisehealth EAP Dashboard

NEW HAVEN UNIFIED SCHOOL DISTRICT

If you have specific questions, please contact your account manager **Mona Reese**

## Overview

This dashboard is a valuable tool to understand details about your program with Uprise Health. It provides details for total cases, demographics, services, utilization, and top presenting problems. If total cases are too low, some data will be hidden due to member confidentiality policies.

*Uprise app data updated on Mar-31-2024 and Case management data updated on Mar-30-2024*

Total cases

10

Any member contact which includes but is not limited to: traditional EAP requests, employer services, and monthly active users of digital self-guided tools and resources.

Utilization

1.0%

Total cases divided by primary members calculated over the selected period.  
Current annual projection: **1.0%**

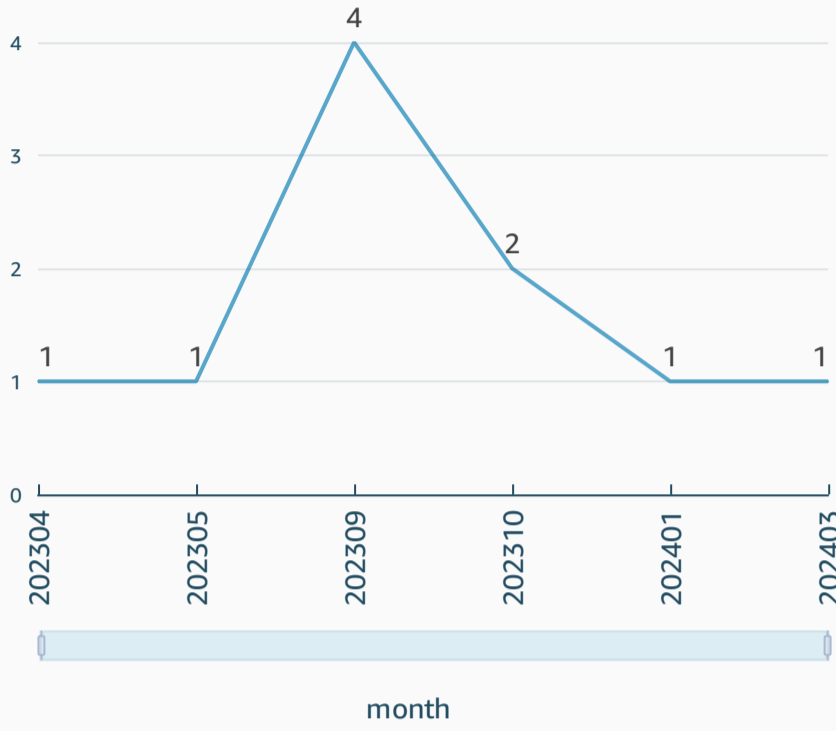
Primary Members

1,039

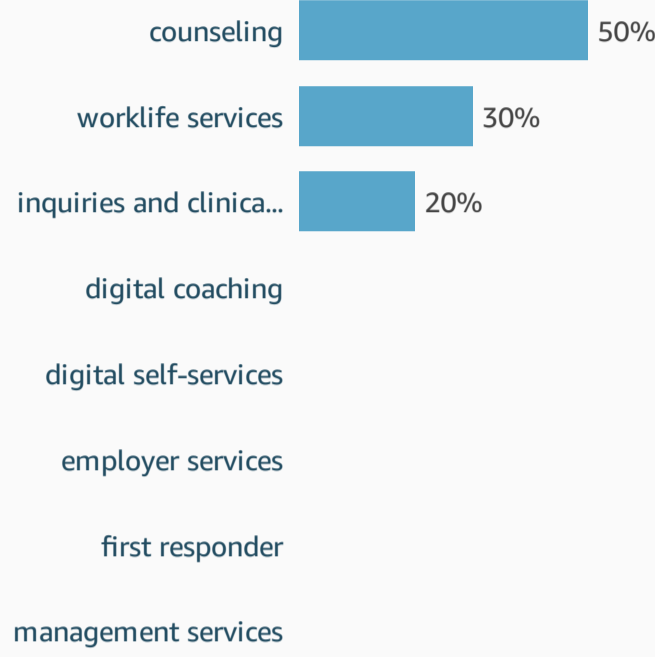
Definition: Number of primary members reported to your Client Success manager.

Top Problems

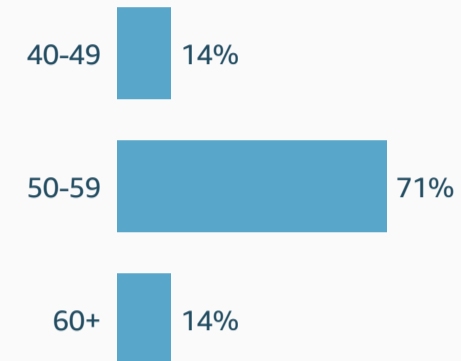
### Cases by month



### Cases by type



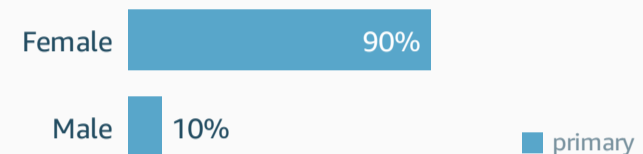
### Cases by age



### Cases by relationship



### Cases by gender



## Counseling Services

The following is a summary of short-term counseling services. The data shown covers the mental health and work-life topics that were presented by members and the session delivery type. Data for peer support groups is also provided to report the types of groups that were attended by members.

### Personal problems

Number of cases

Top 5

No data

There was no data found for the visual

### Work related problems

Number of cases

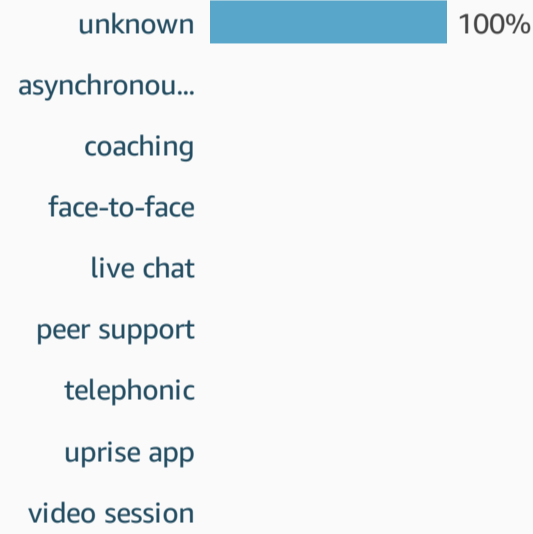
Top 5

No data

There was no data found for the visual

### Delivery types

Number of cases



### Peer support groups

Number of cases

No data

There was no data found for the visual

## Work-life Services

Uprise Health provides work-life services to help members better manage issues and concerns that impact their work and home. Services include legal, financial, budget planning, child and parenting, and eldercare support.

Number of cases

No data

There was no data found for the visual

## Management Services

These graphs show data on support Uprise Health provided to managers who have identified and documented employee performance issues. The following graphs show phone consultations to support managers with identifying and documenting performance issues

### Cases by type

■ consultation ■ referral

### Referral problems

Number of cases

Top 5

No data

There was no data found for the visual

## Employer Services

Employer services includes webinars, critical incidents support, and health fairs. There may be some additional delay in reporting of this section.

*Employer Services data updated on Apr-01-2024*

No data

There was no data found for the visual

## Digital Self-Services

Uprise Health provides an online work-life portal that provides members access to online resources for work-life, training, and on-demand webinars. This section is updated monthly.

*Website data updated on Feb-2024 ; Uprise app data updated on Mar-31-2024*

### Cases by type

uprise app

website

### Visits by website sections

No data

There was no data found for the visual

## Overview

This dashboard is a valuable tool to understand details about your program with Uprise Health. It provides details for total cases, demographics, services, utilization, and top presenting problems. If total cases are too low, some data will be hidden due to member confidentiality policies.

*Uprise app data updated on Mar-31-2024 and Case management data updated on Mar-30-2024*

### Total cases

13

Any member contact which includes but is not limited to: traditional EAP requests, employer services, and monthly active users of digital self-guided tools and resources.

### Utilization

3.6%

Total cases divided by primary members calculated over the selected period.  
Current annual projection: **7.3%**

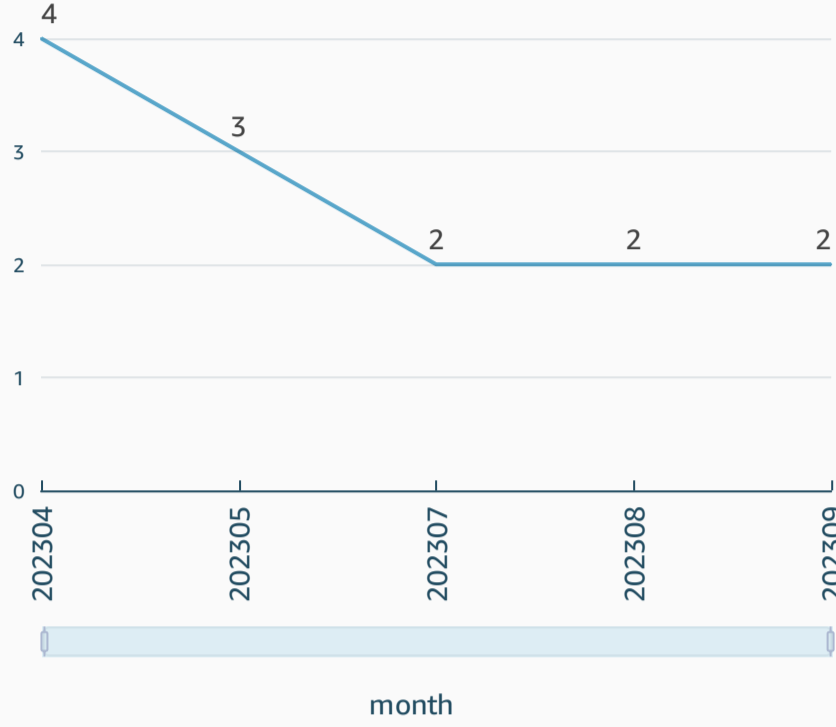
### Primary Members

359

Definition: Number of primary members reported to your Client Success manager.

### Top Problems

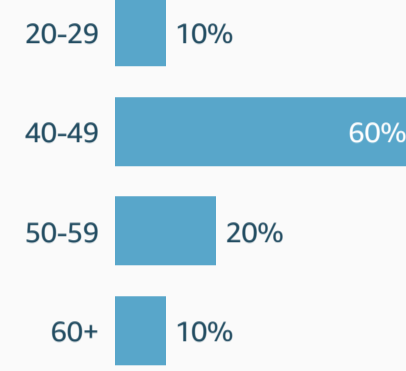
### Cases by month



### Cases by type



### Cases by age



### Cases by relationship



### Cases by gender



## Counseling Services

The following is a summary of short-term counseling services. The data shown covers the mental health and work-life topics that were presented by members and the session delivery type. Data for peer support groups is also provided to report the types of groups that were attended by members.

### Personal problems

Number of cases

Top 5

No data

There was no data found for the visual

### Work related problems

Number of cases

Top 5

No data

There was no data found for the visual

### Delivery types

Number of cases

No data

There was no data found for the visual

### Peer support groups

Number of cases

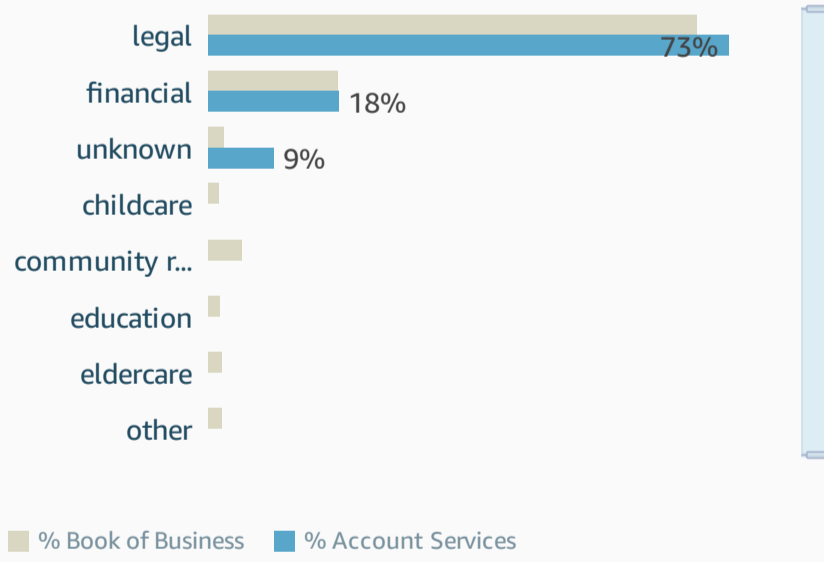
No data

There was no data found for the visual

## Work-life Services

Uprise Health provides work-life services to help members better manage issues and concerns that impact their work and home. Services include legal, financial, budget planning, child and parenting, and eldercare support.

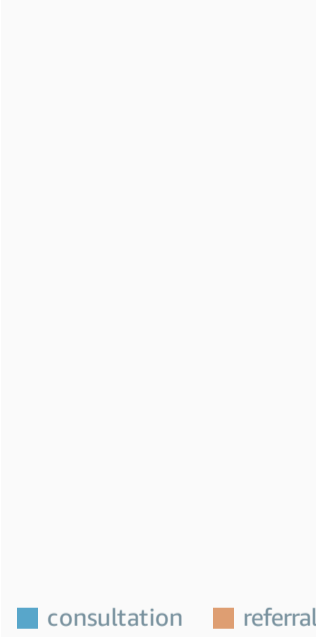
Number of cases



## Management Services

These graphs show data on support Uprise Health provided to managers who have identified and documented employee performance issues. The following graphs show phone consultations to support managers with identifying and documenting performance issues

### Cases by type



### Referral problems

Number of cases

Top 5

No data

There was no data found for the visual

## Employer Services

Employer services includes webinars, critical incidents support, and health fairs. There may be some additional delay in reporting of this section.

*Employer Services data updated on Apr-01-2024*

No data

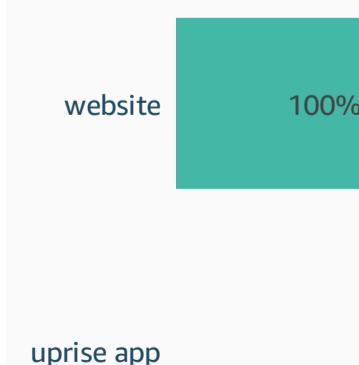
There was no data found for the visual

## Digital Self-Services

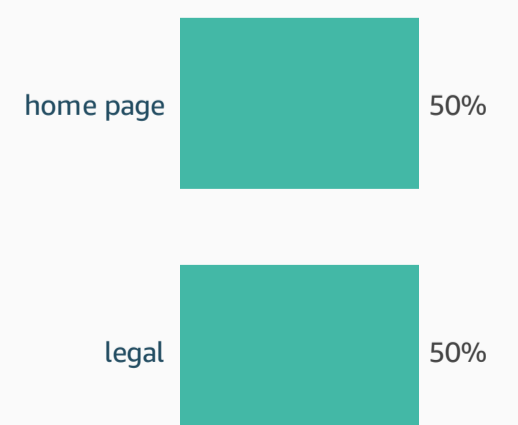
Uprise Health provides an online work-life portal that provides members access to online resources for work-life, training, and on-demand webinars. This section is updated monthly.

*Website data updated on Feb-2024 ; Uprise app data updated on Mar-31-2024*

### Cases by type



### Visits by website sections





### Overview

This dashboard is a valuable tool to understand details about your program with Uprise Health. It provides details for total cases, demographics, services, utilization, and top presenting problems. If total cases are too low, some data will be hidden due to member confidentiality policies.

Uprise app data updated on Mar-31-2024 and Case management data updated on Mar-30-2024

#### Total cases

# 34

Any member contact which includes but is not limited to: traditional EAP requests, employer services, and monthly active users of digital self-guided tools and resources.

#### Utilization

# 2.4%

Total cases divided by primary members calculated over the selected period.  
Current annual projection: **2.4%**

#### Primary Members

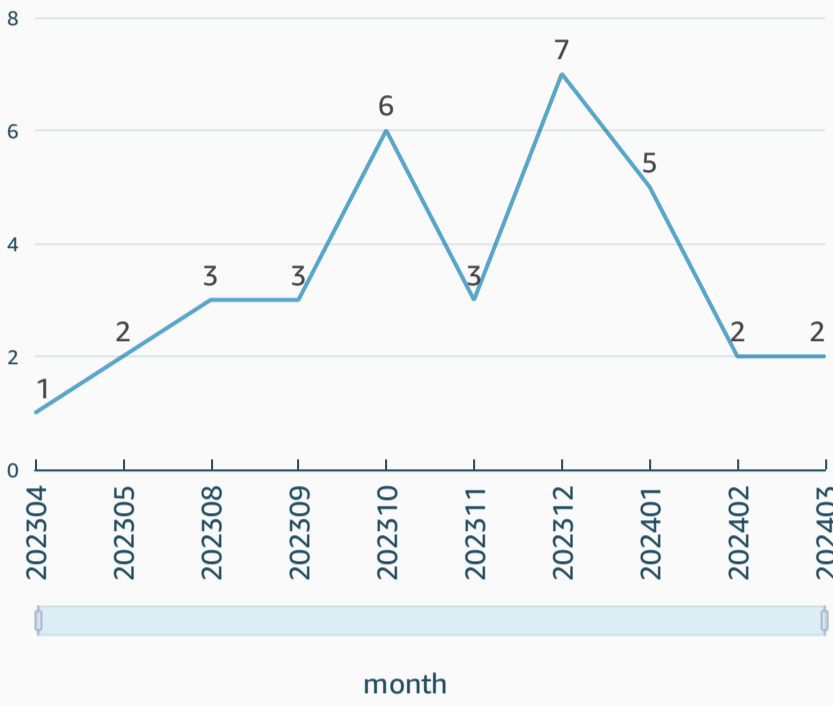
# 1,438

Definition: Number of primary members reported to your Client Success manager.

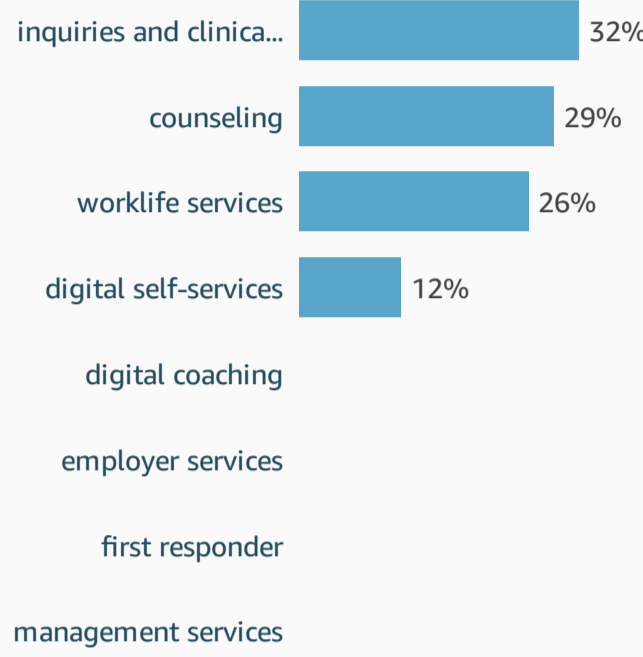
#### Top Problems

- **workplace stress** with 2 cases
- **stress/anxiety** with 2 cases
- **work/life balance** with 2 cases

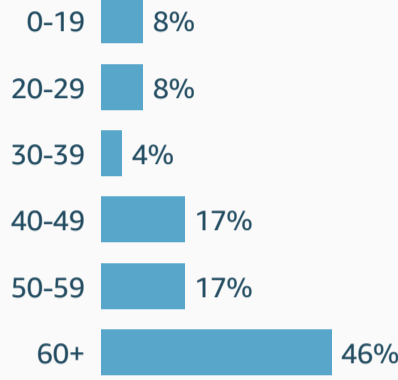
#### Cases by month



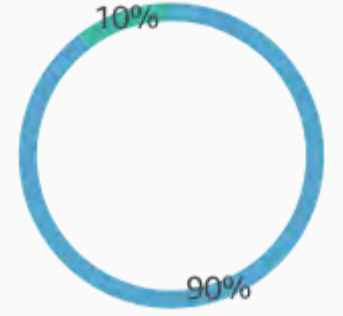
#### Cases by type



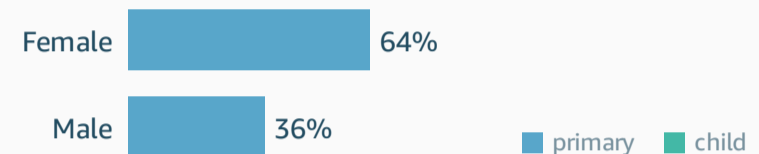
#### Cases by age



#### Cases by relationship



#### Cases by gender



### Counseling Services

The following is a summary of short-term counseling services. The data shown covers the mental health and work-life topics that were presented by members and the session delivery type. Data for peer support groups is also provided to report the types of groups that were attended by members.

#### Personal problems

Number of cases

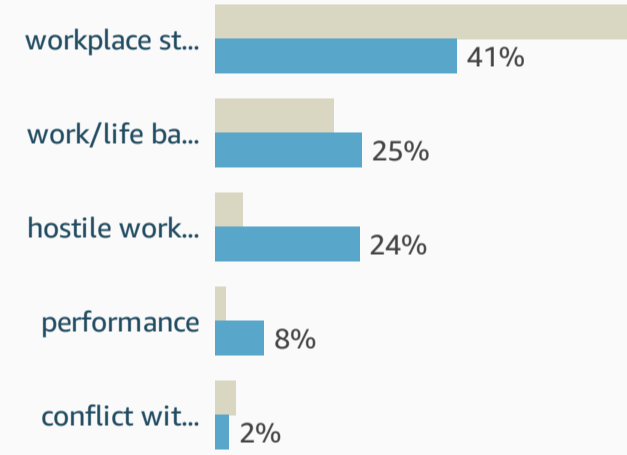
#### Top 5

No data  
There was no data found for the visual

#### Work related problems

Number of cases

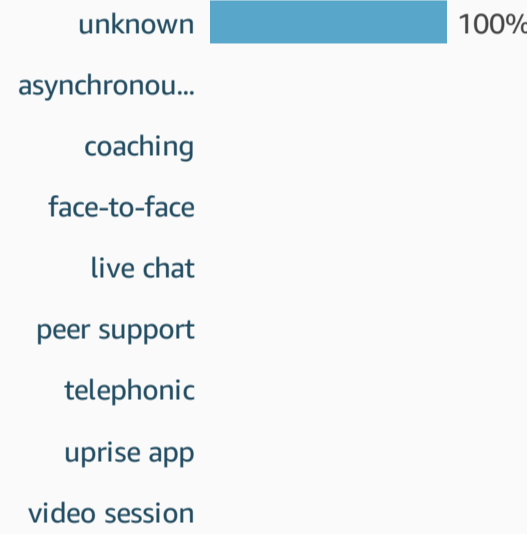
#### Top 5



% Book of Business % Account Services

#### Delivery types

Number of cases



#### Peer support groups

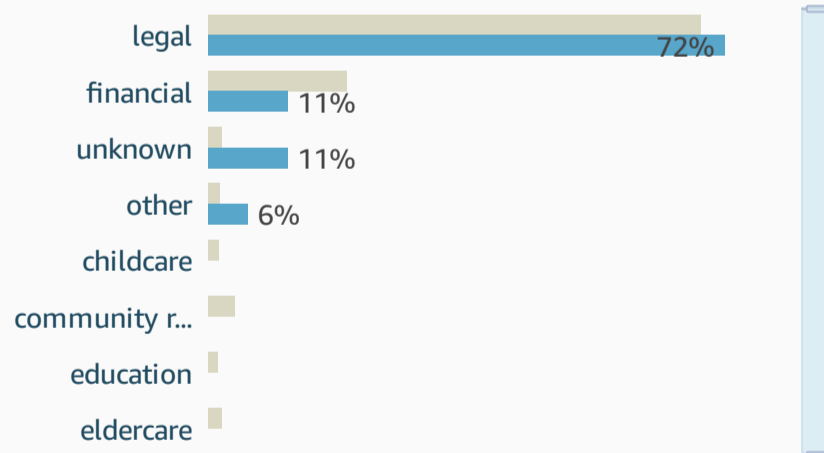
Number of cases

No data  
There was no data found for the visual

### Work-life Services

Uprise Health provides work-life services to help members better manage issues and concerns that impact their work and home. Services include legal, financial, budget planning, child and parenting, and eldercare support.

Number of cases



% Book of Business % Account Services

### Management Services

These graphs show data on support Uprise Health provided to managers who have identified and documented employee performance issues. The following graphs show phone consultations to support managers with identifying and documenting performance issues

#### Cases by type

Number of cases



consultation referral

#### Referral problems

Number of cases



No data  
There was no data found for the visual

### Employer Services

Employer services includes webinars, critical incidents support, and health fairs. There may be some additional delay in reporting of this section.

Employer Services data updated on Apr-01-2024

No data

There was no data found for the visual

### Digital Self-Services

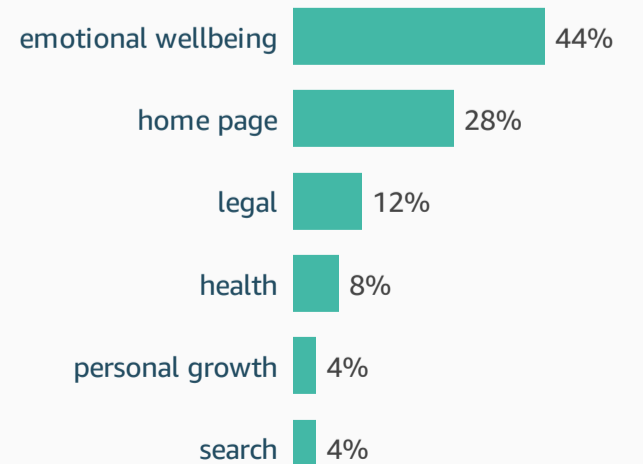
Uprise Health provides an online work-life portal that provides members access to online resources for work-life, training, and on-demand webinars. This section is updated monthly.

Website data updated on Feb-2024 ; Uprise app data updated on Mar-31-2024

#### Cases by type



#### Visits by website sections



### Overview

This dashboard is a valuable tool to understand details about your program with Uprise Health. It provides details for total cases, demographics, services, utilization, and top presenting problems. If total cases are too low, some data will be hidden due to member confidentiality policies.

Uprise app data updated on Mar-31-2024 and Case management data updated on Mar-30-2024

#### Total cases

# 30

Any member contact which includes but is not limited to: traditional EAP requests, employer services, and monthly active users of digital self-guided tools and resources.

#### Utilization

# 3.3%

Total cases divided by primary members calculated over the selected period.  
Current annual projection: **3.3%**

#### Primary Members

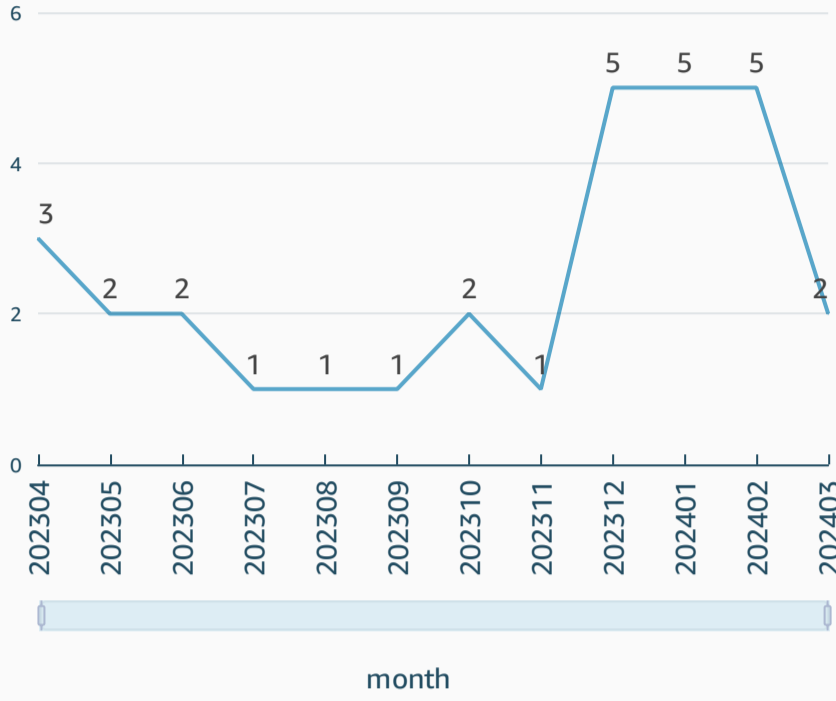
# 910

Definition: Number of primary members reported to your Client Success manager.

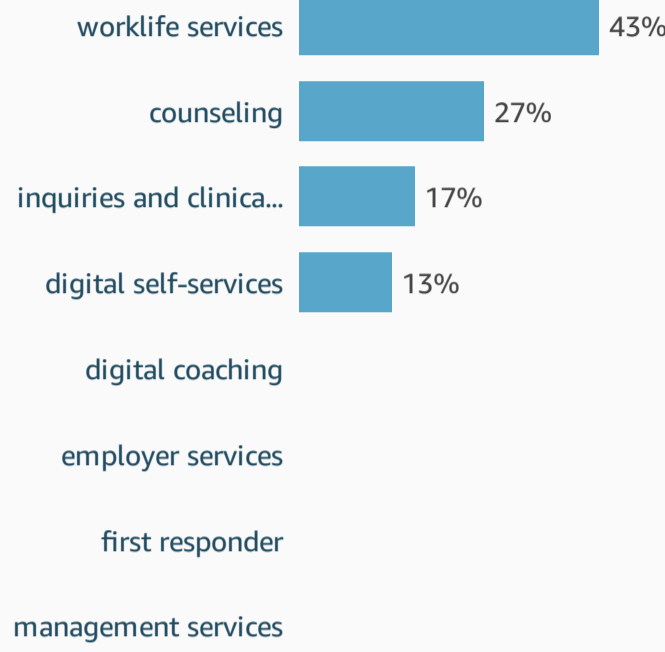
#### Top Problems

- **stress/anxiety** with 4 cases
- **depression** with 1 cases
- **child/family** with 1 cases

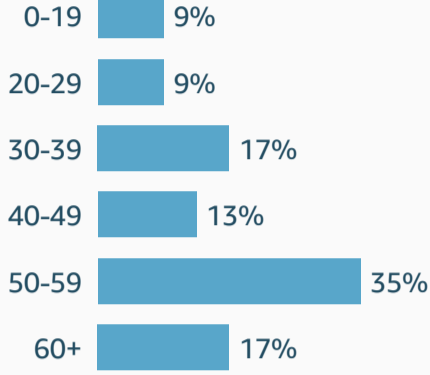
#### Cases by month



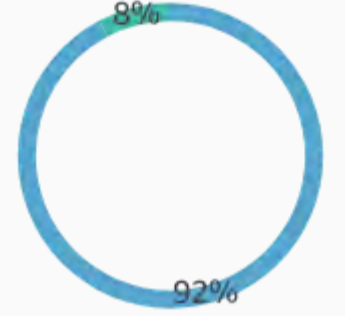
#### Cases by type



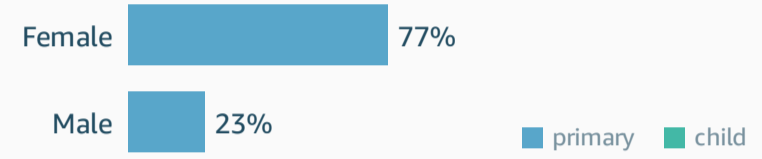
#### Cases by age



#### Cases by relationship



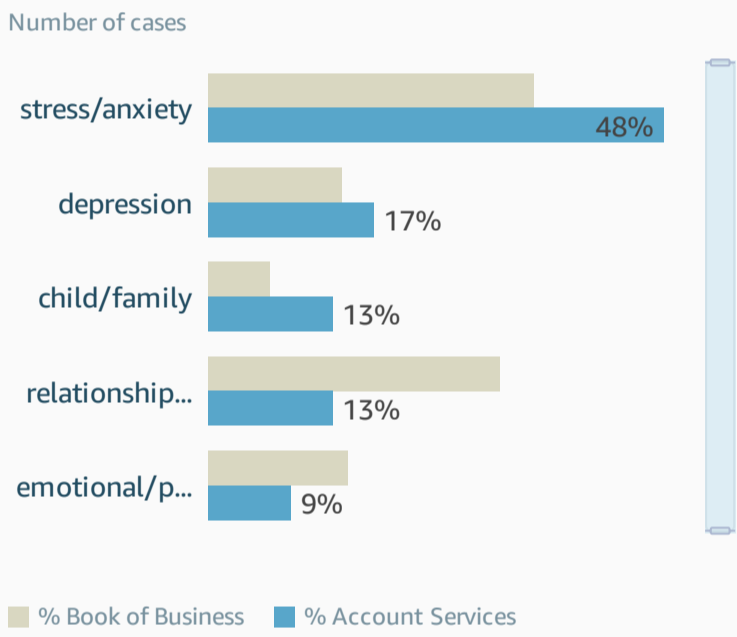
#### Cases by gender



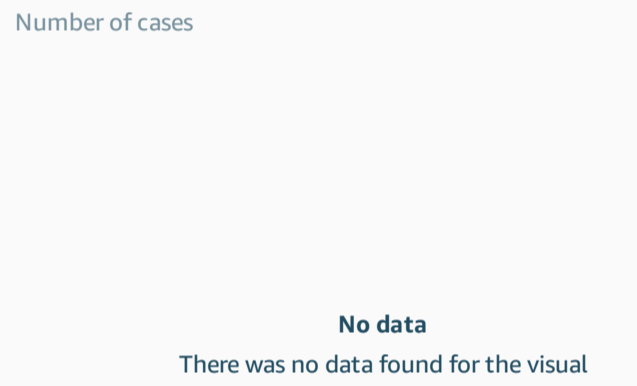
### Counseling Services

The following is a summary of short-term counseling services. The data shown covers the mental health and work-life topics that were presented by members and the session delivery type. Data for peer support groups is also provided to report the types of groups that were attended by members.

#### Personal problems



#### Work related problems



#### Delivery types

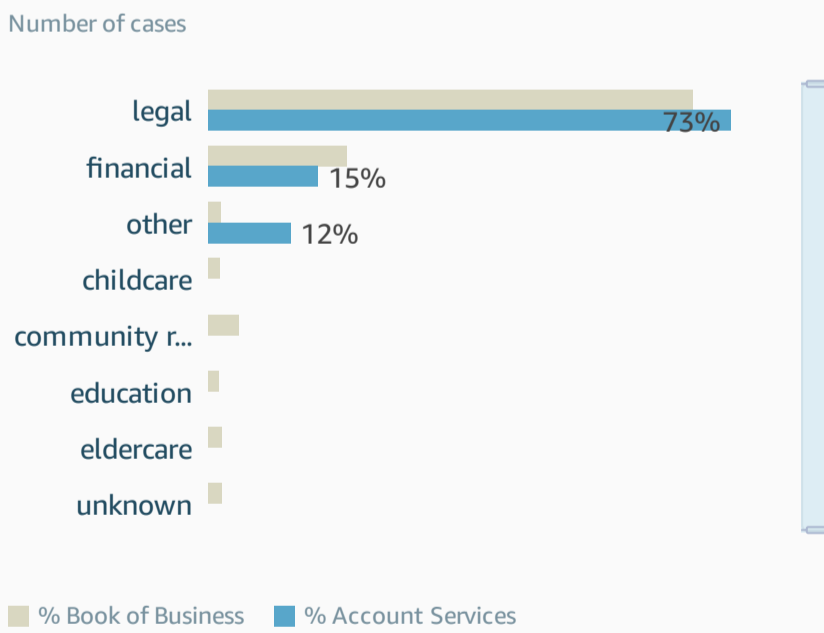


#### Peer support groups



### Work-life Services

Uprise Health provides work-life services to help members better manage issues and concerns that impact their work and home. Services include legal, financial, budget planning, child and parenting, and eldercare support.



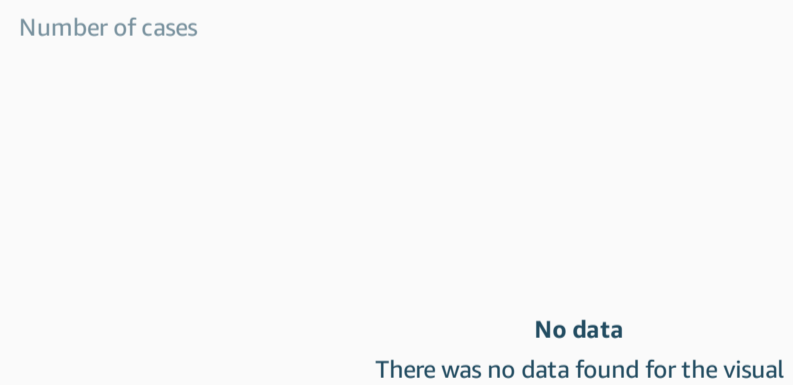
### Management Services

These graphs show data on support Uprise Health provided to managers who have identified and documented employee performance issues. The following graphs show phone consultations to support managers with identifying and documenting performance issues

#### Cases by type



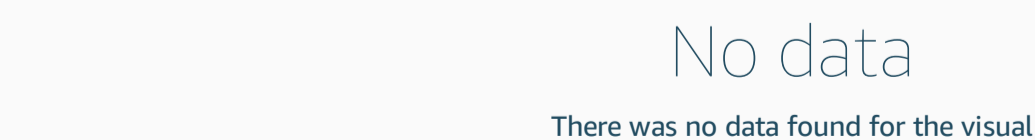
#### Referral problems



### Employer Services

Employer services includes webinars, critical incidents support, and health fairs. There may be some additional delay in reporting of this section.

Employer Services data updated on Apr-01-2024

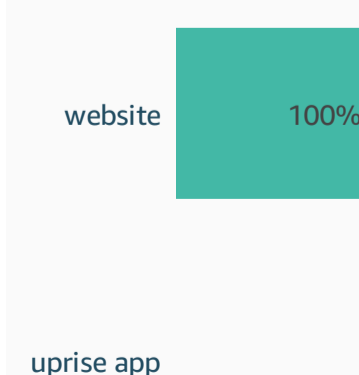


### Digital Self-Services

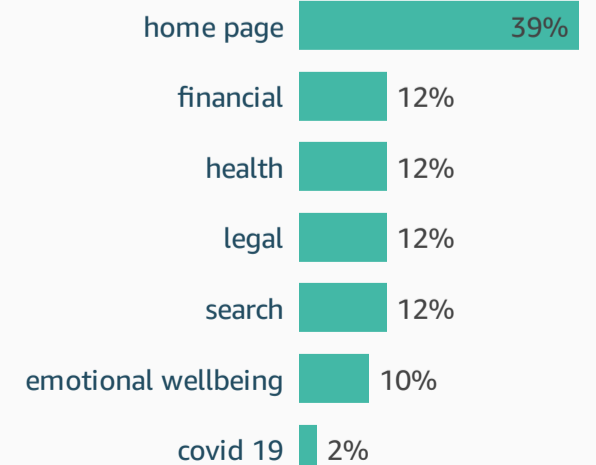
Uprise Health provides an online work-life portal that provides members access to online resources for work-life, training, and on-demand webinars. This section is updated monthly.

Website data updated on Feb-2024 ; Uprise app data updated on Mar-31-2024

#### Cases by type



#### Visits by website sections



## Overview

This dashboard is a valuable tool to understand details about your program with Uprise Health. It provides details for total cases, demographics, services, utilization, and top presenting problems. If total cases are too low, some data will be hidden due to member confidentiality policies.

Uprise app data updated on Mar-31-2024 and Case management data updated on Mar-30-2024

### Total cases

11

Any member contact which includes but is not limited to: traditional EAP requests, employer services, and monthly active users of digital self-guided tools and resources.

### Utilization

1.0%

Total cases divided by primary members calculated over the selected period.  
Current annual projection: **1.0%**

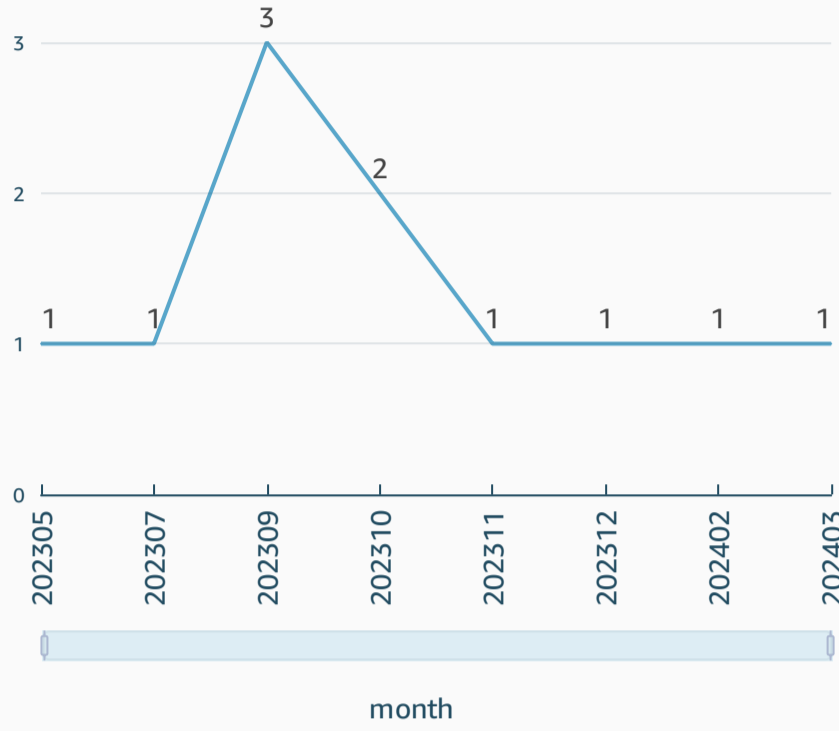
### Primary Members

1,152

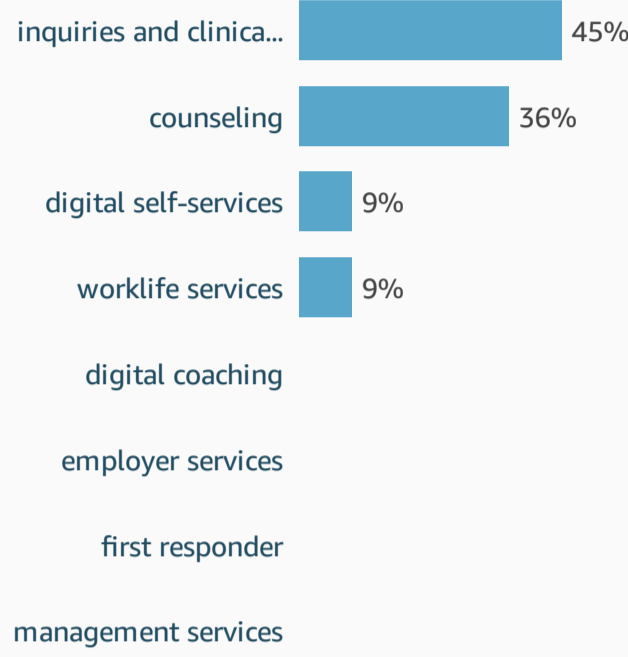
Definition: Number of primary members reported to your Client Success manager.

### Top Problems

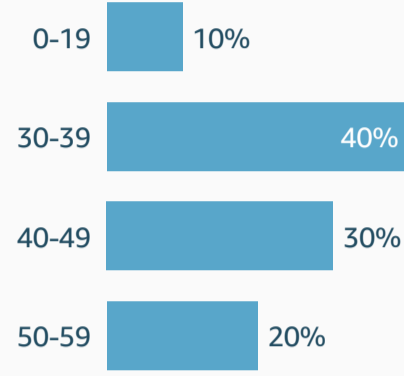
### Cases by month



### Cases by type



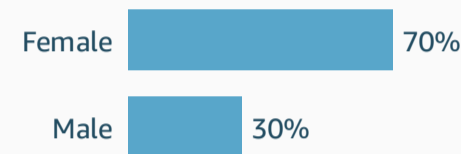
### Cases by age



### Cases by relationship



### Cases by gender



## Counseling Services

The following is a summary of short-term counseling services. The data shown covers the mental health and work-life topics that were presented by members and the session delivery type. Data for peer support groups is also provided to report the types of groups that were attended by members.

### Personal problems

Number of cases

Top 5

No data

There was no data found for the visual

### Work related problems

Number of cases

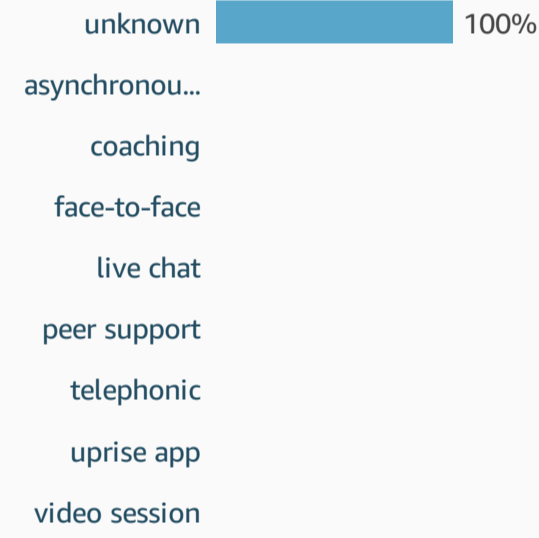
Top 5

No data

There was no data found for the visual

### Delivery types

Number of cases



### Peer support groups

Number of cases

No data

There was no data found for the visual

## Work-life Services

Uprise Health provides work-life services to help members better manage issues and concerns that impact their work and home. Services include legal, financial, budget planning, child and parenting, and eldercare support.

Number of cases

No data

There was no data found for the visual

## Management Services

These graphs show data on support Uprise Health provided to managers who have identified and documented employee performance issues. The following graphs show phone consultations to support managers with identifying and documenting performance issues

### Cases by type



### Referral problems

Number of cases

Top 5

No data

There was no data found for the visual

## Employer Services

Employer services includes webinars, critical incidents support, and health fairs. There may be some additional delay in reporting of this section.

Employer Services data updated on Apr-01-2024

No data

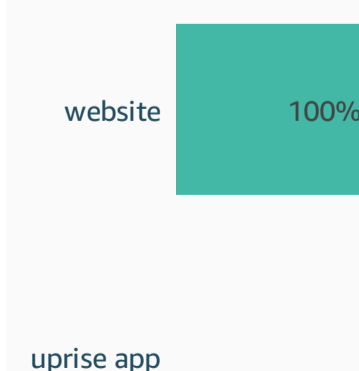
There was no data found for the visual

## Digital Self-Services

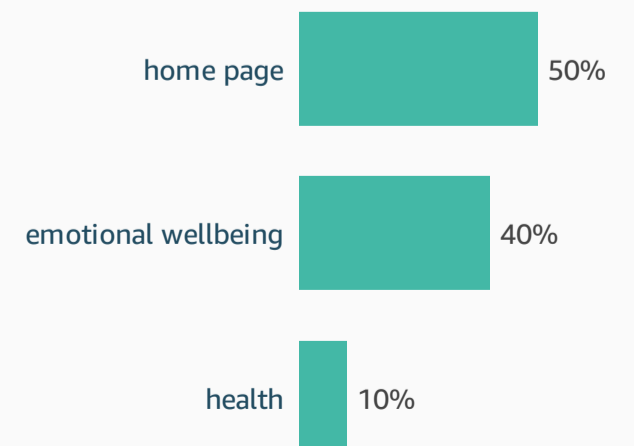
Uprise Health provides an online work-life portal that provides members access to online resources for work-life, training, and on-demand webinars. This section is updated monthly.

Website data updated on Feb-2024 ; Uprise app data updated on Mar-31-2024

### Cases by type



### Visits by website sections



## Overview

This dashboard is a valuable tool to understand details about your program with Uprise Health. It provides details for total cases, demographics, services, utilization, and top presenting problems. If total cases are too low, some data will be hidden due to member confidentiality policies.

*Uprise app data updated on Mar-31-2024 and Case management data updated on Mar-30-2024*

### Total cases

0

Any member contact which includes but is not limited to: traditional EAP requests, employer services, and monthly active users of digital self-guided tools and resources.

### Utilization

**This insight could not be displayed**  
Authors can open the insight editor for details and correct any issues

### Primary Members

35

Definition: Number of primary members reported to your Client Success manager.

### Top Problems

### Cases by month

**No data**  
There was no data found for the visual

### Cases by type

**No data**  
There was no data found for the visual

### Cases by age

**No data**  
There was no data found for the visual

### Cases by relationship

**No data**  
There was no data found for the visual

### Cases by gender

**No data**  
There was no data found for the visual

## Counseling Services

The following is a summary of short-term counseling services. The data shown covers the mental health and work-life topics that were presented by members and the session delivery type. Data for peer support groups is also provided to report the types of groups that were attended by members.

### Personal problems

Number of cases

Top 5

**No data**  
There was no data found for the visual

### Work related problems

Number of cases

Top 5

**No data**  
There was no data found for the visual

### Delivery types

Number of cases

**No data**  
There was no data found for the visual

### Peer support groups

Number of cases

**No data**  
There was no data found for the visual

## Work-life Services

Uprise Health provides work-life services to help members better manage issues and concerns that impact their work and home. Services include legal, financial, budget planning, child and parenting, and eldercare support.

Number of cases

**No data**  
There was no data found for the visual

## Management Services

These graphs show data on support Uprise Health provided to managers who have identified and documented employee performance issues. The following graphs show phone consultations to support managers with identifying and documenting performance issues

### Cases by type

**No data**  
There was no data found for the visual

### Referral problems

Number of cases

Top 5

**No data**  
There was no data found for the visual

## Employer Services

Employer services includes webinars, critical incidents support, and health fairs. There may be some additional delay in reporting of this section.

*Employer Services data updated on Apr-01-2024*

No data

There was no data found for the visual

## Digital Self-Services

Uprise Health provides an online work-life portal that provides members access to online resources for work-life, training, and on-demand webinars. This section is updated monthly.

*Website data updated on Feb-2024 ; Uprise app data updated on Mar-31-2024*

### Cases by type

**No data**  
There was no data found for the visual

### Visits by website sections

**No data**  
There was no data found for the visual

Showing	
Parent Account	All
State	All
Account	SUNOL GLEN UNIFIED SCHOOL DISTRICT
Month	202403, 202402, 202401, 202312, 202311, 202310, 202309, 202308 and 4 more...
Service Type	All

## Overview

This dashboard is a valuable tool to understand details about your program with Uprise Health. It provides details for total cases, demographics, services, utilization, and top presenting problems. If total cases are too low, some data will be hidden due to member confidentiality policies.

*Uprise app data updated on Mar-31-2024 and Case management data updated on Mar-30-2024*

### Total cases

0

Any member contact which includes but is not limited to: traditional EAP requests, employer services, and monthly active users of digital self-guided tools and resources.

### Utilization

**This insight could not be displayed**  
Authors can open the insight editor for details and correct any issues

### Primary Members

5

Definition: Number of primary members reported to your Client Success manager.

### Top Problems

### Cases by month

**No data**  
There was no data found for the visual

### Cases by type

**No data**  
There was no data found for the visual

### Cases by age

**No data**  
There was no data found for the visual

### Cases by relationship

**No data**  
There was no data found for the visual

### Cases by gender

**No data**  
There was no data found for the visual

## Counseling Services

The following is a summary of short-term counseling services. The data shown covers the mental health and work-life topics that were presented by members and the session delivery type. Data for peer support groups is also provided to report the types of groups that were attended by members.

### Personal problems

Number of cases

Top 5

**No data**  
There was no data found for the visual

### Work related problems

Number of cases

Top 5

**No data**  
There was no data found for the visual

### Delivery types

Number of cases

**No data**  
There was no data found for the visual

### Peer support groups

Number of cases

**No data**  
There was no data found for the visual

## Work-life Services

Uprise Health provides work-life services to help members better manage issues and concerns that impact their work and home. Services include legal, financial, budget planning, child and parenting, and eldercare support.

Number of cases

**No data**  
There was no data found for the visual

## Management Services

These graphs show data on support Uprise Health provided to managers who have identified and documented employee performance issues. The following graphs show phone consultations to support managers with identifying and documenting performance issues

### Cases by type

**No data**  
There was no data found for the visual

### Referral problems

Number of cases

Top 5

**No data**  
There was no data found for the visual

## Employer Services

Employer services includes webinars, critical incidents support, and health fairs. There may be some additional delay in reporting of this section.

*Employer Services data updated on Apr-01-2024*

No data

There was no data found for the visual

## Digital Self-Services

Uprise Health provides an online work-life portal that provides members access to online resources for work-life, training, and on-demand webinars. This section is updated monthly.

*Website data updated on Feb-2024 ; Uprise app data updated on Mar-31-2024*

### Cases by type

**No data**  
There was no data found for the visual

### Visits by website sections

**No data**  
There was no data found for the visual

Showing	
Parent Account	All
State	All
Account	TRI VALLEY ROP
Month	202403, 202402, 202401, 202312, 202311, 202310, 202309, 202308 and 4 more...
Service Type	All



## Alameda County Schools Insurance Group

P.O. Box 2487

Dublin, CA 94568

Phone (925) 225-1030

Fax (925) 225-0653

[www.acsig.com](http://www.acsig.com)

### Executive Summary: Claims Trends – 5-year Point in Time

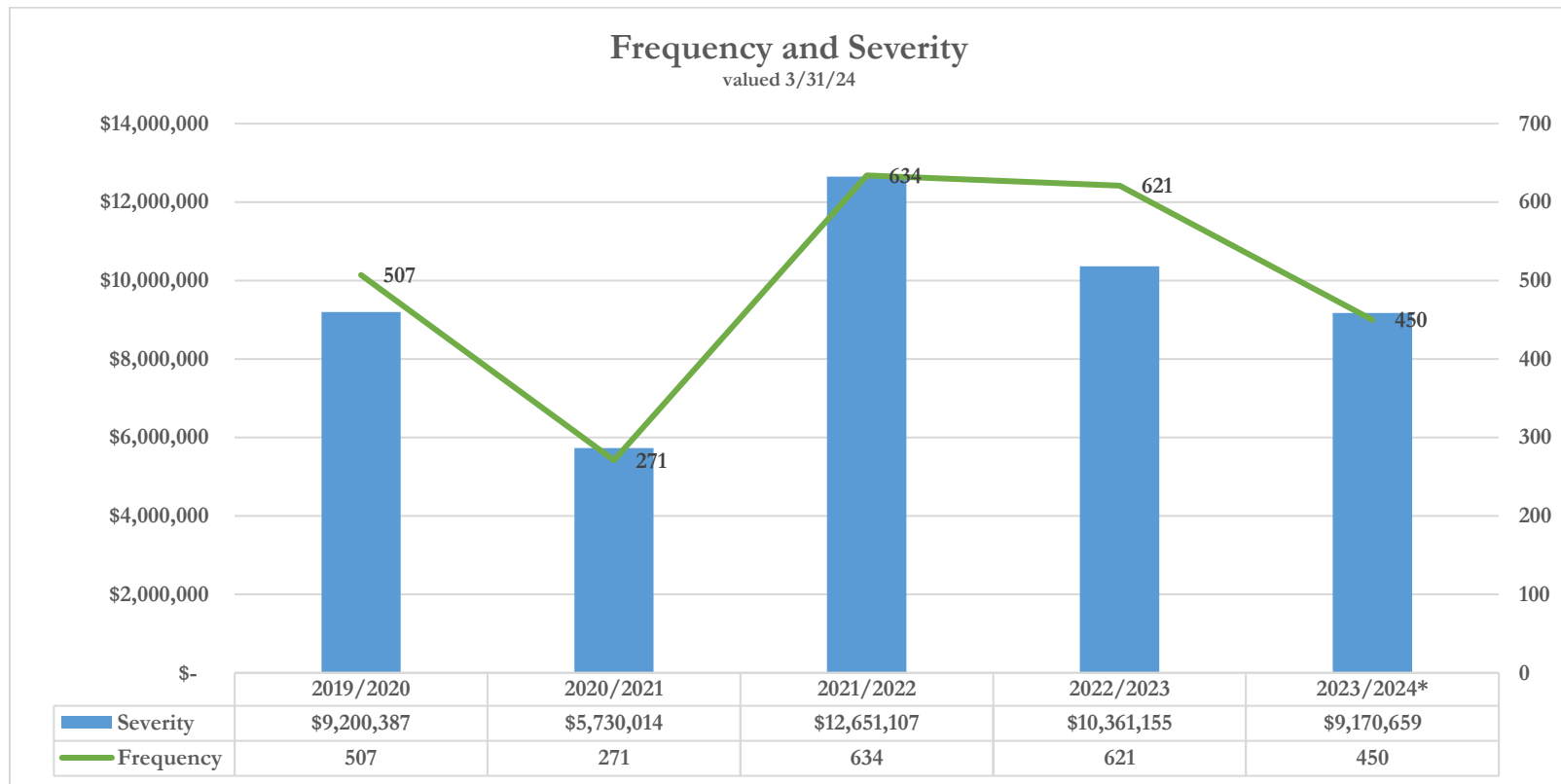
To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: Claim Trends

Keenan and Associates provides many services for ACSIG. Included in those services is the collection, aggregation, and analysis of program wide workers' compensation data. Michael Clark, Senior Risk Management Analyst with Keenan, prepared a claims trend report for review. That report is included in this packet. The report indicates the health and direction of the program and is a starting point for developing program improvements.

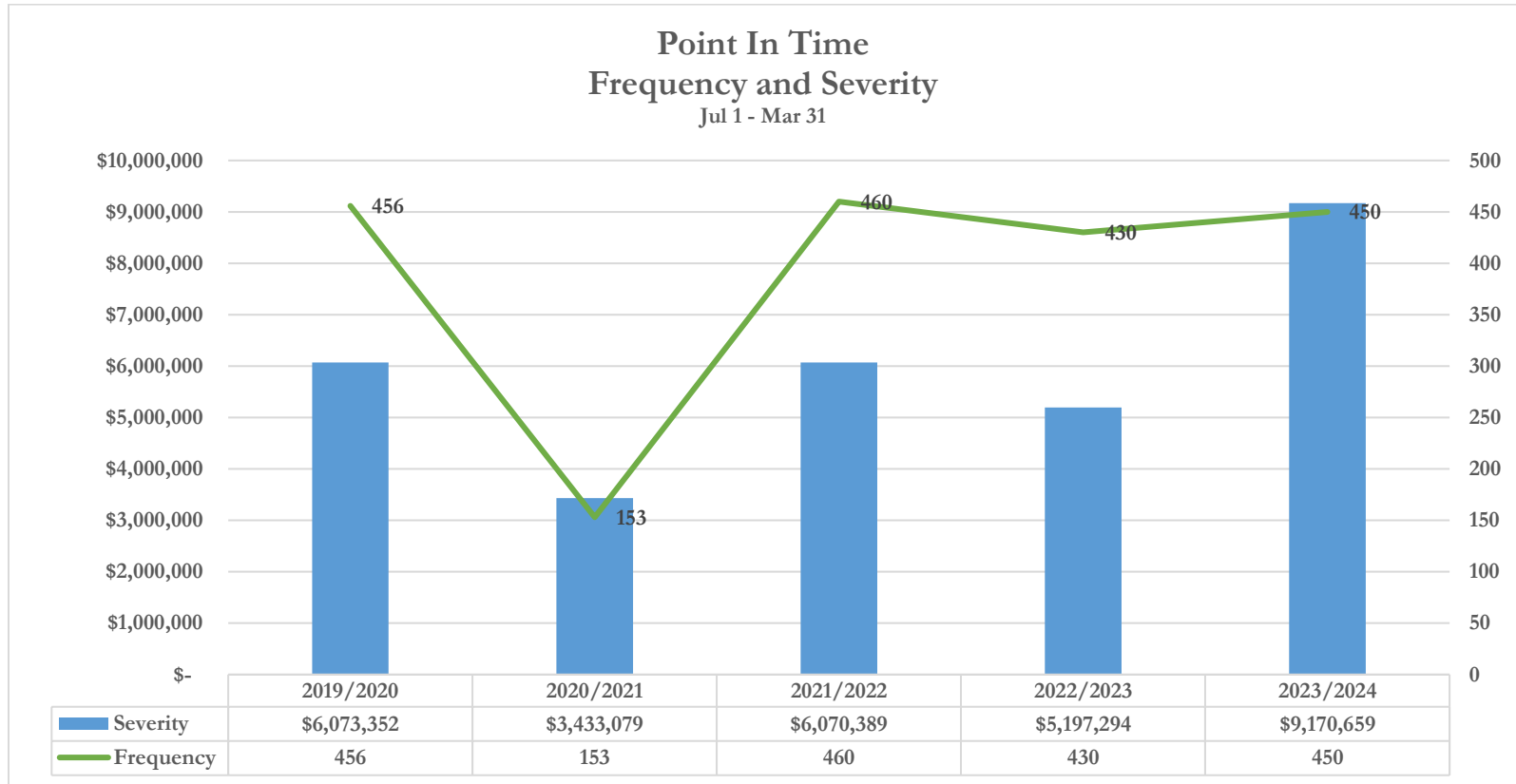
The Executive Director will present the information with discussion by the committee.

## Alameda County Schools Insurance Group

### Frequency and Severity of Claims by Fiscal Year



\*2023/2024 FY through 3/31





**Point In Time by District**

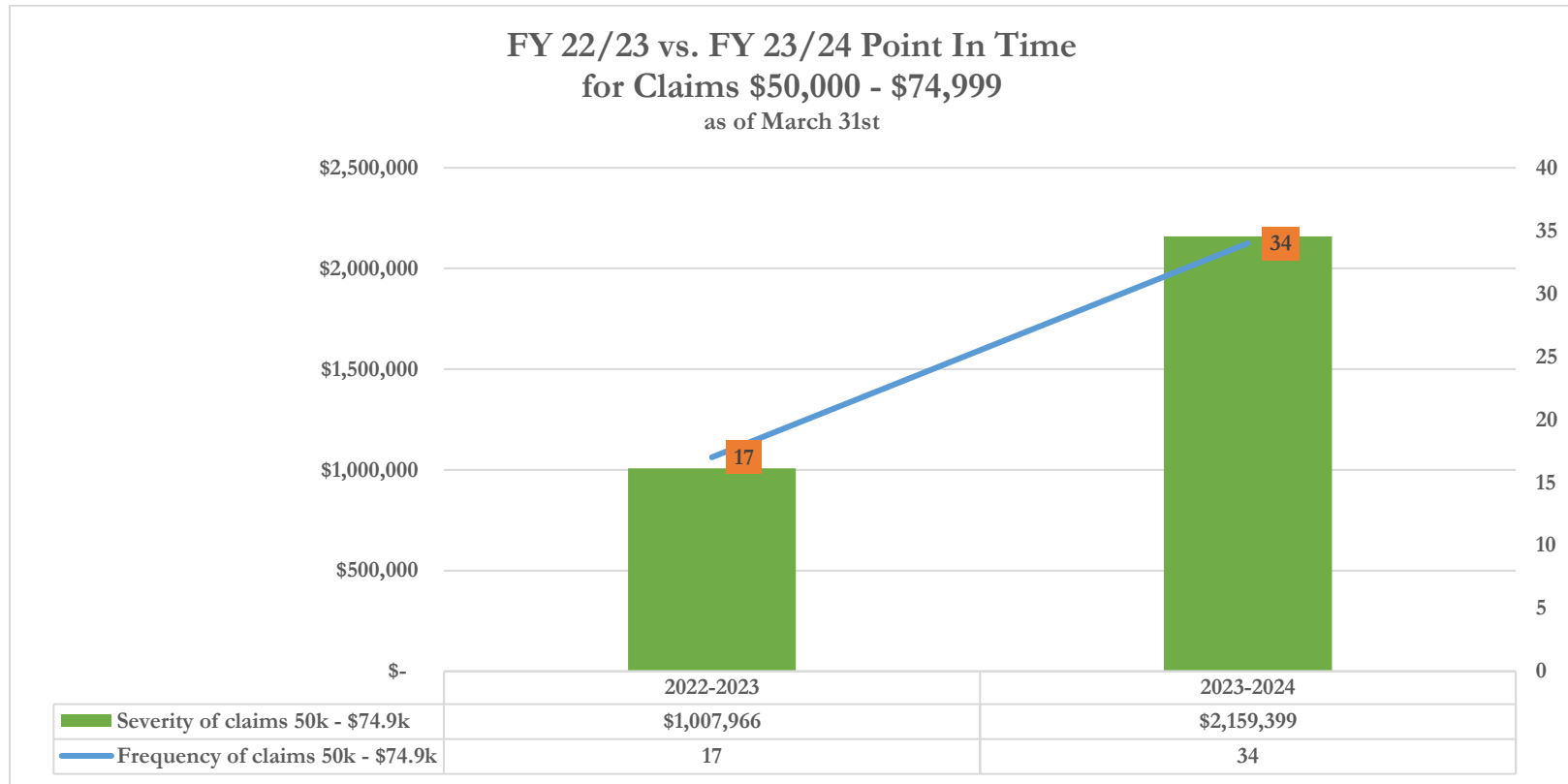
Valuation Date: March 2020, March 2021, March 2022, March 2023, March 2023

District	7/1/2019-3/31/2020		7/1/2020-3/31/2021		7/1/2021-3/31/2022		7/1/2022-3/31/2023		7/1/2023-3/31/2024	
	Frequency	Severity	Frequency	Severity	Frequency	Severity	Frequency	Severity	Frequency	Severity
Alameda County Office of Education	2	\$488	0	\$0	7	\$58,114	3	\$5,262	4	\$11,710
Alameda Unified School District	40	\$791,391	13	\$145,827	27	\$579,731	29	\$442,098	30	\$733,726
Albany Unified School District	13	\$446,619	2	\$29,922	10	\$147,663	9	\$231,845	12	\$348,015
Castro Valley Unified School District	33	\$362,822	11	\$90,748	28	\$393,013	40	\$381,695	30	\$280,076
Dublin Unified School District	38	\$343,969	17	\$767,609	36	\$330,956	42	\$526,255	48	\$976,523
Eden Area ROP	7	\$14,383	0	\$0	2	\$5,338	2	\$8,072	4	\$162,001
Emery Unified School District	5	\$126,740	1	\$10,000	6	\$26,465	6	\$61,040	5	\$3,964
Fremont Unified School District	102	\$1,857,471	24	\$578,763	89	\$1,161,333	74	\$877,408	83	\$2,069,301
Livermore Valley Joint Unified School District	45	\$394,244	13	\$137,594	45	\$618,175	37	\$585,091	33	\$1,016,132
Mission Valley ROP	1	\$101	1	\$4,900	1	\$4,900	6	\$66,316	1	\$406
Mountain House Elementary School District	0	\$0	1	\$3,264	0	\$0	0	\$0	0	\$0
New Haven Unified School District	29	\$101,682	14	\$259,160	52	\$855,453	50	\$322,427	45	\$547,448
Newark Unified School District	17	\$237,489	12	\$270,494	20	\$227,100	26	\$295,672	22	\$262,740
Piedmont Unified School District	10	\$71,603	2	\$66,836	3	\$44,336	11	\$168,010	14	\$104,437
Pleasanton Unified School District	32	\$463,253	14	\$265,735	38	\$318,181	37	\$401,256	38	\$1,013,443
San Leandro Unified School District	29	\$234,538	14	\$507,782	32	\$520,733	30	\$526,878	34	\$758,281
San Lorenzo Unified School District	53	\$626,557	14	\$294,443	63	\$778,898	25	\$275,759	46	\$840,132
Sunol Glen School District	0	\$0	0	\$0	0	\$0	0	\$0	1	\$42,325
Tri Valley Regional Occupational Program	0	\$0	0	\$0	1	\$0	3	\$22,210	0	\$0
<b>Totals</b>	<b>456</b>	<b>\$6,073,352</b>	<b>153</b>	<b>\$3,433,079</b>	<b>460</b>	<b>\$6,070,389</b>	<b>430</b>	<b>\$5,197,294</b>	<b>450</b>	<b>\$9,170,659</b>

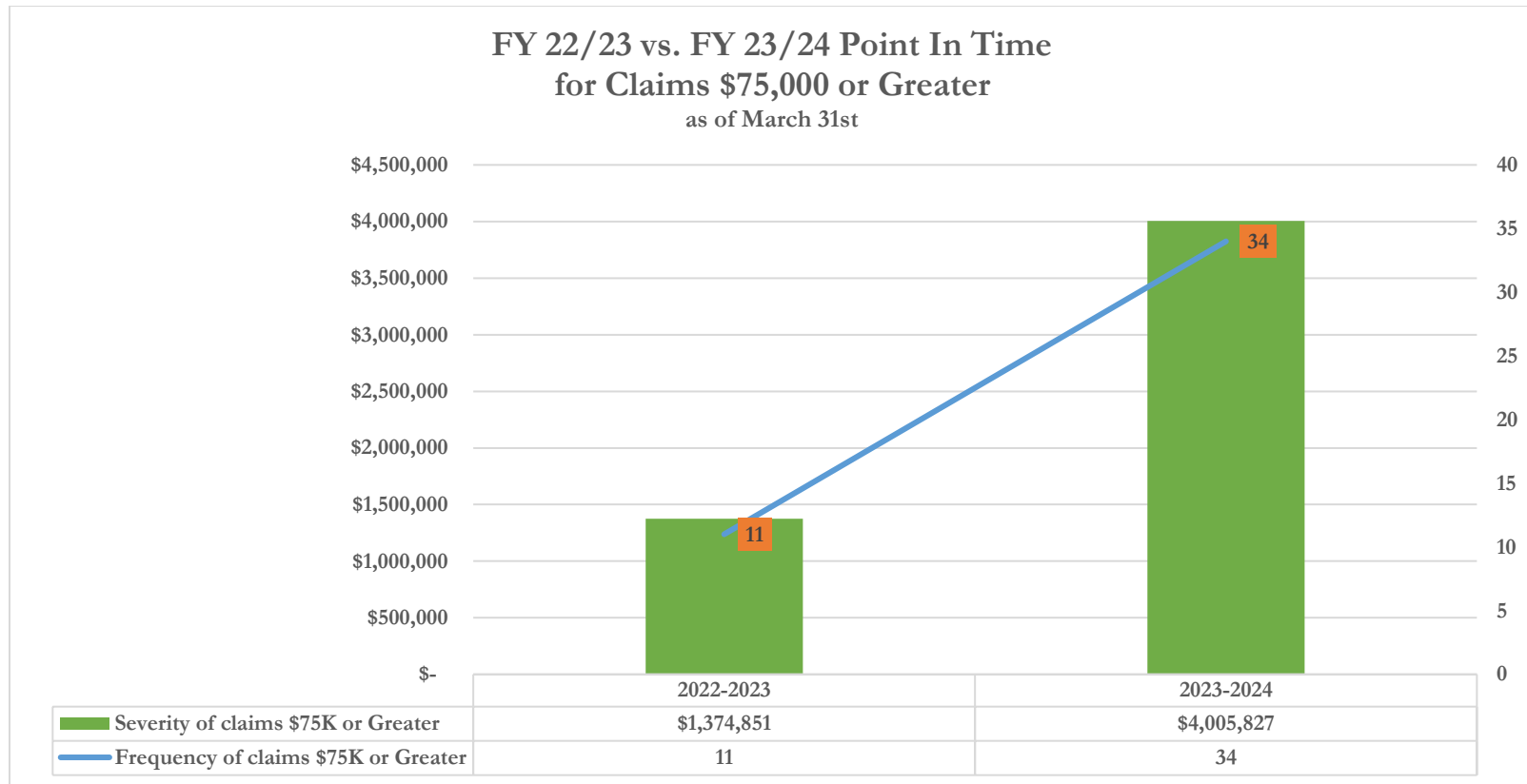
- '23/'24 Increase in Severity of \$3,973,365 when compared to previous year.
- '23/'24 Increase in Frequency by 20 claims when compared to previous year.

**2022/2023 vs 2023/2024 Point In Time Comparison**

As of 3.31.2024



- '23/'24 Severity increase of \$1,151,433 for claims \$50,000 - \$74,999
- '23/'24 Frequency Increase of 17 claims \$50,000 - \$74,999



- '23/'24 Severity increase of \$2,630,976 for claims greater than \$75,000
- '23/'24 Frequency increase in of 23 claims greater than \$75,000

**2023/2024 Occupation and Nature of Injury for All Claims Greater than \$50,000**

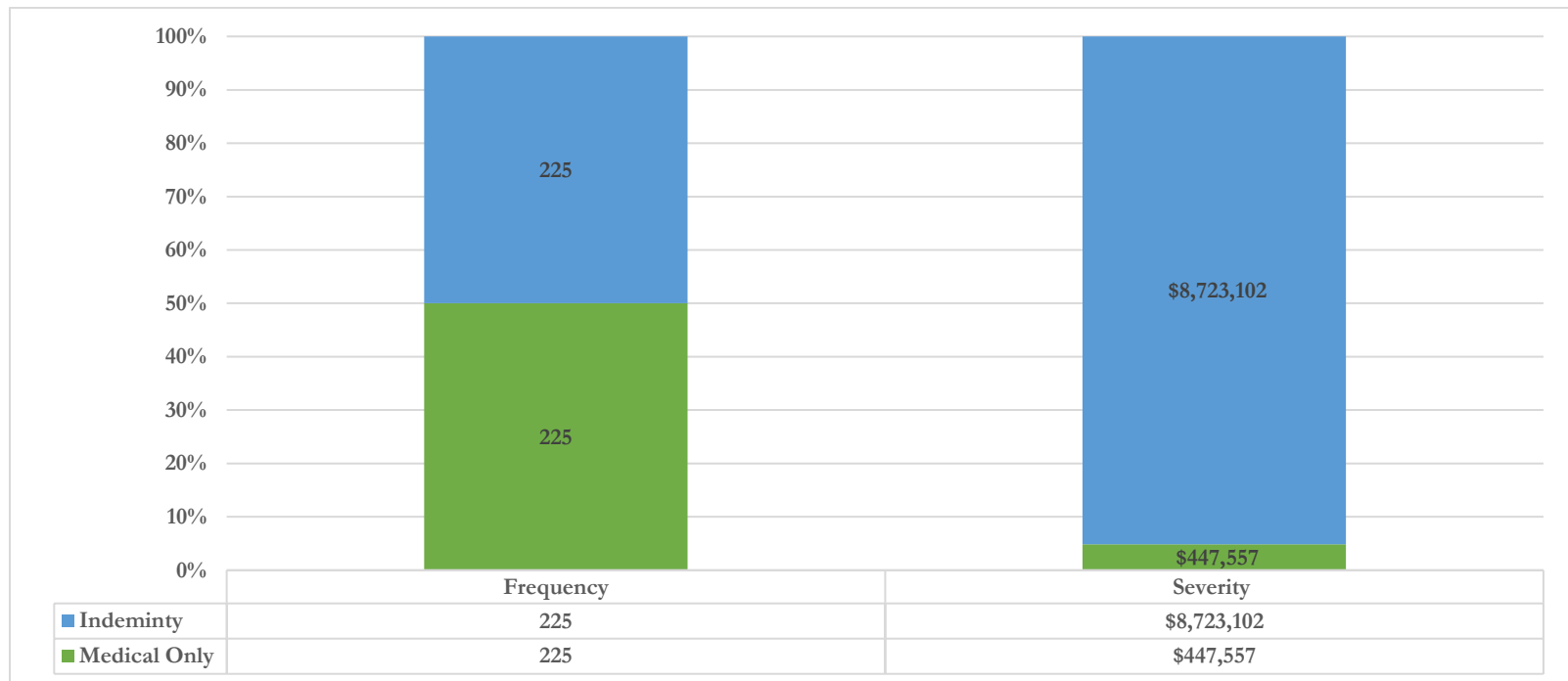
As of 3.31.2024

Occupation	Nature of Injury	Frequency	Severity
<b>ADMIN/CERTIFICATED</b>	Concussion	1	\$ 81,281
<b>ADMIN/CLASSIFIED</b>	All Other Cumulative	1	\$ 73,806
	All Other	2	\$ 198,462
	Contusion	2	\$ 161,478
	Fracture	1	\$ 118,690
	Strain	3	\$ 354,441
<b>AIDES</b>	Concussion	2	\$ 193,380
<b>AIDES-SPECIAL EDUCATION</b>	All Other	1	\$ 55,645
	Concussion	1	\$ 57,500
	Sprain	2	\$ 150,751
	Strain	7	\$ 576,651
<b>ATHLETICS</b>	Fracture	1	\$ 59,263
	Sprain	1	\$ 54,193
<b>BUS DRIVER</b>	Strain	1	\$ 101,854
<b>CAMPUS-YARD SUPERVISOR</b>	Contusion	1	\$ 56,009
	Sprain	1	\$ 61,795
<b>CLERICAL</b>	Multi Inj Both Phys & Psych	1	\$ 50,979
	All Other	1	\$ 152,586
	Strain	1	\$ 63,228
<b>CUSTODIANS</b>	All Other	2	\$ 203,136
	Fracture	3	\$ 427,214
	Strain	8	\$ 614,680
<b>FOOD SERVICE</b>	All Other	1	\$ 69,251
	Strain	2	\$ 147,389
<b>GROUNDKEEPING</b>	Strain	1	\$ 81,391
<b>MAINTENANCE</b>	Concussion	1	\$ 103,727
	Sprain	2	\$ 199,881
	Strain	2	\$ 182,148

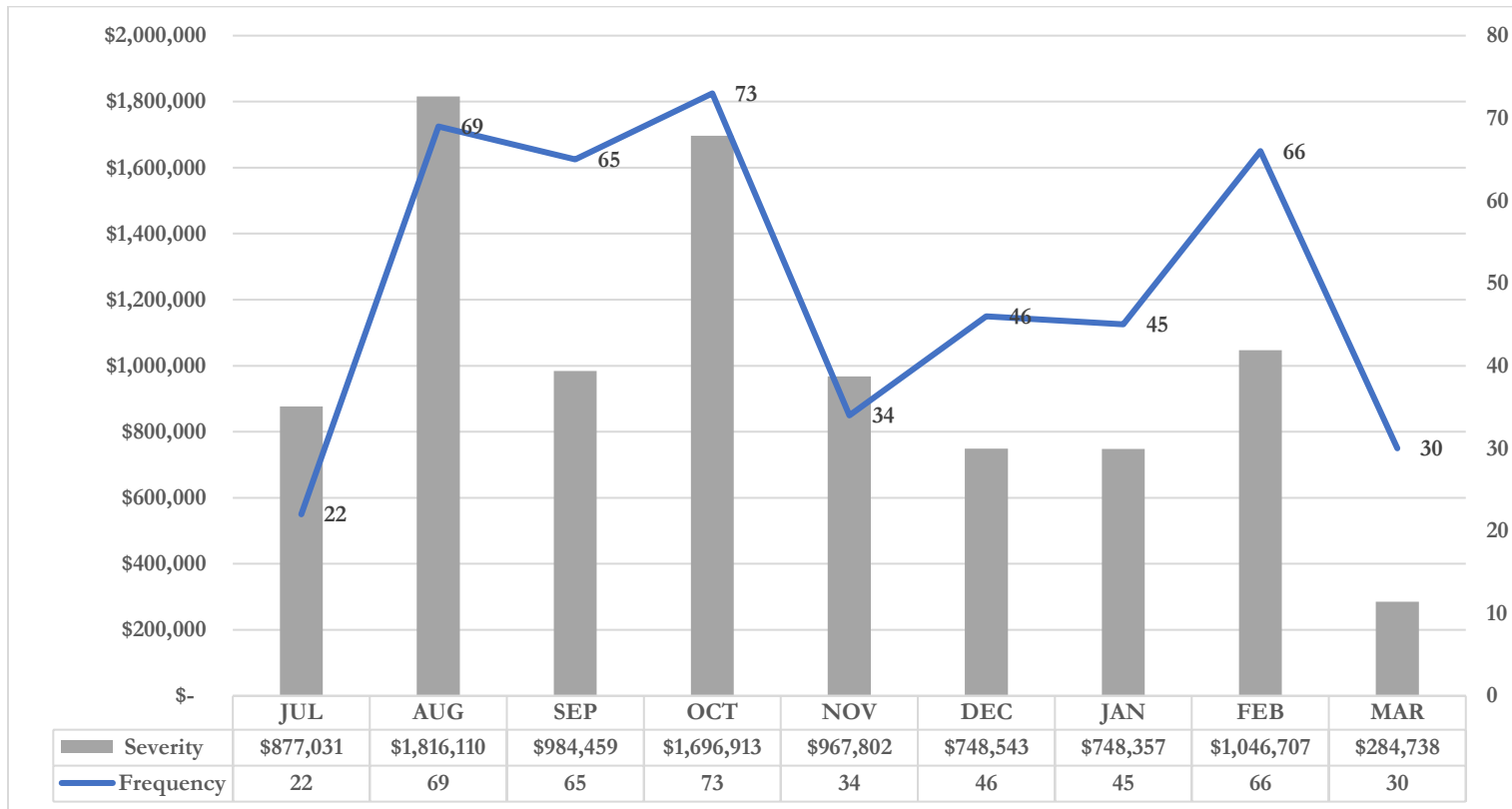
<b>TEACHERS</b>	Mental Stress	1	\$ 52,075
	All Other	2	\$ 174,233
	Laceration	1	\$ 54,214
	Sprain	6	\$ 751,616
	Strain	2	\$ 216,198
<b>TEACHER-SPECIAL ED</b>	Mental Stress	1	\$ 83,561
	Sprain	2	\$ 182,523
<b>Grand Total</b>		<b>68</b>	<b>\$ 6,165,226</b>

**2023/2024 Claims Frequency and Severity by Claim Type**

As of 3.31.2024



**2023/2024 Claims Distribution by Month**  
As of 3.31.2024





**Alameda County Schools Insurance Group**

P.O. Box 2487  
 Dublin, CA 94568  
 Phone (925) 225-1030  
 Fax (292) 225-0653  
[www.acsig.com](http://www.acsig.com)

**Executive Summary: Workers' Compensation Claims Audit**

To: ACSIG Executive Committee  
 From: Kimberly Dennis  
 Date: May 16, 2024  
 Subj.: Workers' Compensation Claims Audit

Regular audits of Workers' Compensation claims handling practices promote Workers' Compensation program health. Accordingly, ACSIG directs audits of its Workers' Compensation Claims Administrator every two years. The most recent audit was completed by Newfront Insurance Services, LLC, and is dated April 18, 2024. That audit is included in this packet. Recent audit scores are listed below:

<b>Date</b>	<b>Auditor</b>	<b>Administrator</b>	<b>Score</b>
April 21, 2014	Wells Fargo Ins. Ser.	Keenan	82.5%
April 3, 2018	USI	Keenan	84%
May 29, 2020	ABD Insurance	Keenan	90%
April 27, 2022	Newfront	Keenan	88%
April 18, 2024	Newfront	Keenan	88.4%

The Executive Director will present the Audit for discussion and Patrice Grant, Claims Manager for Keenan, will provide additional information. The Executive Committee will be asked for a recommendation to the Full Board.

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*WORKERS' COMPENSATION CLAIMS AUDIT*

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1

Client: Alameda County Schools Insurance Group  
Claims Administrator: Keenan & Associates

Report Date: April 18, 2024  
Audit Dates: March 4<sup>th</sup> – March 29<sup>th</sup>, 2024.

Auditors: Newfront Insurance Services, LLC  
**JoAnn M Gamoras, CLCS, WC SIP, WCCA**  
AVP, Senior Claims Consultant  
Property & Casualty-Occupational Health and Safety

**Jennet Horder, CLCS, WC SIP, WCCA**  
VP, Senior Claims Consultant  
Property & Casualty – Commercial Lines

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*SUMMARY OF AUDIT CONSIDERATIONS*

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Pursuant to the service agreement between Alameda County Schools Insurance Group (ACSIG) and ABD Insurance and Financial Services, Inc., dba: Newfront Insurance Services, LLC executed on January 23, 2024, and effective February 12, 2024, Newfront conducted an audit of workers' compensation claims administered by Keenan & Associates for ACSIG. The audit was completed based on information as made available by Keenan & Associates.

Auditors were provided access to Keenan & Associates claims systems and loss data valued as of January 31, 2024, in excel format, 08) PIPS Program Structure pages 1-14, Pleasanton Org Chart, 23-25 Amendment of PRIME Fees, Prime Savings Report, UR IMR to State (Maximus), Genex CA UR Plan Complete 2.7.2022, Keenan standards and procedures, and a summary of inventory and tenure of claims team.



The actual review of claims was completed remotely with access to documentation via the claims system. The review reflects work completed after the audit previously conducted in 2022. No work prior to April 2022 was considered in this review to avoid any duplication of findings unless an issue was found to be pertinent and outstanding during the period of review.

Sixty-six claims were reviewed for the following as applicable (not every claim has the same applicable issues to review. Only the categories which were eligible for review were scored and commented on):

**HOUSEKEEPING:** a review of all pertinent documentation required in the file not limited to DWC1, 5020, 5021, wage statements, final settlement documents, applications of adjudication, disclosures, etc.; accuracy of data in the system and documentation to ensure dates of injury/ knowledge/ hire match, coding for type of claim, status of claim, and body parts; identification of documents that are not appropriately filed under the relative claim.

**NOTICES COMPLIANCE:** a review of all obligatory and industry practice notices for timeliness, appropriateness, and accuracy (not following PAR audit criteria).

**PAYMENTS:** a review of payments issued in a claim including benefits (e.g., temporary disability, permanent disability, wage loss, mileage, voucher issuance), settlements and a limited number of bills randomly picked of medical billings, vendor payments, and applicant attorney fees for accuracy and timeliness.

**DISABILITY MANAGEMENT:** a review of how temporary and permanent disability is managed from return-to-work efforts, coordination with the medical doctors on disability issues, pursuit of permanent and stationary status, and apportionment.

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**MEDICAL MANAGEMENT:** a review of the medical management including insuring medical reporting compliance by doctors, 30-day medical control/MPN assertion, and future medical monitoring; use of nurse case managers, utilization review (with a random review of up to 5 Requests for Authorizations), pharmacy review, and medical legal examinations.

**INVESTIGATION:** a review of investigation efforts throughout the life of the claim from AOE/COE (compensability) issues to sequelae claims and any appropriate investigation needs but for subrogation which has its own category.

**SUBROGATION:** a review of the initial rule in/out of available subrogation opportunities and actual subrogation pursuit and recovery.

**LITIGATION MANAGEMENT:** a review of the coordination of all legal matters relative to the claim including timeliness and detail of referral to defense attorney, plan of action detail and substance, response, and escalation efforts, and illustrated collaboration.

**RESOLUTION /CLOSURE:** a review of the timeliness of closures, efforts to settle including assessments on options to settle, and follow up efforts to insure timeliness of settlement.

**CASE OVERSIGHT:** a review of the overall frequency and effectiveness of the examiner, supervisor and manager management of the case including diary setting, timely/thorough review of case updates and assessments, plan of action detail/goal setting, and any other oversight as required via service contract with other parties including client for things like reserve and settlement authorizations.

**RESERVES:** a review of the timing and accuracy of initial, subsequent, and current reserves including subrogation recovery documentation.

*For a breakdown of the type and status of the claims reviewed, please see Appendix A.*



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## AUDIT RESULTS

Individual claims were reviewed with the described areas of consideration scoring up to 5 points each with 5 being the best score and 1 being the worst. A modifier of .5 was used at the discretion of the auditor.

If a claim had all 11 considerations applicable for review the highest number of points available was 55. If less than 11 areas were applicable for review, scoring was adjusted to remove all non-applicable points. For example, if subrogation and resolution/ closure were considered non-applicable the highest number of points available for that claim would be 45 instead of 55.



To determine the percentage score of each described area of consideration and / or individual claim the actual points scored were divided by the points available for that claim and/or area of consideration.

After review of all 66 claims and the applicable considerations for review the scoring was as follows:

Total Points Available for all Claims: 2555

Total Points Scored for all Claims: 2259

Percentage Score: 88.4%

Each area of consideration scored as follows:

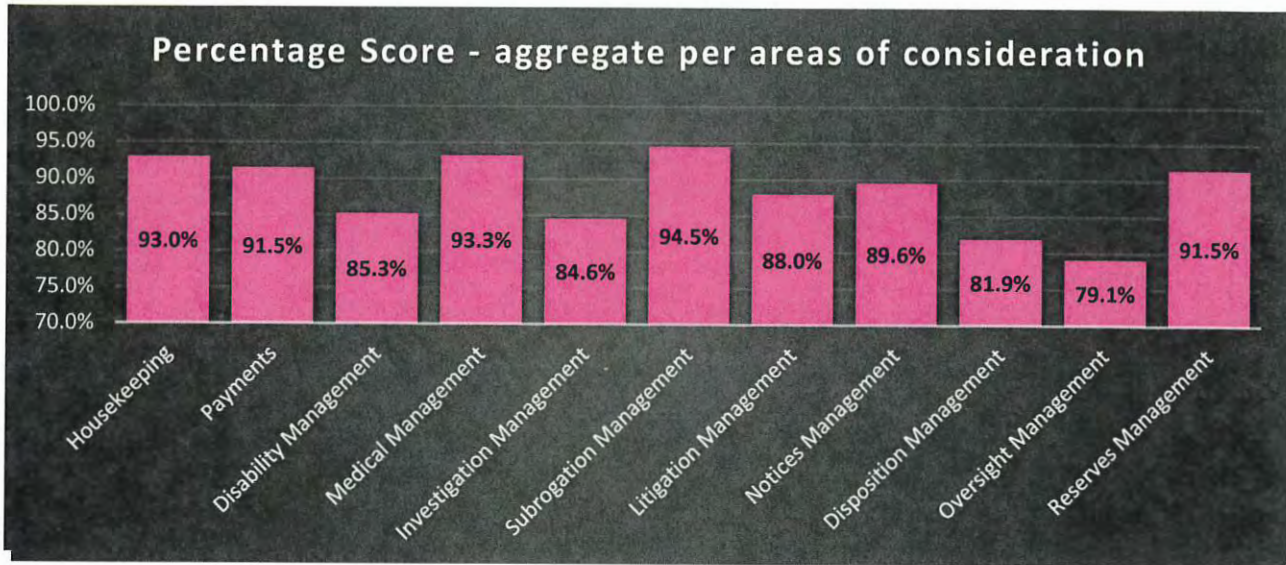
DESCRIPTION	# of claims eligible for review	Points Available	Points Scored
HOUSEKEEPING	66	330	307
PAYMENTS	61	305	279
DISABILITY MANAGEMENT	36	180	153.5
MEDICAL MANAGEMENT	49	245	228.5
INVESTIGATIONS	26	130	110
SUBROGATION	22	110	104
LITIGATION MANAGEMENT	15	75	66
NOTICES	57	285	255.5
RESOLUTION/ CLOSURE	47	235	192.5
CASE OVERSIGHT	66	330	261
RESERVES	66	330	302

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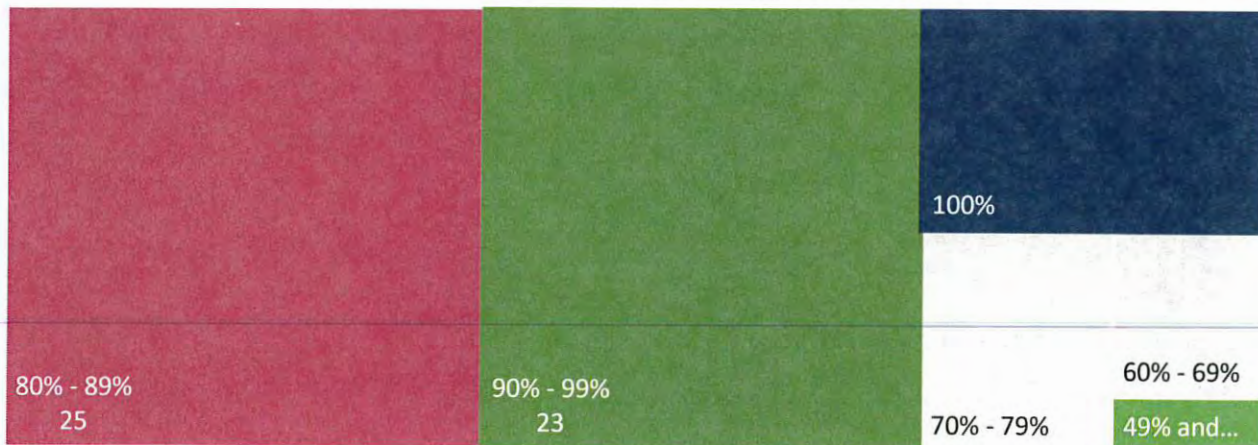
6

Average percentage score = 88.4%

Individual claims percentage scores ranged from 35% to 100% and is summarized by range as follows:

Percentage Score Range	# of Claims
49% and under	1
50%-59%	0
60%-69%	3
70%-79%	5
80%-89%	25
90-99%	23
100%	9

**Scoring Percentage Ratio: # of claims/ total reviewed**



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AUDIT COMMENTS BY AREAS OF CONSIDERATION

**HOUSEKEEPING:**

*Percentage Score: 93.0%*

*Number of claims eligible for consideration: 66*

35 of 66 (53%) claims scored a 5 out of 5. According to the Office of Self-Insured Plans (OSIP) regulation 15400 a claim file needs to have the 5020, 5021, and subsequent relevant medical reports, all applicable WCAB orders and reports, DWC letters, etc. It also requires that files or portions of files maintained in electronic form shall be easily retrievable. Keenan & Associates keeps files generally well documented. The auditors worked on the premise that all files should be able to stand on their own for documentation purposes whether they be companion or master files.



The system used by Keenan appears to be relatively user friendly. Keenan keeps codes and system entries up to date and detailed with some exceptions. Some of the tabs were not consistently up to date with, for instance work status information or subrogation information. Claim coding per the standards and accountability document should be updated with each diary and for the most part with some exceptions this was done.

**Audit Findings:**

1. Several claims had missing documents to include DWC-1s, 5020s, 5021s, settlement documents, applications, answers, medical legal reports, permanent and stationary reports, wage statement ticker, etc.
2. Claim tab status information was not consistently updated including whether the claims were accepted, claim type, and future medical indication even when requested by supervisor to update.
3. Work Status tab information not consistently updated.
4. Several files had requests for DWC-1s after case closed and/or just before closure. We did not see documentation of efforts to confirm with employer if DWC-1 was sent out by employer.

*We recommend placing on plan of action review whether or not the DWC1 has been received in order to determine need to request and avoid request after closure and/or just before closure. Supervisors are reviewing whether or not system is updated, however, responses are not documented recognizing request and completion of direction or why the system is not updated. We recommend examiners document response to directions as made by supervisors.*

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**PAYMENTS:**

*Percentage Score: 91.5%*

*Number of claims eligible for consideration: 61*

48 of 66 (73%) claims scored a 5 of 5. Auditors found payments including benefits, expenses, vendor services, and miscellaneous invoices were paid timely and pursuant to bill review reductions with some exceptions. Up to 5 randomly chosen medical bills were reviewed and the auditors found medical bills were paid timely. E-bills are required to be paid within 15 days and non-ebill issued invoices are required to be paid no later than 60 days. Most bills regardless of whether received via ebill or regular billing were paid timely although we did find some circumstances where payments were not timely including for reasons including but not limited to not having sufficient reserves or different receipt dates. We did not discover any unidentified duplicate payments. We did not find claims where penalties were due for late payment of medical bills. However, we did find a \$2,000 penalty for sanctions related to service of medical records. It technically ended up being a stipulation agreement for the sanctions, but we have categorized this as a penalty.



Temporary Total Disability initial payments were not consistently made timely and although if salary continuation has been issued by the Member, it is the position of the auditors that all temporary total disability payments should be made in accordance with the labor code statutory time frames even in light of existing salary continuation.

As of 1/1/2020, regulation 8CCR 10555 requires all credits to be asserted via formal written petition. Examiners can no longer automatically take credit against permanent disability for temporary total disability overpayments. We did note a couple of overpayments but more related to calculations of disability rates versus an overpayment related to timing.

**Audit findings:**

1. Total overpayments for temporary disability estimated at \$10,376.77 based on auditors finding of disability rate calculation issues on 2 claims.
2. Overpayments estimated for permanent disability \$844.77 based on incorrect amount issued on offer letter and on settlement document as incorrect figure associated with your percentage of disability. Administrator determined it was best to offer the amount on letter to avoid litigation or delay. Noting dollar amount will not be counted for apportionment only percentage will.
3. Total penalties paid \$2,000 for sanctions.
4. A few claims had late disability payment reimbursements for salary continuation and some with no payments for temporary and or permanent disability.
5. A couple of bills were pending payments due to insufficient reserves and/or were paid late based on date of receipt.

Recommendations in this area overlap with other areas reviewed for consideration such as reserves and disability management. The recommendation below concentrates solely on the issuance of the payments.

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We recommend that diaries be set for initial payment of disability be set on all files as a rule in/or out disability due date to avoid late payment of initial disability and to allow the diary to be captured in the weekly Manager Accountability report.

**DISABILITY MANAGEMENT:**

Percentage Score: 85.3%

Number of claims eligible for consideration: 36

15 of 36 (42%) claims scored a 5 of 5. The disability management review encompassed return to work coordination efforts; timely assessments and pursuit for accuracy on permanent disability ratings and payments ensuring apportionment is applied when appropriate; and identifying how much and when temporary total disability should be paid, disputed, and coordinated with Ed Code.



Wage statement ticker calculations were evidenced in almost all files and were calculated with consideration for the outcome of what was most accurate for the employee based on the labor code i.e., 52 weeks and/or earnings capacity although the auditors noted finding some cases where calculations required additional review and calculations. The auditors did find several files where the claims team communicated at an excellent level with the Members and medical providers to determine modified work and ability to provide especially when the claims assistant appeared to take lead. The level of communication for disability management was not consistent with all files. Some claims had late assessments, or no assessments made regarding whether or not disability was due to claimant whether it be permanent disability or temporary. The auditors noted several files where the supervisor and/or manager would provide direction to the examiners to rule in or out (address) temporary disability but with no documented response or with late response even when information was available.

**Audit findings:**

1. A couple of files missing wage statements or ticker calculation sheet.
2. Several claims would have benefited from calls to Members to obtain employment status, work status,
3. Very good work in communication for return-to-work efforts found in several cases even though not consistently.
4. Supervisor directions provided under supervisor review did not have consistent follow up documentation and/or completion of activity noted in claim.
5. A couple of files needed review for determination of need to issue permanent disability advances after retirement and/or termination of employment as well as temporary disability.

We recommend a response to supervisor direction recourse plan such as a diary set based on level of urgency of directions particularly for ruling in or out need for disability payments in addition to the recommendation in payments for initial payments due date in addition to refresher training on

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calculating unique wage and disability issues such as dual income changes and/or change in employment triggers for permanent disability advances. In addition, those diaries should have an ad hoc report biweekly for any still pending diaries that need to be addressed.

### MEDICAL MANAGEMENT:

Percentage Score: 93.3%

Number of claims eligible for consideration: 49

Some files reviewed were companion files where medical control was handled under the master files. A few files were future medical care where although the employee was eligible for medical treatment no treatment was sought during the period of review. Of the 49, 37 (76%) claims scored a 5 of 5. There is a good grasp of the medical facilities and appropriate doctors to use for each case and as a result there was not a lot of identified need to push doctors to report but for a few exceptions. There were several files where medical information appeared to be assessed timely and accurately, however this was not consistent on all files. Several files had gaps in medical treatment plans or follow up care with delays in pursuit.

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#### Audit findings:

1. Treatment plans were not consistently pursued with a few cases having gaps in months relative to medical movement.
2. One claim had a late RFA response.
3. Closure notices for missed appointments were not consistently sent in a timely manner.
4. Once claim had a one-month delay in response to change of treater request.
5. A couple of claims had late requests for supplemental reports.
6. A couple of claims had late submissions to QME for cover letter and/or medical records with one being documented as sent after the exam.
7. One claim was noted to have excellent work by the NCM in providing updates.

We recommend that plan of actions include strategy to move medical forward including sending closure notices when appointments are missed, or no care has been sought and/or contact with provider to obtain updated treatment plans or push for permanent and stationary status with response dates listed.

### INVESTIGATIONS:

Percentage Score: 84.6%

Number of claims eligible for consideration: 26

15 of 26 (58%) claims scored a 5 of 5. In this area the auditors review for investigations including AOE/COE (compensability) issues to sequelae claims and any appropriate investigation needs. Subrogation investigation efforts are not considered in this portion of the review and are covered under subject header Subrogation. Review of investigation documents such as ISO reports,

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medical legal reports, investigations, and deposition reports are expected to be documented and addressed for the purposes of creating investigation plan of actions as well as determinations on case issues. We also review for timeliness and thoroughness of initial investigation which includes 3-point contacts, request for information such as medical reports, and employer sided information. According to Keenan’s standards the initial 3-point contact should be made 24 hours from notice date and/or contact request should be made. We did see most cases have 3-point contacts, but some were missing the employee information even when compensability issues were decided.

**Audit findings:**

1. One claim missed an opportunity to obtain employee statement to address priors when claim converted as a result of the employee’s call requesting care and the claim was converted from medical only to indemnity.
2. A couple of claims did not have documentation of employee contact for initial investigation.
3. COVID positive case would have benefited from documentation of cost benefit analysis of disputing vs. accepting as well as communication with the supervisor regarding why it made sense to accept.
4. One claim had an excellent initial review outlining ISO findings however, no actual plan of action was laid out.
5. One claim had a medical legal doctor creating an injury that did not appear to be identified as a new injury or different injury.
6. One claim had an application in the file that should have triggered establishing a new claim and investigation but did not occur for years.

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*We recommend conducting a refresher training on identifying what constitutes the need to set up a new claim within a file when found by a doctor, applicant, or attorney. We also recommend that training be provided to show the need to investigate gaps in time when claimant returns for care including contacting employer for verification of employment and extent of injury questions to providers.* Would be good to use the COVID claim as a case study to address future COVID claim filings. Standards of evidence and investigation strategies for disputing vs. accepting may be key in addressing possible high exposure claims for long COVID and/or claimed internal body parts with pre-existing conditions given the industry environment set during the period of the presumption.

**SUBROGATION:**

Percentage Score: 94.5%

Number of claims eligible for consideration: 22

18 of 22 (82%) claims scored a 5 of 5. Subrogation is reviewed as it affords the opportunity for the administrator to seek reimbursement/ recovery from third parties who may have caused in whole or in part the injury. As this impacts the overall financial value of a claim these auditors feel it is important that all claims be reviewed for subrogation potential and that detailed rule in/out

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language be shown on each claim as part of the initial investigation and the determination should be noted throughout the file should future information change the initial determination. Pursuit of subrogation should be made timely and be assertive as to recovery efforts. Overall case benefit analysis documentation should be found in the files including cost benefit review for pursuing. Based on date of injury and/or remote/unlikely opportunity to pursue, some claims are not ranked in this category although at the auditor’s discretion templated language will be noted. Credit was given even for claims with no real opportunity for subrogation if the rule in/out process was thoroughly thought out.

**Audit findings:**

1. Templated rule out language found in several files including “There is no third-party involvement, so subrogation is not an issue” or “No third-party involvement, no need to pursue subrogation.”
2. Examiners do not consistently rule out subrogation in plan of actions or diary review notes. Credit was given if the supervisor or manager did so in their notes or if the rule out language was found in the client review status reports.
3. One claim had a later referral to subrogation representative.
4. One claim did not provide the details needed to appropriately rule out a motor vehicle accident.
5. One claim did not have documentation as to the disposition of the subrogation pursuit efforts.

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We continue to recommend that examiners be required to document their own rule in/out reasoning for subrogation with detail and customized to the claim events and if pursued final disposition should be outlined in plan of action as well as customer updates. We also recommend that this rule/out reasoning be a listed item in the standards and accountability document.

**LITIGATION MANAGEMENT:**

Percentage Score: 88%

Number of claims eligible for consideration: 15

8 of 15 (53%) claims scored a 5 of 5. The focus of the review is to determine how Keenan manages the litigation process, not the defense attorneys. We do not reduce points for the issues based on the defense attorneys. For example, if a defense attorney does not respond timely to an inquiry by an examiner/ supervisor/ manager, the review determines how the examiner/ supervisor/ manager dealt with the lack of response. We continued to note that the claims managers oversight on the legal was impactful to insure legal movement on cases. We hope this continues to be the oversight structure for litigated cases. We did not find any deferral of work to defense attorneys. However, we did find some delayed response to attorneys and recommendations made by supervisor/ manager.

**Audit findings:**

1. One claim did not have a timely response to a 6/21/2021 letter from Defense Counsel that was not addressed until 2024.

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2. Directions to attorneys were not consistently timely and/or detailed with information such as denial status and/or settlement authority.
3. Documentation missing on one case for communication on settlement amount which ended up being different than the authority initially provided.
4. One claim had a late response to manager referral to Defense attorney taking 4 months to clear the directive.

*We recommend that the supervisor/ manager place a diary for follow up on directions issued to examiners based on level of urgency and expected activity completion with escalation plan should directive not be cleared at time of diary.*

**NOTICES:**

*Percentage Score: 89.6%*

*Number of claims eligible for consideration: 57*

32 of 57 (56%) claims scored a 5 of 5. Obligatory and industry practice notices for timeliness, appropriateness, and accuracy (not following PAR audit criteria) were reviewed. In addition, notices such as 132a and or Serious and Willful notices to Members, notices and reports to excess carriers, and any other notices that are standard industry practice and/or needed based on case activity are considered in this area of review. The auditors generally found that the notices were sent timely. We found consistent efforts in issuing the 9785 notices to doctors including all new doctors. Benefits notices were sent out mostly per required standards, but some were incorrect type of notices and/or had errors/ inaccuracies which could cause confusion for receiver.

**Audit Findings:**

1. Errors on the accuracy of the information sent in the obligatory notices which included wrong dates, wrong rates, and/or incorrect amounts paid were found.
2. Incorrect notices were sent including TD/SC that were sent as TD letters.
3. Some late or missing notices were mostly discovered with some notices sent at closure and/or just before closure with a couple issued after the permanent disability denial and/or after denial.
4. Permanent disability notices seemed to fall back on the 6 month notice time frame.
5. Offers of full duty work were issued to a couple of employees who were no longer employed and/or a substitute.
6. One claim sent a general notice of acceptance with a DWC1 file that claimed entire body. No specific language was provided to isolate what exactly was being accepted.
7. One claim had a notice issued with the wrong value of 1% permanent disability.
8. A couple of claims had late PIPs notices. But one claim had excess reports issued at 6 months starting 4/4/2022- nicely done!

*We continue to recommend proofing of notices being sent to minimize/ avoid errors that can cause confusion to injured workers and ongoing training on notices due dates should continue. Referencing*

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the standards and accountabilities document for timing of notices which is outlined throughout document would be a good resource.

### CASE OVERSIGHT:

Percentage Score: 79.1%

Number of claims eligible for consideration: 66

16 of 66 (24%) of claims scored 5 of 5. This area reviews not just the oversight by the managers and supervisors, but also by the examiner, work done by claims assistants and nurse case managers. It considers their frequency and development of a plan of action; whether they followed that plan of action; and communication effectiveness with all involved in the claim from the claims team. We continued to find responses to Supervisor and Manager recommendations either not completed and/or late in response. There appeared to be a staffing change that occurred during the period we reviewed which may have impacted our findings, including in some cases where all the work was completed by the Supervisor or Manager. Per Keenans' standard plan of actions should be completed 72 hours within a new claim file set up and reviewed upon each diary which the auditors determined was not consistently met on each file.

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### Audit findings:

1. Lack of documented response on Supervisor and/or Manager recommendations for issues such as: including disability payments, subrogation, negative reserves, and general action items needed on file.
2. Gaps in plan of actions and missing current updates. Most plan of actions had only short-term goals and no long-term resolution goals.
3. Gaps in a few claims for examiner and supervisor review.
4. Several claims had late initial examiner review.
5. Several claims had late examiner transfer initial review with several being addressed by the supervisor several times prior to the examiner review.
6. Several pending late diaries were found at the time the claims were reviewed.
7. Excellent Manager and Supervisor oversight on unique exclusive remedy case – however needs current plan of action including viability of settlement.

We continue to recommend that communication between Supervisor/ Manager and claims team be documented to include an escalation process related to directions issued at Supervisor and/or Manager reviews such as diaries for response to directions based on urgency level and next escalation phase if not completed to insure action items are taken.

### RESOLUTION/ CLOSURE:

Percentage Score: 81.9%

Number of claims eligible for consideration: 47

19 of 47 (40%) claims scored 5 of 5. This area of review considers the case movement toward closure and for claims requiring resolution by settlement the timeliness, accuracy, and analysis of

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options for type of settlements with disposition of all issues being detailed and fully resolved accordingly. The auditors did find some great work on case closures for minor claims and on a few claims good settlement efforts and work up. However, we noted several claims where resolution was delayed sometimes without documentation as to the reasons for the delay. These auditors agree with the standards and accountabilities document for the within 15 days timeline for evaluation of receipt of all relevant facts for the purposes of evaluation, negotiation, and settlement.

**Audit findings:**

1. A couple of claims did not have documentation of authority to settle at the amount settled and/or did not show documentation that Defense Attorney was provided settlement authority already authorized.
2. A couple of claims had inaccurately completed settlement documents.
3. Late requests for contributions and/or no documentation of requests on a couple of PIPs files.
4. One claim showed on closure checklist that DWC1 was in file but could not locate in file.
5. A couple of claims continue to hold out for Compromise and Release with no pivot to Stipulate and no documentation as to why Stipulation is not feasible or appropriate.
6. One claim had over one year time gap to request a supplement to clarify unratable report.
7. One claim remained opened for voucher which expired several months earlier.
8. A couple of claims have no documented offers to settle out future medical for over a year and/or 2+ years.
9. One claim had supervisor providing direction to pursue settlement and assessment for 2 years before addressed.

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As recommended in a couple of other sections of this report, an escalation process for directions issued by Supervisor and Manager may help in moving action items requested by Supervisor and Manager.

**RESERVES:**

Percentage Score: 91.5%

Number of claims eligible for consideration: 66

41 of 66 (62%) claims scored 5 of 5. This area concentrates on the accuracy of the timeliness of placing reserves and/or adjusting reserves as well as the accuracy and supporting information for reserves placed on each file. From the loss data received by Keenan and valued as of 1/31/2024, the total value of the claims reviewed was at \$7,555,773. By the time of our review, those same claims had a total value of \$8,026,468. We recommend additional reserve assessments of \$199,011 (including several reductions) for a total loss value of \$8,225,479 or a 2% increase. We did find noted late assessments for reserves which at times including currently seen negative reserves and/or no reserves when it came to initial reserve setting.

We believe claims where permanent and stationary status has been determined the Office of Self-Insured Plans (OSIP) reserve regulations apply which includes a 3-year running assessment of

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regularly sought / paid medical treatment with consideration for non-annually used but anticipated medical care such as diagnostics, etc. This review is to be done at least annually. Should there not be 3 years from date of permanent and stationary OSIP allows an extrapolation for the shorter period to calculate the 3-year average use. These auditors do not believe the 3-year average usage should be a method of reserve analysis for claims that are not fully permanent and stationary as it considers medical care at an acute level that may result in an overstatement of exposure. We did see some efforts to comply with the OSIP reserving regulations but did not see it consistently, especially post the first OSIP analysis.

**Audit findings:**

1. Negative and or low reserves noted on a few files currently and some negative reserves noted throughout the review with resulting issues for payments at least on one claim.
2. Late reserve changes being 30 days or more after receipt of data that necessitated an increase/decrease.
3. One claim is estimated to have a reserves increase of over \$200k with OSIP applied average.
4. Several claims had supervisor reviewing more than once either negative reserves and or low reserves giving direction to address with several not addressed until after 2<sup>nd</sup> request.
5. A couple of claims placed permanent disability reserves not supported by information on file.
6. A couple of claims did not have permanent disability reserves despite information in file supporting need.

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*We recommend that, if possible, a monthly ad hoc report of outstanding reserves be run to find low and/or negative reserves if not already being included in the Manager's Weekly Accountability Report in addition to the escalation process for follow-up on supervisor directions to address reserves.*

Claim Audit #	Noted Recommended Increase
1	\$6,500.00
10	\$15,000.00
28	\$15,000.00
42	\$(16,000.00)
43	\$232,969.02
45	\$16,059.21
50	\$(23,997.50)
52	\$25,000.00
55	\$3,480.00
59	\$25,000.00
62	\$(100,000.00)

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SUMMARY OF RECOMMENDATIONS:

1. Place in plan of action whether or not the DWC1 has been received or requested.
2. Examiners document response to directions as made by supervisors.
3. Set diary for initial payment of disability on all files as a rule in/or out disability due date to avoid late payment of initial disability.
4. Escalation plan such as a diary set based on level of urgency of directions particularly for ruling in or out need for disability payments in addition to the recommendation in payments for initial payments due date in addition to refresher training on calculating unique wage and disability issues such as dual income changes and/or change in employment triggers for permanent disability advances.
  - a. Ad hoc report biweekly for any still pending diaries that need to be addressed.
5. Include strategy to move medical forward in plan of action including sending closure notices when appointments are missed, or no care has been sought and/or contact with provider to obtain updated treatment plans or push for permanent and stationary status with response dates listed.
6. Conduct a refresher training on identifying what constitutes the need to set up a new claim within a file when indicated by a doctor, applicant, or attorney.
7. Conduct a refresher training on identifying the need to investigate gaps in time when claimant returns for care including contacting employer for verification of employment and extent of injury questions to providers.
8. Require Examiner's own documented own rule in/out reasoning for subrogation with detail and customized to the claim events and if pursued final disposition should be outlined in plan of action as well as customer updates.
9. Supervisor/ Manager diary for follow up on directions issued to examiners based on level of urgency and expected activity completion with escalation plan should directive not be cleared at time of diary.
10. Proof notices being sent to minimize/ avoid errors that can cause confusion to injured workers and ongoing training on notices due dates should continue.
11. We recommend that, if possible, a monthly ad hoc report of outstanding reserves be run to find low and/or negative reserves in addition to the escalation process for follow-up on supervisor directions to address reserves.

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*ADDITIONAL COMMENTS*

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Disclaimer: This audit and its findings are reflective of the 66 claims reviewed based on the experience of the auditors and the data as made available by Keenan & Associates. It was conducted as a general comprehensive review of the claims which are subject to rules and regulations. The audit does not include the same criteria or detail as state audits and should not be considered a pre-audit for any state conducted audits.

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*APPENDIX*

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DASHBOARD OF LIST OF AUDIT CLAIMS REVIEWED:

BY EXAMINER INCLUDING TYPE OF CLAIM AND STATUS

Examiner   Type of Claim	Closed	Open	Re-Open	Grand Total
<b>Anna Kelly</b>	<b>4</b>	<b>14</b>		<b>18</b>
FUTURE MEDICAL	1	1		2
INDEMNITY	2	13		15
MEDICAL ONLY	1			1
<b>Barbara Lanns</b>	<b>1</b>	<b>5</b>	<b>2</b>	<b>8</b>
INDEMNITY		5	2	7
MEDICAL ONLY	1			1
<b>Cassandra Broussard</b>	<b>5</b>	<b>6</b>	<b>3</b>	<b>14</b>
FUTURE MEDICAL	1	1	1	3
INDEMNITY	4	5	2	11
<b>Heather Doyle</b>	<b>2</b>	<b>1</b>		<b>3</b>
MEDICAL ONLY	2	1		3
<b>Jhandel Cabrera</b>	<b>3</b>	<b>2</b>		<b>5</b>
MEDICAL ONLY	3	2		5
<b>Kirsten Fisher</b>	<b>2</b>	<b>5</b>		<b>7</b>
FUTURE MEDICAL		1		1
INDEMNITY	2	4		6
<b>Omolara DaSilva</b>	<b>2</b>	<b>6</b>	<b>1</b>	<b>9</b>
FUTURE MEDICAL	1	1	1	3
INDEMNITY	1	5		6
<b>Sabrina Harris</b>	<b>1</b>	<b>1</b>		<b>2</b>
INDEMNITY	1	1		2
Grand Total	20	40	6	66

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ADDITIONAL SAMPLING INFORMATION		
LITIGATED	22	33%
DENIED	9	14%
CLAIMS PAID OVER SIR	4	6%

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**BY TYPE OF CLAIM INCLUDING STATUS:**

TYPE OF CLAIM   STATUS	Count of Claim Number
FUTURE MEDICAL	9
Closed	3
Open	4
Re-Open	2
Indemnity	47
Closed	10
Open	33
Re-Open	4
MEDICAL ONLY	10
Closed	7
Open	3
Grand Total	66

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**BY PIPS YEAR**

Category	Count of Claim Number
Alameda County Schools	4
PIPS Year 9 Pleasanton	1
PIPS Year 10 Pleasanton	1
PIPS Year 12 Pleasanton	2
PIPS Year 13 Pleasanton	2
PIPS Year 14 Pleasanton	1
PIPS Year 15 All Offices	4
PIPS Year 16 All Offices	6
PIPS Year 17 All Offices	5
PIPS Year 18 All Offices	3
PIPS Year 19 All Offices	12
PIPS Year 20 All Offices	7
PIPS Year 21 All Offices	18
Grand Total	66

**BY FISCAL YEAR**

Fiscal Year	Count of Claim Number
2004	1
2005	1
2007	2
2012	1
2013	1
2015	2
2016	2
2017	1
2018	4
2019	7
2020	5
2021	3
2022	11
2023	7
2024	18
Grand Total	66

PERCENTAGE GROUPED YEARS	%
2015-2021	88%
PRE-2015	12%

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*APPENDIX B*

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**Individual claims comments on Housekeeping:**

Claim Audit Number	Housekeeping Comments
1	DWC-1 completed on 7/13/2023. Employee first sought medical on 7/13/2023 and placed on modified work. System states employer's first date of knowledge 7/21/2023. Keenan received notice loss on 7/26/2023, but notepad has manual set up by Doctors First Report received on 7/24/2023. Need to clarify.
2	not able to locate the 5020
3	No DWC-1 or Doctor's First Report. Request made on 2/8/2024. Closing checklist completed on 2/2/2024.
5	5020 and 5021 in file. No DWC-1 and not requested until 2/22/2024 after file closed on 10/24/2023.
8	Letter sent out on 11/28/2023 but file not re-opened until 1/24/2024. I was only able to locate the Stip in file notes
12	Employee emailed examiner on 7/11/2023 to re-open claim. RFA received on 9/27/2023. Medical being paid while file closed. File not re-opened until 12/6/2023.
21	This CT claim is noted as the Master. The file was just set up on 2/28/2024. I found the application in file 567040 which was received on 12/27/2019.
22	not able to locate the 5020/5021/DWC-1
23	Not able to locate the 5020/5021/DWC-1
28	not able to locate the 5020/DWC-1/5021
30	Was able to find the 5020 in sticky notes and 5021 in document imaging. No DWC-1 but must be somewhere.
33	Documentation (including pertinent legal updates) from other file needs to be copied to this file for stand-alone review.
34	Not able to locate the 5020/5021 and DWC-1
39	Could not find documentation of efforts to obtain DWC1. Could not locate completed DWC1.
40	partial report attached to document image billing for P&S report received 2/9/2021.
42	Could not locate stipulation document. Recommend copy be placed in file.
44	Claim tab on system clicks Future Medical. Case is not yet future medical.
46	Could not locate C&R document in this claim although noted in checklist as being in file.
47	DWC1 and 5020 not found in file.
50	Sticky note overview naming convention does not specify more than "Email Confirmation" no points reduction but noting would be good to apply stronger naming conventions. Could not locate answer to application.
52	Claim tab for wages shows gross monthly wages of \$10,252.10 --- 5020 says annual \$102,521. Claimant gets paid 12 months but works 10 months.
53	Work status tab not completed

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54	Claim tab does not indicate if case was accepted. Supervisor noted tab not updated on 9/15/2023 -- as of 3/27/2024 not updated.
55	Reference is made to a 2019 QME report that has impact on exposure on this case. Could only find a 2019 P&S report by Dr. Chen.
56	Claim tab status section not updated.
57	Several documents copied from Master file. Could not find application of adjudication. Should be in any companion file. 2015 App found in claim 513974 in sticky notes. Suggest placing copy in this file.
60	CA instructions on DWC1 and wage statement request 2/7/2024.
62	Work status tab not updated. Could not locate 4/5/2022 QME report. Could not locate wage statement. Noting 2nd job had a link email but could not locate actual document.
63	NCCI code in claim tab show Medical Only, but claim is listed as indemnity with settlement being pursued.
64	Claim is not fully documented. NO DWC1, no 5020, no application, etc. Possibly due to claim being paper file initially, however, fundamental documents should be uploaded to system. If lost --- should be written down and recreated if possible and easily locatable i.e., sticky notes with naming convention.
66	Unable to locate DWC-1 DOI 1/4/2022.

**Individual claims comments on Payments:**

Claim Audit Number	Payments Comments
1	Ebill Kaiser received 2/20/2024 for dos 2/5/2024 for \$953. Bill Review allowing \$509.00 payment pending due to insufficient reserves.
5	File closed on 7/12/2023-payments made while file closed-4. Medical reserves entered 9/25/2023 through 10/16/2023 and then file must have reported on 10/17/2023 as \$2500 entered. File closed on 10/24/2023.
9	Only one bill paid on 8/16/2022 for date of service 10/27/2021 to 10/29/2021. Carrier received on 11/19/2021 per ebill but EOB in system shows receive date 8/10/2022.
16	Supervisor review of 8/21/2023 directed examiner to review TTD payments as one more day due. Employee first sought medical treatment in emergency on 7/18/2023.
17	Dr. Boparai placed the employee on limited work hours 4 hours per day/5 days a week. wage loss due from 10/26/2023 to 2/12/2024?? Denial issues 2/12/2024 - late.
23	Salary Continuation/TD not issued until 2/28/2024. Defense counsel sent notice on 1/17/2024 that TTD is due

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24	12/5/2023=Supervisor initial review pointed out TTD due. Examiner paid on 3/13/2024.
25	Penalty issue stip'd for \$2,000.
29	CT contributions to master file. Last contribution on 1/26/2023 but not able to locate any CT worksheets on this file.
40	Attorney fee paid on closed claim creating need to reopen. Walk thru requested and approved. Bill expected. No request prior to first closure.
44	Disability payments made 5/5/2020-5/15/2022 = 740 days or 105.71 weeks. Examiner response to 8/2022 request from supervisor to explain disparity on calculations for temporary disability shows summer months were paid at minimum wage. Unable to verify due to documentation on wage statement.
45	Payment made to KPOJ for \$251.02 paid on 8/24/2021 was issued in error - requested payment be returned. Could not find recovery as of 3/25/2024. Initial pay not in review period but recovery never noted.
49	Permanent Disability paid at \$1704.77 vs. \$860 overpayment on 6/30/2023 - reasoning not provided. Did claimant stop working? Was there confirmation from employer on work status?
52	Due to disability calculation appears overpayment of \$3,895.18 - see disability management for calculation concerns.
55	Do not see payments for permanent disability due.
58	TTD check sent direct to claimant for 7/3/22-7/6/22 - showing reason as Ed Code ended. District advised Ed Code still continuing and direct payments should not have been made. Although shown as an overpayment -- not an overpayment for WC...maybe with Ed Code payments sent by District.
62	Payments issued after 12/29/2022 for temporary disability included earnings from 2nd job when TTD for that was stopped due to the claimant not wanting to return to that job. According to gross weekly wage in system (unable to find wage ticker -- 5020 says \$81.84 daily rate for 4 days/ week. ADJ App shows rate of pay \$20/h 30 h/w) TD rate would be \$480.51 vs. \$680.51. Just noting what auditor is able to see - checks from 2/2/23-9/14/23 = 225 days = \$15,445.07 vs. \$21,926.66 paid. Overpayment indicated at \$6,481.59. Late payment was made 7/7/2023.
63	Could not locate reports associated with bills paid in system.
64	Med bill w/o report approved for Kaiser online pharmacy has reference date 7/17/23 - document says for 2/1/2019 with signature on file 9/3/22.
65	Late TTD
66	TTD/ salary continuation payment late but no penalty as employee receiving salary continuation.

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**Individual claims comments on Disability Management:**

Claim Audit Number	Disability Management Comments
1	Would like to see documentation on efforts to pursue full duty release. Work status has not changed.
6	Good work by examiner in following up with District on disability management.
8	I do not see any contact made with District to confirm if employee is still employed and working within the restrictions of no repetitive typing.
16	Supervisor review of 8/21/2023 directed examiner to review TTD payments as one more day due.
17	PTP placed employee on limited working hours of 4 hours per day/5 days a week as of 10/26/2023. Not addressed until 2/15/2024
20	Need to confirm return to work date with District. Did employee return to work on 9/8/2022 or 9/29/2022? There is no communication documented with District
22	Need to confirm Employee's retired date.
23	Surgery was 12/5/2023. MUA on 2/7/2024. I do not see any calls to PTP. What is the current medical and work status? Would like to see effort to determine estimated time off.
24	Employee returned to modified work on 10/30/2023. Communication with District to confirm? Identify need to pay?
26	Supervisor review of 12/12/2023-executive decision to pick up the two weeks of TTD
27	No follow up calls to district in 2022 or present to verify employment status, work duties etc.
30	No follow up with District to confirm employment status until 3/4/2024
35	Good communication with District on modified work availability.
44	Could not locate wage statement to determine if rate calculated accurately. Permanent Disability advances being paid without documentation on stop date. Noting system shows 34% for permanent disability and worksheet for 12/18/2023 shows 77.57 weeks to be paid and 26.01 permanent -- total weeks for 34% = 159 weeks. Need stop date.
47	Appears claimant is now off work. Examiner questions reasons - no documented effort to clarify if related to this injury.
48	Did not see communication to District about days off after acceptance until 3/2024. Claimant sent offer of full duty notice after resignation of 9/12/2023. Could not locate confirmation with employer that there was full duty available to claimant.

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52	Good work coordinating Ed Code benefits and benefits payments. Wages determined to be max --- with AWW in system listed as 2365.87 TD rate 1539.71. 5020 shows annual salary \$102,521/ 52 = 1971.56 AWW rate = \$1314.37. Wage statement completed does show \$10,252.10 monthly. Examiner paid through summer months using 12 month pay schedule but appears to have calculated using 10 months. Review for overpayment.
53	Good work with communication with claimant, doctor, and District for return to work.
54	Initial review 8/23/2023 5 days post injury for vomiting incident with no lost time estimated PD at 1% or \$870.
55	Employee resigned. Is permanent and stationary and was presented with permanent disability at 2% WPI per medical report 2/12/2019. Do not see any effort to advance permanent disability despite claimant no longer being employed. If not paid in other file - penalty may be due for total line of benefit. PD delay notices were sent up to 12/2023, however, delay may not be appropriate in light of medical evidence. Case needs full review and disability needs to be addressed.
56	Good coordination with CA and District for work status accommodations.
57	no score in this category --- however, noting there is permanent disability noted and although there is settlement being approached --- it is unclear if the claim has been subsequently accepted - with plan to stip noted to pursue if C&R is not achieved. Permanent disability advances have been made but for another one of the claimants pending claims. Did not see payments in master file. Review for determination on if permanent disability advances on the 513974 - are due and payable.
59	Good review of exposure question on TTD.
61	Could not locate wage ticker calculation - noting wage statement shows total annual salary \$62,280.90 monthly pay rate 7077.37 for 11 months -- which does not equate to \$62,280.90 if paid 11 months. Could not figure out where rate came from. \$62,280.90/ 47.7 weeks = \$1305.68 AWW TD rate = \$870.45. Need to review for verification of accurate TD rate.
62	Advance amount instructions provided to CA 2/28/2024 gives just a number and not rationale. Calculation for payments not readjusted with stoppage of wage loss for 2nd job.
63	Could not locate coordination with District on modified work release since claim reopen.
65	Supervisor notepad 12/28/22 request LDW RTW or TD delay - ER responded per notepad 11/9/2022.
66	District advised Keenan employee off work as of 1/24/2022 in initial ER contact. Supervisor review on 3/7/2022 also stated TTD due. Not issued until 4/7/2022

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**Individual claims comments on Medical Management:**

Claim Audit Number	Medical Management Comments
1	Would like to see documentation on treatment plan to move claimant to full duty and MMI. Only one attempt on 10/24/2023 to have physician address MMI status
9	No medical treatment. Employee has been going back and forth to Mexico to care for mother. Examiner last contact with employee was on 12/22/2023.
12	RFA for hand consult received on 9/27/2023 and not approved until 12/7/2023.
16	Nasal surgery authorized on 8/3/2023. No further follow up with surgeon or employee on surgery
23	Surgery was 12/5/2023. MUA on 2/7/2024. I do not see any calls to PTP. What is the updated medical treatment plan?
26	Documentation needed to explain/ confirm why medical evidence beyond home test not needed. No medical redirection made to get labor code required diagnosis, etc.
27	No letter to PTP to address MMI status. 6/10/2022- Released to full work, continue with home exercise and Neurontin. Return in 6 weeks. Employee did not return for care until 4/21/2023 after received the closing letter.
44	QME medical report dated 4/16/2023 indicates needed medical reports. Could not locate cover letter or medicals sent to new PQME for 4/16/2023 exam until 5/24/2023.
47	Supplemental not requested until 8/2023.
52	Claimant requested change in treater on 2/23/2023 --- MPN not shown as sent until 3/26/2023. Examiner did call treater at time to provide authority to transfer care but could not see where list as required within 5 days of 2/23 was sent until 5/16/2023. Treater change did not appear completed until 7/2023. QME cover letter for 11/30/2023 appointment sent 11/21/2023. Good medical reviews by nurse and good determination to use nurse.
59	Nurse assigned to case; claimant has had TKR almost 1 year post now. Do not see move to return to QME for permanent and stationary status. Diary Review/ File Activity continues to question if all medical care requested from 2020 QME report? The "care" is not outlined in POAs. In reviewing QME report. PT was recommended - so were injections if PT was not sufficient - then a repeat MRI if that was not sufficient. On Page 8 of the report, the QME does indicate that if Dr. Gay determines the patient is not in need of further surgery the QME would consider him permanent and stationary. 9785 issued to Dr. Gay 4/7/2020. Do not see efforts to press Dr. Gay on need for further surgery between 4/7/2020-2022. (not in ranking period but noting file.)

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60	QME notes in report for 2/22/2023 exam that no cover letter or medical records were sent/ received by QME. He was not deemed MMI. Could not find plan of action to pursue reevaluation with QME. Case is 1 year since last evaluation. Surgery was noted at QME as pending. do not see that that took place. Do not see correspondence to treater to push for PR4/ permanent and stationary.
62	QME cover, forms and medical records for 4/5/22 sent on 3/28/22. Cover letter for 3/19/2024 QME re-eval did not include information about some past claims.
63	Could not locate medical reports corresponding to notes. Claim is 18+ months post original injury - does have other claim - do not see in this file effort to push to permanent and stationary status.
66	NCM did good work providing updates.

**Individual claims comments on Investigations:**

Claim Audit Number	Investigation Management Comments
1	File just converted from MO to indemnity. There were opportunities to obtain the employee statement when employee called about medical treatment. Need to obtain the employee's statement to address priors and other factors that could be delaying recovery
2	Initial employer and physician contact made timely. Employee contact note of 10/6/2023 is blank.
4	Could not locate investigation documentation. Only verified if there was lost time with employer and employee.
5	Employee contact-left voicemail and sent contact card. No real investigation completed as employee did not lose time and did not seek any medical attention until 9/12/2023. No follow up call to employee or district noted.
8	no calls to District/ no ISO
21	File set up on 2/28/2024. App received in 2019 - no investigation noted between receipt of App and file set up.
26	Home test only --- documentation warranted to show reasons for not seeking labor code required testing. E.G. County area not able to provide testing. Home test positive witnessed. Etc. Is this consistent with claims procedural process and applied universally for members.

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48	Case was accepted without supervisor's approval. QME noted that the employee had to have gotten it from work due to her word that she does not do anything else --- only spends time with husband who tested positive a few days after claimant. QME uses an assumption that claimant must have gotten from work due to asymptomatic spread and mentions another party who may have provided exposure. Does not appear the doctor was aware of information that injured worker leaves school grounds at lunch time but lives 1/2 hour away from school preventing the ability to simply go home. Did not see documentation on if this report meets the standard of substantial medical evidence.
50	Nice thorough cover letter to QME 11/17/2023. Could not see supportive information from employer sided statements on points made on cover letter. Would like to have seen that. However, that was canceled and new PQME appointment pending.
52	Excellent initial review dated 6/24/2022 including outline of ISO only no actual Plan of action was laid out.
62	Qualified Medical Exam initial 4/5/22 report makes compensable bilateral arms condition as industrial -- would have liked to have seen review of connection to mechanism of injury. Application only claims neck and back. ISO showed match/ EAMS showed match. Could not find documentation of pursuit of medical records. could not tell if ISO 1/3/2024 was reviewed noting more matches and information pertaining to 2018 hand injury. Noting 4/28/2022 report from Dr. Morley advises that employee's condition worsens with repetitive work. claimant was off work from both District and 2nd job. 2nd claim should have been set up for bilateral arms per app filed for CT through to 7/13/2021. received 4/24/2023 --- but noting care already paid for under this claim.
64	Case reopened after long period closed with no settlement on case (despite notes referencing case as future medical care) Cannot see that was official. Noting 2021 when case reopened doctor report from surgeon visits 8/12/2021 mentions problems with body part after going on fishing trip. would have liked to have seen extent of injury questions to doctor as to relationship to injury.

**Individual claims comments for Subrogation:**

Claim Audit Number	Subrogation Management Comments
1	Initial review has standard language "There is no third-party involvement, so subrogation is not an issue". Score not reduced but noting template language.
2	Initial file review-standard language: "No third-party involvement, no need to pursue subrogation". No points reduction but noting templated language.
3	Initial review has standard language: "there is no third-party involvement, so subrogation is not an issue". No reduction in score but noting templated language.

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4	Not addressed or ruled out in examiner's notes. What caused the employee's shoe to get caught on a wide part of the cement?
17	Not addressed in initial review. Supervisor's Initial review on 6/23/2022 directed examiner to rule out.
24	Ruled out in Supervisor initial review on 12/5/2023.
37	Not scored but noted reason was There is no third-party involvement, so subrogation is not an issue. Would like to see why no third party is involved language.
38	Not ranked. But noting language on rule out simply states subrogation is not an issue. Would like to have small indication - Caused by special ed student. Subrogation not viable. Or something to that degree.
45	Would have liked to have seen more detail. If individual was visiting from out of country was car a rental or belonged to someone? Insurance follows the car not the driver. If permissive user -- did car owner have insurance?
51	Date to issue Complaint noted as 3/24/2023 - 2 years postdate of injury. Referral to subrogation representative not completed till 7/2023. However, good work on keeping subrogation in the forefront of discussions and discussing cost benefit analysis.
53	Good subrogation rules out language.
58	nice, detailed rule out language for subrogation
59	--- no POA between 2022-2024 provides disposition of subrogation. Last noted involved Regency checking for assets given policy report. Would like to see disposition on plans of actions.

**Individual claims comments for Litigation Management:**

Claim Audit Number	Litigation Management Comments
21	6/21/2021-Letter from Defense counsel. There is no indication where this claim has been admitted or denied. Not addressed until 2024.
23	Response / follow up from attorney updates not consistently timely.
30	Examiner needs to update this file
40	Appropriately used walk thru. Not scored.
50	Initial case assessment dated 2/14/2024 did not show defense attorney's knowledge of denied status of case. Could not see direction to complete answer to app.
62	Manager recommended referral to DA in 4/2023. Referral made 8/16/2023. Defense attorney not consistently provided with service of medical.
65	Appropriate and timely referral for walk thru
66	5/25/2023-Settlement authority to D/A to C&R up to \$37,500. No further documentation to support \$50K authority extended.
68	I see correspondence from defense counsel outlining all four cases. Not able to find documentation to defense counsel advising of settlement authority of \$80K.

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**Individual claims comments for Notices Management:**

Claim Audit Number	Notices Management Comments
5	2/22/2024-Examiner sent notice to employee to complete claim form. File closed prior to request on 7/12/2023 and again on 10/24/2023
9	Examiner issued PD denial on 3/5/2024.
15	PD delays were 6+ months out: 4/22/2022, 7/22/2022, 1/3/2023, 7/19/2023 and 10/19/2023
17	Denial of 4850/SC continuation for modified work effective 10/26/2023 not issued until 2/15/2024.
20	No ending Salary Continuation letter. No PD delay
22	PD Delay sent every six months. SC notice issued on 2/6/2024 for payments 12/3/2016 to 8/18/2021(?). No SC End issued. First & Final PD notice issued on 2/12/2024 based on Dr. Lin. 2/19/2024-PD Notice issued(?) PIPS report delayed
23	Late notice for TD /SC based on late payment.
24	PD denial notice issued on 1/31/2024. SC First and Final issued on 3/13/2024. first notice should have been issued back in October of 2023.
25	Petition for Sanctions, Penalties and attorney fees for not filing medical records. Stip Award of \$2000 to avoid trial. Did not see notice to ACSIG or Member.
26	F/F SC issued on 12/21/2024. PD delay issued on 12/21/2024 and PD denial on 1/10/2024
30	Last PD delay notice issued on 10/6/2023
34	First and Final PD notice due to settlement
39	Could not locate notice to employer requesting receipt of DWC1
40	Settlement authorization document dated 3/6/2023 after offer made to claimant on 1/12/2023. No post payment of settlement letter sent to claimant to spell out payment and simply states the settlement document is enclosed. Final Compromise and Release payment breakdown would have been appropriate.
42	Excess reports completed @ 6 months between 4/4/2022 to current. Nicely done.
43	Proofreading needed for letter 6/9/2023 to Dr. Lo.
45	Permanent Disability denial notice dated 12/22/2021 references a doctor's report from 12/31/2021 as to reason for no permanent disability.
48	General acceptance letter sent for a DWC1 that claimed entire body. Specific acceptance verbiage along with dates, etc., would have been appropriate. Claimant has pre-existing conditions that could come up as an issue in the future. Claim was accepted on 11/22/2023. Temporary Disability denial sent 12/15/2023 past 14 days. Claimant sent offer of full duty work on 12/15/2023 - after employee had resigned on 9/2023. Did not see where checked with employer that full duties were available. Cover letter though advises checked with employer --- was that with new employer?

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49	First and final Permanent Disability notice send 6/30/2023 for 1% using value \$1704. PS MMI Advice sent 6/30/2023 with 1% using value \$1704 noting original 2020 notice had correct information.
50	Late denial/ subsequent delay for no DWC1 case sent 12/12/2023 due 12/9 per delay notice. Appears TTD denial sent 1/17/2024 was template --- indicates case was accepted - cannot tell if actually sent but appears to have been with a copy to District - has add date 12/12/23 and edit date 1/17/2024 with Overview "not this one". Denial sent 2/9 predates receipt of DWC and App - could not see additional notice of denial based on receipt of DWC1. Also notes - DWC1 prefilled shows receipt of DWC1 by employer 9/8/2023 --- not signed by employer --- may need to address. PQME was canceled by AA last minute. Should send notice to AA of demand and intent to recover cancelation fee.
51	PIPS reporting gap 11/10/21, 6/23/2022, 11/15/2023.
52	June 22, 2022, summer wages letter to claimant states earnings are \$0.00 therefore rate change to \$1539.71. Claimant receives her pay in a 12-month period of time. There is no change rate noted. Letter not necessary except to advise that checks will be paid directly which was sent under separate mailing. Confusing language. ADA letter sent to District missing information. 2/9/2024 Request for DWC1 states "we have recently been notified that you may have sustained a work-related injury" for this 5/31/2022 injury.
54	Not sure why 10133.35 was issued. No permanent and stationary status, no lost time, etc. -- additionally claimant is a substitute, and an offer of regular work may imply more than the actual existing employment relationship. Claim was accepted by 8/24/2023. Efforts to contact claimant were unsuccessful and notice of contact timely sent. PD Denial sent 12/16/2023.
55	Last PD delay notice puts delay date through to 12/2023. No updated delay notice found in file. 6-month period used for delay period. Auditor believes permanent disability advances are due in the absence of any information different from what is in file -- as such PD initial and last payment letter due.
56	2 notices sent for first and final payment. Could not locate 9785 notice.
62	No delay in TPD issued for wage loss from 2nd job. Information provided at time of claim. TD notice start letter sent 8/11/2021 coverage check 7/20/21-8/11/2021. End notice for 2nd job wage loss was sent as a TD/SC payment termination notice and indicated rate was \$680.51/ week. Notice 3/9/2022 --- indicates start of TTD period 7/20/21 - 3/9/2022 --- and includes rate which is inclusive of 2nd job. Also sent as regular TD letter vs. TD/SC. Notice also includes dates where the employer did provide modified work - interactive dated 8/17/2021 confirmed when placed off work. Change of rate letter was sent noting would be direct to injured worker as of date of letter but noting sick leave balance exhausted 10/2021. 1st PIPS notice completed 1/4/2024 - supervisor noted due much earlier. PD start notice give starting date 4/21/2022 covering trough to 2/28/2024 and says will continue for 188.8 weeks. Notices do not match payment dates in system. TTD ended 9/14/2023

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	for 104 max. There was an advance for \$2k requested but cannot find payment in system. otherwise, PD start date was 9/15/2023.
65	Late First and final notice for dates 11/4-6. Employee lost a few days from work. Was deemed permanent and stationary with permanent disability. Could not see that 10133.35 issued.
66	TD delay notice issued on 3/10/2022. denial notice issued on 4/6/2022. Salary continuation first and final notice issued on 4/7/2022

**Individual claims comments for Resolution/Closure:**

Claim Audit Number	Disposition Management Comments
4	Employee was discharged from care on 8/31/2023 by Dr. Deguzman. Appears file fell off diary and file closed on 2/15/2024.
5	7/12/2023 note states file being admin closed and was re-opened on 10/17/2023 but no notes to reflect why. File closed again on 10/24/2023 but no note in system to support closing file.
6	Good settlement
14	Manager worked up settlement based on 1/18/2023 diary review and again on 1/10/2024.
15	MMI report received on 10/3/2023. Could not find settlement attempts made with Employee. Supervisor review on 12/4/2023-contact Employee to discuss settlement.
17	Compromise and Release sent to EE and A/A on 9/22/2023. Follow up on 11/1/2023 after review diary review. But need plan of action to bring case to resolution.
20	MMI report from Dr. Van Gompel on 10/27/2022 with 10% PD. MMI report from Dr. Van Gompel dated 12/21/2023 with 18% WPI. Offer to stip not sent till 2/2024.
21	Pulled from companion file-Certified MSA proposal received on 2/5/2024.Supervisor has extend authority up to \$80K. Has D/A been notified?
24	PD denial issued on 1/31/2024. Late diary 3/5/2024. Can case close?
26	Closure action plan for 1/10/2024 but file is still open
27	6/10/2022- Released to full work, continue with home exercise and Neurontin. Return in 6 weeks. Employee did not return for care until 4/21/2023 after received the closing letter. 8 months to move to closing notice.
29	Found defense update of 2/1/2024 in file #583516. MSC on 1/30/2024. Applicant rejected offer of \$750,000. Keenan to obtain a new MSA quote. Documentation needs to be updated on this file.
30	Supervisor review 7/26/2021 and 11/22/2021. File has been in settlement posture since 9/27/2019. Directions given to examiner. 10/17/2022-Examiner reached out to employee to discuss settlement. Employee then retains counsel on 2/16/2023.
32	Great settlement work up by Examiner

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40	Employee was deemed permanent and stationary on 1/22/2021 by treater for one body part and continued to treat on other. All body parts considered permanent and stationary from QME report dated 10/5/2021 received 11/16/2021. Pursuit for settlement and assessment dated 1/11/2023 after 3 supervisor directions entered on 1/2022, 5/2022 and again 8/2022. Assessments completed 1/11/2023 with initial documents sent to claimant had incorrect dollar amount. Case closure and settlement was achieved within 60 days after examiner did work up for settlement. Case closed then had to reopen to pay DA final bill. Bill was obtained and should have been expected and requested prior to closure.
42	Offer to close out FM sent to AA on 7/2/2020 with no response. Examiner followed up with claimant on 8/5/2020, 8/2/2021, 8/11/2022 and consistently responded not interested per notes. Last written offer and/or documented offer 7/2/2020. Per supervisor should be documented with each call.
43	Written offer last extended to Applicant Attorney (AA) 9/29/2022. No work up. Letter to AA requests interest only. Could not locate documentation of continued lack of interest by claimant/ AA.
45	Claimant deemed MMI 12/31/21 and again 2/22/2022. Treatment stopped 5/2022. Claimant has other claim. Supervisor Diary Review mentions PQME pending for 9/2023 but not mentioned in following plan of actions. Permanent Disability was sent. Claimant still appears to be working for employer. Multiple efforts were made to contact claimant. Plan of action remains the same. Are all options being explored including language letter for 5405 or global settlement as noted previously with newer claim? Using 3rd party vendor to pursue communication and explain to claimant documents, etc.
46	Case remained opened despite C&R in 2022 due to voucher. Voucher was issued in 2020 expired 11/27/2023. Case not closed until 3/5/2024.
47	Claimant initially deemed MMI 2/2022. report not ratable per DEU - received 3/15/2022. Supplemental not requested till 8/2023. Received 8/15/23. Settlement analysis completed 12/20/2023.
48	Case is pending issue on dispute on TTD. Do not see full assessment on file to completely resolve case. Costs benefit analysis of completing C&R for TTD disputed? Etc.
49	Attempts to C&R have been pursued since 3/2021 - with a gap period between 12/15/2021 and 5/22/2023. Review of settlement apparently discovered that the C&R documents were incorrectly completed. Not caught despite being sent 3 times. Renegotiations with claimant resulted in having to honor incorrect 1% pay figure of \$1704.77. Rationale included it was offered, claimant is not in agreement necessarily with level of permanent disability and trying to avoid further work up and/or reevaluation with QME. Expects judge to set for adequacy. C&R turned to Stipulation as claimant would not C&R in 2023. Gap in settlement effort between 7/13/2023 - to date of audit. Permanent disability advanced with no plan of action on resolution noting stipulation was to be sent occurred on 6/28/2023. No additional plan other than to continue to pursue. Any other available strategies?

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55	File contains a medical P&S report from Dr. Chen giving this knee injury a 2% WPI --- report in system as of 2/15/2019. Claimant has retired and has been contacted about C&R however, claimant says she does not want to C&R claim. See no effort to offer stipulation on this case. It is noted she has other claims and that there is some reference to a 2019 QME report that needs to be reviewed. However, if Stip only could not see rationale as to why Stip was not sent for this file other than referencing an effort to settle all claims which the claimant already stated she was not interested as noted in this file.
57	Confusing language in companion and master file --- case is shown as a Denied CT --- but POA is to stipulate if C&R not viable. C&R efforts have been ongoing. Was Stipulation not offered? Should be noted on all files.
58	Signed C&R does not include Medicare language regarding intent not to shift costs, etc. Claimant is not within MSA threshold; however, it would be clear to ensure CMS that the claimant was advised as to the monies' purpose. Excellent work pursuing C&R and getting signed document from claimant.
63	MO check list for 4/10/23 shows no DWC1 in file. Do not see request prior to 4/18/2023.
64	POA was to resend C&R - no documents sent until 3/2023. Last C&R offer sent 11/2022. No movement documented to move case to closure. Determination needs to be made -- although afforded future medical care employee stopped treating 2012 --- restarted 2019 in 2021 had problems after fishing trip. efforts to settle have been fruitless --- assertion of statute of limitations not reviewed?
65	Good work moving case to full resolution once claimant was deemed permanent and stationary.
66	5/25/2023-Settlement authority to D/A to C&R up to \$37,500. No further documentation to support \$50K
67	4/20/2023-Employee called examiner that the settlement documents were incorrect, and the amount did not equal the amount in the settlement correspondence. C&R assigned to defense on 7/25/2023 for walk through. Defense e-filed on 8/18/2023. 3/14/2023-settlement letter to employee for \$20K. 8/10/2023 to LFLM for settlement walk through. Compromise and Release on 9/28/2023 for \$22,740. No mention of settlement increase rationale in the notepad but found the 8/10/2023 letter to the employee.
68	Certified MSA proposal received on 2/5/2024. Supervisor has extended authority up to \$80K. Has D/A been notified?

**Individual claims comments for Oversight:**

Claim Audit Number	Oversight Management Comments
1	Supervisor first review was on 2/8/2024 who recommended conversion.
2	Late 2/16/2024 diary. Supervisor initial review on 2/8/2024

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4	Gap in action between 8/2023 and 2/15/2024. Appears file fell off diary and file closed on 2/15/2024.
5	file must have fallen off diary. 7/12/2023 note states file being admin closed and was re-opened on 10/17/2023 but no notes to reflect why. File closed again on 10/24/2023 but no note in system to support closing file.
8	6/8/2023-Keenan received notice from A/A requesting change of physician. 11/28/2023.-9785 treatment authorization provided but file not re-opened and no POA. Supervisor review on 12/11/2023 provided direction to examiner to set reserves. Examiner first POA since re-opened was on 1/19/2024.
9	Med maintenance file. Supervisor has been doing most of the work. On 2/10/2022, 8/11/2022 and 4/26/2023-Supervisor provided direction to the examiner. On 8/1/2023 Supervisor worked up file. First Examiner POA was on 12/22/2023. 2/29/2024-Late supervisor diary. No work in 2022.
10	Late examiner diary of 3/7/2023. Need to review supervisor's last diary on directions.
11	could not find documentation of supervisor review
12	Supervisor worked up file in the beginning. Examiner first POA not until 8/6/2022. 7/11/2023 employee emailed examiner requesting medical treatment. Treatment authorization sent to medical provider timely, but file must have fell off diary and no real action by examiner until 12/6/2023. 2/13/2023-Late supervisor diary.
14	No examiner plan of action until 1/19/2024.
15	Late CA diary 2/7/2024 and 3/4/2024 Supervisor Diary. Last Examiner review was on 10/18/2023.
16	Late examiner and supervisor diary 2/9/2024 and 2/19/2024. Last supervisor review 8/21/2023. Examiner review on 11/7/2023-POA to follow up on surgery. Last examiner review on 1/5/2024 no follow-up with physician, district or employee. Did issue a 30-day closing letter.
17	Examiner reviewed file on 9/11/2023 and C&R sent out on 9/22/2023. Employee placed on limited work hours as of 10/26/2023, No action. No further action until 2/20/2024 as employee was placed off work as of 2/13/2024. Examiner needs to provide a current claim update with POA.
18	Final work up completed by claims manager. Points not reduced noting that examiner did not complete work up.
20	diary review 12/1 2022 and 2/17/2023 are blank. Gap in examiner review in 2023. Stips sent to employee on 2/23/2024.
21	2/14/2024-Late Supervisor Diary but Supervisor reviewed the reserves on 2/28/2024 and provided direction. Examiner POA does not say why this is the Master file when all benefits have been paid on the companion file.
22	9/28/2022 Examiner POA blank. Late diaries: 2/27/2024 and 3/13/2024
23	Late diaries 2/21/2024, 2/27/2024 and 3/11/2024. Examiner needs to provide current summary, review reserves and provide a current POA.

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24	No initial POA by examiner. Supervisor initial POA 12/5/2023-provided several directives to examiner (TTD may be due, update claim screen.). Examiner addressed on 3/2/2024.
26	Late diary 2/5/2024-Prep for closure. Closure action plan for 1/10/2024 but file is still open. Supervisor just reviewed file on 3/8/2024 to have examiner complete closing checklist and document closing rationale
27	Late diaries 2/19-future medical review. Case is not a FM as stated in Supervisor diary of 6/29/2022 which provided direction to examiner. Examiner's POA of 7/30/2022-same POAs from priors and did not address supervisor diary of 6/29/2022. No employee or district contact. 30 day closing notice issued on 2/23/2023. Examiner needs a current POA and place file on 90-day diary.
29	Last review on 12/20/2023. File needs to be updated as late diaries 2/14/2024 and 3/12/2024. Manager and Supervisor reviews are current. Examiner needs to follow through and provide a current POA
30	Supervisor review 7/26/2021. File has been in settlement posture since 9/2020 or 2019. Directions given to examiner. Examiner review on 7/12/2022 but did not address all of supervisor's questions. Examiner contacted employee on 10/17/2022 and sent settlement letter. Employee is now represented. Examiner needs to update this file as requested by supervisor.
34	Supervisor review 12/7/2021, 1/13/2022, 3/14/2022-Provided direction to examiner to update this file. Examiner POA 5/12/2022-Follow up on CMS. Examiner POA 9/29/2022-provided some content. Closed file via PD denial. Supervisor review on 4/10/2023 provided full breakdown of all three claims
37	Good Timely efforts to get information and to close file.
39	Gap in review of file between 4/18/2022-8/25/2022.
40	Gap in examiner review and POA 1/31/2022- 1/11/2023. 5/11/2022 - SR entered 2 Reviews on both dates noting overdue diary and directions for CE to complete claim value analysis and make settlement offer. Then again on 8/11/2022 - noting again overdue diary and the case was in settlement set 10/25/2021. Unknown supervisor escalation of directions. No examiner POA between 1/31/2022 and 1/11/2023. Settlement instructions to CA states PIPS year 2016 -- but data shows PIPS 2019. CA did complete requested documents from examiner within 24 hours of receipt i.e., 1/11 completed on 1/12, however, initial C&R documents had incorrect dollar amounts.
42	Diary pending for 2/20/24 Medium priority. as of date of review 3/18/2024 - requiring File Review although noting excess report review completed in 2/2024. Last file review / Plan of Action completed 8/24/2023. POA dated 1/16/2023 included complete excess report 4/2023 and contact claimant by 8/2023 for settlement vis C&R. Could not locate excess report in 4/2023. Supervisor review 4/19/2023 requested ER update for retirement date as mentioned by treater.
43	SR noted negative reserves 1/17/23 requested completion 1/23/2023. Reserves review noted on 2/6/2023 after 2nd note from supervisor dated 1/30/2023. FM

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	review dated 6/9/2023 and 9/11/2023 have same/ similar Plan of Action with no documented efforts to take specified action.
44	Plan of action gap 2/28/2023-10/31/2023. POA's between 8/26/2022-and 11/2023 --- were short term with no dates associated with action. No plan for final resolution noting this appears to be done by supervisor. 2/10/2024 notes PIPS report due. Overdue diary noted by supervisor on 8/26/2022 and 5/11/2022.
45	Diary 3/18/2024 for CE Not addressed as of 3/25/2024. No examiner diary presents for review at time of Supervisor review on 2/11/2024 - Supervisor review dated 10/31/2023 notes a PQME to take place on 9/2023 -- uncertain if for other claim or this one but noted as part of POA to look at global C&R. No POA's following mentions receipt of 9/2023 QME or any update accordingly. Gap in formal plan of action between 3/6/2022 and 4/18/2023. Gap in supervisor review between 5/6/2022 and 10/31/2023.
46	Gap in formal plan of action between 8/4/2023 and 2/26/2024. Noted Plan of Actions were scheduled in 180 days due to case being settled via Compromise and Release. 22 days late for Plan of Action. Time corresponds with later closure.
47	Diaries dated 3/14/2024 for settlement evaluation not addressed as of 3/25/2024. Indicates settlement eval was done on 12/20/23 but emailed claimant about work status. Supervisor review 10/2022 and 4/2023 appear to be the same with the same recommendations/ directions to examiner. No formal POA from examiner until 4/25/2023.
48	Diary for 2/7/2024 CE Instructions not completed as of 3/25/2024. Communication with supervisor did not include discussion of accepting claim. No plan of action beyond acceptance of claim on 11/22/2023.
49	Diary 2/13/2024 not cleared as of 3/26/2024 for 30-day POA and follow up on settlement. Appears claim dropped off diary noting this occurred previously in 2021 as noted by Claims Manager. Gap in any notes between 12/15/21 to 5/22/2023.
50	Diaries 2/26/2024, 3/8/2024, 3/20/2024, still pending as of 3/26/2024. 1 formal POA examiner level 1/10/2024. Supervisor review completed monthly or twice monthly. Late addressing of delay due date.
51	Manager and supervisor oversight very good on this claim. Noting formal POA 1/2024. Pending official court docs for MSJ regarding exclusive remedy. Also pending decision by Plaintiff party to appeal findings of MSJ. POA should include case assessment and value to move exposure case for Workers' comp benefits with 2 dependents. Noting lots of discussion on file about possible judge's discretion on benefits to dependents. It is uncertain what the claimant contributed financially to household as she was a volunteer and paid stipend for Board position. Prep for movement to settlement options would be appropriate.
52	Diaries 2/19/2024, 2/26/2024 still pending as of 3/27/2024. Overdue diary noted in 2022. diary review 7/5/2022 - is not completed just blank. Diary Review 9/6/2022, 10/18/2022 - not completed just blank.
53	Formal POA should be due - overdue diary 3/14 for both examiner and supervisor review. Only 1 POA since 11/2023 -- 3-month POA would have been due in February.

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	File activity was completed between 11/15-3/27 (date of audit) with gap between 11/28/2023-2/23/24.
55	3/12/2024 - diary pending as of 3/27/2024. Supervisory review 12/20/21 and 5/5/2022 continue to mention reviewing a 2019 QME to determine how much each of the cases connected to this claimant should have what exposure. Gap in review between 12/20/21 - 5/5/2022. Gap in file activity between 12/20/21 - 9/13/0222 except for ISO run on 1/26/22. POA no real change from 12/20/21, 5/5/2022, 11/7/2022. Staffing review completed 5/25/2023 - advised plan to settle.
56	No Examiner POA found.
57	Diary 2/14/2024 pending as of 3/28/2024. Supervisor and manager only activity on case between 4/12/2023-1/16/2024. CE last note about contribution 1/30/2023. Is claimant not treating? Supervisor advises ongoing efforts and stalled settlement, but contributions would still continue. Documentation on this file should be updated for contribution status. Plan of actions are found in master file (different examiner) @ 120-day intervals with supervisor review.
58	Diaries 3/12, 3/15, 3/20 pending as of 3/28/2024. CE 30-day diary 5/17/2022 -- blank. File activity instruction on 12/27 --- states please terminate TTD --- EE RTW 10/17.
59	2/15/2024 pending diary as of 3/28/2024. 2/24/2022 - file activity examiner - POA is to follow up with employee about medical care requested from 2020 QME. Missing diary noted by supervisor 7/21/2022. Gaps in formal POA for examiner. Some POAs found in file activity.
60	2/22/2024 and 3/14/2024 diaries pending as of 3/28/2024. Last supervisor review noted 9/14/2023. Last examiner file activity entered 6/7/2023. Last completed plan of action entered as a file activity 2/27/2023 has POA is to contact QME for attendance at 2/22/2023 appointment. RFAs were approved between 2/27/2023-11/9/2023.
62	11/6/2023, 3/5/24, 3/19/24, 3/21/24 pending diaries as of 3/29/2024. Excellent Manager review dated 4/11/2023. Job description on 2nd job asked by Supervisor in 2022 and again 8/16/2023.
63	3/19/2024 pending diary as of 3/29/2024. Document images stopped being added in 7/7/2023. Medical notepad entered dated 2/29/2024 but refers to 10/10/22 for x-rays. Another medical notepad entered 2/29/24 references a medical status 2/22/24 showing claimant last seen 2/22/24 for CTS, Myalgia, Sprain, etc. given work restrictions and noted for recheck 3/18/2024 but cannot locate this status report in documents. Uncertain if this report is related to this claim. Notepad jumps from claim review follow up which references 2/22/24 visit then to settlement. POA indicates to check with HR on accommodations of restrictions. As of 3/29/2024 do not see completion of POA. Case reopened 4/18/2023 - first formal POA by examiner - 2/13/2024.

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64	3/13/2024 is pending diary as of 3/29/2024. Last notepad entry 10/13/2023 by supervisor shows settlement offer was to be resent 3/23 but does not appear this occurred. No follow. Case needs to be revisited. Last examiner activity 3/4/2023 indicating resend settlement documents and then previous to that 11/19/2022 resend settlement docs. Correspondence tab shows last C&R letter sent 11/21/2022 as a 2nd request. appears efforts have been ongoing since 2020 with case reopen and previous to that as far back as 2012.
65	Supervisor 2 pt contact review dated 11/15/2022 showed does not have EE contact on file -- EE contact documented on 11/9/2022. However. No file review completed at that time and again on 12/27/2022 supervisor review date.
66	No initial review by examiner. Supervisor initial review on 3/7/2022 gave examiner several items to address. 4/6/2022-Manager completed an initial review with direction: initiate TTD evaluate reserves and issue denial of rt knee.
67	POA did not reflect the settlement offer change from \$20K to \$22,740.00
68	Supervisor review on 3/29/2022, 6/29/2022, 1/9/2023, 3/20/2023 (negative reserves), 7/6/2023 and 8/2/2023-direction to examiner. Supervisor worked up file. Manager review on 11/27/2023. Examiner POA and reserves on 1/2/2024.

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**Individual claims comments for Reserves:**

Claim Audit Number	Reserves Management Comments
1	Medical reserves are a negative \$459.60. Examiner last updated the notepad on 2/14/2024
5	File closed on 7/12/2023-payments made while file closed-4 medical.
8	File re-opened late with reserves not posted on 1/24/2024.
10	Allocated reserves are showing a -\$2632.47. Reserves last reviewed on 1/31/2024. More legal bills showing pending in payment field. Need to increase by \$15K as case set for trial on April 2, 2024. Need to review the PD reserves as defense report of 1/23/2024 outlined best PD case scenario is 44% (\$66,410) worst case is 67% (\$118,102.50).
21	Supervisor reviewed reserves on 2/28/2024.Questioned why \$10K when no defense on file. Also, claim is master? Where does legal expense exposure belong?
26	Initial reserves not entered until 12/2023.
27	Medical reserves are a negative \$459.60. Examiner last updated the notepad on 2/14/2024
28	Will need to increase allocated to pay defense as only \$542.63 outstanding
33	No reduction in score but noting Manager reviewed reserves and adjusted them accordingly
34	PD reserves entered on 6/3/2023 in the amount of \$6090 for settlement

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35	Some stair stepping between 8/23/2023 to 2/1/2024 - somewhat anticipated as case could have gone either way. Reserves added to claim on 2/15/2024 in the amount of \$11,000.01 for a total incurred of \$15,000 despite knowledge that the claimant had been released to modified work. Not sure of rationale for that level. Reserves for medical reduced by \$10,357.87 on 2/29/2024 given injured workers was already released to full duty. Case closed at \$5616.00. Would have liked to have seen documentation on Reserve rationale.
36	Claimant missed last scheduled appointment. There was some anticipation from administrator that claimant would be considered permanent and stationary or discharged by next diary 4/11/2024. Outstanding reserves are \$826.02. If in fact the employee gets discharged this is likely an okay reserve. The employee did return to full duty and has been on full duty for a month or so as of date of review. However, if the employee returns to care - reserves are too low. No points reduced. No recommended reserve changes.
42	OSIP 3-year average reviews done 8/21/2022 noted on excess report dated 10/3/2022. -- as of 2/13/2024 not done annually per OSIP regulations. Reserves list shows last medical 3-year assessment completed 4/10/2017. 4/4/2018 medical reserves increased to cover MSA report values. total paid less x-rays/MRI/ CT scan between 8/21/2020-8/22/2023 = \$1602.21/3 = \$534.07 x 20.6 years = \$11001.84. Outstanding reserves = \$31,921.15. Could not find OSIP 3-year reserves calculation consideration -- unknown what extra 20k is for -- needs updated documentation as well as annual review. Anticipate some non-annual costs, however, medical use appears to be steady.
43	Noted negative reserves on FM file January 2023. Noting Reserve listing for claim shows process date for last reserves review 7/21/2020 showing L.E. 21.7 x \$3000 as 3-year average. Same notation on 2/6/2023 updated reserve review entry. Worksheets completed for 2/6/2023 and 3/2024. Could not find 3-year average assessment. Do not see entry for 2/6/2023 worksheet on reserve listing. reviewing medical usage from 3/18/2021-3/18/2024 total use \$38914.43 less x-ray/CT scan/MRI (4x in past 3 years paid), defense fees, etc. Would estimate diagnostics another 4 x in 18-year period of time at \$2332 average = \$9328. Auditors review shows an average annual pay out on medical = \$12,971.48 x life expectancy of 18.4 = 238,675.2. + \$9328 = \$248,003.2
44	Reserves will likely need to be increased once claimant becomes permanent and stationary and settlement negotiations begin. However, in the absence of further information to justify an increase no points reductions made, and no recommended reserves increase at this time.
45	claimant used \$1994.73 in medical from 1/1/2022-5/23/2022 -monthly use between 1/1/2022-3/2024 (26 months) = \$2761.93 for 36 months = \$920.64 average per year. OSIP reserves regs = \$34,892.43. Reserves need to be reviewed per OSIP regulations 1x per year. Reserves noted on POA's as no change indicated yet.
47	Supervisor notes for 6 months disability reserves needed to review. No noted review. Claimant MMI as of 2/7/2022. Reserves review completed 4/2023 does not include

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	OSIP evaluation on future medical. Good catch by supervisor on 4/26/2023. But noting OSIP requires an extrapolation if a full 3 years is not available. Increase of reserves for medical is likely should recent care be related and if time off is related. No recommendation as information still pending.
48	Temporary Disability denied but demanded. Disputed issue --- for accepted claim with exposure. Outstanding reserves are on medical and expenses. Need to be properly placed in correct benefits line.
49	Claimant has had no medical treatment since deemed permanent and stationary in 7/2020. Reserves should be set based on expected lifetime future medical care as no 3-year average available. Settlement was to be for \$12,500. Reserves could be lower based on lack of usage but not much lower so no recommendations being made.
50	Could not find justification for permanent disability reserves at \$30,957.50 or 26%. Did not see GAF score or any medical illustrating her current complaints are likely to be permanent in nature. Precautionary reserves for exposure make sense but could not find justification for this amount of permanent disability. Noted supervisor caught this on 2/28/2024 and requested rationale as well.
51	Reserve rationale is noted several times dependent on judge's discretion on amount of benefits. Reserves may be too high depending on overall household situation of dependents, but no recommendations at this time until further information can be determined on this case.
52	Reserves rationale not provided for all reserve work ups. Negative reserves in 2022. Supervisor requested PD reserves be placed on file on 9/8/2022, completed 11/7/2022. Medical reserves are likely low. If predicting permanent disability likely future medical should be assessed.
53	PD may be low, but no recommendation made as claimant is not yet permanent and stationary. Current PD reserve is appropriate without further evidence. Salary continuation reserves seem to be high at 19,661.10 still remaining. Claimant return to work on 2/20/2024 -- expect these reserves to be reduced absent any issues with injured worker. No recommendation to reduce at this time as employee is back to work for just about 30 days.
54	No rationale for input of 1% PD set 5 days after incident of vomiting with no lost time.
55	Claim is reserved for medical only. Supervisor reviews references a 2019 QME report which will provide separation of exposure and in 2023 noted 4% permanent disability on this case. No reserves for permanent disability on this case. Case information does not stand on its own for exposures on this case.
57	Last contribution 8/2022. Masterfile does not appear to be paying anything at this time. MSA's show higher contribution on this case but C&R not moving forward. Review of whether or not full MSA value needs to be reserved is based on whether or not there is a probability of settlement.
59	Negative reserves noted in 2023. Medical reserves low. Requires assessment including future medical expected and medical legal evaluation.

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61	Some stair stepping between 8/23/2023 to 2/1/2024 - somewhat anticipated as case could have gone either way. Reserves added to claim on 2/15/2024 in the amount of \$11,000.01 for a total incurred of \$15,000 despite knowledge that the claimant had been released to modified work. Not sure of rationale for that level. Reserves for medical reduced by \$10,357.87 on 2/29/2024 given injured workers was already released to full duty. Case closed at \$5616.00. Would have liked to have seen documentation on Reserve rationale.
62	Negative reserves noted in 2022. 3-year medical reserve calculation for lifetime medical? During acute stage of claim? Not sure of method used to produce exposure. Need to review reserves for reasonable probable outcome.
63	Reserves review made -- could not find medical noted in notepad in this claim to assist with supporting rationale for permanent disability although payments are being made on this case.
65	Initial reserves for claim received 11/9 on 12/28/22. Initial PD reserves - could not find substantive rationale for use of 10% WPI --- not noted.
66	Supervisor and manager review 3/7/2022, 5/16/2022, 12/8/2022 and 4/5/2023 both commented on insufficient reserves. Initial reserves not entered until 2/10/2022

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ACSIG EXECUTIVE COMMITTEE MEETING

Newfront Insurance Services, LLC Audit



Presented by: Patrice D. Grant

May 3, 2024



May 3, 2024

Kimberly Dennis  
Executive Director, ACSIG  
5776 Stoneridge Mall Road  
Pleasanton, CA 94588

Dear Ms. Dennis:

We have evaluated the audit report and findings dated April 12, 2024, from Newfront Insurance Services, LLC. We received a score of 88.4%, a slight increase in the overall score from the last audit. The following is a discussion of findings and any appropriate corrective action plans.

### **HOUSEKEEPING**

**Audit Finding:** We received a score of 93%. The auditors note that we keep files well documented and codes and system entries up to date and detailed, with some exceptions. However, some of the tabs, such as work status information or subrogation information, were not consistently up to date.

**Response:** The auditors noted several claims were missing documents, including DWC-1, 5020's and 5021's. Regarding the DWC-1, if the claims administrator obtains knowledge that the employer has not provided a claim form, we must send one to the employee within three working days of knowledge that the claim form was not provided. If the claims administrator cannot determine if the employer has provided a claim form to the employee, the claims administrator shall provide one to the employee within 30 days of the administrator's date of knowledge of the claim. For most of the claims reviewed, the employer had indicated on the Employer's Report that the DWC-1 was given. Further, we attempted to request the missing claim information from the employer. The 5020 and 5021 noted as missing were found upon our review as these were contained in the paper file and had been scanned into our system under a document type of Paper File Conversion. Also, the auditors may have missed some of the reports in our billing system (CEP).

**Action Plan:** We recommend training member Districts on the importance of providing us with supporting claim information. We will also document our efforts to obtain the missing claim information and make the required attempts to get it. Training will also be conducted with the Staff to ensure claims are properly coded and the work status tab is updated. Target audits will also be undertaken to ensure compliance.

## **PAYMENT COMPLIANCE**

**Audit Finding:** We received a score of 91.5%. Auditors found payments including benefits, expenses, vendor services, and miscellaneous invoices were paid timely and pursuant to bill review reductions with some exceptions, specifically having to do with insufficient reserves on the file at time of payment. Initial payments were not consistently made timely and although if salary continuation has been issued by the Member, it is the position of the auditors that all temporary total disability payments should be made in accordance with the labor code statutory time frames even in light of existing salary continuation. Noted Overpayment of TTD on 2 claims

**Response:** Most of the reserve issues had to do with defense attorney costs, and Claim Examiners need to review reserves at the time of payment to ensure they are adequate to ensure payments are issued. None of the payments were late. There is no requirement, when an employee is receiving salary continuation, that the payment of temporary disability is made in accordance with labor code statutory time frames. There is no violation of the law for reimbursing the District. Acknowledge that one examiner overpaid TTD due to the miscalculation of a wage statement. Upon review, it does not appear that any of the bills were paid late. Keenan will reimburse PIPS for the \$2,000.00 penalty.

**Action Plan:** Reserve training will be conducted with the Staff to ensure they reserve claims appropriately for defense expenses. Wage statement training will be conducted. \_

## **DISABILITY MANAGEMENT**

**Audit Finding:** We received a score of 85.3%, an increase from our prior score of 80% from 2022. Wage statement ticker calculations were evidenced in almost all files. They were calculated with consideration for the outcome that was most accurate for the employee based on the labor code, i.e., 52 weeks/or earnings capacity. The auditors noted finding some cases where calculations required additional review and calculations. The auditors did find several files where the claims team communicated at an excellent level with the Members and medical providers to determine modified work and ability to provide, especially when the claims assistant appeared to take the lead. The level of communication for disability management was not consistent with all files. Some claims had late assessments, or no assessments made regarding whether or not disability was due to the claimant, whether it be permanent disability or temporary. The auditors noted several files where the supervisor and/or manager would provide direction to the examiners to rule in or out (address) temporary disability but with no documented response or with late response even when information was available.

**Response:** Continued improvement between us and the employer regarding disability status and management is warranted. One of the claims identified for contact with the employer was for a District no longer with the JPA, and we are only administering the Future Medical Award. If the injured worker returns to regular work, prior to retirement, permanent disability is not due and can be deferred until the claim is settled and there was no late payment in these situations of permanent disability benefits.

**Action Plan:** Training will be conducted on wage statements as well as adherence to using the Ticker. It was recognized prior to this audit that there was not consistent review by claims examiners to address supervisor recommendations. Our protocol is that examiners are to document their responses

to directions given by supervisors. We will be conducting Return to Work training with the Claims Examiners to address modified duty, district communication, as well as communication with medical providers.

## **MEDICAL MANAGEMENT**

**Audit Finding:** We received a score of 93.3% versus 91% from 2022. The auditor noted that we had a good grasp of the medical facilities and appropriate doctors to use for each case, and as a result, there was not a lot of identified need to push doctors to report, but for a few exceptions. There were several files where medical information was assessed timely and accurately. However, this was not consistent in all files. Several files had gaps in medical treatment plans or follow-up care with delayed pursuit.

**Response:** Agree with auditors' findings to ensure that we are proactively monitoring the issues.

**Action Plan:** We will establish more aggressive diary management oversight.

## **INVESTIGATION MANAGEMENT**

**Audit Finding:** We received a score of 84.6%, an increase from our score of 80%. The auditors noted that we were conducting 3-point contacts in most cases within 24 hours. Auditors noted refresher training on setting up a new claim within a field when found by a doctor, Applicant, or attorney.

**Response:** Agree training is warranted regarding addressing the ISO findings and outlining a plan of action, setting up new claims based on findings in a medical report, and filing applications.

**Action Taken:** Claims examiners have had training addressing how to respond to Applications and if a new injury is outlined in a medical report. We hold additional training in this area. The findings could have been for a claim wherein this issue had been identified in prior audits; it may not represent current behavior.

## **SUBROGATION MANAGEMENT**

**Audit Finding:** We received a score of 94.5% vs 95% from audit in 2022. The auditors noted rule-out language in several files, including "There is no third-party involvement, so subrogation is not an issue" and "No third-party involvement, no need to pursue subrogation." Also, examiners do not consistently rule out subrogation in the plans of action or diary review notes.

**Response:** Refresher training will be conducted in this area to better explain why subrogation is ruled out and documented. This will ensure that Claims Examiners identify subrogation and document their rationale for ruling it out at their initial reviews.

**Action Plan:** We will schedule subrogation training within the next 90 days.

## **LITIGATION MANAGEMENT**

**Audit Finding:** We obtained a score of 88% versus 89% from 2022. Auditors noted: "We continued

to note that the claims managers' oversight on the legal was impactful to ensure legal movement on cases. We hope this continues to be the oversight structure for litigated cases. We did not find any deferral of work to defense attorneys. However, we did find some delayed response to attorneys and recommendations made by supervisor/manager."

**Response:** Agree with findings

**Action Plan:** Refresher training on Litigation Management with Claims Examiner

### **NOTICE MANAGEMENT**

**Audit Finding:** We received a score of 89.6% which an improvement from 86% in 2022. The auditors generally found that the notices were sent timely. They found consistent efforts in issuing the 9785 notices to doctors including all new doctors. Benefits notices were sent out mostly per required standards, but some were incorrect type of notices and/or had errors/ inaccuracies which could cause confusion for receive.

**Response:** This is a training opportunity on benefit notice requirements and reviewing for the accuracy of notices sent.

**Action Plan:** Refresher training will be conducted about benefits notices expectations.

### **OVERSIGHT**

**Audit Finding:** The score in this area fell from 84% in 2022 to 79.1%. This area reviews not just the oversight by the managers and supervisors, but also by the examiner, work done by claims assistants and nurse case managers. It considers their frequency and development of a plan of action; whether claims examiner followed that plan of action; and communication effectiveness with all involved in the claim from the claims team. The auditor noted: "We continued to find responses to Supervisor and Manager recommendations either not completed and/or late in response. There appeared to be a staffing change that occurred during the period we reviewed which may have impacted the auditor's findings, including in some cases where all the work was completed by the Supervisor or Manager. Per Keenans' standard plan of actions should be completed 72 hours within a new claim file set up and reviewed upon each diary which the auditors determined was not consistently met on each file."

**Response:** Agree with findings in this area

**Action Plan:** We are implementing a process where the supervisor is creating a follow up diary to ensure that directions have been completed by the claim's staffs. We are closing monitoring this by requesting status reports, conducting check-ins to provide updates, and giving due dates. Supervisor Training is being scheduled Statewide as well. Furthermore, all the Claims Examiner attended New Hire Training as a refresher of all our standards and accountabilities March 13, 2024.



## **RESOLUTION/CLOSURE**

**Audit Finding:** We received a score of 81.9% a decrease in the findings of 88%. This area of review considers the case movement toward closure and for claims requiring resolution by settlement the timeliness, accuracy, and analysis of options for type of settlements with disposition of all issues being detailed and fully resolved accordingly. The auditors did find some great work on case closures for minor claims and on a few claims good settlement efforts and work up. However, we noted several claims where resolution was delayed sometimes without documentation as to the reasons for the delay. These auditors agree with the standards and accountabilities document for the within 15 days timeline for evaluation of receipt of all relevant facts for the purposes of evaluation, negotiation, and settlement.

**Response:** Agree with findings in this area.

**Action Plan:** We will hold settlement triages with the claims examiners to ensure that claims are moving towards resolution within expected timeframes and conduct litigation roundtables with defense attorneys to expedite claim resolution.

## **RESERVES**

**Audit Finding:** We received a score of 91.5 a slight increase from 91% in 2022. This area concentrates on the accuracy of the timeliness of placing reserves and/or adjusting reserves as well as the accuracy and supporting information for reserves placed on each file. From the loss data received by Keenan and valued as of 1/31/2024, the total value of the claims reviewed was at \$7,555,773. By the time of our review, those same claims had a total value of \$8,026,468. We recommend additional reserve assessments of \$199,011 (including several reductions) for a total loss value of \$8,225,479 or a 2% increase. We did find noted late assessments for reserves which at times including currently seen negative reserves and/or no reserves when it came to initial reserve setting. We believe claims where permanent and stationary status has been determined the Office of Self- Insured Plans (OSIP) reserve regulations apply which includes a 3-year running assessment of regularly sought/ paid medical treatment with consideration for non-annually used but anticipated medical care such as diagnostics, etc. This review is to be done at least annually. Should there not be 3 years from date of permanent and stationary OSIP allows an extrapolation for the shorter period to calculate the 3-year average use. These auditors do not believe the 3-year average usage should be a method of reserve analysis for claims that are not fully permanent and stationary as it considers medical care at an acute level that may result in an overstatement of exposure. We did see some efforts to comply with the OSIP reserving regulations but did not see it consistently, especially post the first OSIP analysis.

**Response:** Our policy is to reserve pursuant to OSIP regulations. The reserving issues noted are training issues on assessing reserves and outlining rationale. The claims have been reviewed, and we feel that reserves on three of the claims identified claims are reserved appropriately. Any recommended reserves that we agree with will be addressed by May 31, 2024.

**Action Plan:** We will be conducting additional training in Reserving for the team to ensure compliance.

We are committed to implementing these actions plans to address the audit findings. By incorporating the suggestions made by the auditors as well as our proposed action plan, it is our goal to further enhance the effectiveness of our claims handling and drive positive outcomes. Thank you for your understanding and support as we work to improve our processes and performance.

Sincerely,

Patrice D. Grant

*Patrice D. Grant*

Claims Manager

Workers' Compensation

cc: Tara Schilling Tracy Gold Carmella Harrison



## Alameda County Schools Insurance Group

P.O. Box 2487

Dublin, CA 94568

Phone (925) 225-1030

Fax (925) 225-0653

[www.acsig.com](http://www.acsig.com)

### **Executive Summary: Dental Program & Rates 2024/2025**

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: Dental Program & Rates 2024/2025

Proposed 2024/2025 Dental rate changes for the ACSIG fixed rate members are included in this packet. This year there are several renewal options. Options forecasted to increase cost have an associated buy-down amount. Staff recommends that increased program cost due to plan enhancements come from program reserves to allow for a flat rate renewal.

Enhancement options include an additional cleaning, an additional cleaning and exam, Night Guard benefits, and/or implant benefits.

The Executive Committee will be asked for a recommendation to the Full Board.

## Program Enrollment Summary

### Dental Program

	Fixed Rate	Self-Funded	Total Dental
December 2022	18,606	92,106	110,712
December 2023	19,036	97,360	116,396
Difference	<b>2.31%</b>	<b>5.70%</b>	<b>5.13%</b>

Enrollment provided by PBIA

### Vision Program

	Fixed Rate	Self-Funded	Total Vision
December 2022	11,664	22,787	34,451
December 2023	11,969	27,837	39,806
Difference	<b>2.61%</b>	<b>22.16%</b>	<b>15.54%</b>

Enrollment provided by VSP



**Dental Trends & Renewal**

## Fixed Rate Dental – Current Trend Data

### **Delta Dental Trend**

- *Book of Business: 5.0%*

### **Market Trend Data**

*Survey of national carriers including:*

- *Delta Dental entities, Aetna, Blue Cross/Blue Shield entities, CIGNA, and United Concordia*
- *Dental organizations: 4.0%*
- *Source: Segal 2024 Trend Survey*

### **ACSIG Dental Trend – Fixed Rate Groups**

- *24 Months of Claims Data (January 2022– December 2023): +2.0%*
- *36 Months of Claims Data (January 2021– December 2023): +15.2%*

### **ACSIG Historical Performance**

*Calendar Year Claims PEPM vs. Prior Calendar Year*

- *2023 vs. 2022: 4.3%*
- *2022 vs. 2021: -1.3%*
- *2021 vs. 2020: 12.8% (COVID-19)*
- *2020 vs. 2019: -14.7% (COVID-19)*
- *2019 vs. 2018: -1.1%*
- *2018 vs. 2017: -0.8%*
- *2017 vs. 2016: -0.3%*
- *2016 vs. 2015: -1.9%*
- *2015 vs. 2014: -1.7%*
- *2014 vs. 2013: -0.1%*
- *2013 vs. 2012: -1.2%*
- *2012 vs. 2011: -2.8%*

## Fixed Rate Dental – Renewal Recommendation

	Trend	Renewal
<i>ACSIG 2022-2023 Trend</i>	1.5%	-2.8%
<i>ACSIG 2023-2024 Trend</i>	1.5%	-2.8%
<b>ACSIG 2024-2025 Dental Renewal Trend Status Quo</b>	<b>1.5%</b>	<b>-2.8%</b>
<i>ACSIG 2024-2025 Dental Renewal Trend with Enhancements Option 2</i>	1.5%	0.6%
<i>Segal Trend</i>	4.0%	2.1%
<i>Delta Trend</i>	5.0%	4.0%

### 2024-2025 Underwriting Assumptions & Recommendation

- *Paid Claims: 24-months of claims data (January 2022 – December 2023)*
- *Alliant recommended trend of 1.5% was used*
- *Risk margin of 0.0%*
- *Alliant Recommends No Change in Rates*
- *Enhancements Option 2: Increase to 3 cleanings and 3 exams*
  - *This option will require a buy-down using ACSIG reserves of \$840,264 for a flat renewal*

## Fixed Rate Dental – Renewal Recommendation

	Trend	Renewal	Reserves Buy-Down \$Δ from Status Quo
ACSIG 2024-2025 Dental Renewal Trend with Enhancements Option 1	15%	-0.7%	N/A
ACSIG 2024-2025 Dental Renewal Trend with Enhancements Option 2	15%	0.6%	\$840,264
ACSIG 2024-2025 Dental Renewal Trend with Enhancements Option 3	15%	-1.1%	N/A
ACSIG 2024-2025 Dental Renewal Trend with Enhancements Option 4	15%	-2.0%	N/A
ACSIG 2024-2025 Dental Renewal Trend with Enhancements Option 5	15%	-1.5%	N/A
ACSIG 2024-2025 Dental Renewal Trend with Enhancements Option 6	15%	1.9%	\$420,132

### 2024-2025 Additional Enhancement Options

- Option 1: Increase to 3 cleanings
- Option 2: Increase to 3 cleanings and 3 exams
- Option 3: Add Night Guard paid under prosthodontic and under calendar year maximum without a lifetime limitation
- Option 4: Add Night Guard paid as a rider and under separate limit of \$500 lifetime
- Option 5: Add Night Guard paid as a rider and under separate limit of \$750 lifetime
- Option 6: Add Implant Services covered under annual maximum and paid at same coverage level as Prosthodontics
- Options 2 and 6 will require a buy-down using ACSIG reserves for a flat renewal

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## Fixed Rate Dental – Renewal Action and History

	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025
Underwriting Results	-0.1%	-0.7%	-0.5%	2.2%	-2.8%
Actual Applied to Members	0.00%	0.00%	0.00%	0.00%	<b>0.00% (Proposed)</b>

Notes:

- 2022-2023: Enhancements adding D&P Maximum Waiver and Cone Beam CT Scans
- 2023-2024: PPO Plans Only - Enhancements increasing the differential between the PPO and Non-PPO Network Calendar Year Maximum to \$500 (Increases the PPO Network CYM up to \$500 depending on the member's current PPO maximum) and adding SmileWay benefit
  - The renewal includes a buy-down using ACSIG reserves



## Alameda County Schools Insurance Group

P.O. Box 2487

Dublin, CA 94568

Phone (925) 225-1030

Fax (292) 225-0653

[www.acsig.com](http://www.acsig.com)

### **Executive Summary: Dental Network Expansion**

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: Dental Network Expansion

While the ACSIG Dental program continues to perform well, in the past 24 months we have seen an uptick in complaints. Multiple Dental Program participants raised concerns that Delta Dental's provider network is not meeting needs. Specifically, more customers are experiencing out-of-network utilization which has resulted in some negative customer experiences. To address these concerns, the Executive Committee directed ACSIG Staff to research adding additional network providers to the Dental Program.

ACSIG Staff worked with Alliant to conduct a Request for Proposal ("RFP") for a second Dental Network partner. A summary of that RFP is included in this packet. Four vendors submitted responsive proposals. Of the responses, staff recommends moving forward with Ameritas.

The Executive Committee will be asked for a recommendation to the Full Board.

# Executive Summary



## Summary

The ACSIG Dental Program has worked with Delta Dental (Delta) as the exclusive carrier, providing dental coverage to over 250+ school districts and 112,000 covered employees.

While we have continued to build and grow the program for over 30 years, Delta's provider network has faced challenges in recent years.

With recent network changes, the "Premier plus PPO" combination now covers only 80% to 85% of all dentists and members are accustomed to access to over 90% of all dentists. The network erosion has caused significant network access issues over the past 24 months.

**ACSIG member districts & their employees are experiencing more Out-of-Network utilization resulting in a negative customer experience.**

After much consideration, the Executive Committee authorized the exploration of another network in conjunction with the Delta network to ensure the Program can provide the strongest coverage for members and their employees.

**Alliant released the ACSIG Dental Program RFP for a second dental partner on March 19, 2024, for a tentative October 1, 2024, effective date.**

## Dental RFP Timeline

RFP Activity	Date
RFP Issuance	3/19/2024
RFP Response Due by	4/9/2024 by 4pm PT
Alliant Evaluation Process, Follow-Up Questions, Vendor Responses	Complete by 4/19/2024
Alliant Presents Results	4/24/2024
Finalists Notified (if applicable)	4/25/2024
Finalist Presentations (if applicable) - via Zoom	April - May 2024
Vendor Recommendations to ACSIG EC/Board for approval	May 2024
Notification to winning Vendors	June 2024
Anticipated Start Date	10/1/2024

\*Please note ACSIG/Alliant has the authority to adjust the dates



**ACSIG Dental RFP  
Objectives**



## ACSIG Dental RFP – Key Goals & Objectives

### **ACSIG's Dental Program Request for Proposal (RFP) instructed bidders to provide:**

- A "dual offering" with Delta Dental – NOT a full replacement
- Match Delta Dental's Incentive Level plan design – Type 1 and 2 services coinsurance percentage will increase by 10% each year (to a maximum of 100%)
- Match Delta Dental's D&P Maximum Waiver
- Provide out of network product solutions for areas with limited network providers at competitive reimbursement levels.
  - Address Delta Dental OON reimbursement level issues
  - Address Out-of-Network (OON) Provider Payments – Pay OON Providers directly instead of members paying upfront
  - Improve/supplement network access to Dental providers

### **ACSIG Program Specific Considerations**

- Participation Rules:
  - Groups under 500 lives will be offered the option to split the dual carrier option down to the entire bargaining unit
  - Groups above 500 lives will be offered the option to split the dual carrier option down to the individual employee-level selection
- ACSIG members characteristics: 40% of groups <500 lives & 60% of groups >500 lives
- Many members have an Incentive Level plan design



## ACSIG Dental RFP – Key Goals & Objectives

### PPO Out-of-Network (OON) Allowance Options:

*MPA (Maximum Plan Allowance - Delta) or MAC (Maximum Allowable Charge - Other Dental Providers)*

- *MPA is the current Delta Dental OON – MAC most closely matches*
- *Pays on average about 40%-50% of billed charges*
- *Least costly for the plan/premium and more costly for members at the point of service*

**MPA/MAC**  
*The Maximum amount for reimbursement of a particular dental procedure as allowed by the provider*

*90th to 95th Percentile Usual, Customary & Reasonable (UCR)*

- *Market quotes proposed this level – Delta does not*
- *Most costly to the plan/premium and least cost to the member at the point of service (great value for employees in rural areas)*
- *This option is estimated to have an impact of a 6% - 10% increase to claims*

**UCR**  
*The amount paid for a dental procedure in a geographic area based on what 90 to 95 out of 100 dentists usually charge for the same procedure*

A large teal rectangular graphic with a thin black border. Inside the rectangle, the text "ACSIG Dental RFP Process and Results" is centered in white. The word "ACSIG" is underlined with a short black horizontal line above it, and "Process and Results" is underlined with a short black horizontal line below it.

## ACSIG Dental RFP Process and Results



Highlights of the proposals and preliminary conclusions are:

- Current fixed rate dental program standards are key differentiators in the market quotes:
  - Delta Dental's Incentive Level plan design – Type 1 and 2 services coinsurance percentage will increase by 10% each year (to a maximum of 100%)
  - Delta Dental's D&P Maximum Waiver – Diagnostic and preventive dental services do not count towards annual maximum
- Though Delta's attrition rate has increased over 5 years, Delta still has more dentists under contract than other bidders when we include BOTH Delta PPO and Delta Premier dentists in the comparison
- Delta's refusal to pay out-of-network (OON) dentists directly is a significant contributor to member dissatisfaction with Delta
  - All bidders have agreed to pay OON providers directly (assignment of benefits) if the dental office is willing

The following slides highlight key comparative data "at-a-glance", which are also presented in more depth in this presentation.





## ACSIG Dental RFP – Responses Key Metric Comparison

RFP Key Questionnaire Items	Ameritas	Anthem	Cigna	United Concordia
Carrier can match Delta Dental Incentive Level Coinsurance Plan Design	Yes	No, limited reset	No, limited type	Yes
Carrier can match Delta Dental D&P Maximum Waiver	Yes	Yes	No, increases next plan year maximum	Yes
Minimum Total Lives	3	100	250	100
Dual Carrier Split Groups <500 lives: split carrier by entire group or allow by bargaining unit	Yes	No, entire group	Yes, min group size 250	No, entire group
Dual Carrier Split Groups >500 lives: split carrier by entire group or allow by individual employee	Yes, but prefers by bargaining unit minimum	No, entire group	Yes	No, entire group
Assignment of Benefits - Carrier can pay Out of Network Providers directly	Yes	Yes	Yes	Yes
Allow PBIA access to the carrier portal for real-time eligibility updates	Yes	No	Yes	No
Network Discounts - all CA	41.13%	44.00%	44.80%	42.80%
OON Reimbursement - MAC	Yes	Yes	Yes	Yes
OON Reimbursement - U&C (Percentile)	50th-95th	50th-95th	TBD	80th or 90th
Prefund or binder required?	No	No	Yes	Yes
Implementation allowance (ACSIG level) for communications and soft dollar costs	Yes	No	Yes	Yes
Performance Guarantees Included	Yes	Yes	Yes	Yes



## ACSIG Dental RFP – Responses Key Metric Comparison

Provider Network Strength	Ameritas	Anthem	Cigna	United Concordia
Geoaccess District Zip Codes WITH General Dentist Access (2 in 10 miles)	92.1%	94.1%	91.1%	92.1%
Geoaccess District Zip Codes WITH Specialist Access (1 in 15 miles)	89.1%	88.1%	89.1%	91.1%
CA PPO Provider Counts - All Provider Types	15,368	13,931	14,291	14,212
CA DHMO Provider Counts	6854 (Liberty)	5493	None	None

Network360 counts for reference:

- Delta Dental CA PPO and Premier Provider Counts - All Provider Types = 19,170 as of February 2024



## ACSIG Dental RFP – Responses Key Metric Comparison

ASO Pricing and Guarantee	Ameritas	Anthem	Cigna	United Concordia
Enrollment 3-49 Lives	\$4.75	N/A	N/A	N/A
Enrollment 50-99 Lives	\$4.75	N/A	N/A	N/A
Enrollment 100-250 Lives	\$4.75	\$4.00	N/A	\$7.50
Enrollment 251-499 Lives	\$4.75	\$4.00	\$3.95	\$7.50
Enrollment 501-749 Lives	\$4.75	\$4.00	\$3.70	\$5.50
Enrollment 751-999 Lives	\$4.75	\$4.00	\$3.45	\$5.50
Enrollment 1,000+ Lives	\$4.75	\$4.00	\$3.25	\$5.50
Enrollment 5,000+ Lives	\$4.75	\$4.00	\$2.10	\$5.50
Enrollment 10,000+ Lives	\$4.75	\$4.00	\$1.89	\$5.50
Enrollment 15,000+ Lives	\$4.75	\$4.00	\$1.75	\$5.50
Rate Guarantee	36 months	36 months	36 months	36 months
Minimum Total Lives	3	100	250	100



## ACSIG Dental RFP – Responses Key Metric Comparison

Enhancements and Value-Added Benefit/Programs			
Ameritas	Anthem	Cigna	United Concordia
Dental Rewards (Rollover) - Traditional roll-over benefit with a threshold and maximum for members who visit dentist and keep benefits below the annual benefits threshold can earn rewards that carry over next year.	Anthem Whole Health Connection® - automatically cover additional dental services for individuals who have certain ongoing medical conditions and self enroll in program.	Cigna Dental Oral Health Integration Program™ (OHIP) - encourages members to seek appropriate preventive care and treatment for gum disease and tooth decay by providing reimbursement for out-of-pocket costs for certain dental services.	Annual Maximum Rollover (add-on) - qualifying members can roll over unused benefit dollars.
Preventive Plus - Benefits for Type 1/ Preventive procedures are not deducted from the plan member's annual maximum benefit.	Dentures@Home - Offers up to 60% cost savings compared to traditional dentures.	Cigna Onsite Dental - bringing dental care services to employees.	Preventive Incentive (add-on) - Preventive services like cleanings, exams, X-rays and sealants don't count towards members' annual maximums.
LASIK - True benefit, not a discount plan. Members earn a lifetime benefit per eye over time. The benefit amount increases over time, with the highest coverage provided at year three or four.	Ortho@Home program Teledentistry - At-home clear aligner treatments with savings of up to 60% less than traditional braces.	Cigna Dental Virtual Care - members can connect to a licensed dentist right when and where they need one, 24 hours per day, through myCigna for urgent care needs.	Smile for Health® - Wellness, encouraging proper treatment and maintenance of periodontal health in members with certain qualifying chronic conditions.
Vision Fusion - Employees/members can use a portion of their dental CYM toward eyecare needs anything through-out the year.	Dental@Home Teledentistry - TeleDentists® is a participating network provider, offering online and mobile app-enabled teledentistry solutions for problem-focused exams or dental emergencies.	A Home Dental Screening Tool - SmartScan is a new, free screening service that allows members to take a guided series of pictures of their teeth, which are evaluated by artificial intelligence and a licensed, in-network Cigna Healthcare dentist.	Oral Care Discounts - Discounted oral care products through United Concordia's Philips Sonicare Store, including a variety of electric toothbrushes, brush heads, and Airfloss for adults and children.
Soundcare - True hearing benefit. Members receive exam and maintenance allowance and plan pays 50% of hearing aid cost up to maximum benefit.	Dental Health and Wellness Condition Kit - digital materials to help you create a healthy, productive workplace and support the overall well-being of your workforce.		Oral Wellness Consultants - assist ACSIG in educating their employees and working with them to develop wellness strategies at both the district and school level.



## ACSIG Dental RFP – Administration Fee Comparison

Group	Average Monthly Enrollment (2023)	Projected Claims PEPM	Delta Dental Fee PEPM	% of Claims	Ameritas Fee PEPM	% of Claims	Anthem Fee PEPM	% of Claims	Cigna Fee PEPM	% of Claims	United Concordia Fee PEPM	% of Claims
ACSIG Group 1	3	\$109.76	\$6.41	5.84%	\$4.75	4.33%	N/A	N/A	N/A	N/A	N/A	N/A
ACSIG Group 2	301	\$90.59	\$5.29	5.84%	\$4.75	5.24%	\$4.00	4.42%	\$3.95	4.36%	\$7.50	8.28%
ACSIG Group 3	488	\$74.21	\$4.33	5.84%	\$4.75	6.40%	\$4.00	5.39%	\$3.95	5.32%	\$7.50	10.11%
ACSIG Group 4	813	\$93.70	\$5.47	5.84%	\$4.75	5.07%	\$4.00	4.27%	\$3.45	3.68%	\$5.50	5.87%
ACSIG Group 5	1,974	\$106.93	\$6.24	5.84%	\$4.75	4.44%	\$4.00	3.74%	\$2.95	2.76%	\$5.50	5.14%
ACSIG Group 6	2,970	\$93.05	\$5.43	5.84%	\$4.75	5.10%	\$4.00	4.30%	\$2.35	2.53%	\$5.50	5.91%
ACSIG Group 7	4,609	\$104.15	\$6.08	5.84%	\$4.75	4.56%	\$4.00	3.84%	\$2.35	2.26%	\$5.50	5.28%
ACSIG FR Pool Renewal	18,712	\$97.08	\$5.67	5.84%	\$4.75	4.89%	\$4.00	4.12%	\$1.75	1.80%	\$5.50	5.67%

Highlighted group size:

- Group <500 lives
- Group >500 lives
- ACSIG Fixed Rate Pool Renewal



## ACSIG Dental RFP – Projection Comparison

ACSIG FR Pool Renewal	Delta Dental (Status Quo)	Delta Dental (Dual Option)	Proposed - Ameritas	Proposed - Anthem	Proposed - Cigna	Proposed - United Concordia
<i>Estimated Monthly Cost (PEPM Includes ASO Fee)</i>	\$104.26	\$109.11	\$111.10	\$110.35	\$108.10	\$111.85
<i>Estimated Monthly Cost (Total Includes ASO Fee)</i>	\$1,950,913	\$2,041,666	\$2,078,903	\$2,064,869	\$2,022,767	\$2,092,937
<i>Estimated \$ Change from Current (Status Quo)</i>		\$90,753	\$127,990	\$113,956	\$71,854	\$142,024
<i>Estimated % Change from Current (Status Quo)</i>		4.65%	6.56%	5.84%	3.68%	7.28%

### Assumptions:

- MAC Out-of-Network (OON) Allowance Benefit Option
- All Dual Options include a surcharge for adverse selection
- All Options add margin to claims cost to account for potential adverse selection, as we are not sure how these plans will run until we have 18 – 24 months of claims
  - This surcharge will likely be applied for 2025 and 2026 funding
- Alliant used current PPO enrollment counts - We are not making any migration assumptions at this stage
- **\*Projections above are estimates and not guarantees**



## ACSIG Dental RFP – Projection Comparison

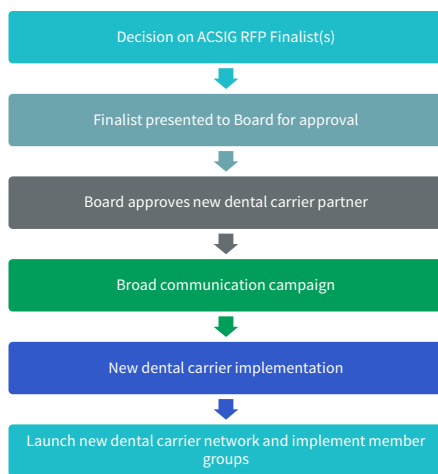
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<i>Estimated \$ Change from Current (Status Quo)</i>		\$90,753	\$255,232	\$241,198	\$199,096	\$269,266
<i>Estimated % Change from Current (Status Quo)</i>		4.65%	13.08%	12.36%	10.21%	13.80%

### Assumptions:

- 90<sup>th</sup> U&C Out-of-Network (OON) Allowance Benefit Option
- All Dual Options include a surcharge for adverse selection
- All Options add margin to claims cost to account for potential adverse selection, as we are not sure how these plans will run until we have 18 – 24 months of claims
  - This surcharge will likely be applied for 2025 and 2026 funding
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## Recap and Next Steps







# ACSIG Dental Program

## Second Dental Partner RFP Results

April 24, 2024

**Alameda County Schools Insurance Group (ACSIG)**  
Kimberly Dennis, Andrew Lathrop

**Alliant Employee Benefits**  
Tom Sher, Cathy Huynh



# Agenda

- I. Executive Summary
- II. ACSIG Dental RFP Objectives
- III. ACSIG Dental RFP Process and Results
- IV. Administration Fee Comparison
- V. Projection Comparison
- VI. Network Access – California
- VII. Next Steps
- VIII. Appendix
  - I. Implementation Timeline



## Summary

The ACSIG Dental Program has worked with Delta Dental (Delta) as the exclusive carrier, providing dental coverage to over 250+ school districts and 112,000 covered employees.

While we have continued to build and grow the program for over 30 years, Delta's provider network has faced challenges in recent years.

With recent network changes, the "Premier plus PPO" combination now covers only 80% to 85% of all dentists and members are accustomed to access to over 90% of all dentists. The network erosion has caused significant network access issues over the past 24 months.

**ACSIG member districts & their employees are experiencing more Out-of-Network utilization resulting in a negative customer experience.**

After much consideration, the Executive Committee authorized the exploration of another network in conjunction with the Delta network to ensure the Program can provide the strongest coverage for members and their employees.

**Alliant released the ACSIG Dental Program RFP for a second dental partner on March 19, 2024, for a tentative October 1, 2024, effective date.**

## Dental RFP Timeline

RFP Activity	Date
RFP Issuance	3/19/2024
RFP Response Due by	4/9/2024 by 4pm PT
Alliant Evaluation Process, Follow-Up Questions, Vendor Responses	Complete by 4/19/2024
Alliant Presents Results	4/24/2024
Finalists Notified (if applicable)	4/25/2024
Finalist Presentations (if applicable) – via Zoom	April – May 2024
Vendor Recommendations to ACSIG EC/Board for approval	May 2024
Notification to winning Vendors	June 2024
Anticipated Start Date	10/1/2024
*Please note ACSIG/Alliant has the authority to adjust the dates	

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# ACSIG Dental RFP Objectives

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# ACSIG Dental RFP – Key Goals & Objectives

## **ACSIG's Dental Program Request for Proposal (RFP) instructed bidders to provide:**

- A “dual offering” with Delta Dental – NOT a full replacement
- Match Delta Dental's Incentive Level plan design – Type 1 and 2 services coinsurance percentage will increase by 10% each year (to a maximum of 100%)
- Match Delta Dental's D&P Maximum Waiver
- Provide out of network product solutions for areas with limited network providers at competitive reimbursement levels.
  - Address Delta Dental OON reimbursement level issues
  - Address Out-of-Network (OON) Provider Payments – Pay OON Providers directly instead of members paying upfront
  - Improve/supplement network access to Dental providers

## **ACSIG Program Specific Considerations**

- Participation Rules:
  - Groups under 500 lives will be offered the option to split the dual carrier option down to the entire bargaining unit
  - Groups above 500 lives will be offered the option to split the dual carrier option down to the individual employee-level selection
- ACSIG members characteristics: 40% of groups <500 lives & 60% of groups >500 lives
- Many members have an Incentive Level plan design



# ACSIG Dental RFP – Key Goals & Objectives

## PPO Out-of-Network (OON) Allowance Options:

MPA (Maximum Plan Allowance - Delta) or MAC (Maximum Allowable Charge – Other Dental Providers)

- MPA is the current Delta Dental OON – MAC most closely matches
- Pays on average about 40%-50% of billed charges
- Least costly for the plan/premium and more costly for members at the point of service

90th to 95th Percentile Usual, Customary & Reasonable (UCR)

- Market quotes proposed this level – Delta does not
- Most costly to the plan/premium and least cost to the member at the point of service (great value for employees in rural areas)
- This option is estimated to have an impact of a 6% - 10% increase to claims

### MPA/MAC

The Maximum amount for reimbursement of a particular dental procedure as allowed by the provider

### UCR

The amount paid for a dental procedure in a geographic area based on what 90 to 95 out of 100 dentists usually charge for the same procedure



# ACSIG Dental RFP – Objectives Summary

1	RFP	Completed	<ul style="list-style-type: none"><li>• Six Dental benefit providers were identified and invited to participate in the RFP based on:<ul style="list-style-type: none"><li>• California Public School experience</li><li>• Provider network</li><li>• Plan design and pricing options</li><li>• Service model and administration</li></ul></li></ul>
2	Responses	Completed	<ul style="list-style-type: none"><li>• Four of the six vendors submitted comprehensive proposals for consideration.</li><li>• Two vendors did not submit proposals, as they were not strategically aligned with being a second option.</li><li>• Alliant summarized responses to present to ACSIG</li></ul>
3	Review	Completed	<ul style="list-style-type: none"><li>• The key factors for consideration of the finalist(s) are:<ul style="list-style-type: none"><li>• Comprehensive proposal response</li><li>• Adherence to Program requirements</li><li>• Provider network analysis</li><li>• Competitive financial results and guarantees</li></ul></li></ul>
4	Finalists	Completed	<ul style="list-style-type: none"><li>• Alliant and ACSIG will meet to review the responses</li><li>• ACSIG will determine the finalists</li><li>• A virtual finalist meeting will be held</li></ul>
5	Board Approval	Pending	<ul style="list-style-type: none"><li>• ACSIG will provide the finalist recommendation to the Board for approval</li></ul>

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# ACSIG Dental RFP Process and Results

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## ACSIG Dental RFP – Responses Key Metric Comparison

Highlights of the proposals and preliminary conclusions are:

- Current fixed rate dental program standards are key differentiators in the market quotes:
  - Delta Dental's Incentive Level plan design – Type 1 and 2 services coinsurance percentage will increase by 10% each year (to a maximum of 100%)
  - Delta Dental's D&P Maximum Waiver – Diagnostic and preventive dental services do not count towards annual maximum
- Though Delta's attrition rate has increased over 5 years, Delta still has more dentists under contract than other bidders when we include BOTH Delta PPO and Delta Premier dentists in the comparison
- Delta's refusal to pay out-of-network (OON) dentists directly is a significant contributor to member dissatisfaction with Delta
  - All bidders have agreed to pay OON providers directly (assignment of benefits) if the dental office is willing

The following slides highlight key comparative data "at-a-glance", which are also presented in more depth in this presentation.



# ACSIG Dental RFP – Responses Key Metric Comparison

RFP Key Questionnaire Items	Ameritas	Anthem	Cigna	United Concordia
Carrier can match Delta Dental Incentive Level Coinsurance Plan Design	Yes	No, limited reset	No, limited type	Yes
Carrier can match Delta Dental D&P Maximum Waiver	Yes	Yes	No, increases next plan year maximum	Yes
Minimum Total Lives	3	100	250	100
Dual Carrier Split Groups <500 lives: split carrier by entire group or allow by bargaining unit	Yes	No, entire group	Yes, min group size 250	No, entire group
Dual Carrier Split Groups >500 lives: split carrier by entire group or allow by individual employee	Yes, but prefers by bargaining unit minimum	No, entire group	Yes	No, entire group
Assignment of Benefits - Carrier can pay Out of Network Providers directly	Yes	Yes	Yes	Yes
Allow PBIA access to the carrier portal for real-time eligibility updates	Yes	No	Yes	No
Network Discounts - all CA	41.13%	44.00%	44.80%	42.80%
OON Reimbursement - MAC	Yes	Yes	Yes	Yes
OON Reimbursement - U&C (Percentile)	50th-95th	50th-95th	TBD	80th or 90th
Prefund or binder required?	No	No	Yes	Yes
Implementation allowance (ACSIG level) for communications and soft dollar costs	Yes	No	Yes	Yes
Performance Guarantees Included	Yes	Yes	Yes	Yes



# ACSIG Dental RFP – Responses Key Metric Comparison

<b>Provider Network Strength</b>	<b>Ameritas</b>	<b>Anthem</b>	<b>Cigna</b>	<b>United Concordia</b>
Geoaccess District Zip Codes WITH General Dentist Access (2 in 10 miles)	92.1%	94.1%	91.1%	92.1%
Geoaccess District Zip Codes WITH Specialist Access (1 in 15 miles)	89.1%	88.1%	89.1%	91.1%
CA PPO Provider Counts - All Provider Types	15,368	13,931	14,291	14,212
CA DHMO Provider Counts	6854 (Liberty)	5493	None	None

Network360 counts for reference:

- Delta Dental CA PPO and Premier Provider Counts - All Provider Types = 19,170 as of February 2024



# ACSIG Dental RFP – Responses Key Metric Comparison

ASO Pricing and Guarantee	Ameritas	Anthem	Cigna	United Concordia
Enrollment 3-49 Lives	\$4.75	N/A	N/A	N/A
Enrollment 50-99 Lives	\$4.75	N/A	N/A	N/A
Enrollment 100-250 Lives	\$4.75	\$4.00	N/A	\$7.50
Enrollment 251-499 Lives	\$4.75	\$4.00	\$3.95	\$7.50
Enrollment 501-749 Lives	\$4.75	\$4.00	\$3.70	\$5.50
Enrollment 751-999 Lives	\$4.75	\$4.00	\$3.45	\$5.50
Enrollment 1,000+ Lives	\$4.75	\$4.00	\$3.25	\$5.50
Enrollment 5,000+ Lives	\$4.75	\$4.00	\$2.10	\$5.50
Enrollment 10,000+ Lives	\$4.75	\$4.00	\$1.89	\$5.50
Enrollment 15,000+ Lives	\$4.75	\$4.00	\$1.75	\$5.50
Rate Guarantee	36 months	36 months	36 months	36 months
Minimum Total Lives	3	100	250	100



# ACSIG Dental RFP – Responses Key Metric Comparison

Enhancements and Value-Added Benefit/Programs			
Ameritas	Anthem	Cigna	United Concordia
Dental Rewards (Rollover) - Traditional roll-over benefit with a threshold and maximum for members who visit dentist and keep benefits below the annual benefits threshold can earn rewards that carry over next year.	Anthem Whole Health Connection® - automatically cover additional dental services for individuals who have certain ongoing medical conditions and self enroll in program.	Cigna Dental Oral Health Integration Program™ (OHIP) - encourages members to seek appropriate preventive care and treatment for gum disease and tooth decay by providing reimbursement for out-of-pocket costs for certain dental services.	Annual Maximum Rollover (add-on) - qualifying members can roll over unused benefit dollars.
Preventive Plus - Benefits for Type 1/ Preventive procedures are not deducted from the plan member's annual maximum benefit.	Dentures@Home - Offers up to 60% cost savings compared to traditional dentures.	Cigna Onsite Dental - bringing dental care services to employees.	Preventive Incentive (add-on) - Preventive services like cleanings, exams, X-rays and sealants don't count towards members' annual maximums.
LASIK - True benefit; not a discount plan. Members earn a lifetime benefit per eye over time. The benefit amount increases over time, with the highest coverage provided at year three or four.	Ortho@Home program Teledentistry - At-home clear aligner treatments with savings of up to 60% less than traditional braces.	Cigna Dental Virtual Care - members can connect to a licensed dentist right when and where they need one, 24 hours per day, through myCigna for urgent care needs.	Smile for Health® - Wellness, encouraging proper treatment and maintenance of periodontal health in members with certain qualifying chronic conditions.
Vision Fusion - Employees/members can use a portion of their dental CYM toward eyecare needs anything through-out the year.	Dental@Home Teledentistry - TeleDentists® is a participating network provider, offering online and mobile app-enabled teledentistry solutions for problem-focused exams or dental emergencies.	A Home Dental Screening Tool - SmartScan is a new, free screening service that allows members to take a guided series of pictures of their teeth, which are evaluated by artificial intelligence and a licensed, in-network Cigna Healthcare dentist.	Oral Care Discounts - Discounted oral care products through United Concordia's Philips Sonicare Store, including a variety of electric toothbrushes, brush heads, and Airfloss for adults and children.
Soundcare - True hearing benefit. Members receive exam and maintenance allowance and plan pays 50% of hearing aid cost up to maximum benefit.	Dental Health and Wellness Condition Kit - digital materials to help you create a healthy, productive workplace and support the overall well-being of your workforce.		Oral Wellness Consultants - assist ACSIG in educating their employees and working with them to develop wellness strategies at both the district and school level.



# ACSIG Dental RFP – Administration Fee Comparison

Group	Average Monthly Enrollment (2023)	Projected Claims PEPM	Delta Dental Fee PEPM	% of Claims	Ameritas Fee PEPM	% of Claims	Anthem Fee PEPM	% of Claims	Cigna Fee PEPM	% of Claims	United Concordia Fee PEPM	% of Claims
<b>ACSIG Group 1</b>	3	\$109.76	\$6.41	5.84%	\$4.75	4.33%	N/A	N/A	N/A	N/A	N/A	N/A
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Highlighted group size:

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# ACSIG Dental RFP – Projection Comparison

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## Assumptions:

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# Dental Claims Example

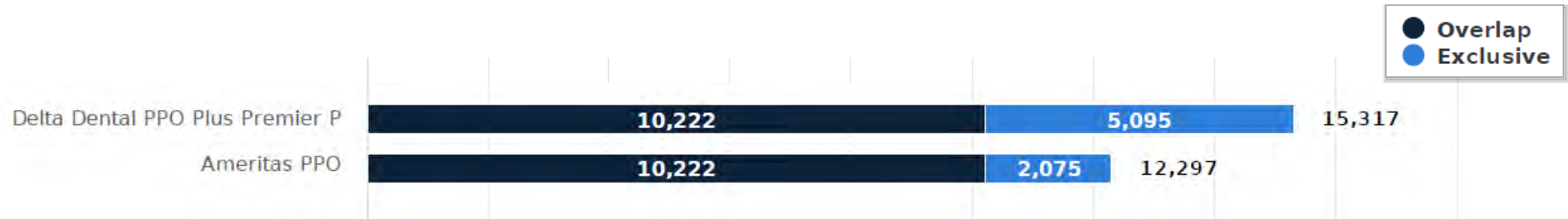
Claims Example	Delta Dental PPO	Delta Dental Premier	Non-Delta Provider	Other Provider PPO	Other Provider OON
<b>Dentist Submitted Charge for a Crown</b>	\$1,200	\$1,200	\$1,200	\$1,200	\$1,200
<b>Plan Allowance</b>	\$732 (39% discount)	\$960 (20% discount)	<b>\$780</b> (MAC)	\$732 (39% discount)	\$1,200 (90 <sup>th</sup> UCR)
<b>Percentage Paid By Plan</b>	50%	50%	50%	50%	50%
<b>Plan Payment</b>	\$366	\$480	\$390	\$366	\$600
<b>Patient Payment:</b> (Plan Allowance – Plan Payment)	<b>\$366</b> (\$732-\$366 = \$366)	<b>\$480</b> (\$960-\$480 = \$540)	<b>\$810</b> (\$780-\$390 + \$420 <b>balance bill</b> )	<b>\$366</b> (\$732-\$366)	<b>\$600</b> (\$1,200-\$600)



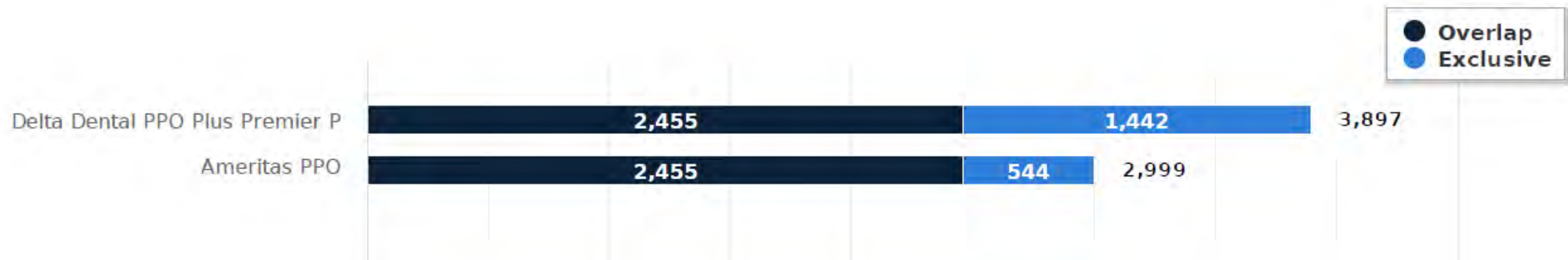
# Network Access – California

Network 360 is a third-party vendor who aggregates dental plan network information

- Below are **General Dentist** provider counts pulled from Network 360 across California: Delta Dental PPO and Delta Dental Premier shown combined



- Below are **Specialist** provider counts pulled from Network 360 across California: Delta Dental PPO and Delta Dental Premier shown combined

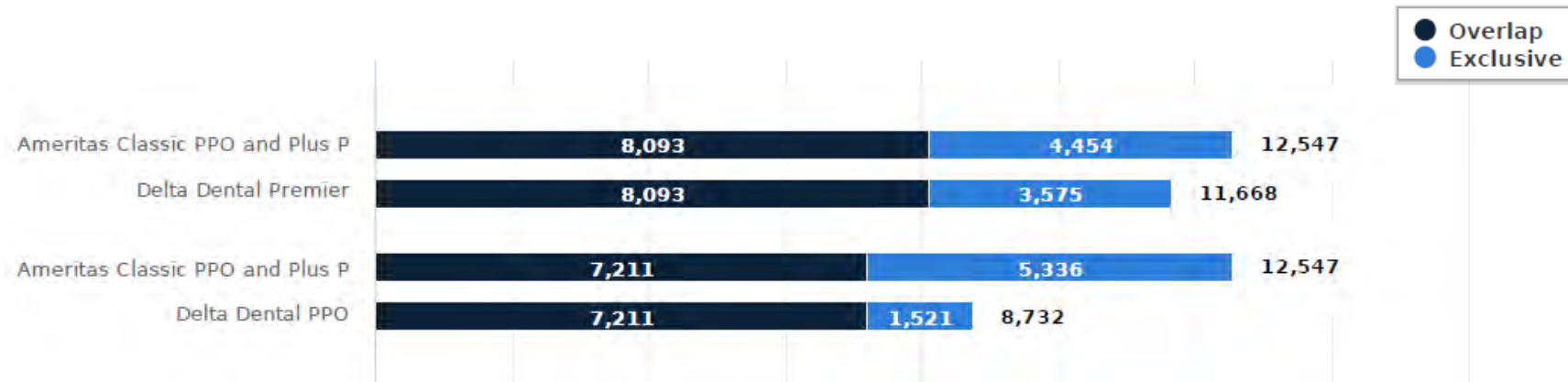




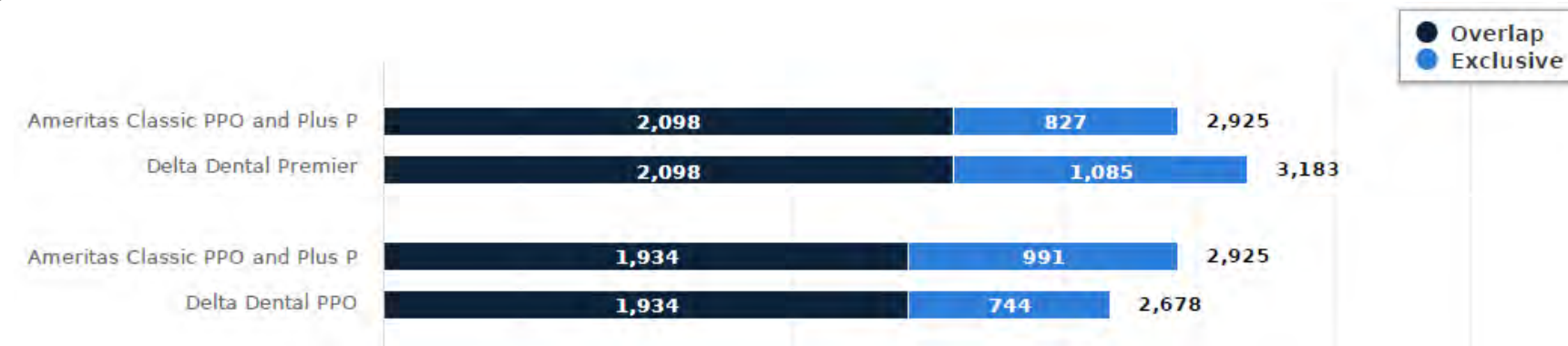
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# Wrap-Up

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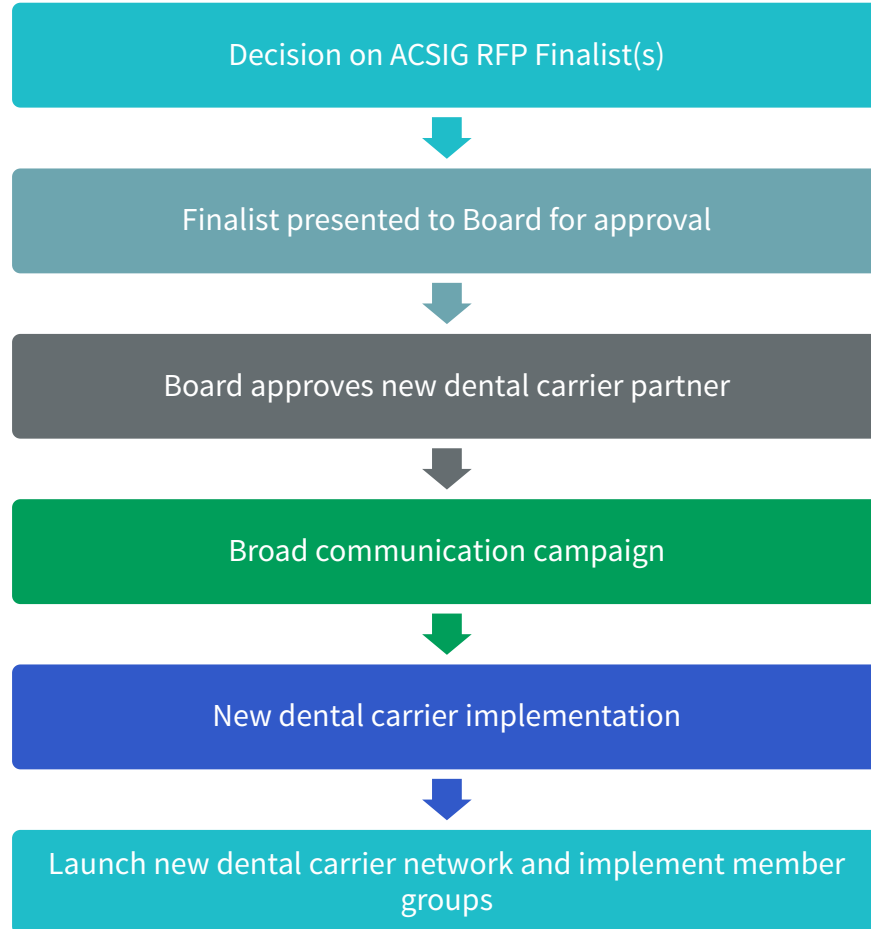
# Questions & Discussion



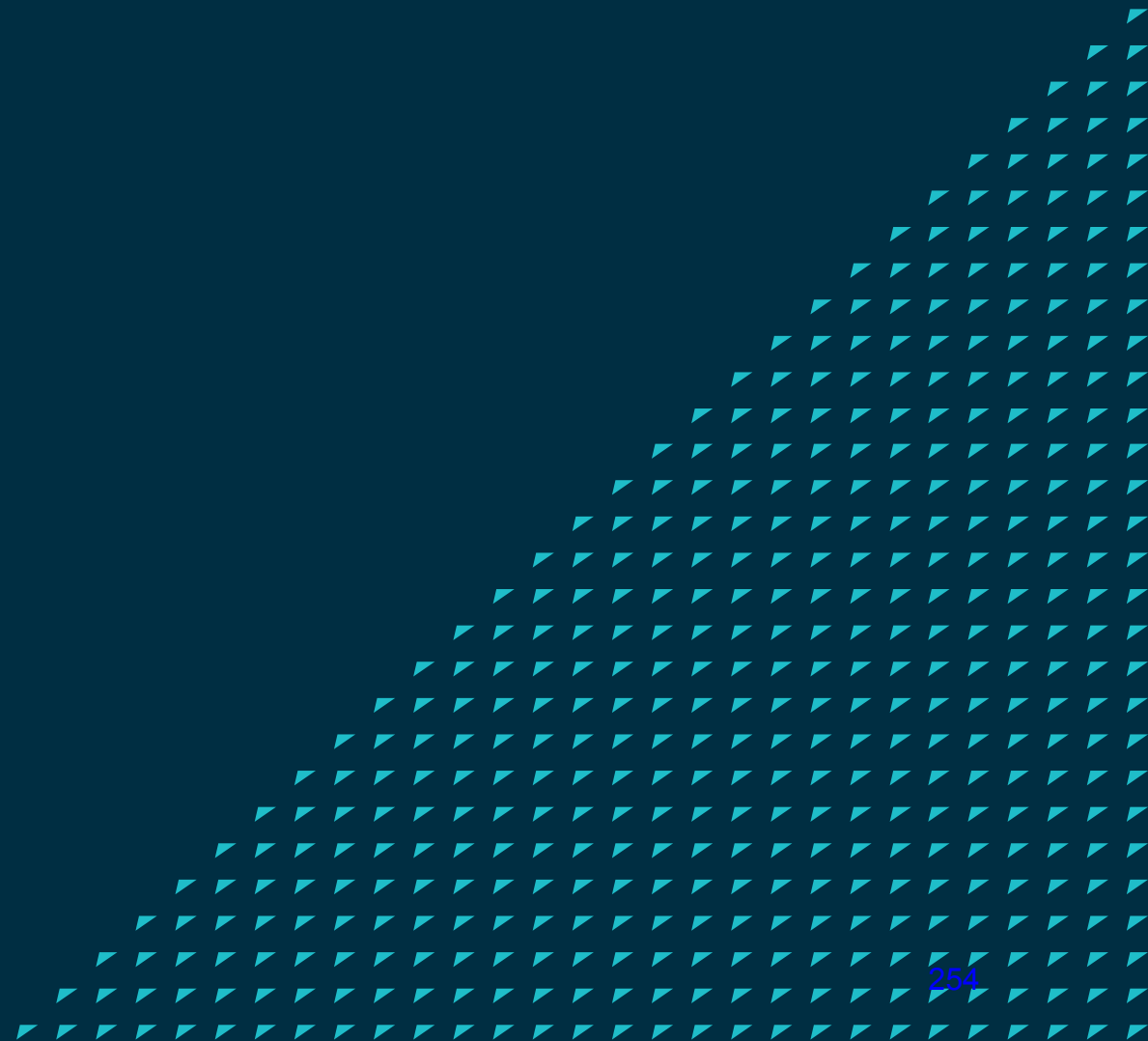
- Do you have any questions?
- Are we missing any key information or data?
- Do you have additional topics to discuss?



## Recap and Next Steps

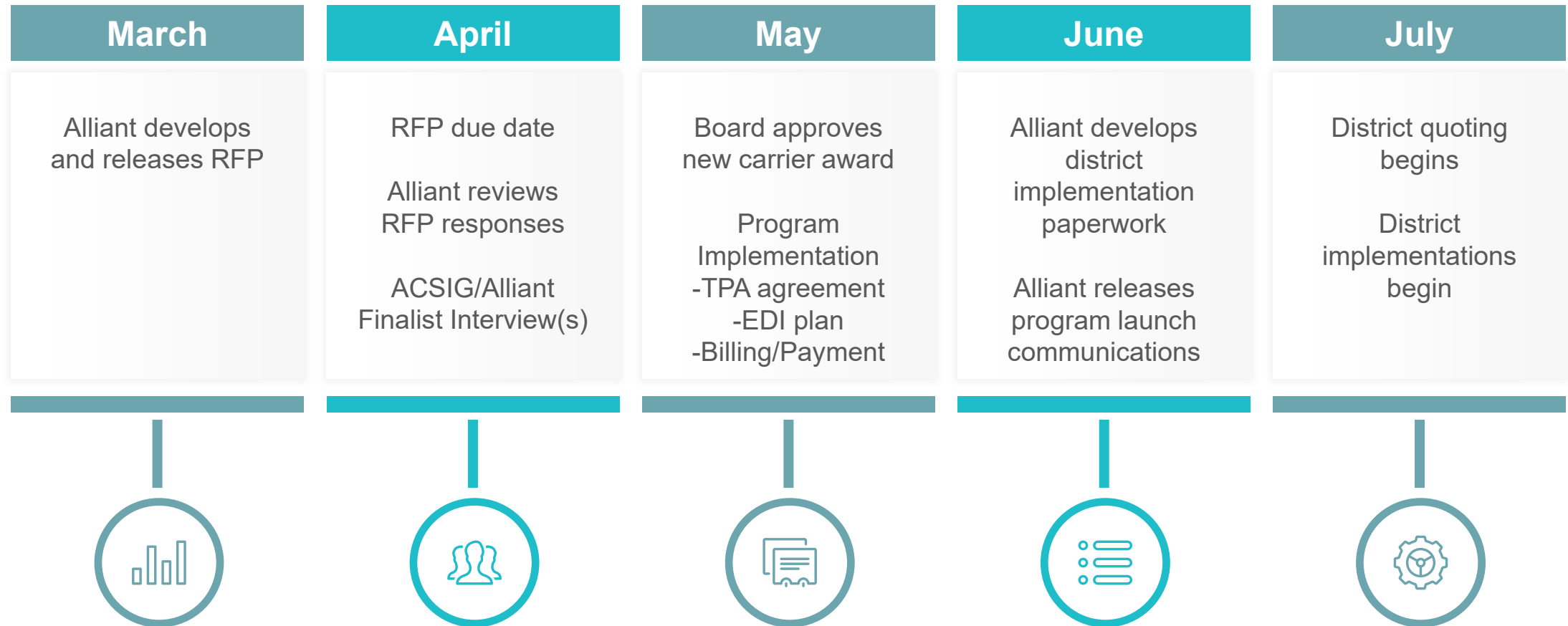


# Appendix





# Implementation Timeline - Tentative 10/1/2024 Effective Date







# Implementation Timeline - Tentative 10/1/2024 Effective Date





# Disclosures

This proposal is for information purposes only and does not amend, extend or alter the policy in any way. Please refer to the policy form for completed coverage and exclusion information.

Alliant embraces a policy of transparency with respect to its compensation from insurance transactions. Details on our compensation policy, including the types of income that Alliant may earn on a placement, are available on our website at [www.alliant.com](http://www.alliant.com). For a copy of our policy or for any inquiries regarding compensation issues pertaining to your account you may also contact us at: Alliant Insurance Services, Inc., Attention: General Counsel, 701 B Street, 6th Floor, San Diego, CA 92101.

Analyzing insurers' over-all performance and financial strength is a task that requires specialized skills and in-depth technical understanding of all aspects of insurance company finances and operations. Insurance brokerages such as Alliant typically rely upon rating agencies for this type of market analysis. A.M. Best has been an industry leader in this area for many decades, utilizing a combination of quantitative and qualitative analysis of the information available in formulating their ratings.

Alliant's standard protocol is to only place coverage with carriers with no less than an "A-" rating from A.M. Best. However, where Alliant determines that it is prudent to consider coverage with a lower rated carrier, the financial rating of the carrier is to be disclosed to the client. Should Alliant becomes aware of a carrier's rating dropping below "A-" mid-policy period we will review and advise you of the situation and consider if an alternative carrier can be reasonably provided prior to renewal.

A.M. Best has an extensive database of nearly 6,000 Life/Health, Property Casualty and International companies. You can visit them at [www.ambest.com](http://www.ambest.com).

**Ratings for Carriers included in this presentation are:**

<b>Carrier</b>	<b>A.M. Best</b>
Delta Dental	A
Ameritas	A
Anthem	A
Cigna	A
United Concordia	A

To learn more about companies doing business in California, visit the California Department of Insurance website at [www.insurance.ca.gov](http://www.insurance.ca.gov).





# Thank You

**PROPRIETARY & CONFIDENTIAL**

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## Alameda County Schools Insurance Group

P.O. Box 2487

Dublin, CA 94568

Phone (925) 225-1030

Fax (925) 225-0653

[www.acsig.com](http://www.acsig.com)

### Executive Summary: Vision Program & Rates 2024/2025

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: Vision Program & Rates 2024/2025

Proposed 2024/2025 Vision rate changes for the ACSIG fixed rate members are included in this packet. Those proposals include four additional enhancement options including increased frame allowances, Polycarbonate Lens Enhancements, and LightCare benefits. Staff recommends a flat rate renewal for whatever options is selected, with program reserves being used to buy-down enhancements if necessary.

The Executive Committee will be asked for a recommendation to the Full Board.

## Program Enrollment Summary

### Dental Program

	Fixed Rate	Self-Funded	Total Dental
December 2022	18,606	92,106	110,712
December 2023	19,036	97,360	116,396
Difference	<b>2.31%</b>	<b>5.70%</b>	<b>5.13%</b>

Enrollment provided by PBIA

### Vision Program

	Fixed Rate	Self-Funded	Total Vision
December 2022	11,664	22,787	34,451
December 2023	11,969	27,837	39,806
Difference	<b>2.61%</b>	<b>22.16%</b>	<b>15.54%</b>

Enrollment provided by VSP



**Vision Trends & Renewal**

## Fixed Rate Vision – Current Trend Data

### **Vision Service Plan (VSP) Trend**

- *Book of Business: 5.0%*

### **Market Trend Data**

*Survey of national vision carriers*

- *Schedule of Allowance Plans: 1.0%*
- *Source: Segal 2024 Trend Survey*

### **ACSIG Vision Trend – Fixed Rate Groups**

- *24 Months of Claims Data  
(January 2022 – December 2023): +3.3%*
- *36 Months of Claims Data  
(January 2021– December 2023): +7.9%*

### **ACSIG Historical Performance**

*Calendar Year Claims PEPM vs. Prior Calendar Year*

- *2023 vs. 2022: 3.2%*
- *2022 vs. 2021: -1.3%*
- *2021 vs. 2020: +11.0% (COVID-19)*
- *2020 vs. 2019: -13.0% (COVID-19)*
- *2019 vs. 2018: -0.2%*
- *2018 vs. 2017: -0.2%*
- *2017 vs. 2016: -1.9%*
- *2016 vs. 2015: -1.7%*
- *2015 vs. 2014: -0.9%*
- *2014 vs. 2013: -2.9%*
- *2013 vs. 2012: -5.2%*
- *2012 vs. 2011: -14.0%*



## Fixed Rate Vision – Renewal Recommendation

	Trend	Renewal
<i>Segal Trend</i>	1.0%	-6.7%
<i>ACSIG 2022-2023 Trend</i>	1.5%	-5.7%
<i>ACSIG 2023-2024 Trend</i>	1.5%	-5.7%
<b>ACSIG 2024-2025 Vision Renewal Trend</b>	<b>1.5%</b>	<b>-5.7%</b>
<i>VSP Vision Trend</i>	5.0%	1.8%

### 2024-2025 Underwriting Assumptions & Recommendation

- *Paid Claims: 24-months of claims data (January 2022 – December 2023)*
- *Alliant recommended trend of 1.5% was used*
- *Risk margin of 0.0%*
- *Alliant Recommends No Change in Rates with plan design enhancement*
- *Alliant Recommends Rate Adjustment*
  - *Consider rate pass for outlier groups per individual analysis*

## Fixed Rate Vision – Renewal Recommendation

	Trend	Renewal	Reserves Buy-Down \$Δ from Status Quo
ACSIG 2024-2025 Vision Renewal Trend with Enhancements Option 1	1.5%	-2.4%	N/A
ACSIG 2024-2025 Vision Renewal Trend with Enhancements Option 2	1.5%	2.7%	\$256,898
ACSIG 2024-2025 Vision Renewal Trend with Enhancements Option 3	1.5%	-0.9%	N/A
ACSIG 2024-2025 Vision Renewal Trend with Enhancements Option 4	1.5%	-3.2%	N/A

### 2024-2025 Additional Enhancement Options

- Option 1: Increase Allowances \$170 Frame and \$170 ECL
- Option 2: Increase Allowances \$200 Frame and \$200 ECL
  - This option will require a buy-down using ACSIG reserves of \$256,898 for a flat renewal
- Option 3: Add Polycarbonate Lens Enhancements
- Option 4: LightCare - Members can use the frame allowance for non-prescription sunglasses or non-prescription blue light filtering glasses in lieu of glasses or contacts.

## Fixed Rate Vision – Renewal Action and History

	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025
Underwriting Results	4.1%	-3.8%	-0.8%	-3.7%	-5.7%
Actual Applied to Members	0.00%	0.00%	0.00%	0.00%	<b>0.00% (Proposed)</b>

Notes:

- 2020-2021: Enhancements of \$150 Frame Allowance and Standard Progressive lens covered in full in-network.
- 2022-2023: Enhancements converting to VSP's updated Open Access Schedule (Out of Network Reimbursements) and adding UV Protection Lens Enhancement.



## Alameda County Schools Insurance Group

P.O. Box 2487

Dublin, CA 94568

Phone (925) 225-1030

Fax (925) 225-0653

[www.acsig.com](http://www.acsig.com)

### **Executive Summary: Property & Liability Rates 2024/2025**

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: Property & Liability Rates 2024/2025

ACSIG participates in the Northern California ReLiEF Property and Liability JPA. Although not all lines of insurance have been placed, the enclosed proposed rates included our best estimate given the information currently available. Assumptions and estimates are noted where utilized. The Executive Direction will present proposed rates for discussion.

The Executive Committee will be asked for a recommendation to the Full Board.

# ACSIG

## 2024/2025 Property & Liability Program Rates

ACSIG	Property	Liability	Total	1st Payment	2nd Payment
ACOE	\$45,985	\$47,165	\$93,150	\$46,576	\$46,574
ACOE Charter	\$0	\$14,088	\$14,088	\$7,044	\$7,044
Albany	\$178,646	\$417,383	\$596,029	\$298,015	\$298,014
Dublin	\$495,586	\$1,483,154	\$1,978,740	\$989,370	\$989,370
Emery	\$75,118	\$73,310	\$148,428	\$74,214	\$74,214
Piedmont	\$168,575	\$288,935	\$457,509	\$228,755	\$228,754
<b>ACSIG TOTALS</b>	<b>\$963,909</b>	<b>\$2,324,034</b>	<b>\$3,287,943</b>		

2024/2025  
Property Program Rates

Member	EDP	Total Insured Values	Rate \$225,000 x \$25,000	Rate excess of \$250,000	Insurance Expense	Loss Fund & Admin	Safety Inspection	Total Premium
ACOE		\$ 50,425,137	0.00786186	0.0717909	\$40,165.01	\$4,770.71	\$1,049.56	\$45,985
Albany	1,417,000	\$ 195,894,319	0.00786186	0.0717909	\$156,035.22	\$18,533.50	\$4,077.37	\$178,646
Dublin		\$ 543,434,279	0.00786186	0.0717909	\$432,860.36	\$51,414.14	\$11,311.11	\$495,586
Emery	365,438	\$ 82,370,289	0.00786186	0.0717909	\$65,610.20	\$7,793.03	\$1,714.47	\$75,118
Piedmont		\$ 184,850,341	0.00786186	0.0717909	\$147,238.39	\$17,488.63	\$3,847.50	\$168,575
<b>ACSIG Totals:</b>		\$1,056,974,365			\$841,909.18	\$100,000.00	\$22,000.00	\$963,909
<b>MRL \$25,000</b>								
<b>ACSIG Rates:</b>								
NCR Rate	0.0092146	Per \$100 TIV			<b>Assumptions</b>			
SAFER Rate	0.0717909	Per \$100 TIV			SAFER rate Flat			
					Safety Inspections		\$ 22,000.00	
					Lost Fund & Admin		\$ 100,000.00	
<b>ACSIG ex-mods:</b>								
NCR ex-mod	0.8532	24-25 ex-mod calculated by NCR (+2.29)			EDP & TIV from 2023 AssetWorks Appraisals (+100MM)			
SAFER ex-mod	0.9218	24-25 ex-mod calculated by NCR (-2.95%)						
<b>Base Rates:</b>								
NCR	0.0108	24-25 NCR rate (-.9%)						
SAFER	0.0778812	23-24 Actual						

**2024/2025**  
**Liability Program Rates**

Member	SIR	Risk Factor ADA	ADA	SIR to \$1 Million	SAFER 49MM x 1MM	Cyber	EDP	Crime	Breakdown	Insurance Expense	Loss Fund & Admin	Total Premium
ACOE	\$5,000	548	263	\$ 34,165.99	\$ 8,807.25	\$687		\$54.55	\$1,147	\$ 44,861.46	\$ 2,303.49	\$ 47,165
ACOE Charter			147	\$ 9,164.96	\$ 4,922.69					\$ 14,087.65	\$ -	\$ 14,088
Albany	\$5,000	4,194	3,539	\$ 261,482.06	\$ 118,512.82	\$9,239	\$5,331	\$733.99	\$4,455	\$ 399,753.26	\$ 17,629.26	\$ 417,383
Dublin	\$5,000	15,313	12,442	\$ 954,715.00	\$ 416,653.44	\$32,480		\$2,580.47	\$12,358	\$ 1,418,786.61	\$ 64,367.38	\$ 1,483,154
Emery	\$5,000	732	588	\$ 45,637.78	\$ 19,690.74	\$1,535	\$1,375	\$121.95	\$1,873	\$ 70,233.36	\$ 3,076.92	\$ 73,310
Piedmont	\$5,000	3,003	2,338	\$ 187,227.14	\$ 78,294.14	\$6,102		\$484.90	\$4,203	\$ 276,311.68	\$ 12,622.95	\$ 288,935
<b>ACSIG Totals:</b>		23,790	19,317	\$1,492,393	\$646,881	\$50,043	\$6,706	\$3,975.86	\$24,036	\$ 2,224,034.01	\$ 100,000.00	\$ 2,324,034
<b>ACSIG Rates:</b>						<b>Assumptions / Notes</b>						
NCR SIR to 1MM	\$ 62.35	PER RF ADA				Risk Factor ADA - Determined Actuarially						
SAFER 49MM x 1MM	\$ 33.49	PER ADA				ADA - Last Keenan Count						
<b>ACSIG ex-mods:</b>						SAFER rate up 20%						
NCR	1.7627	24-25 ex-mod calculated by NCR (+.72%)				Cyber Renewal Flat						
SAFER	1.0293	24-25 ex-mod calculated by NCR (+1.24%)				EDP Renewal Flat						
<b>Base Rates:</b>						Crime Renewal Flat						
NCR	\$ 35.37	24-25 NCR Rates (18.2% increase)				Equipment Breakdown Renewal Flat						
SAFER	\$ 27.112	23-24 Actual				Loss Fund & Admin \$ 100,000.00						
Cyber	\$ 0.7491	23-24 Actual										
EDP	\$ 0.376200	Per \$100 TIV (EDP)				23-24 Actual						
Crime	\$ 0.207400	Per ADA				23-24 Actual						
Breakdown	\$ 0.002274	Per \$100 TIV				23-24 Actual						



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### Executive Summary: PLCA Agreement Renewal

To: ACSIG Executive Committee

From: Kimberly Dennis

Date: May 16, 2024

Subj.: PLCA Agreement Renewal

ACSIG has been a member of Northern California ReLiEF (“NCR”) for Property and Liability coverage since July 2008. As an NCR member, ACSIG maintains a self-insured retention of \$25,000. Keenan & Associates administers Property and Liability claims for both NCR and ACSIG. This arrangement provides excellent claims service and promotes claims consistency. ACSIG’s most recent agreement for these services is the July 1, 2021, Property and Casualty Claims Administration Services Agreement. That agreement was amended twice, with the most recent amended expiring on June 30, 2024.

The Executive Committee will be asked to approve the proposed PLCA Agreement for execution.



PROPERTY AND CASUALTY

CLAIMS ADMINISTRATION SERVICES AGREEMENT

This Property and Casualty Claims Administration Services Agreement Agreement”) is made and entered into by and between Alameda County Schools Insurance Group (“Client”) and Keenan & Associates (“Keenan”), as of July 1, 2024 (“Effective Date”). Client and Keenan are also referred to individually as a “party” and collectively as the “parties.”

In consideration of the mutual obligations contained herein, the Parties agree as follows:

1. **TERM**

The term of this Agreement is from July 1, 2024, through June 30, 2027 (“Term”) unless extended or terminated earlier as provided herein.

2. **KEENAN RESPONSIBILITIES AND SCOPE OF SERVICES**

A. Keenan shall provide Client with the services described in the attached Exhibits A that are checked below:

- Exhibit A-1 – Administrative Services
- Exhibit A-2 – Adjustment Services
- Exhibit A-3 – Investigative Services
- Exhibit A-4 – Additional Investigative Services

B. The Claims that are covered by this Agreement include all currently open claims and those accidents, incidents or claims reported to Keenan in writing on or after the effective date of this Agreement for which Client has financial responsibility as part of the coverage or insurance Northern California ReLiEF (the “Coverage”) provided by the Insurance Policy or Memorandum of Coverage issued by. Such claims shall be referred to hereafter as “Claims.”

C. Keenan shall perform its obligations hereunder as an independent contractor and Keenan shall at all times remain responsible for its own operational and personnel expenses. Under no circumstance shall any employee of one party look to the other party for any payment or the provision of any benefit, including without exception, workers’ compensation coverage.

D. Keenan’s services are limited to the specific obligations described herein and Keenan is authorized to act on behalf of Client as expressly stated in this Agreement. Except for Keenan’s responsibilities with respect to funds obtained from or held on behalf of Client, Keenan shall not be a fiduciary of Client.

- E. Keenan agrees to comply with all applicable State and Federal Laws that relate to the Coverage.

3. **CLIENT'S DUTIES AND RESPONSIBILITIES**

- A. Client shall retain final authority and responsibility to approve the resolution of all Claims that are within the member retained limits and is responsible for all other aspects of the Coverage, except for the services to be provided by Keenan under this Agreement.
- B. Client shall provide Keenan with all applicable information in a timely manner so that Keenan can fulfill its obligations under this Agreement. Client certifies that all information provided to Keenan shall be complete, accurate and timely and that Keenan may rely upon such information without further investigation or review. Client understands and agrees that such information has not been audited by Keenan and Client shall remain liable for its accuracy.
- C. To the extent Keenan requires the assistance of Client's staff or any third parties who are assisting, advising or representing Client to fulfill its obligations hereunder, Client shall have its staff and these third parties assist Keenan.
- D. If a trust account is opened by Keenan on behalf of the Client, Client hereby agrees to fund such trust account and to maintain a minimum balance, during the Term of this Agreement, of at least an amount sufficient to ensure that there are sufficient funds available to pay all appropriate and properly submitted Claims. If Claims exceed the balance in the trust account Client shall be responsible for covering those Claims. Keenan agrees to notify the Client if there are any deficiencies in the minimum balance of the trust account when Claims exceed the account balance. All deficiencies in the minimum balances in the trust account are due and payable upon receipt of notice from Keenan. Client hereby agrees to provide funds to sufficiently fund the trust account in a timely manner. Keenan shall not, under any circumstances or occurrences, be responsible for funding any deficiencies in the trust account; nor, shall it be responsible for the payment of any appropriate and properly submitted Claims.
- E. Client acknowledges and agrees that Keenan will use its discretion in its role as Claims administrator. In such capacity, Keenan shall have no responsibility or liability for actions taken or payments approved, unless it shall be determined that Keenan acted in willful misconduct or in a manner that was grossly negligent.
- F. Client understands that Keenan is not providing any legal, tax or accounting services or advice and agrees to seek the counsel of its own attorney on all legal issues or matters and consult with its own tax and accounting experts on all tax and accounting issues and matters relating to the Claims Services.

4. **COMPENSATION**

Keenan shall receive compensation for the services rendered under this Agreement as provided in the attached Exhibit B.

5. **INSURANCE**

Keenan shall procure and maintain during the term of this Agreement the following insurance coverages, and shall provide certificates of insurance to Client upon Client's request.

- A. Workers' Compensation: Coverage in conformance with the laws of the State of California and applicable federal laws;
- B. General Liability: Coverage (including motor vehicle operation) with a Two Million Dollar (\$2,000,000) limit of liability for each occurrence and a Two Million Dollar (\$2,000,000) aggregate limit of liability; and
- C. Errors and Omissions: Coverage with a Two Million Dollar (\$2,000,000) limit of liability for each occurrence and a Two Million Dollar (\$2,000,000) aggregate limit of liability.
- D. Cyber Liability/Privacy: Coverage with a Two Million Dollar (\$2,000,000) limit of liability for each occurrence and a Two Million Dollar (\$2,000,000) aggregate limit of liability.

6. **INDEMNIFICATION**

If either party breaches this Agreement, then the breaching party shall indemnify and hold harmless the non-breaching party, its officers, agents and employees against all claims, losses, demands, actions, liabilities, and costs (including, without limitation, reasonable attorneys' fees and expenses) arising from such breach. In addition, if Keenan (i) becomes the subject of a subpoena or is otherwise compelled to testify or (ii) becomes the subject of a claim, demand, action or liability brought or asserted by any individual or entity other than the Client ("Third-Party Demand") relating to the Services and such Third-Party Demand is not a direct result of Keenan's negligence or willful misconduct, then Client shall indemnify and hold Keenan harmless from all losses, payments, and expenses incurred by Keenan in resolving such Third-Party Demand.

7. **LIMITATION OF LIABILITY**

Notwithstanding anything to the contrary in this Agreement, in no event shall either party be liable for any punitive damages, fines, penalties, taxes or any indirect, incidental, or special

damages incurred by the other party, its officers, employees, agents, contractors or consultants whether or not foreseeable and whether or not based in contract or tort claims or otherwise, arising out of or in connection with this Agreement even if advised of the possibility of such damage. Keenan's liability under this Agreement shall further be limited to, and shall not exceed, the amount of its available insurance coverage, but not exceeding the limits of coverage outlined in Section 5.

8. **DISPUTE RESOLUTION**

- A. In the event of any dispute arising out of or relating to this Agreement, such dispute shall be resolved by submission to binding arbitration before Judicial Arbitration & Mediation Services ("JAMS") or ADR Services, at the claimant's choice, in Alameda County, California, before a retired judge or justice. If the parties are unable to agree on a retired judge or justice, the selected arbitration service (JAMS or ADR Services) will select the arbitrator.
- B. In any such arbitration, the parties shall be entitled to take discovery in accordance with the provisions of the California Code of Civil Procedure, but either party may request that the arbitrator limit the amount or scope of such discovery, and in determining whether to do so, the arbitrator shall balance the need for the discovery against the parties' mutual desire to resolve disputes expeditiously and inexpensively.
- C. The prevailing party in any action, arbitration, or proceeding arising out of or to enforce any provision of this Agreement will be awarded reasonable attorneys' fees and costs incurred in that action, arbitration, or proceeding, or in the enforcement of any judgment or award rendered.

9. **TERMINATION**

- A. This Agreement may be terminated upon the occurrence of any of the following events:
  - i. By either party upon the dissolution or insolvency of either party;
  - ii. By either party following the filing of a bankruptcy petition by or against either party (if the petition is not dismissed within sixty (60) days in the case of an involuntary bankruptcy petition);
  - iii. If the application of any law, rule, regulation, or court or administrative decision prohibits the continuation of this Agreement or would cause a penalty to either party if the Agreement is continued, and if the Agreement cannot be amended to conform to such law, rule, regulation, or court or administrative decision in a manner that would preserve the original intent of the parties with respect to their rights and duties under this Agreement; or

- iv. By the non-breaching party if a breach of this Agreement is not cured within thirty (30) days following receipt of written notice of the breach from the non-breaching party.
  - v. Either party shall have the right to terminate at any time without cause or penalty upon sixty (60) days prior written notice to the other party.
- B. In the event of termination pursuant to Section 9A above, Keenan shall be paid for the full value of all services rendered through the date of termination.
- C. If Client requests that Keenan continue to provide services under this Agreement after its expiration, Keenan may agree to provide services and the Agreement shall be extended on a month-to-month basis until terminated by either party. In such case, compensation shall be paid to Keenan on a monthly basis, under the then current rates.

10. **DISPOSITION OF FILES**

- A. All files on each Claim shall be the property of Client. However, Keenan shall be entitled to keep a copy of such files and documents as may be necessary to demonstrate its performance under this Agreement.
- B. In the event of the expiration or termination of this Agreement, Keenan shall return all files to Client unless Client requests Keenan to continue to process any file(s), which file(s) Keenan will continue to process on a fee basis as negotiated.

11. **OWNERSHIP OF RECORDS**

- A. Records of the services provided under this Agreement shall be the property of Client. However, Keenan shall be entitled to keep a copy of such files and documents as may be necessary to demonstrate its performance under this Agreement.
- B. In the event of the expiration or termination of this Agreement, Keenan shall return all Client files except as may otherwise be agreed to, in writing, between Keenan and Client.

12. **SOLICITATION OF EMPLOYEES**

During the Term and for a period of twelve (12) months following any termination or expiration of the Agreement, neither party shall solicit the employment or engagement of any employee or agent of the other party that interacted directly with the soliciting party; provided, however, the foregoing provision shall not prevent either party from soliciting for employment or employing an employee who responds to general solicitations of advertisements in periodicals including newspapers and trade publications, so long as such solicitations or advertisements are not specifically directed at the employee(s) of the other party.

13. **MARKETING**

Keenan may use Client's name in its representative client list. Keenan shall obtain Client's written consent before using Client's name for any other purpose.

14. **OTHER RELATIONSHIPS**

- A. Client also understands that Keenan or its affiliates may provide services for other entities that also participate in the same pool as Client and or maintain Coverage with Keenan for similar insurance needs and that Keenan may be separately compensated for those additional services. Such services may include, without limitation, providing similar services for other members of the pool or providing other services for insurers or reinsurers that may provide coverage under the pool.
- B. Client understands that Keenan or its affiliates may provide Client with other services or insurance coverage not provided in this Agreement and receives compensation related to such other services including, without limitation, loss control services, joint powers administration, insurance brokerage services, reinsurance, obtaining other reinsurance coverage for Client, Claims administration, investigative services, financial processing and other related services.
- C. In the event a Claim is reported to Keenan and it is determined that the claimants or cross-complainants are also clients of Keenan to whom Keenan is also committed to serve by contract, Keenan shall notify the Client of the actual or potential conflict of interest. In such event, Client shall either waive the conflict or retain the services of another investigator/adjuster to administer the Claim, and Keenan shall assist the Client in obtaining such service.

15. **GENERAL**

- A. This Agreement, its recitals and all attached exhibits constitute the entire understanding of the parties related to the subject matter of the Agreement, and supersede all prior and collateral statements, presentations, communications, reports, agreements or understandings, if any, related to such matter(s).
- B. The obligations set forth in this Agreement other than Keenan's obligation to perform the Services and Client's responsibility to pay for the Services shall survive the expiration or termination of this Agreement. Nothing in this Section 15 shall, however, be interpreted as relieving Client of its obligation to pay for any Services rendered by Keenan prior to the termination date of this Agreement.
- C. If any person or entity attempts to pursue any claim or remedy based upon or arising in any way out of this agreement, to the extent such claim or remedy is permitted, then such person or entity shall be bound by the terms of this Agreement.

- D. No modifications or amendments to this Agreement shall be binding unless in writing and signed by authorized representatives from both parties. Any waiver or delay by a party in enforcing this Agreement shall not deprive that party of the right to take appropriate action at a later time or due to another breach. This Agreement shall be interpreted as if written jointly by the parties.
- E. Any provision determined by a court of competent jurisdiction to be partially or wholly invalid or unenforceable shall be severed from this Agreement and replaced by a valid and enforceable provision that most closely expresses the intention of the invalid or unenforceable provision. The severance of any such provision shall not affect the validity of the remaining provisions of this Agreement.
- F. Neither party shall be liable or deemed to be in default for any delay or failure in performance under this Agreement resulting, directly or indirectly, from acts of God, civil or military authority, acts of public enemy, war, accidents, fires, explosions, earthquakes, floods, power outages, failure of computer systems, machinery or supplies, vandalism, strikes, or other work interruptions or any similar or other cause beyond the reasonable control of either party. Each party shall make a good faith effort to perform under this Agreement in the event of any such circumstances, and shall resume full performance of its contract duties once the cause of the delay has abated.
- G. All payments and invoices are due and payable upon presentation by Keenan. In the event Client fails to pay any invoice within thirty days of presentation, Keenan shall be entitled to receive interest on such outstanding invoice from the date of presentation at the rate of (a) 1½ percent per month or (b) the maximum interest rate permitted by applicable law, whichever is lower.
- H. All notices hereunder shall be in writing and shall be sent to the parties at the addresses as set forth below, or to such other individual or address as a party may later designate. Notices shall be sent via personal delivery, courier service, United States mail (postage pre-paid, return receipt requested), express mail service or electronic mail. Notice shall be effective when delivered, or if refused, when delivery is attempted. Notices delivered during non-working hours shall be deemed to be effective as of the next business day.

If the notice relates to a legal matter or dispute, a copy shall be sent to:

Keenan and Associates  
2355 Crenshaw Blvd., Ste. 200  
Torrance, CA 90501  
Attn: Legal Department

- I. This Agreement may be executed in counterparts and by electronic signatures.

- J. Each person signing this Agreement on behalf of a party represents and warrants that he or she has the necessary authority to bind such party and that this Agreement is binding on and enforceable against such party.

<u>Alameda County Schools Insurance Group</u>		<u>Keenan &amp; Associates</u>	
<u>Signature:</u>		<u>Signature:</u>	
<u>By:</u>	Kimberly Dennis	<u>By:</u>	Eric J. Lucas, Esq
<u>Title:</u>	Exec. Dir.	<u>Title:</u>	Vice President
<u>Address:</u>	5776 Stoneridge Mall Pleasanton, CA 94588	<u>Address:</u>	2355 Crenshaw Blvd., Ste. 200 Torrance, CA 90501
<u>Attention:</u>	Kimberly Dennis	<u>Attention:</u>	Ron Martin
<u>Telephone:</u>		<u>Telephone:</u>	
<u>E-mail:</u>	<a href="mailto:kdennis@acsig.com">kdennis@acsig.com</a>	<u>E-mail:</u>	<a href="mailto:rmartin@keenan.com">rmartin@keenan.com</a>



**EXHIBIT A-1**  
**ADMINISTRATIVE SERVICES**

1. Keenan agrees to provide, during the term of this Agreement, the following administrative services:
  - A. Provide Client a tabulated Monthly Status Report on all active Claims, indicating the open or closed status of each reported Claim assigned to Keenan, the details of each Claim, the payments during the month and the reserve status.
  - B. If requested by Client, Keenan shall establish a trust account from which Claims that are within the member retained limits are paid. If an account has already been established on the Client's behalf, Keenan shall continue to maintain the account upon renewal of services. Keenan will provide transaction registers of all such expenditures. The Client will maintain a balance adequate to pay bills and expenditures, on a monthly basis from the account and will reimburse said account promptly on a monthly basis in the amount the account is depleted, as outlined in the Agreement.
  - C. Provide for the payment of Claims, according to the guidelines given by Client, to the extent that there are funds available in Client's trust account.

**EXHIBIT A-2**  
**ADJUSTMENT SERVICES**

1. Keenan agrees to provide, during the term of this Agreement, the following adjustment services on each Claim:
  - A. The maintenance of a file on each Claim reported to Keenan.
  - B. Periodic review and adjustment of reserves on all open Claims.
  - C. Whenever investigation results in a determination that Client sustained a liability to a third party, Keenan shall process any such Claim for settlement in accordance with the Coverage and instructions and policies of Client presented to Keenan in writing.
  - D. Investigate, evaluate and adjust all Claims by a covered party in accordance with the terms of the Coverage.
  - E. Notification of Client's primary and excess coverage providers of all Claims, which exceed Client's retained limit and maintenance of liaison between the Coverage providers and the Client on matters affecting the adjustment of such Claims and seek reimbursements for loss in excess of retention or deductible.
  - F. Pursue and direct subrogation/third-party recovery against any party responsible or partially responsible for loss incurred by Client, in accordance with the terms of the "Memorandum of Coverage" or "Insurance Policy" and, if a recovery is successful, the reimbursement of any amounts (net of subrogation effort expenses) shall be made in inverse order, to the extent of each party's disbursement: first to the reinsurer; then to the pool where the Client is a member and then to the Client.
  - G. Recommendation of rejection of Claims when appropriate pursuant to relevant provisions of Title 1, Division 3.6, Part 3, Chapter 2, of the Government Code of the State of California.
  - H. Attempt to obtain Release Agreements on behalf of Client in connection with the settlement of Claims.
  - I. Retain defense and coverage counsel in accordance with approved guidelines for the Coverage. Files referred to counsel will be sent with the appropriate instructions to advise counsel of the steps which are being authorized. All legal bills are to be reviewed for the nature of the work performed and reasonableness of the time charged.

**EXHIBIT A-3**  
**INVESTIGATIVE SERVICES**

1. Keenan agrees to provide, during the term of this Agreement, the following investigative services:
  - A. Receipt and examination of all reports of Claims.
  - B. Initiate investigation through in-house review of Claims, where the nature of the Claim warrants such investigation or when requested by Client; such investigation to include telephonic or written contact with claimant, witnesses, or employees of Client.
  - C. Provide a report to Client with the findings of such investigation and information regarding any potential for subrogation/third-party recovery.
  - D. Assignment to and monitoring of all experts, consultants and field investigators appropriate for the type of Claim presented.
2. Client shall make available to Keenan all employees of Client who are witnesses to an incident or accident or who have knowledge of the event or incident, which is the subject matter of a Claim. If possible, Client shall provide Keenan with photographs and engineering drawings or other descriptive material of all conditions of Client property which are alleged to be dangerous or that were damaged in the events which produced the Claim under investigation.

**EXHIBIT A-4**  
**ADDITIONAL INVESTIGATIVE SERVICES**

1. If necessary to determine probable liability/damage or deny coverage of a Claim and if a third-party recovery is pursued, Keenan shall conduct additional investigation of such Claims, where the nature of the Claim warrants such investigation or when requested by Client as follows:
  - A. Additional Investigative Services shall include additional contact with claimant, witnesses, or employees of Client, and other additional investigative services, such as professional photography, laboratory services, property damage appraisals, taking statements from witnesses away from the premises of Keenan, on-site investigation, copying material and other records, trial preparation and professional engineering services including, but not limited to, map preparation, accident reconstruction, material analysis and premises evaluation (collectively, “Additional Investigative Services”).
2. Keenan agrees to manage and monitor the activities of any such vendors involved in the potential recovery and to assist them in the provision of such services.
3. Client agrees to pay for the cost of Additional Investigative Services. The invoice for such services shall be due and payable upon presentation. Client acknowledges that Additional Investigative Services may be provided by independent third-party vendors or by employees or affiliates of Keenan; provided that the rates charged by Keenan employees or affiliates shall be at market rates.

**EXHIBIT A-5**  
**SECTION 111 REPORTING SERVICES**

1. Section 111 of the Medicare, Medicaid and SCHIP Extension Act of 2007 (“Section 111”) requires the reporting of certain liability settlements and/or payments to the Center for Medicare Services (“CMS”). Client is the Responsible Reporting Entity (“RRE”), as defined under Section 111, for any liability payment or settlement made by it from its own funds.

For each claim managed by Keenan under the Agreement, Keenan shall, in its capacity as TPA, perform the following services:

- a. Determine whether or not a Section 111 report (“Report”) must be filed; and
  - b. File any required Reports on behalf of Client.
2. When a claim payment or settlement exceeds Client’s retained limit or deductible (“MRL/Deductible”), Keenan, as Client’s TPA, shall file a Report with respect to the portion of the payment made from the client’s MRL/Deductible. The coverage provider, **Northern California ReLiEF**, is responsible for submitting a Report with respect to any payments made by the coverage provider.
  3. It is the Client’s responsibility to timely provide Keenan with all information in its possession that is required for the filing of a 111 Report. Keenan shall not be responsible for any penalty or fine that is assessed for a failure to file a timely, accurate and/or complete Report if such failure was the result of the failure of the Client or any third party to provide Keenan with all information necessary to file a timely, accurate, and complete Report.
  4. Keenan cannot issue a payment to a claimant until all information required for the filing of a Report has been received.
  5. Keenan shall have no responsibility to file a Report for any payment or settlement made by Client without the involvement of Keenan. In such cases, Client, or its designee, shall be solely responsible for its own Section 111 compliance. This includes, without limitation, the determination of whether or not a Report must be submitted, as well as the preparation and submission of all required Reports.

**EXHIBIT B  
COMPENSATION**

1. Client agrees to pay Keenan fees calculated as follows:

A. For the period of July 1, 2024 – June 30, 2025:

V.P./A.V.P./Claims Manager -	\$ 108.00 per hour
Senior Claims Examiner -	\$ 102.00 per hour
Claims Examiner -	\$ 90.00 per hour
Expenses -	45% of hourly billing
Minimum per file charge	One hour

2. Fees for subsequent contract years, as applicable, will be determined based upon Keenan's then-current hourly rate. Keenan shall provide Client notice of the rates for subsequent years at least sixty (60) days before the beginning of the applicable contract year.
3. Invoices will be issued quarterly for fees for time and expense actually accrued, if any, and are due and payable upon receipt of the invoice.
4. Any balance not paid within thirty (30) days following the date on the invoice shall be deemed late. Interest on any late payment shall accrue as of the date of Keenan's original invoice at the rate of (a) 1½ percent per month, or (b) the maximum interest rate permitted by applicable law, whichever is lower. Keenan shall have the right to suspend its Services if any balance owed by Client is more than sixty (60) days late.



## Alameda County Schools Insurance Group

P.O. Box 2487

Dublin, CA 94568

Phone (925) 225-1030

Fax (925) 225-0653

[www.acsig.com](http://www.acsig.com)

### **Executive Summary: AB218 PLCA AGREEMENT**

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: AB 218 PLCA Agreement

ACSIG participates in the Northern California ReLiEF Property and Liability JPA. Due to a change in legislation, previous victims of sexual abuse had a revival period to file a claim regardless of when the event occurred. ACSIG members only had 3 claims. One of the claims were associated with the Boy Scouts and use of Facilities. Two of the claims are currently being defended by panel counsel. Due to Keenan's expertise in claim handling, ACSIG is contracting with Keenan to administer the claim (s) regardless of the policy year. The current contract expires June 30, 2024. The Executive Director is requesting an extension of this contract

The Executive Committee will be asked for a recommendation to the Full Board.

**AMENDMENT No 1 to  
AB 218/CCP 340.1 PROPERTY AND CASUALTY CLAIMS ADMINISTRATION  
SERVICES AGREEMENT**

This Amendment modifies the **AB 218/CCP 340.1 Property and Casualty Claims Administration Services Agreement** (“Agreement”) effective on **July 1, 2023** by and between **Alameda County Schools Insurance Group** (“Client”) and **Keenan & Associates** (“Keenan”).

1. The effective date of this Amendment is **July 1, 2024**.
2. This Amendment amends **Exhibit B Compensation** of the Agreement for the period from **July 1, 2024** through **June 30, 2025** to read as outlined below. This Amendment supersedes any and all prior understanding between the Parties as to this matter.

For the period **July 1, 2024– June 30, 2025**:

V.P./A.V.P./Claims Manager -	\$ 108.00 per hour
Senior Claims Examiner -	\$ 102.00 per hour
Claims Examiner -	\$ 90.00 per hour
Expenses -	45% of hourly billings
Minimum per file charge	One hour

3. All other terms and conditions of the Agreement remain unchanged.
4. Each person signing this Amendment on behalf of a Party represents and warrants that he or she has the necessary authority to bind such Party and that this Amendment is binding on and enforceable against such Party.

<u>Alameda County Schools Insurance Group</u>		<u>Keenan &amp; Associates</u>	
<u>Signature:</u>		<u>Signature:</u>	
<u>By:</u>	<b>Kimberly Dennis</b>	<u>By:</u>	<b>Eric J. Lucas, Esq.</b>
<u>Title:</u>	<b>Executive Director</b>	<u>Title:</u>	<b>Vice President</b>
<u>Address:</u>	<b>POB 2487 Dublin, CA 94568</b>	<u>Address:</u>	<b>2355 Crenshaw Blvd., Ste. 200 Torrance, CA 90501</b>
<u>Attention:</u>	<b>Tara Salaiz</b>	<u>Attention:</u>	<b>Ron Martin</b>
<u>Telephone:</u>		<u>Telephone:</u>	
<u>E-mail:</u>	<b>tsalaiz@keenan.com</b>	<u>E-mail:</u>	<b>rmartin@keenan.com</b>





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### **Executive Summary: Loss Control - ReLiEF Inspection Agreement Renewal**

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: ReLiEF Inspection Agreement Renewal

ACSIG has been a member of Northern California ReLiEF (“NCR”) for Property and Liability coverage since July 2008. Members of NCR are required to complete regular safety inspections. ACSIG contracts with Keenan & Associates to perform inspections that satisfy NCR’s requirements. ACSIG’s previous agreement expires on June 30, 2024.

Enclosed is a proposed agreement for services through June 30, 2026. The proposed total rate is \$27,200, which represents a 3% increase over the previous agreement. ReLiEF Inspection and associated services would be performed for Alameda County Office of Education, Albany City USD, Dublin USD, Emery USD, and Piedmont USD.

The Executive Committee will be asked to approve the proposed ReLiEF Inspection Agreement for execution.

## LOSS CONTROL SERVICES AGREEMENT

This **Loss Control Services Agreement** (“Agreement”) is made and entered into by and between **Alameda County Schools Insurance Group (“ACSIG”)** (“Client”) and **Keenan & Associates** (“Keenan”), as of **July 1, 2024** (“Effective Date”).

### RECITALS

- A. Client maintains a liability insurance program (“Insurer”) to protect itself against claims and losses arising out of its day-to-day operations;
- B. Keenan is a specialty insurance services provider with expertise in providing insurance and loss control related services to California school districts, municipalities, health care providers and their related entities.
- C. Client desires Keenan to perform certain loss control services as a complement to its Insurance program; and
- D. Keenan desires to provide such loss control services, subject to the terms and conditions described in this Agreement.

### AGREEMENT

The parties agree as follows:

1. **TERM**

The term of this Agreement is from the **Effective Date** through **June 30, 2026** (“Termination Date”).

2. **KEENAN’S RESPONSIBILITIES AND SCOPE OF SERVICES**

- A. Client elects and Keenan shall provide the loss control services (“Services”) described in Exhibit A, attached hereto and incorporated herein, during the term of this Agreement.
- B. The Services are intended to (i) promote safety awareness, (ii) assist in the identification of conditions which may pose a risk of bodily injury and/or property damage, and (iii) offer recommendations and/or suggestions to help mitigate Client’s risk of loss. Keenan does not represent that the Services will identify every potential risk or hazard inherent in Client’s business activities or existing on Client’s premises. We are confident that Keenan’s loss control services will help Client to promote a safer environment, but Keenan does not represent, guaranty or promise that the Services will eliminate all risk of injury or property damage, or result in improved loss experience.
- C. In providing the Services, Keenan shall act in an advisory and consultative capacity. Client shall retain the right to determine whether to act on or implement the information, recommendations, and suggestions provided by Keenan, and the manner by which any such action or implementation shall be undertaken.



- D. The relationship of Keenan and Client shall be that of an independent contractor and Keenan shall at all times remain responsible for its own operational and personnel expenses. Under no circumstance shall any employee of one party look to the other party for any payment or the provision of any benefit, including without exception, workers' compensation coverage. Except as may be expressly set forth in or contemplated by this Agreement, neither party shall have the right to act on behalf of the other, or to bind the other to any contract or other obligation.
- E. Keenan shall not provide any legal, tax, or accounting service, advice, or opinion, and the Services shall not be interpreted as representing any such service, advice or opinion. Client shall consult its own attorney on all legal issues, and its own tax and accounting experts on all tax, accounting, and financial matters relating to its operations, including without limitation, the establishment and/or operation of the Plans.
- F. In providing its Services, Keenan shall comply with all applicable state and federal laws and regulations, and obtain and maintain all necessary licenses, registrations, and/or permits necessary for the performance of its duties under this Agreement.
- G. Keenan reserves the right to engage independent contractors and/or subcontractors to assist it in performing the Services. The use of such individuals shall not relieve either party of any of its duties under this Agreement.

### 3. **CLIENT'S DUTIES AND RESPONSIBILITIES**

- A. Client shall retain all authority and responsibility for the implementation of any suggestions or recommendation made by Keenan as part of the Services.
- B. Client shall provide Keenan with timely access to such information and individuals, including its outside advisors and consultants, as may be necessary for Keenan to perform the Services. Keenan shall not be responsible for any delay in its performance that results from the failure of Client, or any person acting on behalf of Client, to make available any information or individual in a timely manner.
- C. All information provided to Keenan by Client, in anticipation of or in relation to the Services to be provided by Keenan, shall be complete and accurate, and Keenan may rely upon such information.
- D. Keenan's Loss Control services are not intended to substitute for ongoing inspection and maintenance of Client's facilities. It shall remain Client's responsibility to perform and/or secure standard inspection, maintenance and repair services for its facilities and equipment, including without limitation, any service typically performed by a licensed or certified service professional (e.g., HVAC contractor, electrician, plumber, elevator service personnel, etc.).

### 4. **COMPENSATION**

Keenan shall receive compensation for the services rendered under this Agreement as provided in the attached Exhibit B.

## 5. **INSURANCE**

Keenan shall procure and maintain during the term of this Agreement the following insurance coverages, and shall provide certificates of insurance to Client upon Client's request.

- (1) **Workers' Compensation**. Workers' Compensation Insurance in conformance with the laws of the State of California and applicable federal laws.
- (2) **Bodily Injury, Death and Property Damage Liability Insurance**. General Liability Insurance (including motor vehicle operation) with a Two Million Dollar (\$2,000,000) limit of liability for each occurrence and a Two Million Dollar (\$2,000,000) aggregate limit of liability.
- (3) **Professional Liability Insurance**. Professional Liability Insurance with a Two Million Dollar (\$2,000,000) limit of liability for each occurrence and a Two Million Dollar (\$2,000,000) aggregate limit of liability.
- (4) **Cyber Liability/Privacy Insurance**. Cyber Liability Insurance with a Two Million Dollar (\$2,000,000) limit of liability for each occurrence and a Two Million Dollar (\$2,000,000) aggregate limit of liability.

## 6. **INDEMNIFICATION**

If either party breaches this Agreement, then the breaching party shall indemnify and hold harmless the non-breaching party, its officers, agents and employees against all claims, losses, demands, actions, liabilities, and costs (including, without limitation, reasonable attorneys' fees and expenses) arising from such breach. In addition, if Keenan (i) becomes the subject of a subpoena or is otherwise compelled to testify or (ii) becomes the subject of a claim, demand, action or liability brought or asserted by any individual or entity other than the Client ("Third-Party Demand") relating to the Services and such Third-Party Demand is not a direct result of Keenan's negligence or willful misconduct, then Client shall indemnify and hold Keenan harmless from all losses, payments, and expenses incurred by Keenan in resolving such Third-Party Demand.

## 7. **LIMITATION OF LIABILITY**

Notwithstanding anything to the contrary in this Agreement, in no event shall either party be liable for any punitive damages, fines, penalties, taxes or any indirect, incidental, or consequential damages incurred by the other party, its officers, employees, agents, contractors or consultants whether or not foreseeable and whether or not based in contract or tort claims or otherwise, arising out of or in connection with this Agreement even if advised of the possibility of such damage. Keenan's liability under this Agreement shall further be limited to, and shall not exceed, the amount of its available insurance coverage, but not exceeding the limits of coverage outlined in Section 5.

## 8. **DISPUTE RESOLUTION**

- A. In the event of any dispute arising out of or relating to this Agreement, such dispute shall be resolved by submission to binding arbitration before Judicial Arbitration & Mediation Services ("JAMS") or ADR Services, at the claimant's choice, in Los Angeles County, California, before

a retired judge or justice. If the parties are unable to agree on a retired judge or justice, the selected arbitration service (JAMS or ADR Services) will select the arbitrator.

- B. In any such arbitration, the parties shall be entitled to take discovery in accordance with the provisions of the California Code of Civil Procedure, but either party may request that the arbitrator limit the amount or scope of such discovery, and in determining whether to do so, the arbitrator shall balance the need for the discovery against the parties' mutual desire to resolve disputes expeditiously and inexpensively.
- C. The prevailing party in any action, arbitration, or proceeding arising out of or to enforce any provision of this Agreement will be awarded reasonable attorneys' fees and costs incurred in that action, arbitration, or proceeding, or in the enforcement of any judgment or award rendered.

## 9. **TERMINATION**

- A. This Agreement may be terminated upon the occurrence of any of the following events:
  - i. By either party upon the dissolution or insolvency of either party;
  - ii. By either party following the filing of a bankruptcy petition by or against either party (if the petition is not dismissed within sixty (60) days in the case of an involuntary bankruptcy petition);
  - iii. If the application of any law, rule, regulation, or court or administrative decision prohibits the continuation of this Agreement or would cause a penalty to either party if the Agreement is continued, and if the Agreement cannot be amended to conform to such law, rule, regulation, or court or administrative decision in a manner that would preserve the original intent of the parties with respect to their rights and duties under this Agreement; or
  - iv. By the non-breaching party if a breach of this Agreement is not cured within sixty (60) days following receipt of written notice of the breach from the non-breaching party; and
  - v. Upon sixty (60) days prior written notice to the other party of its intent not to renew this Agreement.
- B. In the event of termination pursuant to Section 9A above, Keenan shall be paid for the full value of all Services rendered through the date of termination.

## 10. **SOLICITATION OF EMPLOYEES**

During the Term, and for a period of twelve (12) months following any termination or expiration of the Agreement, neither party shall solicit the employment or engagement of any employee or agent of the other party that interacted directly with the soliciting party; provided, however, the foregoing provision shall not prevent either party from soliciting for employment or employing an employee who responds to general solicitations or advertisements in periodicals including

newspapers and trade publications, so long as such solicitations or advertisements are not specifically directed at the employee(s) of the other party.

11. **PROPRIETARY INTERESTS**

Keenan shall retain the copyright and the sole right of ownership to the form and format of any report, tool, schedule, exhibit, assessment, analysis, or other deliverable, that is created or developed by Keenan in performing the Services and provided to Client by Keenan in any media whatsoever. Client shall, however, remain the owner of the content of any such deliverable and any Client data or information that was provided to Keenan for the performance of the Services. Any deliverable created by Keenan for Client shall be used for Client's internal purposes and shall not be used, without the written consent of Keenan, for Client's commercial gain, nor shall it be distributed to or shared by Client with any third person, except as may be necessary to accomplish the intent and purpose of this Agreement.

12. **MARKETING**

Keenan may use Client's name in its representative client list. Keenan shall obtain Client's written consent before using Client's name for any other purpose.

13. **OTHER RELATIONSHIPS**

- A. Keenan or its affiliates may provide Client or others with other services or insurance coverage not provided in this Agreement and may receive compensation related to such other services which may include, without limitation, loss control services, joint powers administration, insurance brokerage services, securing reinsurance, claims administration, investigative services, financial processing and other related services.
- B. Keenan and/or its affiliate may provide services for other entities that also provide services to and/or contract with Client's insurance program (e.g., insurers and reinsurers and/or other coverage providers) and to the extent that such services are provided, Keenan will be separately compensated for those services.
- C. The Services provided to Client are non-exclusive and Keenan reserves the right to provide the same or similar services to other clients who may be in the same industry, business, or service as Client.

14. **CONFIDENTIALITY**

- A. As a result of their relationship under this Agreement each party may gain access to confidential information concerning the other. For purposes of this Agreement, the term "Confidential Information" includes, without limitation, i) any information or data about a party's business operations, clients, employees, marketing plans, method of operation, trade secrets, and financial performance; ii) information about Client's employees, such as name, address, social security number, compensation, and medical history, and iii) any other information about a party that is not available to the general public. Neither party shall, without the written consent of the other release, disclose, or disseminate the other party's Confidential Information except as is necessary for the performance of the Services.



- B. In the event that either party becomes the subject of a subpoena or court order compelling the disclosure of the other party's Confidential information, that party shall immediately notify the other so that the party whose Confidential Information is being sought can take such action as may be necessary to prevent or limit the release of its Confidential Information.
- C. Neither party shall be deemed to be in breach of this Section 14 if it has notified the other before it releases the Confidential Information pursuant to a subpoena or court order, and the party whose Confidential Information was requested fails to provide, before the deadline for disclosure, a copy of court order quashing the subpoena or otherwise limiting the original demand for the Confidential Information.

15. **GENERAL**

- A. This Agreement, its recitals and all attached exhibits constitute the entire understanding of the parties related to the subject matter of the Agreement, and supersede all prior and collateral statements, presentations, communications, reports, agreements or understandings, if any, related to such matter(s).
- B. The obligations set forth in this Agreement other than Keenan's obligation to perform the Services and Client's responsibility to pay for the Services shall survive the expiration or termination of this Agreement. Nothing in this Section 15.B. shall, however, be interpreted as relieving Client of its obligation to pay for any Services rendered by Keenan prior to the termination date of this Agreement.
- C. This Agreement is made for the benefit of the parties and is not intended to confer any third party benefit or right. The enforcement of any remedy for a breach of this Agreement may only be pursued by the parties to this Agreement.
- D. No modification or amendment to this Agreement shall be binding unless in writing and signed by authorized representatives from both parties. Any waiver or delay by a party in enforcing this Agreement shall not deprive that party of the right to take appropriate action at a later time or due to another breach. This Agreement shall be interpreted as if written jointly by the parties.
- E. Any provision determined by a court of competent jurisdiction to be partially or wholly invalid or unenforceable shall be severed from this Agreement and replaced by a valid and enforceable provision that most closely expresses the intention of the invalid or unenforceable provision. The severance of any such provision shall not affect the validity of the remaining provisions of this Agreement.
- F. Neither party shall be liable or deemed to be in default for any delay or failure in performance under this Agreement resulting, directly or indirectly, from acts of God, civil or military authority, acts of public enemy, war, accidents, fires, explosions, earthquakes, floods, power outages, failure of computer systems, machinery or supplies, vandalism, strikes, or other work interruptions, or any similar or other cause that is beyond the reasonable control of either party. Each party shall make a good faith effort to perform under this Agreement in the event

of any such circumstances, and shall resume full performance of its contract duties once the cause of the delay has abated.

- G. All notices hereunder shall be in writing and shall be sent to the parties at the addresses as set forth below, or to such other individual or address as a party may later designate. Notices shall be sent via personal delivery, courier service, United States mail (postage pre-paid, return receipt requested), express mail service, electronic mail, or fax. Notice shall be effective when delivered, or if refused, when delivery is attempted. Notices delivered during non-working hours shall be deemed to be effective as of the next business day.

If the notice relates to a legal matter or dispute, a copy shall be sent to:

**Keenan and Associates**  
**Attn: Legal Department**  
**2355 Crenshaw Blvd., Ste. 200**  
**Torrance, CA 90501**

*Signature page to follow.*





This Agreement may be executed in counterparts and by fax signatures and each shall be deemed to be an original. Each person signing this Agreement on behalf of a party represents and warrants that he or she has the necessary authority to bind such party and that this Agreement is binding on and enforceable against such party.

<b><u>Alameda County Schools Insurance Group</u></b>		<b><u>Keenan &amp; Associates</u></b>	
<b><u>Signature:</u></b>		<b><u>Signature:</u></b>	
<b><u>By:</u></b>	<b>Kimberly Dennis</b>	<b><u>By:</u></b>	<b>Tim Hall</b>
<b><u>Title:</u></b>	<b>Executive Director</b>	<b><u>Title:</u></b>	<b>Vice President</b>
<b><u>Address:</u></b>	<b>PO Box 2487</b>	<b><u>Address:</u></b>	<b>2355 Crenshaw Blvd., Ste. 200</b>
	<b>Dublin, CA 94568</b>		<b>Torrance, CA 90501</b>
<b><u>Telephone:</u></b>		<b><u>Telephone:</u></b>	<b>(310) 212-0363, ext. 2726</b>
<b><u>Email:</u></b>	<b>kdennis@acsig.com</b>	<b><u>Email:</u></b>	<b>kdimonte@keenan.com</b>
<b><u>Attention:</u></b>	<b>Kimberly Dennis</b>	<b><u>Attention:</u></b>	<b>Kathy DiMonte</b>



## EXHIBIT A

### **Keenan's Services\***

#### **Property and Liability Inspection and Audit Program**

An on-site inspection of sites owned/operated by member Districts should be conducted at least every two (2) years by a qualified third-party Loss Prevention Specialist. In addition, member Districts should conduct periodic, regular self-inspections. The self-inspection conducted by District personnel should include documentation of all findings and recommended corrective action.

The purpose of the inspection program is to identify and control hazards before people are injured or losses occur. This can help to reduce the frequency and severity of claims and to mitigate the losses resulting from known liability exposures. An inspection conducted by a knowledgeable person, with the results communicated properly to management, conveys recognition of the hazards.

#### **Inspection Services**

Keenan's property and liability inspection program meets the Northern California ReLiEF (NCR) guidelines. Documentation will be provided in an inspection report that lists hazards identified.

#### **Value**

The inspection process has moved forward to focus on High Priority loss exposures and District Wide recommendations while adhering to the NCR Guidelines regarding the number of sites inspected. Value to member Districts will be enhanced by the evolution of the process and focus on the past loss drivers and a more focused inspection process.

#### **Report Format**

Keenan has invested in report-writing software that allows us to upload findings directly from your sites during the physical inspection. An email of immediate hazards can also be sent to District personnel during the inspection process. The system is now robust enough to photograph Medium Priority findings in addition to High Priority findings, for District review as part of the physical inspection. Keenan will continue to provide reports to you in a user-friendly format. The report is Web-based and will be accessible through the P&C Bridge. It can be downloaded into a PDF file or an Excel file, which will give the capability to sort by a number of criteria.

#### **Areas Inspected**

All school sites, District Offices, and Maintenance & Operations facilities will be visually inspected. Also included are adjacent areas to the sites for identification of any potential fire, water damage or student injury exposure to the District. A review of recent Property & Liability claim activity will be reviewed with each District prior to the inspection. NCR JPA pool trends will be reviewed to determine areas that may be impacting individual JPA pools. Areas to be inspected include the following:

### **Playground Equipment**

Keenan will conduct an inspection of general conditions of the playground equipment with attention to:

1. Swing chairs
2. Swing pivot connections
3. Swing seats
4. Chains on any other apparatus such as ring sets and climbers, paying attention to end links and any other point of pivot or wear.
5. Movable apparatus connection points
6. Tread surfaces of ladders on slides and any other climbing apparatus.
7. Surfaces of slide bedways, slide rails teeter-totter seats, merry-go-round seats or any other surface that children regularly contact on the equipment.
8. Bolts and other fasteners for all connecting points on assembled equipment and checking to be sure bolts are not too long and extend into playing areas.
9. Wood equipment, especially for dry rot, deterioration, and splinters.
10. Playground fall protection

### **Athletic Equipment**

Athletic equipment is similar in nature to playground equipment and will be inspected accordingly. Attention will be given to connections, pivot points, tread surfaces and surfaces that regularly contact the body. Weight equipment cables will be inspected for wear or fraying, and equipment joint welds will be checked for cracking.

### **Facilities Housing Playground & Athletic Equipment**

- Fields: Check for conditions of walkways, exposed roots, gopher holes, potholes, broken glass or other debris.
- Outside Courts: Check all surface conditions with attention to potholes, large cracks, raised surfaces and worn areas.
- Athletic Fields: Check for field conditions as noted under the field section. Check the condition of bleachers (seats, walkways side and back rails), player benches, field fencing and backstops.
- Swimming Pools: Check for clearly visible lifesaving equipment, emergency telephone numbers, pool rules and pool depth markings. Check the conditions of deck walking surfaces, bond beams, and stairs to lifeguard chairs, stairs to dive boards, dive board surfaces, pool fencing and bleachers. Inspect wet area electrical outlets for Ground Fault Interrupters. If the pool is indoors, check the condition of exits and exit lighting.
- Gyms: Check the conditions of exits, exit ways, exit lighting, emergency lighting, bleachers and cables supporting movable basketball hoops.
- Multi-Purpose Room: Same as Gyms.

### **Industrial Arts**

Inspect all shops with attention to:

1. Machine guarding
2. Exits
3. Housekeeping
4. Storage of flammable liquids
5. Conditions of electrical power cords
6. Conditions of hand power tools
7. Electrical equipment and connections
8. Ventilation
9. Fire extinguishers
10. Student/Guest use of personal protective equipment

### **Home Economics**

Inspect cooking and sewing rooms with attention to:

1. Machinery electrical wiring and connections
2. Floor and wall electrical outlets
3. Natural gas connections
4. Dryer venting
5. Accumulation of lint and other combustible debris
6. Cooking exhaust
7. Fire extinguishers

### **Public Assembly Areas**

Inspect multi-purpose rooms, cafeterias, theaters, gyms and other public assembly areas. Include inspection of:

1. Exits
2. Panic hardware
3. Exit lighting
4. Emergency lighting for installation and testing
5. Posting of maximum occupancy signs

### **Science Labs**

Special attention is given to eye protection for students and emergency response equipment such as:

1. Eye wash stations
2. Deluge showers
3. Fire blankets and fire extinguishers

Attention is also focused on overall laboratory conditions such as size and number of students regarding emergency egress, ventilation-both local and general, etc.

### **Follow-up Audit**

Northern California ReLiEF guidelines require a follow-up audit. After the inspection has been completed and the reports delivered, there will be a follow-up audit 90-120 days after the inspection. An advisor will visit the member Districts and meet with appropriate personnel to determine the progress being made regarding the recommended high priority corrective actions noted in the inspection report.

### **Self-Inspection**

Documentation for self-inspections can be accomplished using inspection check sheets with a space for corrective action taken. The inspection will assist the districts in developing a self-inspection check sheet that adequately identifies areas that should be inspected by District personnel. This sheet should contain a list of items to be inspected, a rating section for each item inspected (a section for comments) and section to list corrective action taken. The self-inspections should be performed regularly and include:

- Playground & Athletic Equipment
- Facilities Housing Playground & Athletic Equipment
- Public Assembly Areas
- Industrial Arts
- Home Economics
- Science Laboratories
- Common Areas & Grounds

### **Limitations**

Keenan's inspection services are intended to help clients identify and mitigate hazards and potential liability exposures. While we are confident that our services will help our clients create a safer environment, we do not represent or guarantee that we will be able to identify all potential hazards or offer a fail-safe mechanism for dealing with them. Consequently, we make no promise or representation that clients will recognize improved loss experience or premium savings as a result of these services.

Keenan's inspection services are not intended to substitute for regular, ongoing inspection and maintenance of a client's premises or equipment. Nor are they intended to replace any required inspection or service that is to be routinely performed by licensed or certified service professionals (e.g., HVAC contractor, electrician, plumber, elevator service personnel, etc.).

\*The goal of Keenan's loss control services is to (i) promote safety awareness, (ii) assist in the identification of conditions which may pose a risk of injury, and (iii) provide recommendations and/or suggestions to help mitigate the risks identified. While we are confident that Keenan's loss control services will help you to create a safer environment, we do not suggest that we will be able to identify all risk exposures or that following our recommendations will eliminate all risk of injury or result in improved loss experience.

## EXHIBIT B

### FEE SUMMARY

Keenan will conduct the above-described ReLiEF Inspection and Follow Up Audit program for the following member Districts for two (2) years for a total fee of twenty-seven thousand, two hundred dollars (\$27,200.00):

- Alameda County Office of Education
- Albany City Unified School District
- Dublin Unified School District
- Emery Unified School District
- Piedmont Unified School District

An annual fee of thirteen thousand, six hundred dollars (\$13,600.00) will be invoiced on January 1 for each year of the agreement, beginning January 1, 2025.

During the term of the Agreement, if new sites open, or existing sites close, the fee will be adjusted accordingly.

### Fee includes:

- ◆ Professional Time
- ◆ Preparation and Scheduling
- ◆ Travel Time
- ◆ Follow Up Analytical Report
- ◆ Clerical Support/Word Processing
- ◆ All Expenses Associated with Program

Payment for Services shall be due upon receipt of Keenan's invoice. Any balance not paid within thirty (30) days following the date on the invoice shall be deemed late. Interest on any late payment shall accrue, as of the date of Keenan's original invoice, at the rate of 1½ percent per month, or the maximum interest rate permitted by applicable law, whichever is lower. Keenan has the right to suspend performance of its Services if any balance remains unpaid for more than sixty (60) days from the date of the invoice.



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P.O. Box 2487

Dublin, CA 94568

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Fax (925) 225-0653

[www.acsig.com](http://www.acsig.com)

### **Executive Summary: Dispute Resolution Policy**

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: Dispute Resolution Policy

The California Association of Joint Powers Authorities (“CAJPA”) Accreditation Standards require that a JPA maintain a Dispute Resolution Policy.<sup>1</sup> That Policy should be regularly reviewed by the Executive Committee. ACSIG’s Dispute Resolution Policy is included in this packet. No changes are proposed.

The Executive Committee will be asked for a recommendation to the Full Board.

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<sup>1</sup> See

<https://cdn.ymaws.com/www.cajpa.org/resource/resmgr/files/accreditation/AccreditationStandards0101202.pdf>



## DISPUTE RESOLUTION

When a dispute arises between the Authority and a member, the following procedures are followed:

- a) Request for Reconsideration. The member will make a written request to the Authority for the appropriate Committee to reconsider their position, citing the arguments in favor of the member and any applicable case law that applies. The member can also, re quest a personal presentation to that Committee, if it so desires.
- b) Board Appeal. The Board responsible for the program or having jurisdiction over the decision in question will review the matter and reconsider the Authority's position. This Board appeal process is an opportunity for both sides to discuss and substantiate their positions based upon legal arguments and the most complete information available. If the member requesting reconsideration is represented on the Board having jurisdiction, that Board member shall be deemed to have a conflict and shall be excluded from any vote.
- c) Executive Committee Appeal. If the member is not satisfied with the outcome of the committee appeal, the matter will be brought to the Executive Committee for reconsideration upon request of the member. If the member requesting reconsideration is represented on the Executive Committee, that Executive Committee shall be deemed to have conflict and shall be excluded from any vote.
- d) Arbitration. If the member is not satisfied with the outcome of the Executive Committee appeal, the next step in the appeal is arbitration. The arbitration, whether binding or non-binding, is to be mutually agreed upon by the parties. The matter will be submitted to a mutually agreed arbitrator or panel of arbitrators for a determination. If Binding Arbitration is selected, then of course the decision of the arbitration is final. Both sides agree to abide by the decision of the arbitrator. The cost of arbitration will be shared equally by the involved member and the Authority.
- e) Litigation. If, after following the dispute resolution procedure paragraphs A – D, either party is not satisfied with the outcome of the non-binding arbitration process, either party may consider litigation as a possible remedy to the dispute.





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### Executive Summary: Underwriting Policy

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: Underwriting Policy

The California Association of Joint Powers Authorities (“CAJPA”) Accreditation Standards require that a JPA maintain a process for developing and monitoring its underwriting policies and processes.<sup>1</sup> That Policy should be regularly reviewed by the Executive Committee. ACSIG’s Underwriting Policy is included in this packet. No changes are proposed.

The Executive Committee will be asked for a recommendation to the Full Board.

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<sup>1</sup> See

<https://cdn.ymaws.com/www.cajpa.org/resource/resmgr/files/accreditation/AccreditationStandards0101202.pdf>

## **UNDERWRITING POLICY**

### **Objective**

Alameda County Schools Insurance Group has established underwriting criteria for the purpose of marketing to prospective members. Underwriting information is also used for rate making/premium calculation, measuring member performance, and calculating dividends or assessments based upon equity levels. Underwriting standards and guidelines are outlined in various governing documents, including the JPA agreement, By-Laws and ACSIG Policies. This underwriting Policy provides a summary and highlights much of the criteria utilized to complete the underwriting process.

### **Underwriting Function/Mission**

Establishing underwriting criteria ensures that all ACSIG coverage programs are analyzed for risk exposures, funding requirements, dividends and assessment calculations, risk retention levels, compatibility between members and serviceability by staff. Adherence to these Board approved standards and guidelines guarantees the continued financial viability and security of ACSIG.

### **New Members**

The guidelines for admittance of new members to ACSIG are set forth in the Joint Powers Agreement and By-Laws. Membership eligibility requires the public entity be domiciled in Alameda County, or in the general geographic area reasonably serviceable from the County. Approval by two-thirds of all members of the Board is required. Applicants accepted for membership must participate in the Liability or Workers Compensation pooled coverage programs. The applicant agrees to participate as a member for a minimum of three consecutive years.

### **Application Process**

An applicant for membership must complete ACSIG's "risk questionnaire". It solicits specific information to assess the applicants risk exposure. Included is the following financial information:

- a. Underwriting data for the current year, including payroll, audited financial statements, budget and other financial data requested;
- b. Payrolls for the previous five years;

- c. Loss history for the previous five years;
- d. Any recent claim or actuarial studies completed for the coverage programs for which the applicant applies.

In addition, the applicant must submit to an actuarial study in the format required by ACSIG and pay an application fee as determined by the Board.

### Underwriting Guidelines

Any prospective member, including existing members not participating in a program, must meet the following minimum underwriting guidelines:

- a. Have a loss rate calculated for the past three years that not exceed the average loss rate of the current members;
- b. Demonstrate a commitment to support risk management and safety programs to control or prevent claims;
- c. Accept a minimum deductible of \$25,000 if joining the liability program.

### **Rate Setting/Funding Requirements**

The liability and Workers Compensation programs will be fully funded each year after completion of an independent actuarial study. Rates are established based upon multiple factors, including:

- Payroll exposure
- Loss rates
- Excess rates
- Administrative expense
- A margin for contingency as prescribed in ACSIG's Target Equity Policy (minimum 60% confidence level)

Although ACSIG's coverage programs are based upon risk sharing among its members, to encourage accountability for losses, premiums are adjusted after the application of an experience modification factor calculated by the actuary. In addition, the Liability program employs a retrospective premium formula that provides for the return of premium credits, or assessment of premium debits based upon the actual claim experience of both the individual members and the entire group.

## **Dividend/Assessment**

The Joint Powers Agreement authorizes the distribution of dividends or collection of assessments based upon the financial position of each fund at the close of the fiscal year. The Board has adopted a Target Equity Policy that governs the minimum equity balances required before consideration of any dividend. The Policy also requires a program year be at least five years old before being considered for a dividend distribution.

## **Periodic Review**

This Underwriting Policy is hereby established as set forth above, and will be periodically reviewed by the Board at least once every three years. The Board may delegate the underwriting function as outlined in this Policy to the Executive Committee, Full Board or any other committee established for the sole purpose of addressing underwriting issues.



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### Executive Summary: Conflict of Interest Code

To: ACSIG Executive Committee  
From: Kimberly. Dennis  
Date: May 16, 2024  
Subj.: Conflict of Interest Code

The California Association of Joint Powers Authorities (“CAJPA”) Accreditation Standards require that a JPA maintain a written conflict of interest policy that is reviewed annually by the Executive Committee.<sup>1</sup> The ACSIG Conflict of Interest Code is included in this packet. No changes are proposed.

The Executive Committee will be asked for a recommendation to the Full Board.

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<sup>1</sup> [https://cdn.ymaws.com/www.cajpa.org/resource/resmgr/files/accreditation/20.\\_Appendix\\_Q\\_-\\_Sample\\_Conf.pdf](https://cdn.ymaws.com/www.cajpa.org/resource/resmgr/files/accreditation/20._Appendix_Q_-_Sample_Conf.pdf)



## Alameda County Schools Insurance Group

### CONFLICT OF INTEREST CODE

The Political Reform Act, Government Code Sections 81000 et seq., requires state and local government agencies to adopt and promulgate Conflict of Interest Codes. The Fair Political Practices Commission has adopted a resolution, 2 Cal. Adm. Code Section 18730, which contains the terms of a standard Conflict of Interest Code, which can be incorporated by reference and which may be amended by the Fair Political Practices Commission to conform to amendments in the Political Reform Act after public notice and hearings. Therefore, the terms of 2 Cal. Adm. Code Section 18730 and any amendments to it duly adopted by the Fair Political Practices Commission, along with the attached Appendix in which officials and employees are designated and disclosure categories are set forth, are hereby incorporated by reference and constitute the Conflict of Interest Code of the Alameda County Schools Insurance Group.

Pursuant to Section 4 (A) of the standard Code, designated employees shall file Statements of Economic Interests with the Agency. Upon receipt of the statements of the members of the Board, the agency will retain the original statements.

**APPENDIX A**

**DESIGNATED EMPLOYEES**

**DISCLOSURE CATEGORIES**

Members of the Board	All
Alternates	All
Administrator	All
Consultants *	All
General Counsel	All
Insurance Broker	All
Claims Manager	All
Risk Manager	All

**DISCLOSURE CATEGORIES**

1. Investments and business positions in business entities, and sources of income, of the type to contract with the agency to supply materials, commodities, supplies, books, machinery, vehicles or equipment utilized by the agency.
2. Investments and business positions in business entities, and sources of income, which are contractors, or subcontractors, engaged in the performance of work or services of the type utilized by the agency, including but not limited to, insurance companies, carriers, holding companies, underwriters, agents or accounting firms.
3. Investments and business positions in business entities, and sources of income, which have filed claims, or have claims pending against the agency.
4. Investments and business positions in business entities, and sources of income, from banks or savings and loans.
5. Investments and business positions in, and income from, entities in which the Authority is empowered to invest its funds.
6. Interests in commercial real property (or interests in real property used for commercial leasing purposes).
  - With respect to Consultants, the Chairperson of the Board, in the absence of an Administrator, however, may determine in writing that a particular consultant, although a “designated person”, is hired to perform a range of duties that are limited in scope and thus is not required to comply with the disclosure requirements described in this section. Such determination shall include a description of the consultant’s duties and, based upon that description, a statement of the extent of disclosure requirements. A copy of this determination shall be retained by Alameda County Schools Insurance Group. Nothing herein excuses any such consultant from any other provision of the Conflict of Interest Code.

## **WRITTEN EXPLANATION OF REASONS FOR DESIGNATIONS AND DISCLOSURE RESPONSIBILITIES**

### **DESIGNATIONS**

The position of Board Member, Administrator and Consultants have been designated as those positions subject to the provisions of the Conflict of Interest code in that those positions are the only positions that have any substantial responsibility relative to the Alameda County Schools Insurance Group decision making process or policy. The term consultant includes the insurance brokers, the general counsel, and the risk manager and the claims administrator even though said positions are separately specified as well.

### **DISCLOSURE RESPONSIBILITIES**

The categories relative to the types of interests that must be disclosed are based upon the types of financial interests relevant to the ACSIG business, which is confined to providing various types of insurance coverage to local public entities.





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### **Executive Summary: Authorization of Signatures**

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: Authorization of Signatures

The California Association of Joint Powers Authorities (“CAJPA”) Accreditation Standards require that a JPA must designate those authorized to sign documents on behalf of the JPA. This authorization should be reviewed regularly. Currently, the Executive Director and Board President are designated as authorized signers. No changes are proposed.

The Executive Committee will be asked for a recommendation to the Full Board.



Authorization of Signatures  
May 16, 2024

The authorized signers on behalf of ACSIG are Kimberly Dennis, Executive Director and Dr. Kevin Collins, Board President.



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### Executive Summary: Posting and Mailing Address

To: ACSIG Executive Committee  
From: Kimberly Dennis  
Date: May 16, 2024  
Subj.: Posting and Mailing Address

As a general administration matter, and to comply with The California Association of Joint Powers Authorities ("CAJPA") Accreditation Standards, the official ACSIG mailing and posting address must be reviewed and approved annually. No changes are proposed.

**Mailing:**

Alameda County Schools Insurance Group  
PO Box 2487  
Dublin, CA 94510

**Posting:**

Alameda County Office of Education  
313 W. Winton Avenue  
Hayward, CA 94544

The Executive Committee will be asked for a recommendation to the Full Board.