



**Alameda County Employees' Retirement Association  
BOARD OF RETIREMENT**

**RETIREES COMMITTEE/BOARD MEETING  
NOTICE and AGENDA**

**THIS MEETING WILL BE CONDUCTED VIA TELECONFERENCE PER GOV'T CODE § 54953(e)**

**ACERA MISSION:**

**To provide ACERA members and employers with flexible, cost-effective, participant-oriented benefits through prudent investment management and superior member services.**

**Wednesday, December 1, 2021  
10:30 a.m.**

<b>ZOOM INSTRUCTIONS</b>	<b>COMMITTEE MEMBERS</b>	
The public can view the Teleconference and comment via audio during the meeting. To join this Teleconference, please click on the link below. <a href="https://zoom.us/join">https://zoom.us/join</a> Meeting ID: 831 5019 6554 Password: 652927 Call-in Number: 1 669 900 6833 For help joining a Zoom meeting, see: <a href="https://support.zoom.us/hc/en-us/articles/201362193">https://support.zoom.us/hc/en-us/articles/201362193</a>	<b>LIZ KOPPENHAVER, CHAIR</b>	<b>ELECTED RETIRED</b>
	<b>HENRY LEVY, VICE CHAIR</b>	<b>TREASURER</b>
	<b>KEITH CARSON</b>	<b>APPOINTED</b>
	<b>DARRYL L. WALKER</b>	<b>ELECTED GENERAL<sup>1</sup></b>
	<b>GEORGE WOOD</b>	<b>ELECTED GENERAL</b>

This is a meeting of the Retirees Committee if a quorum of the Retirees Committee attends, and it is a meeting of the Board if a quorum of the Board attends. This is a joint meeting of the Retirees Committee and the Board if a quorum of each attends.

The order of agenda items is subject to change without notice. Board and Committee agendas and minutes, and all documents distributed to the Board or a Committee in connection with a public meeting (unless exempt from disclosure), are available online at [www.acera.org](http://www.acera.org).

*Note regarding public comments:* Public comments are limited to four (4) minutes per person in total.

*Note regarding accommodations:* The Board of Retirement will provide reasonable accommodations for persons with special needs of accessibility who plan to attend Board meetings. Please contact ACERA at (510) 628-3000 to arrange for accommodation.

<sup>1</sup> Trustee Walker is filling the vacancy created by Trustee Rogers' retirement. See Gov't Code §§ 31524, 31520.1(b).

# ***RETIREES COMMITTEE/BOARD MEETING***

NOTICE and AGENDA, Page 2 of 3 – Wednesday, December 1, 2021

**Call to Order:** 10:30 a.m.

**Roll Call**

**Public Input (Time Limit: 4 minutes per speaker)**

## **Action Items: Matters for Discussion and Possible Motion by the Committee**

### **1. Adoption of Medicare Part B Reimbursement Plan Benefit for 2022**

Discussion and possible motion to recommend that the Board of Retirement continue to provide Medicare Part B Reimbursement Plan (MBRP) benefits to current eligible retirees at the lowest standard monthly premium rate.

- Kathy Foster  
- Segal

#### **Recommendation**

Staff recommends that the Retirees Committee recommend to the Board of Retirement to continue to provide the Medicare Part B Reimbursement Plan (MBRP) benefit to eligible retirees in 2022, and approve the reimbursement based on the lowest standard monthly Medicare Part B premium at the rate of \$170.10. The MBRP benefit is a non-vested benefit funded by contributions from ACERA Employers to the 401(h) account. After contributions are made, in accordance with the County Employees Retirement Law, ACERA treats an equal amount of Supplemental Retiree Benefit Reserve assets as employer contributions for pensions.

### **2. Adoption of Updates to Appendix A of 401(h) Account Resolutions**

Discussion and possible motion to recommend that the Board of Retirement adopt revisions to 401(h) Account Resolution 07-29, Appendix A, amended to reflect Plan Year 2022 benefit amounts.

- Kathy Foster

#### **Recommendation**

Staff recommends that the Retirees Committee recommend to the Board of Retirement (Board) to adopt the revised and updated Appendix A to Resolution No. 07-29, which reflects the changes approved by the Board to the Monthly Medical Allowance amounts for Group and Individual Plans as well as the Retiree Health Benefit contribution amounts for Plan Year 2022.

# ***RETIREES COMMITTEE/BOARD MEETING***

NOTICE and AGENDA, Page 3 of 3 – Wednesday, December 1, 2021

## **Information Items: These items are not presented for Committee action but consist of status updates and cyclical reports**

### **1. Presentation on Hearing Aid Benefits**

Segal, ACERA's Benefits Consultant, will present information on available hearing aid benefits.

- Kathy Foster
- Segal

### **2. Annual Retired Member (Lump Sum) Death Benefit Report**

Staff will provide a report on the \$1,000 Retired Member (lump sum) Death Benefits paid in 2021. This benefit is funded by the Supplemental Retiree Benefit Reserve and is a vested benefit, as long as there are funds available.

- Jessica Huffman

### **3. Virtual Retiree Health and Wellness Fair Results and Open Enrollment Activity**

Staff will provide results of the Virtual Retiree Health and Wellness Fair and Open Enrollment activity for Plan Year 2022.

- Ismael Piña

### **4. Miscellaneous Updates**

Staff will update the Committee on any recent benefit issues affecting ACERA retirees.

- Kathy Foster
- Ismael Piña

## **Trustee Remarks**

## **Future Discussion Items**

- Annual Supplemental Cost of Living Adjustment (COLA)

## **Establishment of Next Meeting Date**

February 2, 2022, at 10:30 a.m.

## **Adjournment**



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MEMORANDUM TO THE RETIREES COMMITTEE

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DATE: December 1, 2021

TO: Members of the Retirees Committee

FROM: Kathy Foster, Assistant Chief Executive Officer 

SUBJECT: **Medicare Part B Reimbursement Plan Benefits for 2022**

The Centers for Medicare & Medicaid Services (CMS) announced the 2022 Medicare Part B premiums on November 12, 2021. Based on the Supplemental Retiree Benefit Reserve (SRBR) Policy, ACERA reimburses eligible retirees the lowest standard premium amount. Currently, ACERA is paying \$148.50 to eligible retirees as this was the lowest standard premium for all eligible recipients. The standard monthly premium for Medicare Part B enrollees will be \$170.10 for 2022, which is an increase of about 14.5%.

Attached is a letter from Richard Ward with Segal, ACERA's Benefits Consultant, which provides additional information regarding the 2022 Medicare Parts A and B premiums and deductibles. In addition, the table on page 3 of Segal's letter regarding the number of retirees at the CMS income levels is provided to give Trustees a sense of the impact of setting the Medicare Part B Reimbursement Plan (MBRP) amount at the lowest standard premium. Note that the income is only based on ACERA benefit amounts (for 2020), but provides figures reflecting out-of-pocket numbers the higher income groups may incur for their Medicare Part B premiums.

The number of current retirees receiving the MBRP benefit as of November 2021 is 5,795. If ACERA increases the MBRP benefit to \$170.10 for all retirees currently receiving this benefit, the estimated annual cost for 2022 is \$11,828,754. The estimated annual cost based on the same number of retirees and the 2021 benefit amount of \$148.50 is \$10,326,690. The difference in the estimated annual cost is \$1,502,064. These amounts will change for 2022 based on the number of eligible retirees receiving this benefit each payroll.

Recommendation

Staff recommends that the Retirees Committee recommend to the Board of Retirement to continue to provide the Medicare Part B Reimbursement Plan (MBRP) benefit to eligible retirees in 2022, and approve the reimbursement based on the lowest standard monthly Medicare Part B premium at the rate of \$170.10. The MBRP benefit is a non-vested benefit funded by contributions from ACERA Employers to the 401(h) account. After contributions are made, in accordance with the County Employees Retirement Law, ACERA treats an equal amount of Supplemental Retiree Benefit Reserve assets as employer contributions for pensions.

Attachment



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 Glendale, CA 91203-3338  
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November 19, 2021

Kathy Foster  
 Assistant Chief Executive Officer  
 ACERA  
 475 14<sup>th</sup> Street, Suite 1000  
 Oakland, CA 94612

**Re: Medicare Part A and B Premiums and Deductibles**

Dear Kathy:

**Medicare Part A Premiums**

Medicare Part A covers inpatient hospital, skilled nursing facility, and some home health care services. About 99% of Medicare beneficiaries do not pay a Part A premium since they have at least 40 quarters of Medicare-covered employment. If retirees need to purchase Part A, they will pay up to \$499 each month in 2022 versus up to \$471 in 2021.

**Medicare Part A Deductibles**

**Part A Deductible and Coinsurance Amounts for Calendar Years  
 2021 and 2022 Type of Cost Sharing**

Year	2021	2022
Inpatient hospital deductible	\$1,484	\$1,556
Daily coinsurance for 61 <sup>st</sup> – 90 <sup>th</sup> Day	\$371	\$389
Daily coinsurance for lifetime reserve days	\$742	\$778
Skilled Nursing Facility coinsurance (Days 21-100)	\$185.50	\$194.50

**Medicare Part B Premiums**

Retirees pay a premium each month for Medicare Part B medical insurance, which covers physicians' services, outpatient hospital services, certain home health services, durable medical equipment, and certain other items not covered by Part A. The final rates for Medicare Part B were announced by CMS on November 12, 2021 and will take effect January 1, 2022.

CMS announced that the annual deductible for all Part B beneficiaries will be \$233.00 in 2022, an increase of \$30.00 from the annual deductible of \$203.00 in 2021. Premiums for Medicare Advantage and Medicare Prescription Drug plans are already finalized and unaffected by this announcement.

In years where the Social Security Cost of Living Adjustment (COLA) is less than the dollar increase in Medicare Part B Premium there is a statutory "hold harmless" provision meant to protect retirees from the full increase of Part B premiums. Medicare Part B standard premiums are increasing by \$21.60 from \$148.50 in 2021 to \$170.10 in 2022, about a 14.5% increase. The COLA increase is 5.9% for 2022, averaging \$92 per month nationally, as reported by the Social Security National Press Office. The average monthly COLA increase is over four times the standard Part B premium increase for 2022.

Since 2007, beneficiaries with higher incomes have paid higher Part B monthly premiums. These income-related monthly adjustment amounts (IRMAA) affect about 7% of people nationally with Medicare. The 2022 Part B total premiums for high income beneficiaries are shown in the following table.

2020 File Individual Tax Return	2020 File Joint Tax Return	2020 File Married & Separate Tax Return	2022 Monthly Premium
\$91,000 or less	\$182,000 or less	\$91,000 or less	\$170.10
Above \$91,000 to \$114,000	Above \$182,000 to \$228,000	N/A	\$238.10
Above \$114,000 to \$142,000	Above \$228,000 to \$284,000	N/A	\$340.20
Above \$142,000 to \$170,000	Above \$284,000 to \$340,000	N/A	\$442.30
Above \$170,000 and less than \$500,000	Above \$340,000 and less than \$750,000	Above \$91,000 and less than \$409,000	\$544.30
\$500,000 or above	\$750,000 and above	\$409,000 and above	\$578.30

### Impact on ACERA Retirees

ACERA retirees enrolled in Kaiser Senior Advantage have their entire insurance premium covered by the Monthly Medical Allowance (MMA) if they have 20 years of service. The majority of these retirees will not pay out of pocket for Medicare premiums in 2022. Most retirees have the 40 quarters required for fully subsidized Part A. If continued in 2022, ACERA's Medicare Part B Reimbursement Plan reimburses Part B premiums up to the standard amount, which covers the entire Part B premium for most retirees. A smaller proportion of retirees are required to pay the IRMAA.

The following table summarizes out of pocket costs to retirees based on income, using ACERA retirement income as Individual Taxable Income.

<b>2020 File Individual Tax Return</b>	<b>Retirees Over Age 65</b>	<b>% of Retirees</b>	<b>2022 Monthly Premium</b>	<b>Cost to Retiree*</b>
\$91,000 or less	6,621	82%	\$170.10	\$0.00
Above \$91,000 to \$114,000	628	8%	\$238.10	\$68.00
Above \$114,000 to \$142,000	437	5%	\$340.20	\$170.10
Above \$142,000 to \$170,000	181	2%	\$442.30	\$272.20
Above \$170,000 and less than \$500,000	209	3%	\$544.30	\$374.20
\$500,000 or above	0	0%	\$578.30	\$408.20

\*The cost to the retiree is the IRMAA, which is the difference between the Part B premium and ACERA's reimbursement of the standard premium amount of \$170.10 per month.

Under the Medicare Part B Reimbursement Plan, the majority of ACERA's Medicare retirees will be able to avoid paying out of pocket to cover premiums in 2022 by enrolling in Kaiser Senior Advantage if they have 20 years of service.

By comparison, ACERA's Non-Medicare retirees enrolling in Kaiser will have a single retiree premium of \$843.16 of which \$593.73 is covered by the MMA, resulting in an out-of-pocket cost of \$246.43 per month.

Please feel free to call or email us with any questions or concerns you may have.

Sincerely,



Richard Ward FSA, FCA, MAAA  
Senior Vice President  
West Region Market Director, Public Sector

cc: Ismael Piña, ACERA  
Eva Hardy, ACERA  
Jessica Huffman, ACERA  
Stephen Murphy, Segal  
Jessica Kuhlman, Segal  
Michael Szeto, Segal



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MEMORANDUM TO THE RETIREES COMMITTEE

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DATE: December 1, 2021

TO: Members of the Retirees Committee

FROM: Kathy Foster, Assistant Chief Executive Officer 

SUBJECT: **Revision of Resolution No. 07-29, Appendix A**

In February 2007, the ACERA Board of Retirement (Board) passed Resolution No. 07-29 - 401(h) (Resolution). That Resolution set forth the legal requirements and procedural operations of the 401(h) accounts managed by ACERA. The Resolution consists of a detailed recitation of the requirements under the Internal Revenue Code that ACERA and its Participating Employers must satisfy to properly operate the 401(h) accounts.

Attached to Resolution No. 07-29 is Appendix A, which sets forth the cost and eligibility requirements for the Retiree Health Benefits (RHBs) paid to ACERA retirees through the 401(h) accounts. Those benefits include:

1. Monthly Medical Allowance
2. Medicare Part B Premium Reimbursement
3. Dental Care Contribution
4. Vision Care Contribution

Throughout the course of calendar year 2021, as is done each year, the Retirees Committee (Committee) and the Board have evaluated and approved changes to the Monthly Medical Allowance (MMA) and the contribution amounts associated with the RHBs for Plan Year 2022. The Board approved increasing the MMA for Group Plans and Individual Plans through the Health Exchange for early (non-Medicare) retirees living outside the HMO service area from its 2021 maximum amount of \$578.65 to \$596.73. The Board also approved increasing the MMA for Individual Plans through the Medicare Exchange from its 2021 maximum amount of \$443.28 to \$457.13. The pro-rated MMA distributions were also increased accordingly. The Board approved setting the cost of the Delta Dental Care DPO plan at \$44.15 (the same amount as 2021), and the cost of the Delta Dental DMO plan at \$22.18 (the same amount as 2021). The Board approved a \$3.97 premium (the same amount as 2021) for the Vision Service Plan. Lastly, we anticipate the Board will approve the Medicare Part B Reimbursement Plan (MBRP) benefit of \$170.10 (the lowest standard monthly Medicare Part B premium rate) for 2022 (an increase in the premium rate) at the December 16, 2021 Board meeting.

Accordingly, in order for Resolution No. 07-29 to remain current for the upcoming 2022 Plan Year, Appendix A must be amended to reflect the decision regarding the MMA, Medicare Part B premium reimbursement, and dental and vision premium amounts as adopted by the Board for



Revision of Resolution No. 07-29, Appendix A

December 1, 2021

Page 2 of 2

2022. Staff has revised Appendix A and requests that the Board adopt the suggested changes. Attached to this memorandum for your review is a revised version of Resolution 07-29, Appendix A, that reflects the changes described above to the MMA and RHB premiums for Plan Year 2022.

Annually, Staff will request that the Committee and the Board approve modification of Appendix A so that the 401(h) Resolution accurately reflects the eligibility requirements and contributions for the upcoming Plan Year.

Recommendation

Staff recommends that the Retirees Committee recommend to the Board of Retirement (Board) to adopt the revised and updated Appendix A to Resolution No. 07-29, which reflects the changes approved by the Board to the Monthly Medical Allowance amounts for Group and Individual Plans as well as the Retiree Health Benefit contribution amounts for Plan Year 2022.

Attachment

ALAMEDA COUNTY EMPLOYEES' RETIREMENT ASSOCIATION  
 RESOLUTION # 07-29  
 401(h) ACCOUNT  
 APPENDIX A - AMOUNT OF BENEFITS FROM 401(h) ACCOUNT  
 FOR PLAN YEAR 2022

1. Monthly Medical Allowance

- Group Plans

The Monthly Medical Allowance ("MMA") is a subsidy amount covering all or a portion of the eligible retiree's health plan premiums when enrolled in an ACERA-sponsored health plan. Premium costs for an enrolled surviving spouse and dependents are not paid by ACERA and are deducted from the retiree's monthly retirement allowance. Premium costs that exceed the MMA are paid by the retiree and are deducted from the retiree's monthly retirement allowance. If premium costs for any retiree are less than the maximum MMA, no additional cash or other benefit shall be paid to the retiree.

- Individual Plans – Early (non-Medicare) Retirees Living Outside the HMO Service Area

The MMA is provided as a reimbursement for premiums, co-pays and deductibles for Individual Plans for retirees enrolled in a plan through the Health Exchange. The reimbursement amount will not exceed the total annual MMA amount.

- Individual Plans – Medicare Eligible Retirees

The MMA is provided as a reimbursement for premiums, co-pays and deductibles for Individual Plans for retirees enrolled in a Medicare plan through the Medicare Exchange. The reimbursement amount will not exceed the total annual MMA amount.

For the health Plan Year beginning February 1, 2022 for Group Plans and January 1, 2022 for Individual Plans and for all later years (unless and until amended by the Board of Retirement), the maximum MMA for Group Plans and Individual Plans provided through the Health Exchange for early (non-Medicare) retirees living outside the HMO service area is \$596.73 per month. The maximum MMA for Individual Plans for Medicare eligible retirees provided through the Medicare Exchange is \$457.13 per month. The MMA amounts that are paid to retirees based on years of service are set out below:

YEARS OF SERVICE	AMOUNT OF MONTHLY MEDICAL ALLOWANCE BENEFIT		
	<i>Group Plans</i>	<i>Individual Plans – Out-of-Service Area Early Retirees</i>	<i>Individual Plans – Medicare Eligible Retirees</i>
20 or more years or retired on service connected disability	\$596.73	\$596.73	\$457.13
15 through 19	\$447.55	\$447.55	\$342.85
10 through 14	\$298.37	\$298.37	\$228.57
Under 10	\$0	\$0	\$0

As a result of the Affordable Care Act, in 2014 ACERA's plans are required to be "retiree only plans" in order to provide reimbursement through a Health Reimbursement Account (HRA). In order to comply with this federal law, retirees who return to work for an ACERA Participating Employer for any amount of time on or after January 1, 2014, will not be eligible for medical plan and prescription drug plan reimbursements through a HRA during the time period they are working. This is because retirees who return to work (including retired annuitants) are considered "active employees" as defined by the Affordable Care Act, and therefore cause ACERA's plans to not meet the "retiree only" plan qualifications for benefits.

## 2. Medicare Part B Premium

The Medicare Part B premium that will be reimbursed for the calendar year beginning on January 1, 2022 is \$170.10 per month. ACERA shall reimburse only the lowest standard monthly Medicare Part B premium, and will not make any reimbursement of the income-related monthly adjustment amount of the Medicare Part B premium. No premium will be reimbursed to a retiree unless he or she provides proof to ACERA of enrollment in Medicare Part B. Premiums will only be reimbursed for retirees and not for spouse, dependents or survivors.

No Medicare Part D premiums will be reimbursed to retirees enrolled in Group Plans.

## 3. Dental Care

The dental care contribution is payment of the eligible retiree's Delta Dental premium when enrolled in the Delta Dental plan. Premium costs for an enrolled spouse and dependents are not paid by ACERA and are deducted from the retiree's monthly retirement allowance.

For the health Plan Year beginning February 1, 2022 and for all later years (unless and until amended by the Board), the monthly Delta Dental premiums paid by ACERA are as follows: for retirees enrolled in the Delta Dental DPO Plan, \$44.15; and for retirees enrolled in the Delta Dental DMO Plan, \$22.18.

## 4. Vision Care

The vision care contribution is payment of the eligible retiree's Vision Service Plan (VSP) premium when enrolled in the VSP plan. Premium costs for an enrolled spouse and dependents are not paid by ACERA and are deducted from the retiree's monthly retirement allowance.

For the health Plan Year beginning February 1, 2022 and for all later years (unless and until amended by the Board), the monthly VSP premium paid by ACERA is \$3.97.

## 5. Spouse, Dependents and Surviving Beneficiaries

ACERA shall not provide payment for any health or medical or other retiree health benefits to any spouse, dependent, or surviving beneficiary of a retired member. However, to the extent available from the applicable health plan or carrier, ACERA will allow the retired member to purchase for his or her spouse and dependents the same coverage as the member has through ACERA by paying the full premium cost of such coverage. A surviving beneficiary may purchase coverage available from the applicable health plan or carrier by paying the full premium cost of such coverage.



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MEMORANDUM TO THE RETIREES COMMITTEE

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DATE: December 1, 2021

TO: Members of the Retirees Committee

FROM: Kathy Foster, Assistant Chief Executive Officer 

SUBJECT: **Presentation on Hearing Aid Benefits**

Segal, ACERA's Benefits Consultant, will review the attached hearing aid benefits presentation, and discuss the following topics.

- Market analysis and cost
- ACERA's current hearing aid benefits
- Via Benefits hearing aid benefit
- Additional hearing aid providers

Attachment



Alameda County Employees'  
Retirement Association (ACERA)

# Hearing Aid Benefits

**ACERA Retirees Committee Meeting**

Presented on December 1, 2021  
Presented by Stephen Murphy and Michael Szeto

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# | Agenda

**Hearing Aid Market Analysis & Cost**

**Current Hearing Aid Benefits**

**Via Benefits Hearing Aid Benefit**

**Additional Hearing Aid Distribution Channels**

# Hearing Aid Market Analysis & Cost

## Market Analysis

- Based on data provided by the National Institute of Deafness and Other Communication:
  - Approximately one in three people between the ages of 65 to 74 will experience hearing loss
  - Nearly half of individuals older than age 75 will have difficulty hearing
- The most common hearing aid benefit among Segal's clients is a \$1,000 allowance per aid every three years

## Hearing Aid Costs

- The average cost of a single hearing aid is \$2,372, based on a 2019 survey conducted by Hearing Tracker
- Retail price for a pair of hearing aids vary from \$3,000 to more than \$5,000 per year
  - Price differentials depend on technology levels, features, and accessories/services



# Current Hearing Aid Benefits

ACERA's current hearing aid benefits are listed in the table below by each partner:

Hearing Aid Benefits <sup>1</sup>	Kaiser	UHC	Via Benefits <sup>2</sup>
Non-Medicare Plans	N/A	Up to \$5,000 hearing aid allowance / every 36 months	N/A
Medicare Plans	Up to \$1,000 hearing aid allowance per ear / every 36 months	N/A	Direct-to-consumer hearing aids starting at \$499

<sup>1</sup> Hearing Aid Benefits were listed in ACERA's 2021 Retiree Enrollment Guide

<sup>2</sup> Via Benefits offers hearing aid options through iHEAR



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# Via Benefits Hearing Aid Benefit

Via Benefits partners with iHEAR to provide direct-to-consumer hearing aid benefits:

- FDA-approved in-home hearing test kit for \$69
- Three (3) available FDA-approved hearing device models starting at \$499
  - Devices are delivered to the member for free
  - Hearing devices come pre-programmed or can be customized from the member's home
  - 10% off – lowest price guarantee
  - 60-day money back satisfaction guarantee
  - One-year warranty on hardware
  - Dedicated iHEAR support

# Additional Hearing Aid Distribution Channels

- ACERA's current dental and vision carriers offer access to discounted hearing aids listed in the table below:

Hearing Aid Carriers	General Benefits
Amplifon (via Delta Dental) <sup>2</sup>	<ul style="list-style-type: none"><li>• 62% average savings off retail aid pricing <sup>1</sup></li><li>• One-year of follow-up care for cleaning, adjustment, and other hearing aid services</li><li>• Two-year battery supply or charging station</li><li>• Three-year warranty with coverage of loss, repairs, or damage</li></ul>
TruHearing (via VSP) <sup>3</sup>	<ul style="list-style-type: none"><li>• 60% savings on latest brand-name hearing aids</li><li>• Three provider visits for fitting and adjustments</li><li>• 48 free batteries per hearing aid on all non-rechargeable aids</li><li>• Three-year manufacturer warranty for repairs and one-time loss and damage replacement</li></ul>

- The list below contains organizations recognized as leaders in providing hearing aid benefits:
  - AudioNet America
  - Epic Hearing
  - HearUSA
  - NationsHearing
  - Virtual Hearing Solutions

<sup>1</sup> Average Savings was included in Delta Dental's Brochure

<sup>2</sup> Hearing Aid Benefits were provided on Amplifon's website

<sup>3</sup> Average Savings and Hearing Aid Benefits were included in VSP's Brochure



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MEMORANDUM TO THE RETIREES COMMITTEE

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DATE: December 1, 2021

TO: Members of the Retirees Committee

FROM: Jessica Huffman, Retirement Benefits Manager 

SUBJECT: **Retired Member Lump Sum Death Benefits Paid in 2021**

In July 1992, the Board of Retirement adopted Government Code Section 31789.12 to provide a one-time Retired Member (lump sum) Death Benefit payment of \$1,000 to beneficiaries of retirees. For reciprocal members who did not render their last active service with an ACERA employer before retiring, ACERA will consider the death benefit payable by the reciprocal agency. If that agency pays less than \$1,000, ACERA will supplement that amount up to \$1,000. This is a vested benefit, per Government Code Section 31789.12, as long as there are funds available in the Supplemental Retiree Benefit Reserve (SRBR). This Code Section states:

*Notwithstanding Section 31789.1, the board may increase the sum payable pursuant to Section 31789.1 to one thousand dollars (\$1,000).*

*Upon adoption by any county providing benefits pursuant to this section, of Article 5.5 (commencing with Section 31610) of this chapter, the board of retirement shall, instead, pay those benefits from the Supplemental Retiree Benefits Reserve established pursuant to Section 31618.*

Over the twelve-month period December 1, 2020 through November 30, 2021, there were 386 retired member deaths with a total of 207 retired member lump sum death benefits paid. Out of this total, there were twelve retirees with reciprocity who did not render their last active service with an ACERA employer before retiring. The total amount of retired member lump sum death benefits paid from the SRBR was \$201,990.33. The reciprocal agencies paid a total of \$44,000.00 for the twelve retirees with reciprocity. The attached table shows the breakdown of the total number of death benefits paid and the amounts paid by month.

Attachment

**Total Death Benefits Paid  
for Period December 1, 2020 through November 30, 2021**

<b>MONTH</b>	<b>TOTAL LUMP SUM BENEFITS PAID</b>	<b>TOTAL LUMP SUM BENEFITS PAID WITH RECIPROCITY</b>	<b>ACERA PAID DEATH BENEFIT</b>	<b>RECIPROCAL AGENCY PAID DEATH BENEFIT</b>
December - 2020	15	1	<b>\$12,790.34</b>	<b>\$5,000.00</b>
January - 2021	15	2	<b>\$14,850.00</b>	<b>\$5,500.00</b>
February - 2021	14	1	<b>\$14,000.00</b>	<b>\$5,000.00</b>
March - 2021	11	2	<b>\$12,500.00</b>	<b>\$9,000.00</b>
April - 2021	19	0	<b>\$20,500.00</b>	<b>\$0.00</b>
May - 2021	18	1	<b>\$18,400.00</b>	<b>\$2,000.00</b>
June - 2021	17	0	<b>\$22,500.00</b>	<b>\$0.00</b>
July - 2021	13	0	<b>\$10,500.00</b>	<b>\$0.00</b>
August - 2021	15	1	<b>\$12,750.00</b>	<b>\$5,000.00</b>
September - 2021	22	0	<b>\$20,200.00</b>	<b>\$0.00</b>
October - 2021	34	2	<b>\$30,666.66</b>	<b>\$5,500.00</b>
November - 2021	14	2	<b>\$12,333.33</b>	<b>\$7,000.00</b>
<b>GRAND TOTAL</b>	<b>207</b>	<b>12</b>	<b>\$201,990.33</b>	<b>\$44,000.00</b>



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MEMORANDUM TO THE RETIREES COMMITTEE

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DATE: December 1, 2021

TO: Members of the Retirees Committee

FROM: Ismael Piña, Assistant Benefits Manager 

SUBJECT: **Virtual Retiree Health and Wellness Fair Results and Open Enrollment Activity**

Although restrictions were easing, the annual Retiree Health and Wellness Fair was held on October 28, 2021 again as a virtual event allowing members to go online to attend.

Attendees were logged on and ready to enjoy the opportunity to view live streaming presentations from REAC, ACRE, Kaiser, VSP, Delta Dental and Via Benefits. Both REAC and ACRE provided a short introduction and history of their associations. Other presentations from Kaiser, UnitedHealthcare, VSP, Delta Dental, Via Benefits, and Deferred Compensation were available for viewing by clicking on the various links. Vendors also provided information in areas ranging from financial, wellness, support services and discount programs. The webpage will continue to display the informational flyers and links to the various vendors' webpages and customer service contact information. For those who may have missed the presentations, these are available for on demand viewing by visiting the ACERA website.

Final counts show we averaged 204 viewers for the live stream presentations. In addition, there were 244 online visitors, who viewed the various items and clicked on links during the event. Our webpage continues to get visits daily by members seeking information on available coverage options.

A report on Open Enrollment forms received, and status of processing will be provided at the February Retirees Committee meeting.



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MEMORANDUM TO THE RETIREES COMMITTEE

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DATE: December 1, 2021

TO: Members of the Retirees Committee

FROM: Kathy Foster, Assistant Chief Executive Officer   
Ismael Piña, Assistant Benefits Manager 

SUBJECT: **Miscellaneous Updates**

This memo is to provide the Retirees Committee information on various monthly topics, which impact both retirees and ACERA Staff. This month's report provides an update on the retiree payroll deductions to pay premiums to the Operating Engineers Local 3 Union (OE3) Medical Plan.

Retirees enrolled in the OE3 medical plan were sent a letter on November 4<sup>th</sup> to inform them of the pre-payment needed to allow for premiums to remain current and prevent the assessment of late fees. They were offered the alternative to enroll in ACERA-sponsored plans during open enrollment, if they preferred to not make the pre-payment. One retiree contacted Staff to express displeasure with the pre-payment, but as of yet, the retiree has not filed a complaint in writing or enrolled in an alternative plan.

Staff is meeting with OE3 on December 7<sup>th</sup> to further discuss the pre-payment submissions and on-going payment and invoicing process.