

FRESNO CITY EMPLOYEES
HEALTH AND WELFARE TRUST



Park View Plaza
9 River Park Place East, Suite 220
Fresno, CA 93720

TELEPHONE (559) 499-2450
FAX (559) 499-2460

P.O. BOX 45018
FRESNO, CA 93718-5018

**Fresno City Employees Health & Welfare Trust
Agenda for the Regular Board Meeting
May 13, 2026**

General Meeting 8:30 AM

Location: Fresno City Hall, 2600 Fresno Street, Fresno CA 93721, Room 4017

<p>Employer Trustees-City of Fresno Georgeanne White, Chairperson Sumeet Malhi, Trustee TJ Miller, Trustee</p>	<p>Employee Trustees Sam Frank, Vice Chairperson Jeff La Blue, Trustee Marc Anderson, Trustee Alfredo Molina, Trustee David Mendrin, Trustee Steve McGary, Trustee Wendy Norris-Gonzales, Trustee Kim Jackson, Trustee Keola Park, Trustee Terri Hauschel, Trustee Vacant, Trustee</p>	<p>FCEA FPOA FPOA ATU IBEW FFA CFPEA CFMEA FFA Local 39 FAPSS</p>
<p>Administrator Thomas J. Georgouses, Esq. SVP-Legal</p>		
<p>Legal Counsel Michael E. Moss, Esq.</p>	<p>Consultants Rael & Letson David Broome Martin Fornataro</p>	

Roll Call 8:30 A.M.

1. Approval of Agenda**

Approve Agenda for May 13, 2026

⇒ Action as required

2. Executive Session

- a. Conference with Legal Counsel – Anticipated Litigation Government Code Section 54956.9, Subdivision (d)(4) Fresno City Employees Health and Welfare Trust vs. California Physicians' Service d/b/a Blue Shield of California

⇒ Action as required

3. Public Discussion***

4. Consent Calendar

All Consent Calendar items are considered to be routine and will be treated as one agenda item. The Consent Calendar will be enacted by one motion. There will be no separate discussion of these items unless requested by a Board of Trustee Member, in which event the item will be removed from the Consent Calendar and will be considered as time allows.

- a. Approval of the Minutes of March 25, 2026
- b. Correspondence

- i). *Correspondence Dated March 20, 2026 From Councilmember Nelson Esparza Regarding an Urgent Call for Resolution to Protect Fresno City Employees' Access to Healthcare*
- ii). *Correspondence Dated March 23, 2026 From Local 39 Business Representative Terri Hauschel Regarding Stalled Negotiations Between Community Health Systems and Blue Shield*
- iii). *Correspondence Dated April 21, 2026 From Blue Shield of California Addressed to Fresno Community Hospital and Affiliates Addressing Out-of-Network Processing*
- iv). *Correspondence Dated May 5, 2026 From Mayor Jerry Dyer to City of Fresno Employees Regarding Blue Shield and Community Health Systems Contract*
- c. Blue Shield of California
- d. SimpleBehavioral
 - i). *Utilization Report*
- e. United HealthCare
- f. OptumRx
 - i). *Executive Summary and Comparative Executive Summary Commercial*
 - ii). *Executive Summary and Comparative Executive Summary EGWP*
 - iii). *Ratify Chairperson and Vice Chairperson's Approval for Optum to Take all Necessary Action Regarding the Berkeley Security Breach*
- g. Delta Dental
 - i). *Financial Reporting Package*
- h. SimpleMSK
 - i). *Utilization Report*
- i. EyeMed
- j. Teladoc
 - i). *Utilization Report*
- k. EPIC
 - i). *Utilization Report*
- l. Body Scan International
 - i). *Ratification of the Chairperson and Vice Chairperson's Approval of the Spring Event Member Communication*
- m. Open Enrollment
 - i). *Ratification of the Chairperson and Vice Chairperson's approval of the Open Enrollment Member Communication*
 - ii). *Ratification of the Chairperson and Vice Chairperson's Approval of the Revised Dual Coverage Member Communication*
 - iii). *Ratification of the Chairperson and Vice Chairperson's Approval of the Personify Member Service Number Update Effective July 1, 2026*

5. General Calendar

- a. Hinge Health
 - i). *Review, Discuss and Approve Hinge Health Migraine Care*

⇒ *Action as required*

b. Personify Health

- i). Claim and Benefits Reports
- ii). Specific Stop-Loss Reports
- iii). Turnaround Time Reports
- iv). Subrogation
Review and Discuss
- v). Personify Health HCOOnline Complaints
Review and Discuss
- vi). Employer Mandate Reporting - 1094/1095 Process
Review and Discuss Employer Mandate Reporting - 1094/1095 Process
- vii). Review of Vendor Contracts and Business Associates Agreements
 - i) *Review, Discuss and Approve Status of Vendor Contracts and Business Associates Agreements*
⇒ *Action as required*
 - ii) *Review and Approve Contract Personify Health Holding Company LLC*
⇒ *Action as required*
 - iii) *Review and Approve Contract Delta Dental of California*
⇒ *Action as required*
- viii). Open Enrollment 2026-2027
Review and Discuss Status of Open Enrollment Plan Year 2026-2027
- ix). Member ID cards
Review, Discuss and Approve Member ID Cards Effective July 1, 2027
⇒ *Action as required*

c. Appeals

d. International Foundation of Employee Benefit Plans Conference 2026

- i). *Review and Discuss Attendance for International Foundation Employee Benefit Conference 2026*

e. Appointment of Secretary and Treasurer

- i). *Review and Discuss Responsibilities of Secretary and Treasurer'*

6. Consultant's Report

a. Body Scan Imaging

- i). *Review and Discuss Body Scan Imaging Spring Event 2026*

b. Blue Shield of California and Community Health Systems and Affiliates Contract Negotiations

- i). *Review and Discuss Blue Shield of California and Community Health Systems and Affiliates Contract Negotiations*

⇒ Action as required

- c. Physical, Occupational and Speech Therapy Out of State Access
 - i). *Review and Discuss Status of Physical, Occupational and Speech Therapy Out of State Access*
- d. HMO Plan Option
 - i). *Review and Discuss HMO Plan Option*
⇒ Action as required
- e. Request for Information for PPO Network Vendor
 - i). *Review and Discuss PPO Network Request for Information Status*
⇒ Action as required
- e. Stop Loss Renewal Effective July 1, 2026
 - i). *Review and Discuss Stop Loss Renewal Effective July 1, 2026*
⇒ Action as required
- f. Summary Plan Description (SPD)
 - i). *Review, Discuss and Approve Changes to Summary Plan Description (SPD)*
⇒ Action as required
- g. Affordable Care Act- Minimum Value
 - i). *Review, Discuss and Approve Minimum Value Calculation*
⇒ Action as required
- h. Mental Health Parity - Non-Quantitative Treatment Limitation (NQTL) -2026 Report Analysis by MedExpert
 - i). *Review, Discuss, Approve and Accept 2026 Report with Recommendations From MedExpert for Mental Health Parity-Non-Quantitative Treatment Limitation (NQTL)*
⇒ Action as required

7. Pharmacy Benefit Manager Consultant

- a. Pharmacy Plan Performance Overview
 - i). *Review and Discuss Pharmacy Plan Performance Overview – Rolling 12-month: April 2025- March 2026*

8. Attorney's Report

- a. Fresno City Employee Health and Welfare Trust Agreement Revision
 - i). *Review, Discuss, and Approve Recommendation for Adoption the Revised Fresno City Employee Health and Welfare Trust Agreement*
⇒ Action as required
- b. Consolidated Appropriation Act
 - i). *Review and Discuss Consolidated Appropriation Act, Rx Reporting*

9. Board Meeting Schedule

⇒ *Action as required*

10. Future Agenda Items

11. Adjournment

⇒ *Action as required*

* The meeting room is accessible to the physical disabled. If you require a disability related modification or accommodation to participate in the meeting, notify Personify Health at (559) 499-2450.

** All writings, including Agendas, distributed prior to or during any Regular or Special Meeting are available for public inspection during regular business hours at the offices of Personify Health located at 621 Santa Fe, Fresno CA.

***Provides an opportunity for members of the public to address the Board of Trustees on items of interest to the public within the Board of Trustees jurisdiction or items on the Agenda. It is the policy of the Board of Trustees not to answer questions impromptu but refer such matters to the Administration Office for placement on the next Agenda. Speakers should limit their comments to no more than three (3) minutes. No more than ten (10) minutes per issue will be allowed. For items which are on the Agenda for this meeting, members of the public will be provided an opportunity to address the Board of Trustees before a vote is taken on each item.

NOTICE APPEALS COMMITTEE

Next Meeting:

Monday June 1, 2026, at 4:00 p.m.

Committee Members to Attend:

Jeff La Blue, Wendy Norris-Gonzalez, TJ Miller



Park View Plaza
9 River Park Place East, Suite 220
Fresno, CA 93720

TELEPHONE (559) 499-2450
FAX (559) 499-2460

MAILING ADDRESS
P.O. BOX 45018
FRESNO, CA 93718-5018

FRESNO CITY EMPLOYEES HEALTH & WELFARE TRUST

MINUTES OF THE REGULAR BOARD MEETING

March 25, 2026

CALL TO ORDER: The regular monthly meeting of the Board of Trustees for the Fresno City Employees Health & Welfare Trust was called to order by Chairperson Georgeanne White at 8:36 A.M., Wednesday, March 25, 2026 via a Zoom webinar and in person at 2600 Fresno Street, Fresno, CA, Room 4017. A quorum was present including the following:

EMPLOYEE TRUSTEES PRESENT:

Sam Frank
Jeff La Blue
Terri Hauschel
Kim Jackson
Keola Park

Wendy Norris-Gonzalez
Eric Hoopingarner
David Mendrin
Charles (Steve) McGary

EMPLOYEE TRUSTEES ABSENT:

Marc Anderson

EMPLOYER TRUSTEES PRESENT:

Georgeanne White
Jennifer Misner

TJ Miller

OTHERS PRESENT

Personify Health

Tom Georgouses
Diana Cavazos
Nikki Vang
Karla Ray

Blue Shield

Linda Patron
Tavo Suarez
Tim Lieb
Amy Dehart
Laura Rios

EPIC

Sara Santana

EyeMed

Joyce Walling

Law Office of Michael E. Moss

Mike Moss

Optum Rx

Carolyn Martinez
Shannon Ross

Delta

Duab Xaochay

Rael & Letson

David Broome
Martin Fornataro

FORCE

Cheri Detwiler

BSI

Bill Penzo

Benefits, COF

Phillip Carbajal
Sonia Farmer
Jovi Silaphanh

SimpleMSK/SimpleBehavioral

Joshua Oswald

- Item 1** **Approval of Agenda - A Motion** was made by Vice Chairperson Sam Frank and Seconded by Trustee TJ Miller to approve the agenda. The **Motion** was **unanimously approved**.
- Item 2** **Executive Session –** Executive Session started at 8:39 am and ended at 8:55 am. Mr. Mike Moss reported a Motion was made by Trustee Terri Hauschel and Seconded by Trustee Steve McGary to authorize the Chairperson and Vice Chairperson to send necessary communications presenting the Trust's formal position related to the Blue Shield and Community Hospital Systems contract.
- Item 3** **Public Discussion –** Amy Deaver, a representative from Blue Shield of California, expressed appreciation for being invited to the previous Special Board meeting and reaffirmed Blue Shield of California's commitment to restoring Community Medical Center and Community Health Partners to their network at a reasonable rate. Laura Rios with Councilmember Analisa Perez' office made a comment that a letter of support has been submitted.
- Item 4** **Consent Calendar – Motion** was made by Vice Chairperson Sam Frank and Seconded by Trustee Kim Jackson to approve the Consent Calendar. The **Motion** was **unanimously approved**.
- Item 5** **Consultant's Report -**
- a. **Blue Shield of California and Community Health Systems and Affiliates Contract Negotiations**
 - i. **Review and Discuss Blue Shield of California and Community Health Systems and Affiliates Contract Negotiations -** Mr. David Broome provided a verbal update and stated Blue Shield of California and Community Medical Providers contract is currently at an impasse following the official termination of the contract on January 1, 2026 where the parties agreed to a 31-day contract extension that expired on January 31, 2026. Chairperson Georgeanne White asked Blue Shield of California about the status of the negotiations and Amy Deaver reported proposals had recently been exchanged.
 - ii. **Discuss Communication with Members on the Status and Effect of the Plan -** Mr. David Broome provided a verbal update explaining that member communication went out previously on February 10, 2026. No Action taken.

- iii. **Review, Discuss, Approve and Recommended to Meet and Confer with Effective Parties for Options for Alternatives to Current Out of Network -** Direction was given to Blue Shield of California to send a second letter to Community Health System providers clarifying that out of network claims are paid to providers by the Trust, not by Blue Shield, for Trust participants claims.

- b. **Request for Information for PPO Network Vendor –** Mr. David Broome explained Rael and Letson is currently drafting the RFI including the requirements for network access and administration. A **Motion** was made by Trustee Steve McGary and Seconded by Trustee Terri Hauschel to give authority to the Chairperson and Vice Chairperson to assist, answer questions and approve the RFI. The **Motion** was **unanimously approved**.

- c. **Plan Document Update Regarding Gaining Coverage –** After discussion, no changes will be made to the current plan language, and any issues can be addressed by appeal. No Action taken.

- d. **Physical, Occupation and Speech Therapy Out of State Access –** Mr. David Broome explained that the coverage for Physical, Occupational and Speech Therapy out of state care may be carved out of Simple Therapy and will be provide through Blue Shield of California/Blue Card subject to vendor approval; and explained the current process for members seeking care out of state. A **Motion** was made to replace the out of state Simple Therapy network for Physical, Occupational and Speech therapy with Blue Shield of California/Blue Card providers and give authority to the Chairperson and Vice Chairperson to execute all necessary documents approved by the Plan Professionals for the change effective July 1, 2026.

- e. **Medical Benefit Plan Design –** Mr. David Broome referred to his memorandum and provided an overview of additional plan options including Low and mid plans. A **Motion** was made to accept the proposed Low Plan Option A increasing the Non-Contributory Plan deductible

from \$1,300 for single to \$2,000, and from \$2,600 for a family to \$4,000; plus increasing the medical out of pocket maximum from \$4,600 for single to \$6,000 and from \$9,200 for a family to \$12,000; and increasing the pharmacy out of pocket from \$2,000 for single to \$3,400 and from \$4,000 for a family to \$6,800. The **Motion** was **unanimously approved**.

- f. **Financial Projections for the 2026-2027 Fiscal Year** – Mr. David Broome referred to his memorandum for the financial projections for Fiscal Year 2026 - 2027. Mr. Broome stated the projections include claims and eligibility data through December 31, 2025; and financial data through December 31, 2025. The 2026-2027 Fiscal Year projected claims are based on a blended experience from the past three years of data. Mr. Broome noted that the projections show that the Trust would end with 3.0 months of net reserves at the end of the projection year, June 30, 2027, with an increase to the contribution rate of 10.9% effective July 1, 2026.

- g. **Contribution Rates for the 2026-2027 Fiscal Year** – Vice Chairperson Sam Frank stated the Non-Contributory Plan should contribute to the increased cost of the coverage. After much discussion, a **Motion** was made by Vice Chairperson Sam Frank and Seconded by Trustee Terri Hauschel to increase the contribution rate by 10.9% to a total \$1,664 for the Contributory Plan with a City of Fresno contribution of \$1,165 and a Member contribution of \$499 for a total of \$1664 to maintain a projected 3 months reserve at the end of June 30, 2027. The **Motion** was **unanimously approved**. A second **Motion** was made by Vice Chairperson Sam Frank and Seconded by Trustee Jennifer Misner that the Contributory Plan be renamed the High Plan and the Non-contributory Plan be renamed the Low Plan; and the Low Plan will have a contribution of \$49; and going forward on an annual basis, the dollar amount of contribution increase approved for the High Plan will be the same dollar amount of contribution increase for the Low Plan. The **Motion** was **unanimously approved**.

- h. **Affordable Care Act -Minimum Value** - Deferred to the next meeting as Mr. Broome will prepare

new projections based on the plan design changes and contributions for the Low Plan.

i. **Body Scan**

- i. **Review and Discuss BSI Benefit and Utilization** – Mr. David Broome referred to his memorandum and provided an overview of the utilization for 2025/2026 plan year.
- ii. **Review, Discuss and approve BSI Spring Event 2026** - Mr. David Broome explained BSI is requesting to have a Spring event scheduled for May 4, 2026 – May 8, 2026. A **Motion** was made by Trustee Keola Park and Seconded by Vice Chairperson Sam Frank to approve the Spring event and to give authority to the Chairperson and Vice Chairperson to approve member communication. The **Motion was unanimously approved.**

Item 6 General Calendar

a. **Personify Health**

- i. **Claims and Benefits Reports** - Mr. Tom Georgouses reviewed the reports on Claims and Benefits for months ending February 28, 2026.
- ii. **Specific Stop-Loss Reports** – Mr. Tom Georgouses reviewed the reports on Specific Stop-Loss for the policies ending June 30, 2027.
- iii. **Turnaround Time Reports** – Mr. Tom Georgouses reviewed the reports related to claim processing turnaround time.
- iv. **Subrogation** – Mr. Tom Georgouses reviewed the report on Subrogation.
- v. **Personify Health Complaint Form** - Ms. Diana Cavazos reviewed and provided an overview of the complaints received.
- vi. **Employer Mandate Reporting Personify 1094/1095 Process** – Mr. Phillip Carbajal confirmed the 1095's were prepared and about 100 people requested their 1095. Mr. Phillip Carbajal explained there were some issues with e-filing, however the due date is March

31, 2026 and the e-file should be accomplished this week.

vii. **Review of Vendor Contracts and Business Associates Agreements** – Deferred to next meeting.

viii. **Open Enrollment Communication** - Ms. Tom Georgouses referred to the materials related to the Open Enrollment for Plan Year 2026-2027. A **Motion** was made by Vice Chairperson Sam Frank and Seconded by Trustee David Mendrin to approve the draft forms and to give authority to the Chairperson and Vice Chairperson to approve all edits needed related to the Open Enrollment materials for the Plan Year 2026-2027. The **Motion** was **unanimously approved**.

b. **Appeals – None**

c. **International Foundation of Employee Benefit Plan Conference 2025** – Vice Chairperson Sam Frank provided an overview of his experience attending the 2025 International Foundation of Employee Benefit Plan Conference.

d. **International Foundation of Employee Benefit Plan Conference 2026** - Ms. Diana Cavazos confirmed that for all Trustees eligible to attend for 2026 that their registration has been submitted.

e. **Appointment of Secretary and Treasurer** – Deferred to next meeting.

Item 7 Pharmacy Benefit Manager Consultant

a. **Pharmacy Plan Review 2024-2025** - Dr. Martin Fornataro referred to his memorandum for the pharmacy performance overview as a 2025 calendar year versus a Plan year review. Dr. Fornataro stated that GLP-1 medication plan costs have increased \$3.5 million compared to calendar year 2024. Dr. Fornataro also explained that net of rebate the Plan PMPM increased from \$101.92 to \$124.65 from 2024 to 2025.

b. **Optum Rx Formulary Changes Effective July 1, 2026** - Dr. Martin Fornataro referred to his

memorandum and provided an overview of the impact of the formulary changes effective July 1, 2026.

- c. **Optum Rx Appeal Reporting** – Dr. Martin Fornatro explained that OptumRx can provide reporting that shows an overview of appeals and went on to state this information will be included as part of the board materials going forward.
- d. **Off-Cycle Changes Related to Regulatory or Centers for Medicaid Requirements** – Dr. Martin Fornatro gave an overview of the BALANCE (Better Approaches to Lifestyle and Nutrition for Comprehensive hEalth) model which is a voluntary CMS initiative designed to let Medicare Part D and Medicaid programs cover GLP1 medications for weight management. Direction was given that approvals for off-cycle requests must be added to an agenda and presented to the full board.

Item 8 Attorney’s Report –

- a. **Fresno City Employee Health and Welfare Trust Agreement** – Mr. Mike Moss provided an overview of the status of the Agreement and requested that no later than April 20, 2026 that Trustees provide any additional comments.
- b. **Consolidated Appropriations Act** - Mr. Mike Moss explained that further regulations and guidance have not been issued thus no action is needed at this time.
- c. **Mental Health Parity and Addiction Equity Act (MHPAEA)** – Mr. Mike Moss noted this is still under review with MedExpert for requirements and regulations for MHPAEA.

Item 8 Board Meeting Schedule – A Motion was made Trustee David Medrin and Seconded by Trustee Terri Hauschel to have the next Board meeting on May 13, 2026 at 8:30 am. The **Motion** was **unanimously approved**.

Item 9 Future Agenda Items –

- 1. HMO Network Provider
- 2. Review of Vendor Contracts and Business Associates Agreements
- 3. Appointment of Secretary and Treasurer
- 4. Mental Health Parity and Addiction Equity Act (MHPAEA)

Item 10 **Adjournment - A Motion** to adjourn was made by Vice Chairperson Sam Frank and Seconded Trustee David Medrin. The **Motion** was **unanimously approved**, and the meeting adjourned at 12:31 P.M.

Georgeanne White, Chairperson
Fresno City Employees Health & Welfare Trust

Date

Tom Georgouses, Administrator
Personify Health

Date



April 21, 2026

<Provider Org Name>
<Address 1>
<City>, <STATE> <ZIP Code>

Subject: Out-of-Network Services Following Termination from Blue Shield of California PPO Network, specific to Fresno City Employee Health & Welfare Trust members

Dear Practitioner or Administrator in the Community Medical Centers health care system,

This letter is to provide clarification regarding provision of services and claims processing for services provided specifically to Fresno City Employee Health & Welfare Trust (“Fresno City”) members.

Out-of-network services

When services are rendered by an out-of-network healthcare provider, the member is financially responsible for charges, including any amounts not reimbursed under the applicable out-of-network benefit structure.

You may submit out-of-network claims to Blue Shield for services rendered to Fresno City members in the same manner as you did prior to the provider’s contract termination date. Unlike claims for other Blue Shield members, the claims will be processed by Personify, Fresno City’s third-party administrator, in accordance with the member’s out-of-network benefits, including applicable deductibles, coinsurance, benefit limitations, and reimbursement methodologies. The claim will be paid by Personify directly to the provider.

We encourage you to advise members in advance that you are not a participating provider in the Blue Shield PPO Network and that higher out-of-pocket costs may apply.

Continuity of care

Fresno City complies with both federal and state law, as outlined below. If a Fresno City member is seeking continuity of care for a qualifying medical condition under state or federal law and is approved by Blue Shield for continuity of care, claims for covered services will be processed and paid by Personify directly to the provider under the same terms and conditions that applied before the date of the provider’s contract termination with Blue Shield.

blueshieldca.com

Federal law qualifies members for continuity of care covered services if they are receiving treatment for a serious and complex condition, pregnant, undergoing inpatient care, scheduled for non-elective surgery, or terminally ill for 90 days after receipt of the provider participation termination letter or the resolution of the condition, whichever occurs sooner. These member notifications were mailed by Blue Shield to affected Fresno City members to be received on February 1, 2026.

Under California law, members may request continuity of care covered services for the following conditions:

<ul style="list-style-type: none">• An active course of treatment for an acute medical or behavioral health condition, including a maternal mental health condition• Performance of a surgery/procedure that has been authorized by Blue Shield as part of a documented course of treatment and has been recommended to occur within 180 days (in this case, on or after February 1, 2026).	<ul style="list-style-type: none">• A pregnancy, regardless of trimester, and including postpartum care• A terminal illness• Care of a newborn (0 to 36 months)• An active course of treatment for a serious chronic condition
--	---

The time period that continuity of care services are available under California law depends on the qualifying medical condition. The services for a qualified medical condition are approved by Blue Shield for continuity of care coverage. Once approved, under California law and the surviving provisions of your contract with Blue Shield, the contracted rate will be applied to your claim payment from Personify and you (as the provider) may only collect the member's applicable cost-share amount.

If you have questions regarding claim submission requirements or benefit determination, please contact Personify at (800) 442-7247, 5 a.m. to 6 p.m. Pacific time, Monday through Friday.

Sincerely,

Blue Shield of California

From: [PublicAffairs](#)
Subject: Message from Mayor Dyer | Healthcare Update
Date: Tuesday, May 5, 2026 10:06:08 AM

TO: CITY OF FRESNO EMPLOYEES

In late January and again in early March 2026, messages were sent to City of Fresno employees from the Fresno City Employees Health & Welfare Trust (Trust) regarding ongoing contract disputes between Community Health Systems and Blue Shield of California. Weeks later, negotiations between the two parties continue, while City employees are the ones being negatively affected.

The purpose of this message to City employees is to share that I have gotten involved directly, in hopes of ensuring a reasonable agreement is reached as quickly as possible. My intent is to ensure that any resolution is retroactive, provides multiple years of certainty, and minimizes increased costs to the City Trust/employees.

In addition to meeting with City labor leaders, I have also met with representatives from Blue Shield of California, including their Vice President of State Government Affairs, and their Senior Vice President for Provider Partnerships and Network Management, as well as the CEO of Community Health Systems.

I am pleased to say that following my meeting with Blue Shield, they issued correspondence clarifying the Trust's rights and obligations on two topics that I understand have been negatively affecting employees/families, as outlined below:

(1) Out-Of-Network Services: Correct information was provided stating that claims will be paid by Personify directly to providers.

(2) Continuity of Care: Correct information was provided stating that the Trust complies with applicable laws and that claims for covered services will be processed by Personify directly to the provider under the same terms that were applicable prior to the contract termination.

It is my expectation that once these corrections are fully distributed and understood by all relevant parties, the scheduling of appointments for our employees will once again be handled promptly and appropriately.

I also think it is important to mention that I am following up with a letter to each party asking that they return to the bargaining table in an effort quickly resolve negotiations. I am confident once they receive these letters, they will resume negotiations, as both Community Health Systems and Blue Shield have expressed an interest to do so.

In closing, please know that I recognize this situation has created stress and uncertainty for many of our employees and their families when it comes to accessing healthcare — and that is not something I am willing to accept. While this dispute originated outside of the City's control, the impact on our workforce is very much my concern. You deserve reliable access to quality healthcare, and reaching a swift resolution remains a top priority for my Administration.

Sincerely,

Jerry P. Dyer
Mayor

**Mental Health and Substance Abuse Benefit
Utilization Report for:**

Fresno City Employees' Health & Welfare Trust

Reporting Period: 01/01/2026 - 02/28/2026

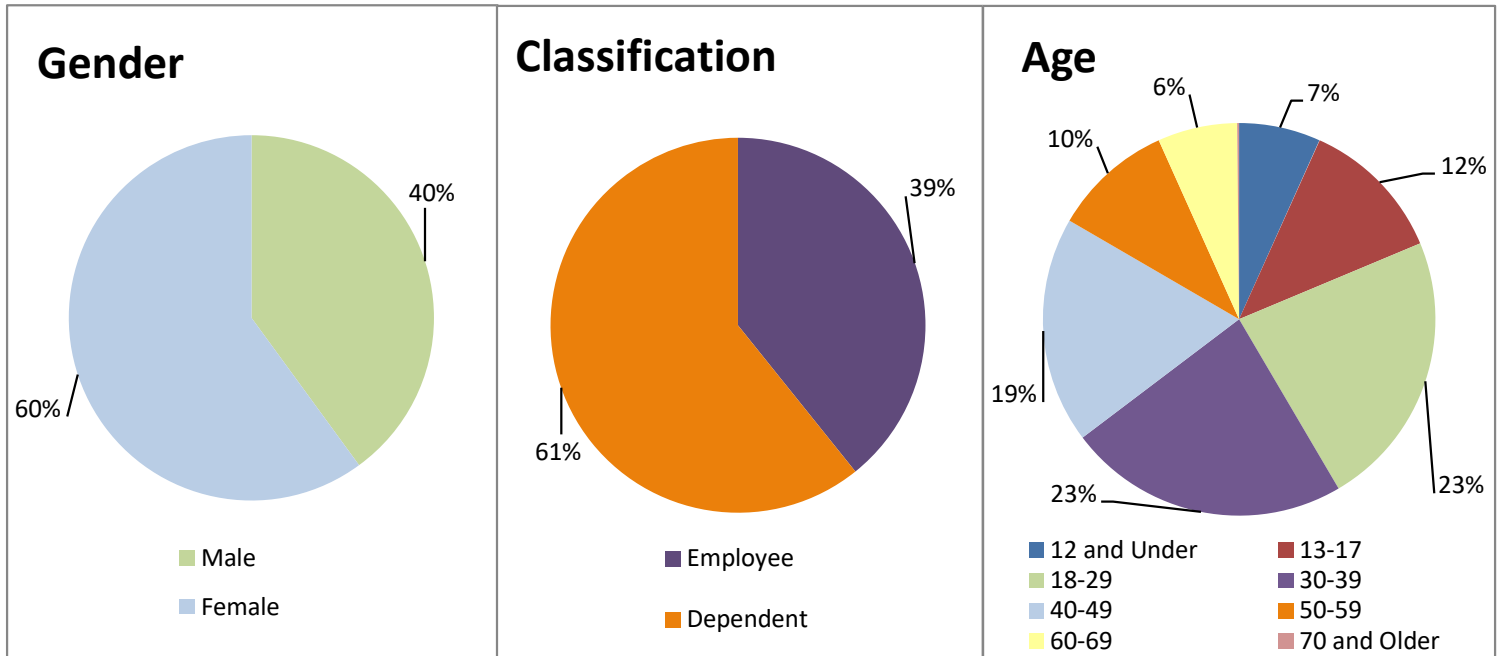
Presented by:



Overall Mental Health & Substance Abuse Benefit Utilization

	January 2026	February 2026	Benefit Year July 2025 – June 2026
Covered Employees	4,459	4,433	
Covered Dependents	7,286	7,245	
Total Covered Members	11,745	11,678	Average: 11,712
Unique Employees Accessing Benefit	114	128	305
Unique Dependents Accessing Benefit	197	229	482
Total Unique Members Accessing Benefits	311	357	787
Access Rate	2.6%	314%	6.7%
Unique Dates of Service Priced	969	959	7,742

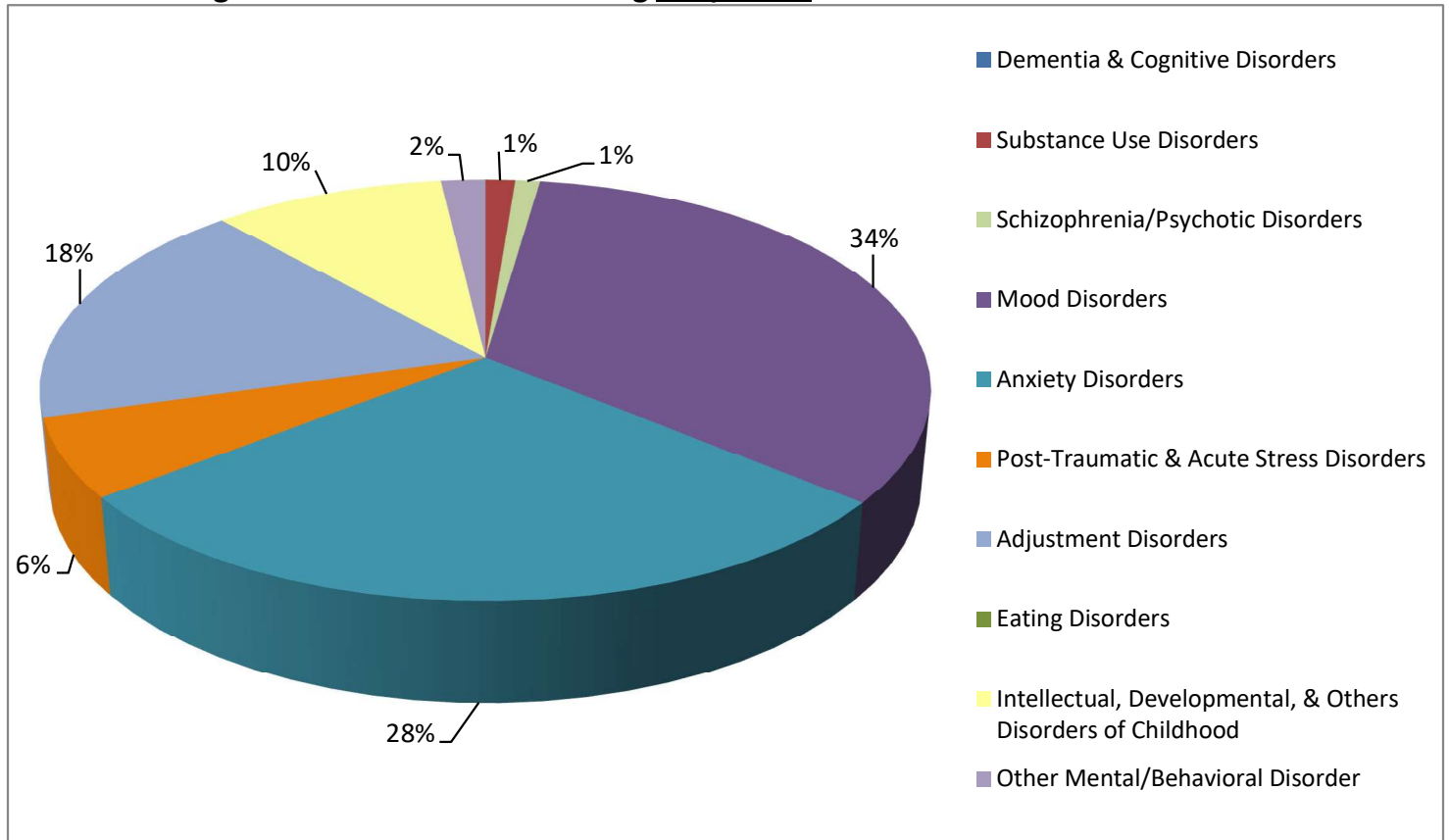
Member Demographics



Routine Outpatient Treatment Service Utilization

	January 2026	February 2026
Psychotherapy		
Total Cases	207	225
Medication Evaluation and Management		
Total Cases	106	127
Crisis Services		
Total Cases	0	2

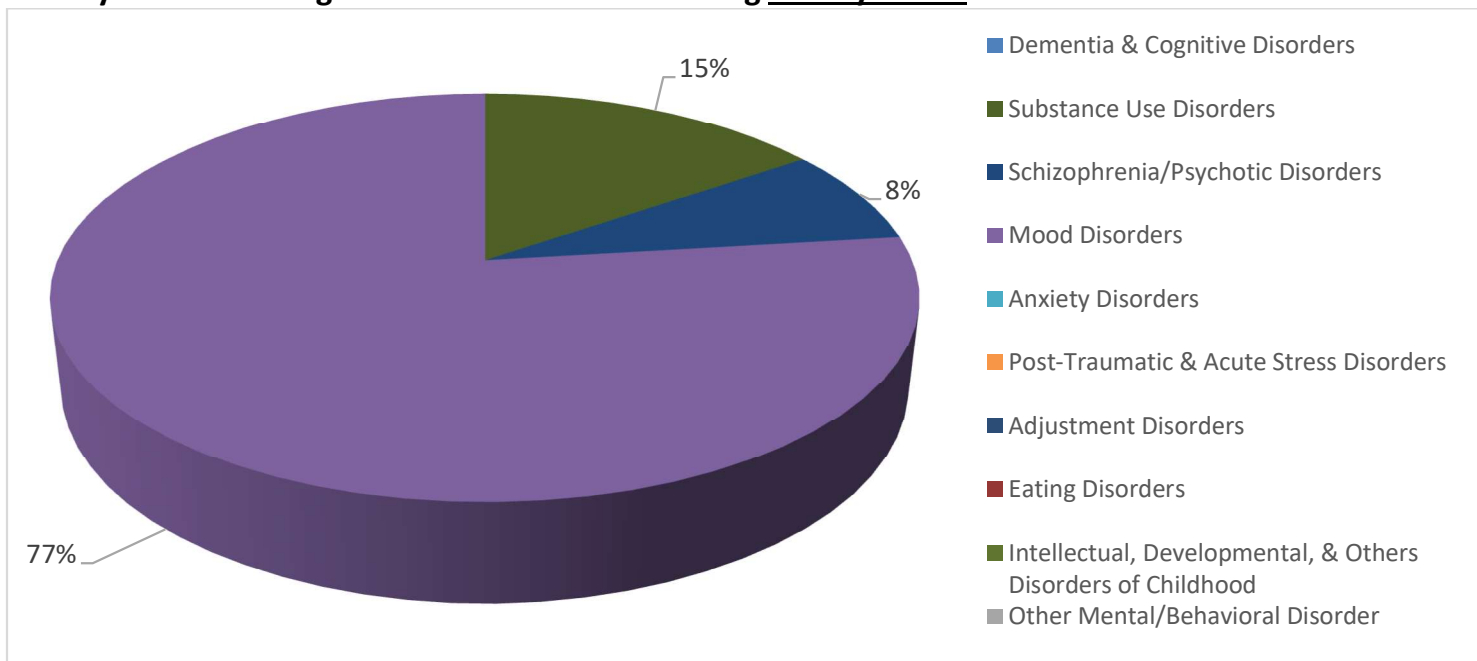
Conditions Diagnosed for Members Receiving Outpatient Treatment



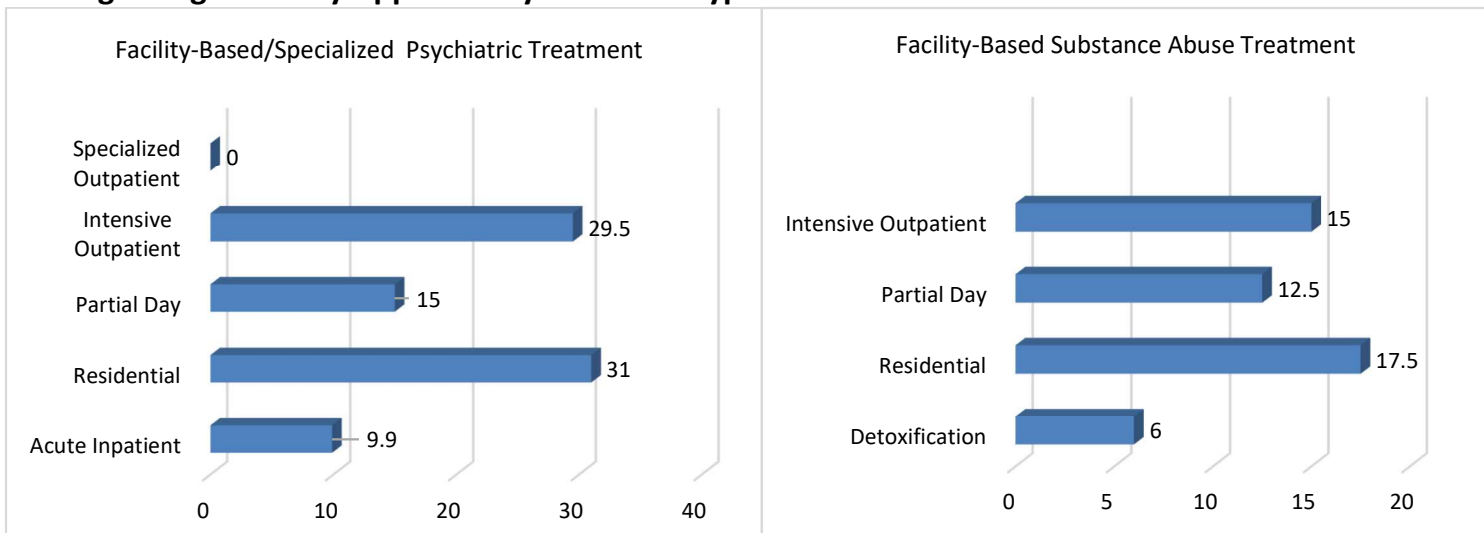
Intensive / Facility-Based Benefit Utilization

All Facility-Based/Intensive Psychiatric Treatment	
	<i>Specific case information removed to preserve member confidentiality</i>
	<i>Throughout the reporting period there were eleven (11) cases included in this category</i>
All Facility Based Substance Abuse Treatment	
	<i>Specific case information removed to preserve member confidentiality</i>
	<i>Throughout the reporting period there were eight (8) cases included in this category</i>

Primary Condition Diagnosed for Members Receiving Facility-Based Treatment

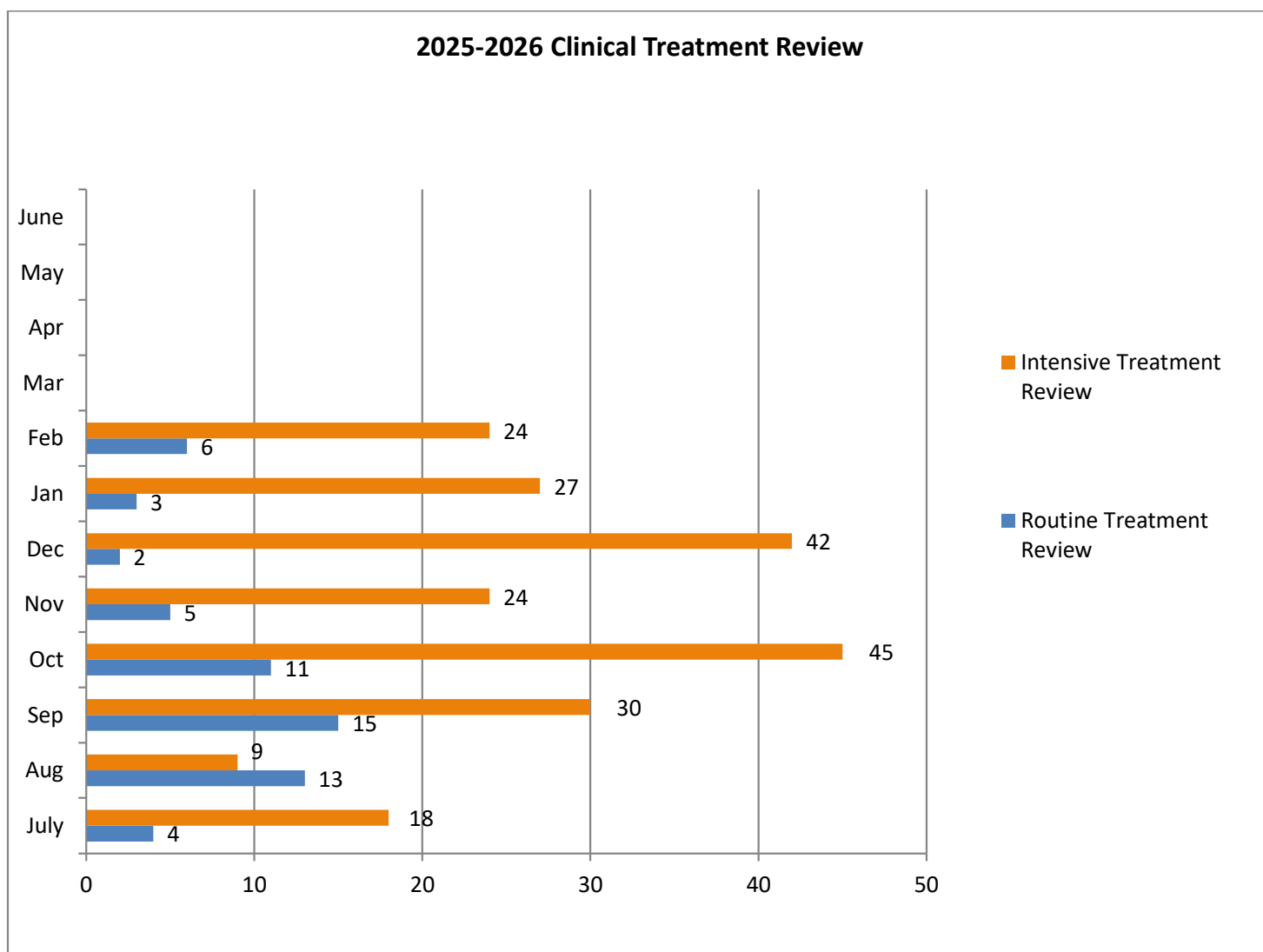


Average Length of Stay Approved by Level and Type of Care



Care Management

<i>Routine Treatment Review</i>	
Review Includes	Review of treatment notes submitted by providers for services that extend beyond standard of care based on primary clinical issue(s) or for routine outpatient services with prior auth requirements
<i>Facility-Based/Intensive Treatment Review</i>	
Review Includes	Admission, concurrent, discharge review for all treatment provided by psychiatric or substance treatment facilities/programs and intensive treatment provided in an outpatient setting



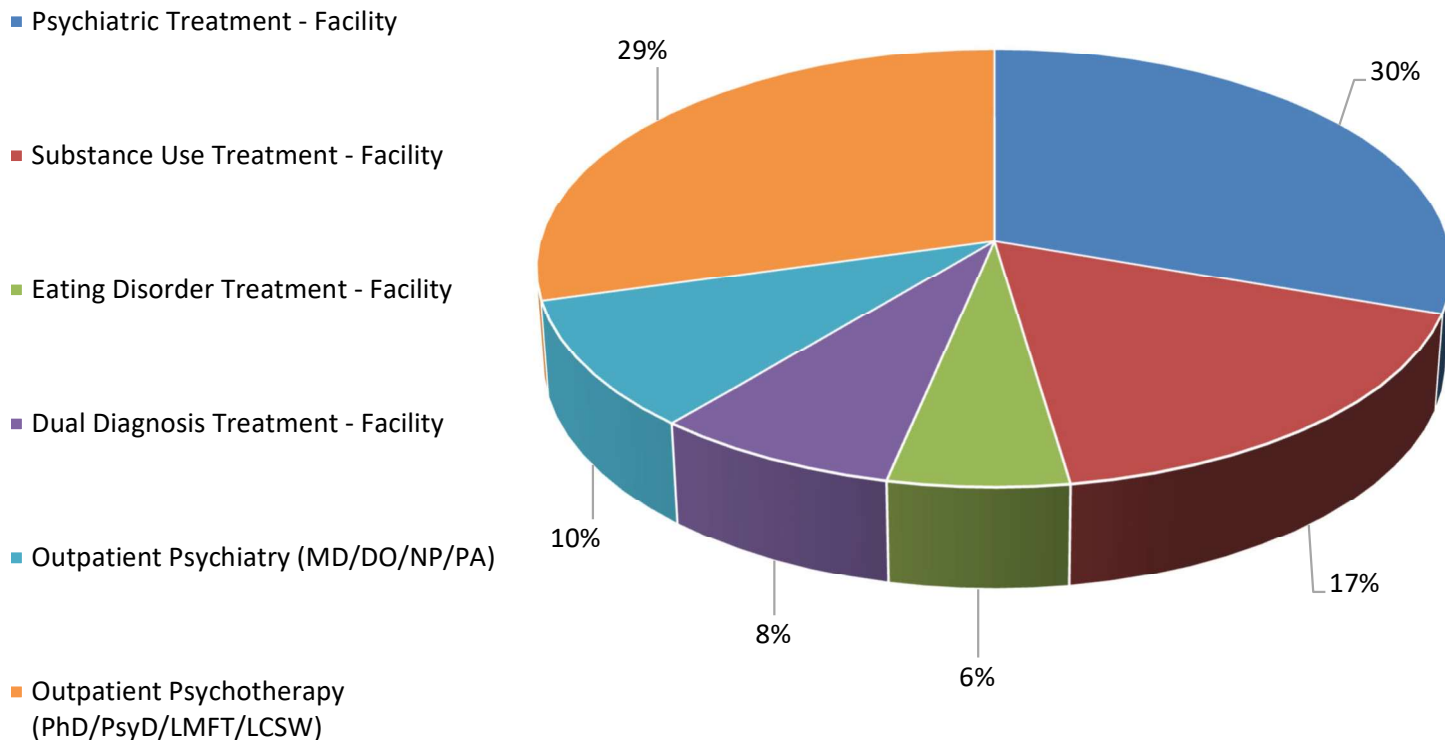
Claims Experience (Pricing: January - February)

Top 5 Facility/Program Provider Activity by Total Pricing for Period: January - February 2026	% Total Pricing
Ascend Behavioral Health	13.0%
San Jose Behavioral Health	9.4%
Sierra Meadows Behavioral Health	8.5%
First Steps Recovery	8.4%
Oasis Eating Disorder Recovery	5.7%

Top 10 Outpatient Provider Activity by Total Pricing for Period: January - February 2026	% Total Pricing
Nirmal Brar, MD	1.9%
Terri Thomas, LMFT	1.5%
Yvette Segura, PhD	1.4%
M. David McOmber, LCSW	1.1%
Smadar Aviv, PhD	0.8%
Shadaria Prince, LCSW	0.7%
Dwight Sievert, MD	0.7%
Armine Hakopyan, NP	0.7%
Exodus (Outpatient Crisis Services)	0.6%
Stacy Manning, NP	0.6%

Claims Experience (Pricing: January-February)

MHSUD Pricing by Specialty



Network Savings*

Network Savings January 2026 - February 2026	Amount
Total Billed	\$1,328,998.73
Network Pricing	\$378,363.50
Network Savings	\$950,635.23

*Estimate based on Halcyon network pricing before benefits have been applied

Measures	April 2025	May 2025	June 2025	July 2025	August 2025	September 2025	October 2025	November 2025	December 2025	January 2026	February 2026	March 2026	Rolling Total
Membership													
Any Eligible Members	11,641	11,634	11,664	11,729	11,754	11,712	11,653	11,663	11,677	11,672	11,677	11,618	11,660
Total Eligible Members	3,059	2,992	2,871	2,881	2,884	3,041	2,884	3,030	3,164	3,165	3,165	3,165	3,071
% of Total Eligible Members	26.3%	25.7%	24.6%	24.5%	24.9%	26.0%	24.7%	26.0%	27.1%	27.3%	27.3%	27.3%	25.7%
Any Member Paid P/HPM	31,251	31,251	31,251	31,251	31,251	31,251	31,251	31,251	31,251	31,251	31,251	31,251	31,251
Rx and Cost													
Total Drug Cost	\$1,488,826.76	\$2,169,426.12	\$2,889,242.14	\$2,073,597.22	\$2,203,649.13	\$3,329,239.26	\$3,329,239.26	\$3,329,239.26	\$2,384,363.52	\$2,290,342.46	\$2,284,161.67	\$2,222,648.48	\$26,646,756.05
Total Member Paid	\$1,809,839.48	\$2,015,959.38	\$1,500,002.23	\$1,161,985.59	\$1,169,185.59	\$1,169,185.59	\$1,169,185.59	\$1,169,185.59	\$1,169,185.59	\$1,169,185.59	\$1,169,185.59	\$1,169,185.59	\$24,818,447.38
Total Member P/HPM	\$118,068.28	\$153,276.94	\$168,179.31	\$161,812.16	\$162,784.48	\$166,389.76	\$166,389.76	\$166,389.76	\$166,389.76	\$166,389.76	\$166,389.76	\$166,389.76	\$2,128,318.89
Total P/HPM Cost	\$1,996,098.32	\$2,165,892.16	\$1,664,566.17	\$1,203,424.10	\$1,203,424.10	\$1,203,424.10	\$1,203,424.10	\$1,203,424.10	\$1,203,424.10	\$1,203,424.10	\$1,203,424.10	\$1,203,424.10	\$26,897,609.05
Total Disposition Fee	\$3,359.44	\$3,359.47	\$3,359.47	\$3,359.47	\$3,359.47	\$3,359.47	\$3,359.47	\$3,359.47	\$3,359.47	\$3,359.47	\$3,359.47	\$3,359.47	\$38,655.46
Total Member P/HPM Cost	\$1,999,457.76	\$2,169,251.63	\$1,667,925.64	\$1,206,783.57	\$1,206,783.57	\$1,206,783.57	\$1,206,783.57	\$1,206,783.57	\$1,206,783.57	\$1,206,783.57	\$1,206,783.57	\$1,206,783.57	\$27,036,264.51
% of Total P/HPM Cost	92.2%	92.2%	92.2%	91.2%	90.9%	91.5%	91.5%	91.5%	91.4%	91.4%	91.4%	91.4%	91.4%
% Member Paid	7.8%	7.1%	7.7%	8.8%	8.8%	8.5%	8.5%	8.5%	7.9%	7.9%	7.9%	6.9%	7.9%
Any Drug Cost / Rx	\$276.30	\$315.24	\$318.15	\$372.99	\$334.09	\$316.85	\$303.24	\$303.24	\$314.59	\$314.52	\$314.51	\$307.29	\$322.56
Any P/HPM Paid / Rx	\$255.45	\$293.86	\$249.69	\$249.68	\$249.68	\$249.68	\$249.68	\$249.68	\$249.68	\$249.68	\$249.68	\$249.68	\$249.68
Any Member Paid / P/HPM	\$2,451	\$2,239	\$2,449	\$2,444	\$2,444	\$2,444	\$2,444	\$2,444	\$2,444	\$2,444	\$2,444	\$2,444	\$2,444
Drug Type													
Total P/HPM	0.61	0.59	0.56	0.68	0.65	0.63	0.61	0.61	0.61	0.62	0.62	0.64	0.59
Any Drug Cost P/HPM	\$185.27	\$186.47	\$173.03	\$175.76	\$182.51	\$183.36	\$183.36	\$183.36	\$183.36	\$183.36	\$183.36	\$183.36	\$183.36
Any P/HPM Paid P/HPM	\$151.21	\$173.27	\$165.30	\$169.35	\$170.51	\$170.51	\$170.51	\$170.51	\$170.51	\$170.51	\$170.51	\$170.51	\$170.51
Any Member Paid P/HPM	\$13.05	\$13.20	\$13.73	\$15.41	\$17.00	\$16.77	\$16.77	\$16.77	\$16.77	\$16.77	\$16.77	\$16.77	\$16.77
Drug Type													
% All-Specific Brand Rx	14.4%	14.5%	14.1%	14.4%	14.4%	14.4%	14.4%	14.4%	14.3%	14.3%	14.3%	14.3%	14.3%
% All-Specific Brand P/HPM	0.0%	0.0%	0.0%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%
% Generic Rx	85.6%	84.0%	83.8%	84.9%	82.8%	81.0%	81.0%	81.0%	84.6%	84.6%	84.6%	84.6%	84.6%
% Generic P/HPM	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
Drug Channel													
% Retail Rx	64.9%	65.9%	64.7%	64.7%	64.2%	64.2%	64.2%	64.2%	64.2%	64.2%	64.2%	64.2%	64.2%
% Mail Rx	35.1%	34.1%	35.3%	35.3%	35.8%	35.8%	35.8%	35.8%	35.8%	35.8%	35.8%	35.8%	35.8%
Specialty Drugs													
Total Specialty Rx	111	122	122	109	128	119	117	117	117	117	117	117	117
Total Specialty Drug Cost	\$16,726.37	\$23,851.39	\$57,415.87	\$77,398.99	\$99,329.04	\$99,329.04	\$99,329.04	\$99,329.04	\$99,329.04	\$99,329.04	\$99,329.04	\$99,329.04	\$1,811,872.10
Total Specialty P/HPM	\$7,713.21	\$9,659.33	\$17,327.27	\$19,329.98	\$23,750.30	\$23,750.30	\$23,750.30	\$23,750.30	\$23,750.30	\$23,750.30	\$23,750.30	\$23,750.30	\$433,158.70
% Specialty Member Paid	\$250,000.00	\$271,652.26	\$271,652.26	\$271,652.26	\$271,652.26	\$271,652.26	\$271,652.26	\$271,652.26	\$271,652.26	\$271,652.26	\$271,652.26	\$271,652.26	\$271,652.26
% Specialty of Total Drug Cost	41.7%	44.2%	42.9%	39.0%	36.5%	36.6%	36.6%	36.6%	42.9%	42.9%	42.9%	42.9%	42.9%
% Specialty of Total P/HPM	49.8%	47.0%	47.9%	39.0%	41.0%	39.6%	39.6%	39.6%	47.0%	47.0%	47.0%	47.0%	47.0%
% Specialty of Total Member Paid	19.1%	17.0%	15.9%	11.0%	15.1%	12.7%	12.7%	12.7%	23.9%	23.9%	23.9%	23.9%	23.9%
Any Specialty Drug Cost P/HPM	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01
Any Specialty P/HPM	\$217.02	\$311.98	\$311.98	\$311.98	\$311.98	\$311.98	\$311.98	\$311.98	\$311.98	\$311.98	\$311.98	\$311.98	\$311.98
Any Specialty Member Paid P/HPM	\$24.40	\$24.32	\$24.32	\$24.32	\$24.32	\$24.32	\$24.32	\$24.32	\$24.32	\$24.32	\$24.32	\$24.32	\$24.32
Any Non-Specialty Drug Cost P/HPM	\$88.11	\$102.79	\$105.04	\$111.57	\$114.01	\$116.67	\$116.67	\$116.67	\$116.67	\$116.67	\$116.67	\$116.67	\$116.67
Any Non-Specialty P/HPM	\$97.54	\$91.31	\$94.44	\$94.44	\$94.44	\$94.44	\$94.44	\$94.44	\$94.44	\$94.44	\$94.44	\$94.44	\$94.44
Any Non-Specialty Member Paid P/HPM	\$10.58	\$10.68	\$11.00	\$11.00	\$11.43	\$11.43	\$11.43	\$11.43	\$11.43	\$11.43	\$11.43	\$11.43	\$11.43

1 of 3
This document includes any associated documents, may contain information that is confidential and may be privileged and exempt from disclosure under applicable laws. It is intended solely for the use of the individual named herein. If you are not the named individual, you are hereby notified that any use, disclosure, dissemination, or copying of this document is strictly prohibited. If you have received this document in error, please notify the distributor. Thank you for your cooperation.

Current Period: Date Submitted From April 2025 Through March 2026
Previous Period: Date Filled From April 2024 Through March 2025

Client: Fresno City Employees Health and Welfare Trust

Measures	Current Period	Previous Period	% Change
Membership			
Avg Eligible Members	11,680	8,756	33.4%
% Utilizing Members	64.9%	77.8%	-16.6%
Total Utilizing Members	7,578	6,814	11.2%
Avg Member Age	31.27	31.16	0.4%
Rx and Cost			
Total Days Supply	3,749,509	2,813,552	43.5%
Total Rx	83,283	60,824	36.9%
Total Drug Cost	\$26,946,766.06	\$17,146,193.87	57.2%
Total Plan Paid	\$24,818,447.38	\$15,721,320.88	57.9%
Total Member Paid	\$2,128,318.68	\$1,424,872.99	49.4%
Total Ingredient Cost	\$26,882,608.05	\$17,110,061.20	57.1%
Total Dispensing Fee	\$38,555.46	\$30,308.39	27.2%
Total Sales Tax	\$32.55	\$4.28	660.5%
Total Incentive Fee	\$25,570.00	\$5,820.00	336.3%
% Plan Paid	92.1%	91.7%	0.4%
% Member Paid	7.9%	8.3%	-4.0%
Days Supply / Rx	45.02	42.97	4.8%
Drug Cost / Rx	\$323.66	\$281.60	14.8%
Plan Paid / Rx	\$298.00	\$258.47	15.3%
Member Paid / Rx	\$25.56	\$23.43	9.1%
Per Member Per Month			
Days Supply PMPM	26.75	24.87	7.6%
Rx PMPM	0.69	0.58	2.7%
Drug Cost PMPM	\$192.26	\$163.18	17.8%
Plan Paid PMPM	\$177.08	\$149.62	18.4%
Member Paid PMPM	\$15.19	\$13.56	12.0%
Drug Type			
% Single-Source Brand Rx	16.7%	15.2%	9.6%
% Multi-Source Brand Rx	0.1%	0.1%	48.3%
% Generic Rx	83.2%	84.7%	-1.8%
% Generic Efficiency	99.9%	99.9%	-0.0%
Drug Channel			
% Retail Rx	64.5%	68.1%	-5.3%
% Retail 90 Rx	26.0%	24.4%	6.5%
% Mail Rx	9.5%	7.5%	26.3%
Specialty Drugs			
Total Specialty Days Supply	44,327	28,331	56.5%
Total Specialty Rx	1,442	913	57.9%
Total Specialty Drug Cost	\$10,811,872.10	\$7,874,861.43	40.9%
Total Specialty Plan Paid	\$10,423,135.70	\$7,425,519.81	40.4%
Total Specialty Member Paid	\$368,736.40	\$249,341.62	55.9%
% Specialty Rx	1.7%	1.5%	15.3%
% Specialty of Total Drug Cost	40.1%	44.8%	-10.4%
% Specialty of Total Plan Paid	42.0%	47.2%	-11.1%
% Specialty of Total Member Paid	18.3%	17.5%	4.4%
Specialty Days Supply PMPM	0.32	0.27	17.3%
Specialty Rx PMPM	0.01	0.01	18.4%
Specialty Drug Cost PMPM	\$77.14	\$73.04	5.6%
Specialty Plan Paid PMPM	\$74.37	\$70.67	5.2%
Specialty Member Paid PMPM	\$2.77	\$2.37	16.9%
Non-Specialty Rx PMPM	0.58	0.57	2.4%
Non-Specialty Drug Cost PMPM	\$115.12	\$90.14	27.7%
Non-Specialty Plan Paid PMPM	\$102.71	\$78.95	30.1%
Non-Specialty Member Paid PMPM	\$12.41	\$11.19	10.9%

This document, including any associated documents, may contain information that is confidential and may be privileged and exempt from disclosure under applicable law. It is intended solely for the use of the individual or entity for which it is created. If you are not the intended recipient of this information, you are hereby notified that any use, disclosure, dissemination, or copying of this document is strictly prohibited. If you have received this document in error, please notify the distributor. Thank you for your cooperation.

Measures	April 2025	May 2025	June 2025	July 2025	August 2025	September 2025	October 2025	November 2025	December 2025	January 2025	February 2025	March 2025	Rolling Total
Membership													
Any Eligible Members	232	231	229	228	228	231	224	224	223	225	224	223	228
Total Unenrolled Members	189	189	189	189	189	189	189	189	189	189	189	189	189
% Unenrolled Members	77.4%	77.4%	77.4%	77.4%	77.4%	77.4%	77.4%	77.4%	77.4%	77.4%	77.4%	77.4%	77.4%
Any Member Age	76.23	76.21	76.12	76.12	76.12	76.23	76.12	76.12	76.23	76.12	76.12	76.12	76.19
Rx and Cost													
Total Rx Cost	\$194,323.31	\$213,278.60	\$238,847.36	\$193,788.23	\$201,728.45	\$276,342.35	\$253,893.87	\$242,370.83	\$247,689.71	\$248,395.35	\$319,427.15	\$319,427.15	\$2,865,845.96
Total Plan Paid	\$148,427.07	\$167,258.93	\$200,778.84	\$149,240.45	\$174,568.56	\$270,725.22	\$249,469.14	\$239,258.19	\$239,624.27	\$239,624.27	\$299,846.34	\$317,067.63	\$2,796,210.03
Total Member Paid	\$6,857.01	\$6,026.53	\$7,447.81	\$6,022.81	\$6,001.29	\$6,501.22	\$4,348.44	\$3,109.29	\$8,426.26	\$8,426.26	\$9,252.01	\$7,252.01	\$68,731.11
Total Prescription Cost	\$183,049.13	\$211,293.14	\$231,069.52	\$187,547.42	\$195,160.89	\$270,841.13	\$250,425.29	\$246,111.35	\$239,057.24	\$241,262.88	\$309,575.13	\$311,813.13	\$2,806,904.84
Total Dispensation Fee	\$449.15	\$339.60	\$374.20	\$452.81	\$467.60	\$441.22	\$418.25	\$388.65	\$411.25	\$411.25	\$438.65	\$373.70	\$4,654.55
Total Sales Tax	\$10,825.03	\$12,647.94	\$17,405.34	\$13,588.00	\$14,192.60	\$19,503.76	\$18,500.78	\$17,521.78	\$17,521.78	\$17,521.78	\$21,000.00	\$21,000.00	\$186,000.00
Total Plan Fee	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00	\$300.00
% Member Paid	96.2%	97.2%	96.0%	97.1%	97.4%	96.0%	96.3%	96.0%	96.4%	96.4%	97.2%	97.0%	97.7%
% Member Paid / Rx	3.8%	2.8%	3.0%	2.8%	2.7%	3.8%	3.7%	3.6%	3.6%	3.6%	2.4%	2.4%	2.4%
Any Drug Cost / Rx	\$262.50	\$388.19	\$430.47	\$315.85	\$388.32	\$462.23	\$427.43	\$414.89	\$414.89	\$414.89	\$518.28	\$532.27	\$411.22
Any Plan Paid / Rx	\$525.45	\$578.19	\$647.52	\$501.67	\$555.18	\$655.77	\$605.74	\$578.74	\$578.74	\$578.74	\$695.54	\$705.27	\$601.24
Any Member Paid / Rx	\$3.85	\$3.85	\$3.85	\$3.85	\$3.85	\$3.85	\$3.85	\$3.85	\$3.85	\$3.85	\$3.85	\$3.85	\$3.85
Specialty Drugs													
Total Specialty Rx Cost	\$98,026.28	\$119,374.07	\$125,930.61	\$104,151.18	\$114,516.50	\$173,278.67	\$139,510.77	\$147,189.23	\$128,612.73	\$128,612.73	\$159,895.54	\$270,398.44	\$1,665,722.84
Total Specialty Plan Paid	\$67,626.28	\$81,957.88	\$85,660.84	\$70,430.31	\$77,448.33	\$123,526.68	\$93,610.77	\$101,489.23	\$85,812.73	\$85,812.73	\$105,747.65	\$181,574.87	\$1,081,137.75
Total Specialty Member Paid	\$1,001.00	\$872.00	\$1,001.00	\$872.00	\$1,001.00	\$1,001.00	\$872.00	\$872.00	\$1,001.00	\$1,001.00	\$1,001.00	\$1,001.00	\$8,720.00
% Specialty	49.8%	55.8%	53.0%	53.4%	56.1%	61.9%	57.8%	58.5%	53.8%	53.8%	62.7%	84.4%	58.4%
% Specialty of Total Drug Cost	44.1%	55.9%	54.0%	51.7%	51.6%	61.7%	54.9%	59.0%	52.9%	52.9%	72.4%	70.9%	55.7%
% Specialty of Total Member Paid	46.1%	57.5%	57.5%	54.0%	55.9%	67.0%	65.0%	63.0%	57.0%	57.0%	74.7%	77.0%	60.9%
% Specialty of Total Plan Paid	1.7%	3.8%	0.4%	0.0%	0.0%	12.8%	0.0%	0.0%	0.0%	0.0%	3.7%	11.2%	6.7%
Any Specialty Drug Cost / Rx	\$352.03	\$516.01	\$544.10	\$434.04	\$492.82	\$700.04	\$522.82	\$516.01	\$492.82	\$492.82	\$604.04	\$604.04	\$434.04
Any Specialty Plan Paid / Rx	\$255.43	\$444.01	\$444.01	\$344.01	\$344.01	\$444.01	\$344.01	\$344.01	\$344.01	\$344.01	\$444.01	\$444.01	\$344.01
Any Specialty Member Paid / Rx	\$0.43	\$0.08	\$0.33	\$0.33	\$0.11	\$3.05	\$0.00	\$0.00	\$0.00	\$0.00	\$1.07	\$3.00	\$0.33
Any Non-Specialty Drug Cost / Rx	\$251.47	\$372.18	\$426.47	\$371.81	\$426.47	\$462.23	\$425.23	\$414.89	\$414.89	\$414.89	\$518.28	\$532.27	\$411.22
Any Non-Specialty Plan Paid / Rx	\$336.54	\$388.19	\$430.47	\$315.85	\$388.32	\$462.23	\$427.43	\$414.89	\$414.89	\$414.89	\$518.28	\$532.27	\$411.22
Any Non-Specialty Member Paid / Rx	\$4.28	\$4.97	\$5.66	\$4.97	\$5.66	\$6.55	\$5.66	\$5.66	\$5.66	\$5.66	\$6.95	\$7.05	\$5.66
Drug Type													
Total Rx Payers	2,455	2,427	2,391	2,372	2,426	2,457	2,465	2,430	2,426	2,426	2,426	2,426	2,455
Any Drug Cost Payer	\$665.31	\$823.27	\$1,030.51	\$846.23	\$868.28	\$1,195.31	\$1,133.45	\$1,050.64	\$1,066.86	\$1,133.77	\$1,153.96	\$1,364.86	\$1,048.98
Any Plan Paid Payer	\$595.77	\$897.19	\$899.03	\$922.01	\$941.47	\$1,113.81	\$1,113.81	\$1,038.43	\$1,038.43	\$1,073.82	\$1,154.87	\$1,365.74	\$1,022.50
Any Member Paid Payer	\$26.55	\$26.55	\$26.55	\$26.55	\$26.55	\$26.55	\$26.55	\$26.55	\$26.55	\$26.55	\$26.55	\$26.55	\$26.55
Drug Type													
% Generic	11.8%	12.4%	11.2%	10.4%	12.4%	14.8%	14.8%	13.3%	13.0%	13.0%	11.3%	13.0%	12.0%
% Generic / Rx	86.0%	86.5%	82.0%	84.5%	86.0%	86.0%	86.0%	86.0%	86.0%	86.0%	87.2%	85.0%	85.9%
% Generic Efficiency	99.3%	99.0%	97.4%	97.4%	98.3%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%
Drug Channel													
% Retail Rx	44.7%	44.3%	41.1%	44.0%	45.5%	47.1%	43.3%	41.8%	42.9%	44.1%	44.7%	44.7%	43.2%
% Mail Rx	55.3%	55.7%	58.9%	56.0%	54.5%	52.9%	56.7%	58.2%	57.1%	55.9%	55.3%	55.3%	56.8%
Specialty Drugs													
Total Specialty Rx Cost	\$98,026.28	\$119,374.07	\$125,930.61	\$104,151.18	\$114,516.50	\$173,278.67	\$139,510.77	\$147,189.23	\$128,612.73	\$128,612.73	\$159,895.54	\$270,398.44	\$1,665,722.84
Total Specialty Plan Paid	\$67,626.28	\$81,957.88	\$85,660.84	\$70,430.31	\$77,448.33	\$123,526.68	\$93,610.77	\$101,489.23	\$85,812.73	\$85,812.73	\$105,747.65	\$181,574.87	\$1,081,137.75
Total Specialty Member Paid	\$1,001.00	\$872.00	\$1,001.00	\$872.00	\$1,001.00	\$1,001.00	\$872.00	\$872.00	\$1,001.00	\$1,001.00	\$1,001.00	\$1,001.00	\$8,720.00
% Specialty	49.8%	55.8%	53.0%	53.4%	56.1%	61.9%	57.8%	58.5%	53.8%	53.8%	62.7%	84.4%	58.4%
% Specialty of Total Drug Cost	44.1%	55.9%	54.0%	51.7%	51.6%	61.7%	54.9%	59.0%	52.9%	52.9%	72.4%	70.9%	55.7%
% Specialty of Total Member Paid	46.1%	57.5%	57.5%	54.0%	55.9%	67.0%	65.0%	63.0%	57.0%	57.0%	74.7%	77.0%	60.9%
% Specialty of Total Plan Paid	1.7%	3.8%	0.4%	0.0%	0.0%	12.8%	0.0%	0.0%	0.0%	0.0%	3.7%	11.2%	6.7%
Any Specialty Drug Cost / Rx	\$352.03	\$516.01	\$544.10	\$434.04	\$492.82	\$700.04	\$522.82	\$516.01	\$492.82	\$492.82	\$604.04	\$604.04	\$434.04
Any Specialty Plan Paid / Rx	\$255.43	\$444.01	\$444.01	\$344.01	\$344.01	\$444.01	\$344.01	\$344.01	\$344.01	\$344.01	\$444.01	\$444.01	\$344.01
Any Specialty Member Paid / Rx	\$0.43	\$0.08	\$0.33	\$0.33	\$0.11	\$3.05	\$0.00	\$0.00	\$0.00	\$0.00	\$1.07	\$3.00	\$0.33
Any Non-Specialty Drug Cost / Rx	\$251.47	\$372.18	\$426.47	\$371.81	\$426.47	\$462.23	\$425.23	\$414.89	\$414.89	\$414.89	\$518.28	\$532.27	\$411.22
Any Non-Specialty Plan Paid / Rx	\$336.54	\$388.19	\$430.47	\$315.85	\$388.32	\$462.23	\$427.43	\$414.89	\$414.89	\$414.89	\$518.28	\$532.27	\$411.22
Any Non-Specialty Member Paid / Rx	\$4.28	\$4.97	\$5.66	\$4.97	\$5.66	\$6.55	\$5.66	\$5.66	\$5.66	\$5.66	\$6.95	\$7.05	\$5.66

2 of 3
This document, including any associated documents, may contain information that is confidential and may be privileged and exempt from disclosure under applicable law. It is intended solely for the use of the addressee and is not to be distributed, disseminated, or copied by any other person. If you are not the intended recipient, you are hereby notified that any use, disclosure, dissemination, or copying of the document is strictly prohibited. If you have received this document in error, please notify the sender by e-mail.

Current Period: Date Submitted From April 2025 Through March 2026
Previous Period: Date Filled From April 2024 Through March 2025

Client: Fresno City Employees Health and Welfare Trust EGWP

Measures	Current Period	Previous Period	% Change
Membership			
Avg Eligible Members	228	228	-0.3%
% Utilizing Members	102.8%	102.0%	0.7%
Total Utilizing Members	234	233	0.4%
Avg Member Age	76.16	76.54	-0.5%
Rx and Cost			
Total Days Supply	409,285	400,792	2.1%
Total Rxs	6,969	6,719	3.7%
Total Drug Cost	\$2,865,815.96	\$1,654,956.77	73.2%
Total Plan Paid	\$2,796,210.03	\$1,309,298.15	113.6%
Total Member Paid	\$68,731.11	\$345,263.66	-80.1%
Total Ingredient Cost	\$2,860,121.41	\$1,649,173.67	73.4%
Total Dispensing Fee	\$4,854.55	\$4,403.10	10.3%
Total Sales Tax	\$0.00	\$0.00	0.0%
Total Incentive Fee	\$940.00	\$1,360.00	-39.1%
% Plan Paid	97.6%	78.1%	23.3%
% Member Paid	2.4%	20.9%	-88.5%
Days Supply / Rx	58.73	59.65	-1.5%
Drug Cost / Rx	\$411.22	\$246.31	67.0%
Plan Paid / Rx	\$401.24	\$194.67	105.6%
Member Paid / Rx	\$9.66	\$51.29	-80.6%
Per Member Per Month			
Days Supply PMPM	149.81	146.27	2.4%
Rxs PMPM	2.55	2.45	4.0%
Drug Cost PMPM	\$1,046.98	\$604.00	73.7%
Plan Paid PMPM	\$1,023.50	\$477.85	114.2%
Member Paid PMPM	\$25.16	\$126.01	-80.0%
Drug Type			
% Single-Source Brand Rxs	12.8%	12.5%	2.5%
% Multi-Source Brand Rxs	1.3%	1.3%	4.2%
% Generic Rxs	85.8%	86.2%	-0.4%
% Generic Efficiency	98.5%	98.5%	-0.1%
Drug Channel			
% Retail Rxs	43.5%	43.5%	-0.0%
% Retail 90 Rxs	33.0%	33.6%	-1.5%
% Mail Rxs	23.5%	23.0%	2.3%
Specialty Drugs			
Total Specialty Days Supply	3,017	1,920	57.1%
Total Specialty Rxs	93	58	60.3%
Total Specialty Drug Cost	\$1,695,722.94	\$545,916.81	210.6%
Total Specialty Plan Paid	\$1,691,137.75	\$534,255.63	216.5%
Total Specialty Member Paid	\$4,585.19	\$11,720.98	-60.9%
% Specialty Rxs	1.3%	0.9%	54.6%
% Specialty of Total Drug Cost	59.2%	33.0%	79.4%
% Specialty of Total Plan Paid	60.5%	40.8%	48.2%
% Specialty of Total Member Paid	6.7%	3.4%	95.5%
Specialty Days Supply PMPM	1.10	0.70	57.6%
Specialty Rxs PMPM	0.03	0.02	60.8%
Specialty Drug Cost PMPM	\$620.69	\$199.26	211.5%
Specialty Plan Paid PMPM	\$619.01	\$194.98	217.5%
Specialty Member Paid PMPM	\$1.88	\$4.28	-80.8%
Non-Specialty Rxs PMPM	2.52	2.43	3.5%
Non-Specialty Drug Cost PMPM	\$428.29	\$404.74	5.8%
Non-Specialty Plan Paid PMPM	\$404.49	\$282.86	43.0%
Non-Specialty Member Paid PMPM	\$23.48	\$121.73	-80.7%

From: [Georgeanne White](#)
To: [Office FCEA](#)
Cc: [Michael Moss](#); [Tom Georgouses](#); [Diana Cavazos](#); [David Broome](#)
Subject: Re: Berkeley Research Group (BRG) Security Incident Notification - Fresno City Employees Health and Welfare Trust
Date: Saturday, April 11, 2026 10:10:39 PM
Attachments: [image001.png](#)

External Email: This message originated from outside Personify Health.

Me too. Approved.

On Apr 11, 2026, at 5:48 PM, FCEA Office <office@fceamail.com> wrote:

External Email: Use caution with links and attachments

I vote to accept the contractors offer to provide the normal notifications and post breach credit protection services.

Sent via the Samsung Galaxy S26 Ultra, an AT&T 5G smartphone

Get [Outlook for Android](#)

From: Michael Moss <mmoss@mossfirm.org>

Sent: Saturday, April 11, 2026 4:30:27 PM

To: Georgeanne White <georgeanne.White@fresno.gov>; FCEA Office <Office@fceamail.com>; Tom Georgouses <tgeorgouses@healthcomp.com>; Diana Cavazos <Diana.Cavazos@personifyhealth.com>; David Broome <davidb@rael-letson.com>

Subject: Fwd: Berkeley Research Group (BRG) Security Incident Notification - Fresno City Employees Health and Welfare Trust

Georgeanne and Sam- Attached please find yet another data security breach impacting FCEHT Participants. This time it is an Optum subcontractor. It appears very similar to all the other breach events reported to the Trust over the past couple of years. Apparently, only 8 Participants were impacted.

I recommend the Trust treat this the same as all the other recent security breach situations. Specifically, place the responsibility for notices, credit checks, government reporting, if any, etc. squarely on the entity that experienced the breach (with a "guarantee of performance" by Optum as the entity that subcontracted to that entity).

Note that Carolyn from Optum indicates an April 26, 2026 deadline for the Trust to accept the subcontractor's offer to handle the matter. Since the Board will not meet until May, it falls on the two of you to authorize a course of action. Please respond directly to Diana and Tom, copying me, to confirm how you want to proceed. Don't hesitate to contact the Plan Professionals if you have any concerns or questions. Although we may have become numb to these incidents, we still need to follow the standard protocol. Thank you.

----- Forwarded message -----

From: **Martinez, Carolyn** <carolyn.martinez@optum.com>
Date: Wed, Apr 1, 2026 at 7:28 AM
Subject: Berkeley Research Group (BRG) Security Incident Notification - Fresno City Employees Health and Welfare Trust
To: moss@mossfirm.org <moss@mossfirm.org>, thomas.georgouses@personifyhealth.com <thomas.georgouses@personifyhealth.com>, David Broome <davidb@rael-letson.com>, Martin Fornataro <martinf@rael-letson.com>, Diana Cavazos <diana.cavazos@personifyhealth.com>, Nikki Vang <nikki.vang@personifyhealth.com>
Cc: Ross, Shannon C <shannon.ross@optum.com>

Good morning,

I wanted to bring to your attention a recent notification I received regarding a data breach involving the Optum Rx vendor, Berkeley Research Group (BRG).

Attached for your review are the following materials:

- Our formal notification to the Board
- Optum Rx's Customer Report
- BRG's Impacted Individual Notification Letter template
- The Four-Factor Risk Assessment prepared by BRG's counsel, Octillo Law Firm
- Booz Allen's attestation

Please note that there is a call to action for clients who wish to engage BRG to assist with notification activities. Written delegation must be submitted to Optum no later than **April 26, 2026**.

I am seeking guidance on how you would like to proceed, as the Board does not meet until May, which presents a challenge in obtaining formal Board review within the required timeframe.

Thank you for taking the time to review these materials. I appreciate your direction on next steps.

Regards,
Carolyn

Carolyn Martinez (she/her)

Senior Account Manager, Public Sector | Optum Rx

O 1-612-428-6104

M 1-702-708-1849

carolyn.martinez@optum.com

<image001.png>

Upcoming PTO Alert: 4/6/2026 – 4/10/2026

Business Travel: 4/2/2026 – 4/3/2026 & 4/30/2026

Office Closure:

This e-mail, including attachments, may include confidential and/or proprietary information, and may be used only by the person or entity to which it is addressed. If the reader of this e-mail is not the intended recipient or intended recipient's authorized agent, the reader is hereby notified that any dissemination, distribution or copying of this e-mail is prohibited. If you have received this e-mail in error, please notify the sender by replying to this message and delete this e-mail immediately.

--

The Law Office of Michael E. Moss
Michael E. Moss, Esq.
mmoss@mossfirm.org
Direct Dial: (559) 269-4744
Facsimile: (415) 757-3416
www.mossfirm.org

THE LAW OFFICE OF MICHAEL E. MOSS
201 SPEAR STREET, SUITE 1100
SAN FRANCISCO, CA 94105

Confidentiality Notice

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

Thank you.

Privacy Incident Investigation Report

Submitted By: Optum Privacy Office

Optum Case Number	1222341
Incident Date	February 28, 2025
Vendor Date of Discovery	March 2, 2025
Optum Date of Discovery	March 24, 2026
Customer Notification Date	March 31, 2026
Incident Summary	<p>The Optum Privacy Office was notified of a security incident by Optum Rx’s vendor and business associate Berkeley Research Group (“BRG”).</p> <p>BRG’s investigation revealed that between February 28, 2025, and March 2, 2025, an unauthorized actor was able to access the BRG network and exfiltrated approximately 3.3TB of BRG data, containing millions of files.</p> <p>On February 27, 2026, BRG’s data mining team identified one (1) file containing member IDs believed to relate to Optum Rx PBM Client’s data.</p> <p>On March 24, 2026, Optum confirmed that the file contained Optum Rx PBM Client’s data.</p> <p><u>No UnitedHealth Group or Optum systems were involved, and to date, BRG reports no known misuse/fraud or dark web posting regarding the data.</u></p>
Data Elements Involved	<p>PBM Client’s data: Member ID, Cardholder ID, Group ID, name of health insurance carrier/plan, and certain claim and prescription information (including prescribing provider, pharmacy name, medication name, and Rx number). However, the data did not contain first or last names, addresses, email addresses, dates of birth, telephone numbers, SSNs, or banking/payment card information related to any individuals.</p>
Root Cause	<p>According to BRG’s report, social engineering by an unauthorized actor resulted in the deployment of the new Chaos ransomware variant on BRG systems.</p>
Containment/Mitigation	<p>BRG reports that it took immediate steps to contain and remediate the incident, including taking systems offline, rotating credentials, auditing accounts and policies, and enhancing endpoint threat detection and monitoring. BRG also reports additional security improvements, including implementing a tiered Active Directory model to strengthen segregation of duties, hardening group policies, and upgrading firewall firmware and</p>

	<p>software.</p> <p>According to BRG, there has been no observed recurrence of unauthorized access to endpoints within the BRG environment following containment and eradication, and an attestation of containment from BRG’s contracted third-party security and forensics firm, Booz Allen Hamilton, was provided.</p> <p>Additionally, BRG has implemented a new process to remove member identifiers from files received before they are stored in their systems.</p> <p>Since it was made aware of impact to PBM Client’s data, Optum Rx has completed a review of the fields included in files sent to BRG and has reduced the dataset.</p>
Risk Assessment (HIPAA/HITECH)	<p>Optum Rx is providing this security incident summary in our role as the Business Associate to our client. The contracted client, a Covered Entity under HIPAA/HITECH, is responsible for the final risk determination. Should the client determine this incident rises to the level of a Breach under HIPAA/HITECH, BRG is prepared to complete individual and regulatory notifications.</p> <p>If you would like BRG to assist with notification activities, please provide written delegation instructions no later than April 24, 2026. This information should be provided to the Optum Privacy Office at ORxIncidentResponse@optum.com. If we do not receive direction by that date, BRG will <u>not</u> proceed with notification activities on your behalf.</p>



Security incident notification

CONFIDENTIAL CUSTOMER COMMUNICATION

Dear Fresno City Employees Health and Welfare Trust,

Pursuant to our contractual obligations, Optum Rx is writing to inform you that, it was recently notified of a potential impact to its PBM client's data as part of a 2025 security incident experienced by Optum Rx's vendor and Business Associate, Berkeley Research Group ("BRG"). BRG's ongoing data review identified data that Optum Rx believes is attributable to your organization based on the Business Associate services provided to your organization.

Attached please find:

- (1) the Optum Rx Customer Report Form for Impacted Customers
- (2) BRG's template Impacted Individual Notification letter
- (3) the Four-Factor Risk Assessment provided by BRG's Counsel, Octillo Law Firm
- (4) Booz Allen Attestation

Please forward this email, and attachments, to the appropriate privacy, compliance, and/or legal team member(s) within your organization.

If you would like BRG to assist with notification activities, please provide written delegation instructions no later than April 24, 2026. This information should be provided to the Optum Privacy Office at ORXIncidentResponse@optum.com. If we do not receive direction by that date, BRG will not proceed with notification activities on your behalf.

Regards,

Carolyn

© 2026 Optum, Inc. All rights reserved.



TO: OptumRx

FROM: Octillo Law

DATE: March 26, 2026

RE: **CONFIDENTIAL DRAFT** HIPAA Risk Assessment Pursuant to 45 C.F.R. § 164.402(2) concerning *OptumRx MAC Pricing Litigation*

I. Introduction

On behalf of Berkeley Research Group, LLC (“BRG”), we provide the following HIPAA Risk Assessment based on the HIPAA Breach Notification Rule and related ransomware guidance from the Office for Civil Rights (the “Ransomware Guidance”)¹ concerning the cybersecurity incident that BRG discovered on March 2, 2025 (the “Incident”). Upon discovery, BRG immediately took steps to contain and remediate the situation, including taking systems offline, engaging cybersecurity and privacy professionals to assist, and conducting a forensic investigation, which confirmed that unauthorized activity occurred between February 28, 2025, and March 2, 2025.

The investigation determined that the unauthorized actor exfiltrated approximately 3.3TB of BRG data, containing millions of files. Following an extensive analysis of the exfiltrated information with the assistance of its internal teams, a digital forensics firm, and a specialized data mining company, BRG identified one (1) file that contained potential Protected Health Information (“PHI”) relating to OptumRx (and subsidiaries) (“OptumRx”) but did not contain the names of any individuals.² Through further analysis of this file, BRG determined that the following types of Information were **not** impacted as a result of this Incident: first or last name, address, email address, telephone number, date of birth, Social Security number, driver’s license number or government identification number, nor any banking or payment card information. The information contained only the following data elements: Various identifiers such as Member ID, Cardholder ID, Group ID, name of health insurance carrier or plan, certain claim and prescription information (including prescribing provider, pharmacy name, medication name, and Rx number), however, BRG cannot reasonably determine for whom the medications were prescribed.

Accordingly, with guidance from Octillo and based upon its role as a Business Associate, BRG conducted a risk analysis pursuant to the HIPAA Breach Notification Rule for this dataset, which is documented in the memorandum that follows, determining that that there is a sufficiently low probability that PHI within this dataset was compromised such that regulatory reporting or individual notification is not required.

II. HIPAA Risk Assessment: Background

¹ *Fact Sheet: Ransomware and HIPAA*, U.S. Department of Health and Human Services: Office for Civil Rights (Sept. 20, 2021) <https://www.hhs.gov/hipaa/for-professionals/security/guidance/cybersecurity/ransomware-fact-sheet/index.html> (the “Ransomware Guidance”).

² This file is named `mac_ncpdp_clms_20250222.csv`.

A. PHI

Generally, the HIPAA Privacy Rule defines PHI as “individually identifiable health information” held or transmitted by a covered entity or business associate.³ Individually identifiable health information is further defined as information, including demographic data, that could be used to identify an individual, relating to an individual’s past, present, or future physical or mental health or condition; the provision of health care to the individual; or the past, present, or future payment for the provision of health care to the individual.⁴ Based on the investigation, BRG identified that the data attributable to OptumRx includes instances of identifiable health information that could constitute PHI, such as a Member ID, requiring further analysis pursuant to the HIPAA Breach Notification Rule.

B. Security Incident Analysis

A security incident under HIPAA is defined as the “attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system.”⁵ Covered entities should conduct a deeper analysis to determine whether the security incident also resulted in an impermissible disclosure of PHI in violation of the Privacy Rule.⁶

Given that the Incident involved disclosure of data elements related to healthcare, albeit in many instances without member names, BRG proceeded as if the definition of “security incident” has been met and conducted a breach analysis.

C. Breach Analysis

A breach under HIPAA is defined, in relevant part, as “the acquisition, access, use, or disclosure of protected health information in a manner not permitted [under the HIPAA Privacy Rule], which compromises the security or privacy of the protected health information.”⁷ Any unauthorized acquisition, access, use, or disclosure of PHI is presumed to be a breach that requires notification unless there is a “low probability that the PHI has been compromised,” based on the factors set forth in the Breach Notification Rule.⁸ In the Ransomware Guidance, the Office for Civil Rights (“OCR”) indicated that “[t]he risk assessment to determine whether there is a low probability of compromise of the PHI must be thorough, completed in good faith and reach conclusions that are reasonable given the circumstances.”⁹ If there is more than a low probability that the PHI has been compromised, the entity must comply with the applicable breach notification provisions, including notification to affected individuals; the Secretary of Health and Human Services; and if more than 500 individuals are

³ 45 C.F.R. § 160.103.

⁴ *See id.*

⁵ 45 CFR § 164.304.

⁶ *See* 45 C.F.R. § 164.308(a)(6).

⁷ 45 C.F.R. § 164.402.

⁸ 45 C.F.R. § 164.402(2).

⁹ *See* Ransomware Guidance at 7.

impacted in a state or jurisdiction, the media; in accordance with HIPAA breach notification requirements.¹⁰

III. HIPAA Risk Assessments: Breach Analysis

For each dataset, BRG examined the factors of the Breach Notification Rule; i) the nature and extent of the PHI involved, including the types of identifiers and the likelihood of re-identification; ii) the identity of the unauthorized actor; iii) whether the PHI was acquired or viewed; and iv) the extent to which the risk to the PHI has been mitigated.

A. Four Factor Analysis for this Dataset

1. *The nature and extent of the protected health information involved and the likelihood of re-identification:*

This dataset did not contain any member names, address, email address, telephone number, date of birth, Social Security number, driver's license number or government identification number, nor any banking or payment card information but did contain Member ID, Group ID, Health Insurance Carrier, and Prescription Information. Arguably there is no manner by which a member could be reidentified based on this combination of data elements without access to other information, and based on these data elements, BRG cannot reasonably know for whom any medication was prescribed. The data did not contain any inherently sensitive data elements, such as Social Security numbers. Instead, while the Member ID may be a unique identifier of an individual in relation to a health plan, it is a sequence of numbers that cannot be tied back to the individual information without more context. Additionally, it is Octillo's understanding that some Member IDs were truncated. Member ID is not a generally recognizable demographic identifier, and instead only relates to the member within the context of membership within a health plan. Given the limited set of information within the data, the risk of re-identification is extremely low. Even if reidentification was possible with just this information, it would reveal health plan membership rather than inherently sensitive information.

2. *The unauthorized actor:*

The unauthorized actor was associated with the new Chaos ransomware variant, which first appeared in early 2025. Based upon BRG's dialogue with the Federal Bureau of Investigation ("FBI") and threat intelligence from third-party cybersecurity professionals, this new Chaos variant has the financially motivated objective of obtaining ransom payments from its business victims in return for (1) a decryption key and (2) deletion of any exfiltrated information. According to the FBI and the cybersecurity professionals, this ransomware business model is dependent upon maintaining a reputation for following through on the bargain after a payment is received in order to receive more payments from other victims in the future. Further misuse of the exfiltrated information, whether through publishing data on the dark web or using it for identity theft or fraud, would therefore run counter to the financial motivations and strategy of the ransomware group.

¹⁰ See 45 C.F.R. §§ 164.400-414.

Courts have also recognized that ransomware is designed to extort payment from corporate victims, rather than interact with or misuse personal data.¹¹ In this matter, BRG communicated with the unauthorized actor, made a ransom payment in exchange for a guarantee that all exfiltrated information would be deleted, and ultimately received confirmation that the unauthorized actor deleted the data, and that it was not otherwise leaked or disclosed. BRG has also engaged third-party professionals to continuously monitor the dark web and leak sites, and there is currently no indication that the data has been posted, leaked, or otherwise disclosed. Likewise, BRG has continued its dialogue with the FBI, which also has found no reason to believe that the unauthorized actor retained any BRG data, including this dataset.

3. *Whether the protected health information was acquired or viewed:*

As described above, the Incident did not target OptumRx data but instead involved the unstructured exfiltration of 3.3TB of BRG data, containing millions of files. The one (1) OptumRx file containing this dataset was identified only through extensive, time-intensive, and costly analysis from BRG and specialized third-party professionals. There is no evidence or reason to believe that the unauthorized actor was aware that the BRG data contained OptumRx information, nor any evidence or reason to believe that OptumRx data was viewed by or otherwise interacted with by the unauthorized actor.

4. *The extent to which the risk to protected health information has been mitigated:*

Upon discovery of the Incident, BRG took immediate steps to deploy containment measures, including isolating and taking systems offline, enhancing its endpoint threat detection, rotating user credentials, and rebuilding impacted systems only once BRG was advised by its cybersecurity experts that it was safe to do so. Since then, BRG has enhanced its already robust security posture and remains committed to continuously enhancing its defences. The initiatives undertaken by BRG include, but are not limited to, new tools to improve threat detection, response, and monitoring, stronger safeguards around user access and data protection, and expanded procedures to prevent social engineering and credential misuse. Additionally, BRG has worked to upgrade system resilience, email security, and incident response processes. Together, and in addition to previously strong security measures, BRG remains proactive in addressing evolving cyber threats and maintaining high standards of protection for client information.

¹¹ See *In re Practicefirst Data Breach Litig.*, 2022 WL 354544 (W.D.N.Y Feb. 2, 2022) (“Indeed, the primary purpose of a ransomware attack is the exchange of money for access to data, not identity theft. Plaintiffs seem to concede this fact. However, plaintiffs maintain that because their PII and PHI was exfiltrated or copied from defendants’ system as part of the ransomware attack, the hacker must intend to use the data, in the future, for identity theft or fraud. This suggestion is both speculative and belied by the complaint ...”); see also *Graham v. Universal Health Serv.*, 539 F. Supp. 3d 481, 487 (E.D. Pa 2021)(“The target of a ransomware attack is the holder of the confidential data; the misappropriation of the data, whether by theft or merely limitation on access to it, is generally the means to an end: extorting payment.”)

B. Ransomware Guidance Factors

In the Ransomware Guidance, OCR indicated that “[a]lthough entities are required to consider the four factors listed above in conducting their risk assessments to determine whether there is a low probability of compromise of the ePHI, entities are encouraged to consider additional factors, as needed, to appropriately evaluate the risk that the PHI has been compromised. If, for example, there is high risk of unavailability of the data, or high risk to the integrity of the data, such additional factors may indicate compromise.”¹²

Here, the Incident did not create a high risk of unavailability of this dataset, nor create a high risk to the integrity of the data. This dataset was not PHI involved in direct patient care but instead was provided to BRG in connection to litigation, for which BRG provided consulting services. In accordance with the Ransomware Guidance,¹³ BRG maintained backups of PHI included in its systems and was able to restore and analyze this dataset without risk to the integrity of the PHI. At the same time, BRG and third-party professionals confirmed the limitations of Chaos ransomware while also successfully implementing containment efforts that prevented any ongoing malware propagation or communication between Chaos and BRG systems. In alignment with the Ransomware Guidance, BRG undertook these containment steps to prevent any further unauthorized persistence within its environment, including potential communication between unauthorized actors and malware within the BRG environment, which ended any potential for a continuing threat to the integrity of backup datasets.¹⁴

Overall, the additional factors discussed within the Ransomware Guidance do not indicate compromise, but instead demonstrate the appropriate steps taken by BRG to prepare for and respond to a ransomware incident affecting PHI.

IV. Conclusion

Considering these factors together, BRG determined that there is a sufficiently low probability that PHI within the Member ID data was compromised in relation to the Incident. Overall, the PHI present did not contain individual names, treatment or diagnosis information, nor any inherently sensitive data elements. While the data was exfiltrated, BRG has taken significant steps to mitigate the risk to PHI and prevent future incidents from occurring.

¹² Ransomware Guidance at 7.

¹³ *See id.* at 7 (“An entity may be able to show mitigation of the impact of a ransomware attack affecting the integrity of PHI through the implementation of robust contingency plans including disaster recovery and data backup plans.”)

¹⁴ *See id.* (“A thorough and accurate evaluation of the evidence acquired and analyzed as a result of security incident response activities could help entities with the risk assessment process above by revealing, for example: the exact type and variant of malware discovered; the algorithmic steps undertaken by the malware; communications, including exfiltration attempts between the malware and attackers’ command and control servers; and whether or not the malware propagated to other systems, potentially affecting additional sources of electronic PHI (ePHI).”)

Octillo Memorandum
Confidential Draft
March 26, 2026

Accordingly, BRG determined that there is a sufficiently low probability that PHI within this dataset was compromised. BRG, therefore, recommends that notification is not required under the HIPAA Breach Notification Rule for this dataset. Nonetheless, BRG will ultimately defer to the determination of OptumRx regarding whether further analysis or notification is required.

This updated HIPAA Risk analysis supersedes the previous draft sent on March 11, 2026. The OptumRx HIPAA discovery date, based on new information provided, is March 24, 2026.



[DATE]

[Name]

[Address]

[City, State, Zip]

Dear [Name],

We are writing to inform you that Berkeley Research Group, LLC, whose headquarters are located at 2200 Powell Street, Suite 1200, Emeryville, CA 94608 (“BRG” or “we”), experienced a data incident on March 2, 2025, (the “Incident”) that involved your personal information (“Information”). BRG is a global consulting firm that provides consulting, advisory, and expert witness services to clients and law firms. BRG has your data because BRG was provided with your Information in connection with client engagements. This letter provides you with information about this Incident, our response, steps you can take, and information on where to direct any questions you may have. Additionally, although we are unaware of any fraud or identity theft involving your Information stemming from the Incident, as a precaution we have also provided steps you can take to protect your Information, including the ability to enroll in credit monitoring services that we are offering free of charge for twenty-four (24) months.

What Happened?

On Sunday, March 2, 2025, we detected suspicious activity in our network and immediately launched an investigation with the assistance of leading data security and privacy professionals. Based on the findings from the investigation, an unauthorized actor briefly gained access to our systems from the evening of Friday, February 28, 2025, until Sunday, March 2, 2025. Our analysis also determined that the unauthorized actor was able to copy some of your Information from our network, but we are unaware of any fraud or identity theft involving your Information stemming from the Incident. BRG’s client discovered impact to your data on [insert date].

What Information Was Involved?

We determined that the following types of Information may have been impacted as a result of this Incident: [Data Elements].

We determined that the following types of Information were **not** impacted as a result of this Incident: first or last name, address, email address, telephone number, date of birth, Social Security number, driver’s license number or government identification number, nor any banking or payment card information.

What We Are Doing.

We take this Incident and the security of information in our care seriously. Upon discovery of the Incident, we took immediate steps to deploy containment measures, including enhanced endpoint threat detection, rotating user credentials, and rebuilding impacted systems only once we were advised by our cybersecurity experts it was safe to do so. Further, there have been no alerts of suspicious activity since the response began, and full containment has been documented. BRG has also been cooperating with



federal law enforcement throughout its investigation and response and is reporting this matter to additional authorities.

What Can You Do?

To help relieve concerns and restore confidence following this incident, we have secured the services of Kroll to provide identity monitoring at no cost to you for twenty-four (24) months. Kroll is a global leader in risk mitigation and response, and their team has extensive experience helping people. Your identity monitoring services include Credit Monitoring, Fraud Consultation, and Identity Theft Restoration.

Visit [**IDMonitoringURL**] to activate and take advantage of your identity monitoring services.

*You have until [**DATE**], to activate your identity monitoring services.*

Membership Number: [**Member ID**]

For more information about Kroll and your Identity Monitoring services, you can visit info.krollmonitoring.com.

Although we are unaware of any fraud or identity theft involving your Information stemming from the Incident, it is always recommended that you remain vigilant, regularly monitor free credit reports, review account statements, and report any suspicious activity to financial institutions. Please also review the “Additional Resources” section included with this letter, which outlines other resources you can utilize to protect your Information.

For More Information.

If you have additional questions, you may call our toll-free assistance line at 866-291-2114 Monday through Friday from 9am through 6:30pm Eastern Time (excluding U.S. holidays).

Sincerely,

Berkeley Research Group

Encl.

ADDITIONAL RESOURCES

Contact information for the three (3) nationwide credit reporting agencies:

Equifax, PO Box 740241, Atlanta, GA 30374, www.equifax.com, 1-800-685-1111

Experian, PO Box 2104, Allen, TX 75013, www.experian.com, 1-888-397-3742

TransUnion, PO Box 2000, Chester, PA 19022, <https://www.transunion.com/data-breach-help>, 1-833-799-5355

Free Credit Report. It is recommended that you remain vigilant for incidents of fraud and identity theft by reviewing account statements and monitoring your credit report for unauthorized activity. You may obtain a copy of your credit report, free of charge, once every twelve (12) months from each of the three (3) nationwide credit reporting agencies.

To order your annual free credit report please visit www.annualcreditreport.com or call toll free at **1-877-322-8228**.

You can also order your annual free credit report by mailing a completed Annual Credit Report Request Form (available from the U.S. Federal Trade Commission's (FTC) website at www.consumer.ftc.gov) to: Annual Credit Report Request Service, P.O. Box 105281, Atlanta, GA 30348-5281.

For Colorado, Georgia, Maine, Maryland, Massachusetts, New Jersey, Puerto Rico, and Vermont residents: You may obtain one (1) or more (depending on the state) additional copies of your credit report, free of charge. You must contact each of the credit reporting agencies directly to obtain such additional report(s).

Fraud Alert. You may place a fraud alert in your file by calling one (1) of the three (3) nationwide credit reporting agencies above. A fraud alert tells creditors to follow certain procedures, including contacting you before they open any new accounts or change your existing accounts. For that reason, placing a fraud alert can protect you, but also may delay you when you seek to obtain credit.

Security Freeze. You may obtain a security freeze on your credit report, free of charge, to protect your privacy and confirm that credit is not granted in your name without your knowledge. You may also submit a declaration of removal to remove information placed in your credit report as a result of being a victim of identity theft. You have a right to place a security freeze on your credit report, free of charge, or submit a declaration of removal pursuant to the Fair Credit Reporting Act (FCRA).

The security freeze will prohibit a consumer reporting agency from releasing any information in your credit report without your express authorization or approval. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. When you place a security freeze on your credit report, you will be provided with a personal identification number, password, or similar device to use if you choose to remove the freeze on your credit report or to temporarily authorize the release of your credit report to a specific party or parties or for a specific period of time after the freeze is in place.

To place a security freeze on your credit report, you may be able to use an online process, an automated telephone line, or a written request to any of the three (3) credit reporting agencies listed above. The following information must be included when requesting a security freeze (note that if you are requesting a credit report for your spouse, this information must be provided for them as well): (1) full name, with middle initial, and any suffixes; (2) Social Security number; (3) date of birth; (4) current address and any previous addresses for the past five years; and (5) any applicable incident report or complaint with a law enforcement agency or a state department of motor vehicles. The request must also include a copy of a government-issued identification card and a copy of a recent utility bill or bank or insurance statement. It is essential that each copy be legible, and display your name, current mailing address, and the date of issue.

FTC and State Attorneys General Offices. If you believe you are the victim of identity theft or have reason to believe your personal information has been misused, you should immediately contact the FTC and/or the Attorney General's office in your home state. You may also contact these agencies for information on how to prevent or avoid identity theft.

You may contact the **Federal Trade Commission**, Consumer Response Center, 600 Pennsylvania Avenue, NW, Washington, DC 20580, www.ftc.gov/bcp/edu/microsites/idtheft/, 1-877-IDTHEFT (438-4338).

For Alabama residents: You may contact the Attorney General's Office for the State of Alabama, Consumer Protection Division, 501 Washington Avenue, Montgomery, AL 36104, www.alabamaag.gov, 1-800-392-5658.

For California residents: Visit the California Office of Privacy Protection (www.oag.ca.gov/privacy) for additional information on protection against identity theft. Office of the Attorney General of California, 1300 I Street, Sacramento, CA 95814, 1-800-952-5225. This notification was not delayed as a result of any law enforcement investigation.

For Colorado residents: You can obtain information from the federal trade commission and the credit reporting agencies about fraud alerts and security freezes.

For Connecticut residents: You may contact the Connecticut Office of the Attorney General, 165 Capitol Avenue, Hartford, CT 06106, www.ct.gov/ag, 1-860-808-5318.

For District of Columbia residents: You can obtain information about steps to take to avoid identity theft from the FTC (contact information above) and the District of Columbia Office of the Attorney General, 400 6th Street NW, Washington, D.C. 20001, consumer.protection@dc.gov, <https://oag.dc.gov/>, 1-202-737-3400.

For Illinois residents: You can obtain information from the credit reporting agencies and the FTC about fraud alerts and security freezes (contact information above). You may contact the Illinois Office of the Attorney General, 100 West Randolph Street, Chicago, IL 60601, https://illinoisattorneygeneral.gov/about/email_ag.jsp, 1-800-964-3013.

For Iowa residents: You may contact the Iowa Office of the Attorney General, 1305 E. Walnut Street, Des Moines, IA 50319, consumer@ag.iowa.gov; www.iowaattorneygeneral.gov, 1-888-777-4590. You are advised to report any suspected identity theft to law enforcement or to the Iowa Attorney General.

For Kansas residents: You may contact the Kansas Office of the Attorney General, Consumer Protection Division, 120 SW 10th Ave, 2nd Floor, Topeka, KS 66612-1597, <https://ag.ks.gov/>, 1-800-432-2310.

For Kentucky residents: You may contact the Kentucky Office of the Attorney General, Consumer Protection Division, 1024 Capital Center Drive, Suite 200, Frankfort, Kentucky 40601, www.ag.ky.gov, 1-800-804-7556.

For Maryland residents: You may obtain information about steps you can take to avoid identity theft from the FTC (contact information above) and the Maryland Office of the Attorney General, Consumer Protection Division, 200 St. Paul Place, Baltimore, MD 21202, www.marylandattorneygeneral.gov, 1-888-743-0023.

For Massachusetts residents: You may contact the Office of the Massachusetts Attorney General, 1 Ashburton Place, Boston, MA 02108, 1-617-727-8400, www.mass.gov/ago/contact-us.html. You have the right to obtain a police report if you are a victim of identity theft.

For Minnesota residents: You may contact the Minnesota Office of the Attorney General, 445 Minnesota Street, Suite 1400, St. Paul, MN 55101, www.ag.state.mn.us, 1-800-657-3787.

For Missouri residents: You may contact the Missouri Office of the Attorney General, Consumer Protection, 207 W. High St., P.O. Box 899, Jefferson City, MO 65102, www.ago.mo.gov, 1-800-392-8222.

For Nevada residents: You may contact the Nevada Office of the Attorney General, Bureau of Consumer Protection, 100 N. Carson St, Carson City, NV 89701, www.ag.nv.gov, 1-702-486-3132.

For New Mexico residents: Consumers have rights pursuant to the FCRA, such as the right to be told if information in their credit file has been used against them, the right to know what is in their credit file, the right to ask for their credit score, and the right to dispute incomplete or inaccurate information. Further, pursuant to the FCRA, the consumer reporting bureaus must correct or delete inaccurate, incomplete, or unverifiable information; consumer reporting agencies may not report outdated negative information; access to consumers' files is limited; consumers must give consent for credit reports to be provided to employers; consumers may limit "prescreened" offers of credit and insurance based on information in their credit report; and consumers may seek damages from violators. Consumers may have additional rights under the FFCRA not summarized here. Identity theft victims and active-duty military personnel have specific additional rights pursuant to the FCRA. We encourage consumers to review their rights pursuant to the FCRA by writing Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580, or by visiting www.consumerfinance.gov/f/201504_cfpb_summary_your-rights-under-fcra.pdf.

For New York residents: You may obtain information regarding security breach response and identity theft prevention and protection information from the FTC (contact information above) and the New York Office of the Attorney General, Office of the Attorney General, The Capitol, Albany, NY 12224-0341, <https://ag.ny.gov>, 1-800-771-7755.

For North Carolina residents: You may obtain information about preventing identity theft from the FTC (contact information above) and the North Carolina Office of the Attorney General, Consumer Protection Division, 9001 Main Service Center, Raleigh, NC 27699-9001, www.ncdoj.gov, 1-877-566-7266 or 1-919-716-6400. You are advised to report any suspected identity theft to law enforcement or to the North Carolina Attorney General.

For Oregon residents: Oregon Department of Justice, 1162 Court Street NE, Salem, OR 97301-4096, www.doj.state.or.us/, Telephone: 1-877-877-9392. You are advised to report any suspected identity theft to law enforcement, the FTC, and the Oregon Attorney General.

For Pennsylvania residents: You may contact the Pennsylvania Office of the Attorney General, Bureau of Consumer Protection, 15th Floor, Strawberry Square, Harrisburg, PA 17120, www.attorneygeneral.gov, 1-800-441-2555.

For Rhode Island residents: You may contact the Rhode Island Office of the Attorney General, Consumer Protection Division, 150 South Main Street, Providence, RI 02903, www.riag.ri.gov, 1-401-274-4400. You have the right to file or obtain any police report in regard to this incident.

For Texas residents: You may contact the Texas Office of the Attorney General, Office of the Attorney General, PO Box 12548, Austin, TX 78711-2548, www.texasattorneygeneral.gov, 1-800-621-0508.

For Wyoming residents: This notification was not delayed as a result of any law enforcement investigation.

Reporting of identity theft and obtaining a police report. You have the right to obtain any police report filed in the United States in regard to this incident. If you are the victim of fraud or identity theft, you also have the right to file a police report.

CONFIDENTIAL

To: Whom it May Concern
From: Booz Allen Hamilton
Ref: Berkeley Research Group
Date: March 13, 2025

On March 2, 2025, Berkeley Research Group (BRG) experienced a cybersecurity incident involving a user that was socially engineered which led to the deployment of ransomware and encryption of data. Booz Allen Hamilton (Booz Allen) was engaged by BRG's counsel to assist in responding to the incident.

Booz Allen is a consulting firm which specializes in digital forensics and incident response, handling numerous ransomware, malware, and business email compromise (BEC) investigations per year. Booz Allen provides a full suite of incident response services including digital forensic investigations, incident containment, restoration and recovery services, threat hunting and Endpoint Detection and Response (EDR) monitoring.

In support of the investigation the Booz Allen Threat Detection and Response (TDR) team worked with the Berkeley Research Group team to deploy an EDR tool (SentinelOne) to all systems including high-value target servers and computer endpoints within the environment and have confirmed 100% saturation. Threat hunting has been performed daily, and continuously, through the date of this letter, specifically to identify suspect binaries and executions both current and historical based on the available evidence. Any indicators of compromise identified as result of the forensic investigation were re-mediated and added to be banned within the SentinelOne EDR platform. At this time, Booz Allen has not observed further activity by any unauthorized person or malicious and suspicious files in the BRG environment following the incident. In addition, and according to security best practices, The Booz Allen team with support from the BRG team undertook a series of decisive and comprehensive measures to enhance security and resilience:

1. **Deployment of SentinelOne:** SentinelOne was deployed with 100% coverage and monitored 24/7. Its playbook was enhanced with indicators of compromise from this engagement as well as previous ones, ensuring comprehensive protection.
2. **Global Password Reset:** A global reset was conducted for all user, administrator, and service account passwords. The Kerberos ticketing account, used for Windows environment authentication, had its password changed twice initially and once more after twelve hours to eliminate any cached or clear-text credentials.
3. **Compromised User Account:** The affected user account had its password reset and was then disabled. A new account was created to replace the compromised one.
4. **Active Directory Audit:** The Active Directory was thoroughly audited to identify any suspicious accounts or unauthorized changes. No evidence of such activity was found.
5. **Group Policy Audit:** An audit of Group Policies was conducted to detect any unauthorized changes or newly created policies, with none identified.

By: 

Name: Brendan Rooney

Title: Senior Vice President



DELTA DENTAL SELF-FUNDED FINANCIAL REPORT PACKAGE

**FRESNO CITY EES HEALTH &
Group Number: 00273**



TABLE OF CONTENTS

FRESNO CITY EES HEALTH & Group Number: 00273

Tab	Report Title
Summary	SUMMARY OF KEY STATISTICS
1	MONTHLY FINANCIAL EXPERIENCE
2	MONTHLY FINANCIAL EXPERIENCE BY DIVISION
3	DATA TABLE FOR CLAIM LAG IN GROUP SUMMARY AND BY DIVISION



**DELTA DENTAL OF CALIFORNIA
SUMMARY OF KEY STATISTICS
FRESNO CITY EES HEALTH &
Group Number: 00273**

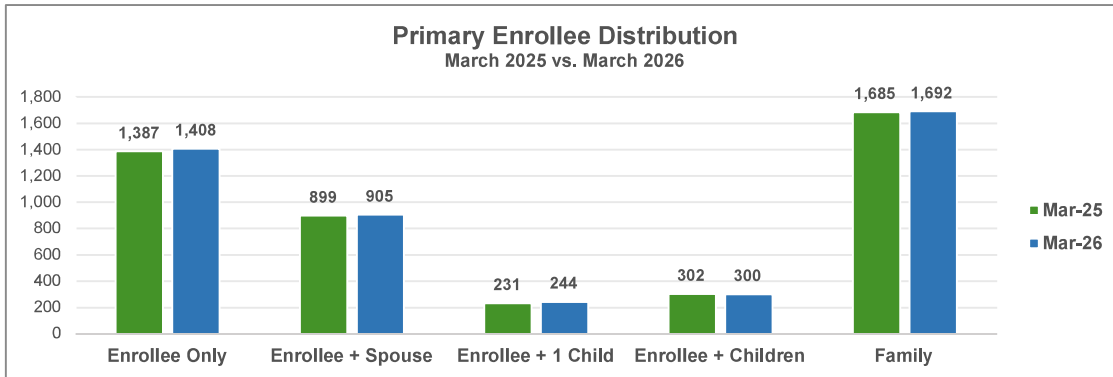
Paid Period: April 1, 2024 - March 31, 2025 compared to April 1, 2025 - March 31, 2026

Financial Summary

- For paid period ended March 31, 2026, the group had an average exposure of 4,540 primary enrollees. This represents a year / year increase of 1.2% from the previous period's average exposure of 4,484 primary enrollees.
- For the current period, claims paid PEPM was \$67.77, compared to \$66.52 during the previous period; This represents a year / year increase of 1.9%.
- During the current period, 69.4% of primary enrollees had enrolled dependents vs. 69.2% of primary enrollees during the previous period.

	04/1/2024 - 03/31/2025	04/1/2025 - 03/31/2026
<i>Claims Paid</i>	\$3,579,551	\$3,691,835
<i>Exposure**</i>	53,808	54,474
<i>Avg. Exposure</i>	4,484	4,540
<i>Avg. Member Count</i>	11,739	11,868

*** Exposure = Total primary enrollee months during the period.*



For more information regarding financial experience, please refer to tabs 1 through 3.



**DELTA DENTAL OF CALIFORNIA
MONTHLY FINANCIAL EXPERIENCE
FRESNO CITY EES HEALTH &
Group Number: 00273**

Paid Period: April 1, 2024 - March 31, 2026

Date	Number of Claims	Paid Amount	Enrollee Only	Enrollee + Spouse	Enrollee + 1 Child	Enrollee + Children	Family	Total Primary Enrollees	Adult Dependents	Child Dependents	Total Members
Apr-24	1,613	\$270,397	1,363	873	223	288	1,670	4,417	2,543	4,610	11,570
May-24	2,154	\$353,645	1,358	882	226	285	1,664	4,415	2,546	4,605	11,566
Jun-24	1,745	\$287,869	1,383	888	228	285	1,663	4,447	2,551	4,608	11,606
Jul-24	1,556	\$237,953	1,385	904	222	305	1,683	4,499	2,590	4,691	11,780
Aug-24	2,381	\$410,265	1,394	901	224	300	1,693	4,512	2,596	4,694	11,802
Sep-24	1,770	\$311,858	1,389	905	228	297	1,700	4,519	2,606	4,706	11,831
Oct-24	2,162	\$349,594	1,390	898	228	297	1,694	4,507	2,593	4,692	11,792
Nov-24	1,580	\$254,337	1,380	908	229	294	1,693	4,504	2,601	4,700	11,805
Dec-24	1,690	\$268,341	1,378	906	231	292	1,692	4,499	2,598	4,693	11,790
Jan-25	1,737	\$268,903	1,371	904	233	299	1,689	4,496	2,593	4,698	11,787
Feb-25	1,648	\$274,234	1,380	901	229	299	1,680	4,489	2,581	4,684	11,754
Mar-25	1,801	\$292,155	1,387	899	231	302	1,685	4,504	2,584	4,700	11,788
Apr-25	1,804	\$282,528	1,386	896	232	300	1,687	4,501	2,583	4,706	11,790
May-25	2,186	\$357,000	1,378	892	231	299	1,693	4,493	2,585	4,708	11,786
Jun-25	1,741	\$274,397	1,372	897	234	298	1,691	4,492	2,588	4,705	11,785
Jul-25	2,168	\$362,286	1,388	914	241	301	1,713	4,557	2,630	4,765	11,952
Aug-25	1,740	\$299,583	1,397	921	240	306	1,710	4,574	2,634	4,756	11,964
Sep-25	1,787	\$318,750	1,389	919	236	307	1,705	4,556	2,627	4,732	11,915
Oct-25	2,150	\$380,424	1,379	918	237	301	1,695	4,530	2,616	4,701	11,847
Nov-25	1,785	\$306,576	1,389	921	240	300	1,696	4,546	2,621	4,713	11,880
Dec-25	1,776	\$302,031	1,399	917	243	302	1,696	4,557	2,617	4,710	11,884
Jan-26	1,676	\$276,394	1,407	914	241	299	1,705	4,566	2,623	4,716	11,905
Feb-26	1,690	\$279,584	1,404	907	239	300	1,703	4,553	2,614	4,704	11,871
Mar-26	1,698	\$252,281	1,408	905	244	300	1,692	4,549	2,601	4,686	11,836
Total	44,038	\$7,271,386	33,254	21,690	5,590	7,156	40,592	108,282	62,321	112,683	283,286

Note: The number of primary enrollees may change to include retroactive additions and/or deletions in eligibility.



DELTA DENTAL OF CALIFORNIA
MONTHLY FINANCIAL EXPERIENCE BY DIVISION
FRESNO CITY EES HEALTH &
Group Number: 00273

Paid Period: April 1, 2024 - March 31, 2026

Group-Division	Date	Number of Claims	Paid Amount	Enrollee Only	Enrollee + Spouse	Enrollee + 1 Child	Enrollee + Children	Family	Total Primary Enrollees	Adult Dependents	Child Dependents	Total Members
00273-00001	Apr-24	1,391	\$227,865	1,218	516	215	280	1,588	3,817	2,104	4,447	10,368
00273-00001	May-24	1,860	\$303,016	1,210	524	218	278	1,583	3,813	2,107	4,447	10,367
00273-00001	Jun-24	1,512	\$246,586	1,233	525	220	278	1,586	3,842	2,111	4,457	10,410
00273-00001	Jul-24	1,395	\$211,985	1,235	546	215	297	1,609	3,902	2,158	4,539	10,599
00273-00001	Aug-24	2,084	\$362,020	1,243	539	218	291	1,621	3,912	2,162	4,545	10,619
00273-00001	Sep-24	1,497	\$263,689	1,239	541	222	289	1,627	3,918	2,169	4,557	10,644
00273-00001	Oct-24	1,878	\$304,086	1,239	534	221	288	1,619	3,901	2,154	4,538	10,593
00273-00001	Nov-24	1,350	\$217,496	1,231	542	222	285	1,620	3,900	2,162	4,548	10,610
00273-00001	Dec-24	1,467	\$228,622	1,229	540	224	284	1,616	3,893	2,156	4,539	10,588
00273-00001	Jan-25	1,530	\$238,591	1,221	538	226	292	1,616	3,893	2,154	4,554	10,601
00273-00001	Feb-25	1,458	\$242,457	1,230	533	223	292	1,609	3,887	2,142	4,545	10,574
00273-00001	Mar-25	1,548	\$247,561	1,233	537	225	295	1,614	3,904	2,151	4,561	10,616
00273-00001	Apr-25	1,582	\$249,349	1,231	534	225	294	1,617	3,901	2,151	4,570	10,622
00273-00001	May-25	1,885	\$307,287	1,221	530	224	293	1,622	3,890	2,152	4,568	10,610
00273-00001	Jun-25	1,473	\$233,554	1,216	534	226	290	1,617	3,883	2,151	4,555	10,589
00273-00001	Jul-25	1,891	\$308,252	1,232	553	233	293	1,644	3,955	2,200	4,624	10,779
00273-00001	Aug-25	1,554	\$288,012	1,240	558	232	298	1,637	3,965	2,198	4,610	10,773
00273-00001	Sep-25	1,525	\$271,588	1,233	553	228	299	1,631	3,944	2,187	4,586	10,717
00273-00001	Oct-25	1,856	\$327,695	1,219	552	229	293	1,620	3,913	2,175	4,554	10,642
00273-00001	Nov-25	1,540	\$261,143	1,230	555	232	293	1,622	3,932	2,181	4,572	10,685
00273-00001	Dec-25	1,526	\$261,365	1,238	552	235	295	1,624	3,944	2,180	4,572	10,696
00273-00001	Jan-26	1,458	\$235,879	1,245	547	234	292	1,631	3,949	2,182	4,577	10,708
00273-00001	Feb-26	1,483	\$241,628	1,241	536	232	293	1,630	3,932	2,170	4,566	10,668
00273-00001	Mar-26	1,477	\$214,562	1,246	535	237	293	1,618	3,929	2,157	4,547	10,633
00273-00002	Apr-24	127	\$27,437	60	178	4	8	66	316	244	131	691
00273-00002	May-24	165	\$32,043	63	179	4	7	66	319	245	128	692
00273-00002	Jun-24	132	\$24,358	63	183	4	7	63	320	246	123	689
00273-00002	Jul-24	88	\$14,219	63	186	4	7	61	321	247	124	692
00273-00002	Aug-24	170	\$25,732	66	189	3	8	59	325	248	121	694
00273-00002	Sep-24	156	\$28,294	66	191	3	7	59	326	250	120	696
00273-00002	Oct-24	173	\$30,805	66	186	3	8	60	323	246	123	692
00273-00002	Nov-24	126	\$20,314	64	187	3	8	60	322	247	124	693
00273-00002	Dec-24	124	\$22,358	65	186	4	7	63	325	249	126	700
00273-00002	Jan-25	123	\$17,131	66	184	4	6	62	322	246	123	691
00273-00002	Feb-25	111	\$17,232	66	184	3	6	62	321	246	120	687
00273-00002	Mar-25	139	\$21,392	68	180	3	6	62	319	242	120	681
00273-00002	Apr-25	130	\$18,917	68	180	4	5	62	319	242	118	679
00273-00002	May-25	160	\$24,513	68	180	4	5	63	320	243	122	685
00273-00002	Jun-25	131	\$18,330	68	181	5	6	65	325	246	128	699
00273-00002	Jul-25	156	\$29,529	69	180	5	6	61	321	241	121	683
00273-00002	Aug-25	110	\$17,067	69	182	5	6	65	327	247	126	700
00273-00002	Sep-25	154	\$27,148	68	185	5	6	65	329	250	125	704
00273-00002	Oct-25	178	\$31,243	72	184	5	6	64	331	248	123	702
00273-00002	Nov-25	131	\$26,971	68	183	5	6	64	326	247	121	694

00273-00002	Dec-25	133	\$19,662	69	182	5	6	61	323	243	116	682
00273-00002	Jan-26	125	\$21,455	68	184	4	6	63	325	247	117	689
00273-00002	Feb-26	107	\$19,835	69	187	4	6	62	328	249	116	693
00273-00002	Mar-26	128	\$22,064	69	183	4	6	63	325	246	117	688
00273-00003	Apr-24	91	\$14,484	78	162	1	0	9	250	171	14	435
00273-00003	May-24	113	\$16,698	78	162	1	0	9	250	171	14	435
00273-00003	Jun-24	82	\$13,754	77	162	1	0	9	249	171	13	433
00273-00003	Jul-24	61	\$9,267	75	155	1	0	8	239	163	12	414
00273-00003	Aug-24	111	\$20,319	75	155	1	0	8	239	163	12	414
00273-00003	Sep-24	105	\$17,892	76	155	1	0	8	240	163	12	415
00273-00003	Oct-24	99	\$12,857	76	160	1	0	10	247	170	15	432
00273-00003	Nov-24	89	\$14,387	76	161	1	0	10	248	171	15	434
00273-00003	Dec-24	84	\$14,558	75	162	1	0	9	247	171	14	432
00273-00003	Jan-25	76	\$11,821	75	162	1	0	8	246	170	13	429
00273-00003	Feb-25	68	\$12,951	76	164	1	0	8	249	172	13	434
00273-00003	Mar-25	107	\$20,622	78	162	1	0	8	249	170	13	432
00273-00003	Apr-25	88	\$13,767	78	163	1	0	7	249	170	12	431
00273-00003	May-25	131	\$24,479	82	167	1	0	7	257	174	12	443
00273-00003	Jun-25	114	\$18,807	81	167	1	0	7	256	174	12	442
00273-00003	Jul-25	110	\$21,343	81	167	1	0	7	256	174	12	442
00273-00003	Aug-25	69	\$13,282	82	168	1	0	7	258	175	12	445
00273-00003	Sep-25	103	\$19,295	82	169	1	0	8	260	177	13	450
00273-00003	Oct-25	109	\$20,707	82	170	1	0	8	261	178	13	452
00273-00003	Nov-25	102	\$17,116	84	172	1	0	7	264	179	11	454
00273-00003	Dec-25	107	\$19,838	84	171	1	0	7	263	178	11	452
00273-00003	Jan-26	87	\$17,008	86	171	1	0	7	265	178	11	454
00273-00003	Feb-26	91	\$16,390	86	171	1	0	7	265	178	11	454
00273-00003	Mar-26	82	\$13,371	85	174	1	0	7	267	181	11	459
00273-00004	Apr-24	4	\$610	7	17	2	0	0	26	17	2	45
00273-00004	May-24	11	\$1,263	7	17	2	0	0	26	17	2	45
00273-00004	Jun-24	13	\$2,133	7	18	2	0	0	27	18	2	47
00273-00004	Jul-24	11	\$2,090	8	17	2	0	1	28	18	3	49
00273-00004	Aug-24	12	\$1,679	7	18	2	0	1	28	19	3	50
00273-00004	Sep-24	10	\$1,821	7	18	2	0	1	28	19	3	50
00273-00004	Oct-24	12	\$1,846	8	18	2	0	1	29	19	3	51
00273-00004	Nov-24	12	\$1,836	8	18	2	0	1	29	19	3	51
00273-00004	Dec-24	12	\$2,061	8	18	2	0	1	29	19	3	51
00273-00004	Jan-25	8	\$1,360	8	20	2	0	1	31	21	3	55
00273-00004	Feb-25	11	\$1,594	8	20	2	0	0	30	20	2	52
00273-00004	Mar-25	7	\$2,580	8	20	2	0	0	30	20	2	52
00273-00004	Apr-25	4	\$496	8	19	2	0	0	29	19	2	50
00273-00004	May-25	9	\$676	7	14	2	0	0	23	14	2	39
00273-00004	Jun-25	19	\$3,201	7	14	2	0	0	23	14	2	39
00273-00004	Jul-25	11	\$3,162	6	13	2	0	0	21	13	2	36
00273-00004	Aug-25	7	\$1,223	6	13	2	0	0	21	13	2	36
00273-00004	Sep-25	2	\$278	6	12	2	0	0	20	12	2	34
00273-00004	Oct-25	7	\$779	6	12	2	0	0	20	12	2	34
00273-00004	Nov-25	11	\$1,029	7	11	2	0	0	20	11	2	33
00273-00004	Dec-25	8	\$853	7	11	2	0	0	20	11	2	33
00273-00004	Jan-26	4	\$1,219	7	12	2	0	0	20	11	2	33
00273-00004	Feb-26	7	\$1,383	7	12	2	0	0	21	12	2	35
00273-00004	Mar-26	8	\$1,918	7	12	2	0	0	21	12	2	35
00273-09001	Apr-24	0	\$0	0	0	1	0	7	8	7	16	31
00273-09001	May-24	5	\$626	0	0	1	0	6	7	6	14	27
00273-09001	Jun-24	6	\$1,039	0	0	1	0	5	9	5	13	27
00273-09001	Jul-24	1	\$382	4	0	0	1	4	9	4	13	26

00273-09001	Aug-24	4	\$515	3	0	0	1	4	8	4	13	25
00273-09001	Sep-24	2	\$152	1	0	0	1	5	7	5	14	26
00273-09001	Oct-24	0	\$0	1	0	1	1	4	7	4	13	24
00273-09001	Nov-24	3	\$305	1	0	1	1	2	5	2	10	17
00273-09001	Dec-24	3	\$742	1	0	0	1	3	5	3	11	19
00273-09001	Jan-25	0	\$0	1	0	0	1	2	4	2	5	11
00273-09001	Feb-25	0	\$0	0	0	0	1	1	2	1	4	7
00273-09001	Mar-25	0	\$0	0	0	0	1	1	2	1	4	7
00273-09001	Apr-25	0	\$0	1	0	0	1	1	3	1	4	8
00273-09001	May-25	1	\$66	0	1	0	1	1	3	2	4	9
00273-09001	Jun-25	4	\$505	0	1	0	2	2	5	3	8	16
00273-09001	Jul-25	0	\$0	0	1	0	2	1	4	2	6	12
00273-09001	Aug-25	0	\$0	0	0	0	2	1	3	1	6	10
00273-09001	Sep-25	3	\$440	0	0	0	2	1	3	1	6	10
00273-09001	Oct-25	0	\$0	0	0	0	2	3	5	3	9	17
00273-09001	Nov-25	1	\$317	0	0	0	1	3	4	3	7	14
00273-09001	Dec-25	2	\$314	1	1	0	1	4	7	5	9	21
00273-09001	Jan-26	2	\$834	1	1	0	1	4	7	5	9	21
00273-09001	Feb-26	2	\$348	1	1	0	1	4	7	5	9	21
00273-09001	Mar-26	3	\$366	1	1	0	1	4	7	5	9	21
Total		44,038	\$7,271,386	33,254	21,690	5,590	7,156	40,592	108,282	62,321	112,683	283,286

Note: The number of primary enrollees may change to include retroactive additions and/or deletions in eligibility.



**DELTA DENTAL OF CALIFORNIA
 DATA TABLE FOR CLAIM LAG IN GROUP SUMMARY AND BY DIVISION
 FRESNO CITY EES HEALTH &
 Group Number: 00273**

Paid Period: April 1, 2024 - March 31, 2026

Group	Division	Paid Month/Year	Incurred Month/Year	Paid Amount
00273	All	Apr-24	Sep-22	\$313
00273	All	Apr-24	Feb-23	-\$6
00273	All	Apr-24	Mar-23	\$63
00273	All	Apr-24	Apr-23	\$93
00273	All	Apr-24	Jun-23	\$827
00273	All	Apr-24	Jul-23	\$1,556
00273	All	Apr-24	Aug-23	\$189
00273	All	Apr-24	Sep-23	\$634
00273	All	Apr-24	Oct-23	\$325
00273	All	Apr-24	Nov-23	\$565
00273	All	Apr-24	Dec-23	\$188
00273	All	Apr-24	Jan-24	\$3,342
00273	All	Apr-24	Feb-24	\$14,960
00273	All	Apr-24	Mar-24	\$109,859
00273	All	Apr-24	Apr-24	\$137,491
00273	All	May-24	Jul-23	\$1,519
00273	All	May-24	Aug-23	\$777
00273	All	May-24	Oct-23	\$2,539
00273	All	May-24	Nov-23	\$1,149
00273	All	May-24	Dec-23	\$812
00273	All	May-24	Jan-24	\$3,661
00273	All	May-24	Feb-24	\$10,993
00273	All	May-24	Mar-24	\$17,903
00273	All	May-24	Apr-24	\$138,996
00273	All	May-24	May-24	\$175,297
00273	All	Jun-24	Apr-23	\$44
00273	All	Jun-24	Jun-23	\$1,096
00273	All	Jun-24	Sep-23	\$32
00273	All	Jun-24	Oct-23	\$248
00273	All	Jun-24	Nov-23	\$887
00273	All	Jun-24	Dec-23	\$458
00273	All	Jun-24	Jan-24	\$356
00273	All	Jun-24	Feb-24	\$5,213
00273	All	Jun-24	Mar-24	\$7,153
00273	All	Jun-24	Apr-24	\$6,944
00273	All	Jun-24	May-24	\$116,182
00273	All	Jun-24	Jun-24	\$149,255

00273	All	Jul-24	Sep-23	\$330
00273	All	Jul-24	Nov-23	\$76
00273	All	Jul-24	Jan-24	\$410
00273	All	Jul-24	Feb-24	\$3,631
00273	All	Jul-24	Mar-24	\$2,187
00273	All	Jul-24	Apr-24	\$3,571
00273	All	Jul-24	May-24	\$6,463
00273	All	Jul-24	Jun-24	\$95,906
00273	All	Jul-24	Jul-24	\$125,379
00273	All	Aug-24	Mar-23	\$137
00273	All	Aug-24	Jul-23	\$375
00273	All	Aug-24	Sep-23	\$39
00273	All	Aug-24	Oct-23	\$359
00273	All	Aug-24	Nov-23	\$795
00273	All	Aug-24	Dec-23	\$153
00273	All	Aug-24	Jan-24	\$1,537
00273	All	Aug-24	Feb-24	\$1,727
00273	All	Aug-24	Mar-24	\$1,288
00273	All	Aug-24	Apr-24	\$5,687
00273	All	Aug-24	May-24	\$3,041
00273	All	Aug-24	Jun-24	\$12,325
00273	All	Aug-24	Jul-24	\$179,850
00273	All	Aug-24	Aug-24	\$202,952
00273	All	Sep-24	Aug-23	\$76
00273	All	Sep-24	Sep-23	\$721
00273	All	Sep-24	Nov-23	\$147
00273	All	Sep-24	Dec-23	\$91
00273	All	Sep-24	Jan-24	\$127
00273	All	Sep-24	Feb-24	\$1,436
00273	All	Sep-24	Mar-24	\$2,309
00273	All	Sep-24	Apr-24	\$2,727
00273	All	Sep-24	May-24	\$1,967
00273	All	Sep-24	Jun-24	\$2,758
00273	All	Sep-24	Jul-24	\$12,965
00273	All	Sep-24	Aug-24	\$125,583
00273	All	Sep-24	Sep-24	\$160,953
00273	All	Oct-24	Sep-23	\$110
00273	All	Oct-24	Jan-24	\$499
00273	All	Oct-24	Mar-24	\$666
00273	All	Oct-24	Apr-24	\$768
00273	All	Oct-24	May-24	\$4,411
00273	All	Oct-24	Jun-24	\$1,509
00273	All	Oct-24	Jul-24	\$7,056
00273	All	Oct-24	Aug-24	\$15,719
00273	All	Oct-24	Sep-24	\$123,042
00273	All	Oct-24	Oct-24	\$195,815
00273	All	Nov-24	Nov-23	\$96
00273	All	Nov-24	Dec-23	\$164
00273	All	Nov-24	Jan-24	\$1,098

00273	All	Nov-24	Feb-24	\$162
00273	All	Nov-24	Mar-24	\$1,038
00273	All	Nov-24	Apr-24	\$824
00273	All	Nov-24	May-24	\$172
00273	All	Nov-24	Jun-24	\$1,597
00273	All	Nov-24	Jul-24	\$3,244
00273	All	Nov-24	Aug-24	\$2,766
00273	All	Nov-24	Sep-24	\$7,053
00273	All	Nov-24	Oct-24	\$92,189
00273	All	Nov-24	Nov-24	\$143,935
00273	All	Dec-24	Dec-23	\$377
00273	All	Dec-24	Feb-24	\$149
00273	All	Dec-24	Apr-24	\$1,337
00273	All	Dec-24	May-24	\$586
00273	All	Dec-24	Jun-24	\$587
00273	All	Dec-24	Jul-24	\$3,045
00273	All	Dec-24	Aug-24	\$1,364
00273	All	Dec-24	Sep-24	\$2,823
00273	All	Dec-24	Oct-24	\$12,720
00273	All	Dec-24	Nov-24	\$102,749
00273	All	Dec-24	Dec-24	\$142,604
00273	All	Jan-25	Nov-23	\$750
00273	All	Jan-25	Jan-24	\$1,681
00273	All	Jan-25	Feb-24	\$56
00273	All	Jan-25	Mar-24	\$659
00273	All	Jan-25	Apr-24	\$366
00273	All	Jan-25	May-24	\$312
00273	All	Jan-25	Jun-24	\$732
00273	All	Jan-25	Jul-24	\$235
00273	All	Jan-25	Aug-24	\$1,367
00273	All	Jan-25	Sep-24	\$2,318
00273	All	Jan-25	Oct-24	\$10,018
00273	All	Jan-25	Nov-24	\$19,993
00273	All	Jan-25	Dec-24	\$81,464
00273	All	Jan-25	Jan-25	\$148,953
00273	All	Feb-25	Feb-24	\$482
00273	All	Feb-25	Mar-24	\$26
00273	All	Feb-25	Apr-24	\$300
00273	All	Feb-25	May-24	\$981
00273	All	Feb-25	Jun-24	\$257
00273	All	Feb-25	Jul-24	\$436
00273	All	Feb-25	Aug-24	\$1,735
00273	All	Feb-25	Sep-24	\$2,094
00273	All	Feb-25	Oct-24	\$2,656
00273	All	Feb-25	Nov-24	\$5,239
00273	All	Feb-25	Dec-24	\$10,137
00273	All	Feb-25	Jan-25	\$106,103
00273	All	Feb-25	Feb-25	\$143,787
00273	All	Mar-25	Feb-24	\$900

00273	All	Mar-25	Mar-24	\$957
00273	All	Mar-25	Apr-24	\$39
00273	All	Mar-25	May-24	\$209
00273	All	Mar-25	Jun-24	\$723
00273	All	Mar-25	Jul-24	\$179
00273	All	Mar-25	Aug-24	\$117
00273	All	Mar-25	Sep-24	\$776
00273	All	Mar-25	Oct-24	\$105
00273	All	Mar-25	Nov-24	\$3,517
00273	All	Mar-25	Dec-24	\$4,009
00273	All	Mar-25	Jan-25	\$13,093
00273	All	Mar-25	Feb-25	\$113,917
00273	All	Mar-25	Mar-25	\$153,614
00273	All	Apr-25	May-24	\$572
00273	All	Apr-25	Jun-24	\$358
00273	All	Apr-25	Jul-24	\$174
00273	All	Apr-25	Aug-24	\$177
00273	All	Apr-25	Sep-24	\$645
00273	All	Apr-25	Oct-24	\$208
00273	All	Apr-25	Nov-24	\$463
00273	All	Apr-25	Dec-24	\$998
00273	All	Apr-25	Jan-25	\$2,015
00273	All	Apr-25	Feb-25	\$9,890
00273	All	Apr-25	Mar-25	\$127,007
00273	All	Apr-25	Apr-25	\$140,022
00273	All	May-25	Jun-24	\$1,628
00273	All	May-25	Jul-24	\$691
00273	All	May-25	Aug-24	\$189
00273	All	May-25	Sep-24	\$1,488
00273	All	May-25	Oct-24	\$121
00273	All	May-25	Nov-24	\$709
00273	All	May-25	Dec-24	\$3,403
00273	All	May-25	Jan-25	\$2,864
00273	All	May-25	Feb-25	\$3,028
00273	All	May-25	Mar-25	\$14,760
00273	All	May-25	Apr-25	\$153,220
00273	All	May-25	May-25	\$174,898
00273	All	Jun-25	Feb-24	\$322
00273	All	Jun-25	Mar-24	\$134
00273	All	Jun-25	Sep-24	\$197
00273	All	Jun-25	Oct-24	\$677
00273	All	Jun-25	Nov-24	\$1,986
00273	All	Jun-25	Dec-24	\$179
00273	All	Jun-25	Jan-25	\$1,650
00273	All	Jun-25	Feb-25	\$1,192
00273	All	Jun-25	Mar-25	\$3,058
00273	All	Jun-25	Apr-25	\$12,657
00273	All	Jun-25	May-25	\$105,960
00273	All	Jun-25	Jun-25	\$146,385

00273	All	Jul-25	Dec-23	\$367
00273	All	Jul-25	Mar-24	\$116
00273	All	Jul-25	May-24	\$614
00273	All	Jul-25	Jun-24	\$919
00273	All	Jul-25	Jul-24	\$104
00273	All	Jul-25	Aug-24	\$482
00273	All	Jul-25	Sep-24	\$501
00273	All	Jul-25	Oct-24	\$947
00273	All	Jul-25	Nov-24	\$1,313
00273	All	Jul-25	Dec-24	\$239
00273	All	Jul-25	Jan-25	\$882
00273	All	Jul-25	Feb-25	\$1,409
00273	All	Jul-25	Mar-25	\$2,696
00273	All	Jul-25	Apr-25	\$7,423
00273	All	Jul-25	May-25	\$11,440
00273	All	Jul-25	Jun-25	\$127,539
00273	All	Jul-25	Jul-25	\$205,296
00273	All	Aug-25	Nov-23	\$32
00273	All	Aug-25	Jan-24	\$92
00273	All	Aug-25	Feb-24	\$144
00273	All	Aug-25	Apr-24	\$222
00273	All	Aug-25	Jun-24	\$150
00273	All	Aug-25	Jul-24	\$311
00273	All	Aug-25	Aug-24	\$293
00273	All	Aug-25	Sep-24	\$50
00273	All	Aug-25	Nov-24	\$223
00273	All	Aug-25	Jan-25	\$469
00273	All	Aug-25	Feb-25	\$2,489
00273	All	Aug-25	Mar-25	\$1,674
00273	All	Aug-25	Apr-25	\$2,671
00273	All	Aug-25	May-25	\$4,060
00273	All	Aug-25	Jun-25	\$10,894
00273	All	Aug-25	Jul-25	\$103,338
00273	All	Aug-25	Aug-25	\$172,471
00273	All	Sep-25	Aug-24	\$59
00273	All	Sep-25	Dec-24	\$1,487
00273	All	Sep-25	Feb-25	\$263
00273	All	Sep-25	Mar-25	\$1,895
00273	All	Sep-25	Apr-25	\$2,192
00273	All	Sep-25	May-25	\$1,125
00273	All	Sep-25	Jun-25	\$4,674
00273	All	Sep-25	Jul-25	\$15,256
00273	All	Sep-25	Aug-25	\$118,072
00273	All	Sep-25	Sep-25	\$173,728
00273	All	Oct-25	Nov-24	\$203
00273	All	Oct-25	Dec-24	\$50
00273	All	Oct-25	Jan-25	\$979
00273	All	Oct-25	Feb-25	\$526
00273	All	Oct-25	Mar-25	\$66

00273	All	Oct-25	Apr-25	\$1,235
00273	All	Oct-25	May-25	\$1,366
00273	All	Oct-25	Jun-25	\$2,135
00273	All	Oct-25	Jul-25	\$7,946
00273	All	Oct-25	Aug-25	\$21,024
00273	All	Oct-25	Sep-25	\$157,631
00273	All	Oct-25	Oct-25	\$187,263
00273	All	Nov-25	Sep-24	\$147
00273	All	Nov-25	Nov-24	\$145
00273	All	Nov-25	Feb-25	\$529
00273	All	Nov-25	Mar-25	\$188
00273	All	Nov-25	Apr-25	\$137
00273	All	Nov-25	May-25	\$1,144
00273	All	Nov-25	Jun-25	\$970
00273	All	Nov-25	Jul-25	\$5,146
00273	All	Nov-25	Aug-25	\$3,689
00273	All	Nov-25	Sep-25	\$14,998
00273	All	Nov-25	Oct-25	\$117,432
00273	All	Nov-25	Nov-25	\$162,050
00273	All	Dec-25	Nov-24	\$75
00273	All	Dec-25	Mar-25	\$242
00273	All	Dec-25	Apr-25	\$557
00273	All	Dec-25	May-25	\$153
00273	All	Dec-25	Jun-25	\$715
00273	All	Dec-25	Jul-25	\$3,661
00273	All	Dec-25	Aug-25	\$6,926
00273	All	Dec-25	Sep-25	\$4,461
00273	All	Dec-25	Oct-25	\$7,687
00273	All	Dec-25	Nov-25	\$108,792
00273	All	Dec-25	Dec-25	\$168,763
00273	All	Jan-26	May-24	-\$13
00273	All	Jan-26	Jan-25	\$1,115
00273	All	Jan-26	Feb-25	\$153
00273	All	Jan-26	May-25	\$106
00273	All	Jan-26	Jun-25	\$115
00273	All	Jan-26	Jul-25	\$582
00273	All	Jan-26	Aug-25	\$317
00273	All	Jan-26	Sep-25	\$3,710
00273	All	Jan-26	Oct-25	\$1,160
00273	All	Jan-26	Nov-25	\$13,666
00273	All	Jan-26	Dec-25	\$82,060
00273	All	Jan-26	Jan-26	\$173,423
00273	All	Feb-26	Apr-25	\$889
00273	All	Feb-26	Jun-25	\$215
00273	All	Feb-26	Jul-25	\$745
00273	All	Feb-26	Aug-25	\$1,888
00273	All	Feb-26	Sep-25	\$394
00273	All	Feb-26	Oct-25	\$2,313
00273	All	Feb-26	Nov-25	\$6,388

00273	All	Feb-26	Dec-25	\$11,226
00273	All	Feb-26	Jan-26	\$112,223
00273	All	Feb-26	Feb-26	\$143,303
00273	All	Mar-26	Jan-25	\$750
00273	All	Mar-26	Mar-25	\$124
00273	All	Mar-26	Apr-25	\$750
00273	All	Mar-26	May-25	-\$440
00273	All	Mar-26	Jul-25	\$2,156
00273	All	Mar-26	Aug-25	\$4,069
00273	All	Mar-26	Sep-25	\$441
00273	All	Mar-26	Oct-25	\$540
00273	All	Mar-26	Nov-25	\$1,435
00273	All	Mar-26	Dec-25	\$2,606
00273	All	Mar-26	Jan-26	\$13,494
00273	All	Mar-26	Feb-26	\$89,112
00273	All	Mar-26	Mar-26	\$137,244
Total				\$7,271,386

Group	Division	Paid Month/Year	Incurred Month/Year	Paid Amount
00273	00001	Apr-24	Sep-22	\$313
00273	00001	Apr-24	Feb-23	-\$6
00273	00001	Apr-24	Mar-23	\$63
00273	00001	Apr-24	Apr-23	\$93
00273	00001	Apr-24	Jun-23	\$827
00273	00001	Apr-24	Jul-23	\$1,556
00273	00001	Apr-24	Aug-23	\$189
00273	00001	Apr-24	Sep-23	\$634
00273	00001	Apr-24	Oct-23	\$325
00273	00001	Apr-24	Nov-23	\$191
00273	00001	Apr-24	Dec-23	\$188
00273	00001	Apr-24	Jan-24	\$2,725
00273	00001	Apr-24	Feb-24	\$13,141
00273	00001	Apr-24	Mar-24	\$89,139
00273	00001	Apr-24	Apr-24	\$118,489
00273	00001	May-24	Jul-23	\$1,469
00273	00001	May-24	Aug-23	\$651
00273	00001	May-24	Oct-23	\$2,539
00273	00001	May-24	Nov-23	\$1,149
00273	00001	May-24	Dec-23	\$812
00273	00001	May-24	Jan-24	\$1,856
00273	00001	May-24	Feb-24	\$8,362
00273	00001	May-24	Mar-24	\$15,117
00273	00001	May-24	Apr-24	\$117,787
00273	00001	May-24	May-24	\$153,274
00273	00001	Jun-24	Apr-23	\$44
00273	00001	Jun-24	Jun-23	\$1,096
00273	00001	Jun-24	Sep-23	\$32
00273	00001	Jun-24	Oct-23	\$248

00273	00001	Jun-24	Nov-23	\$887
00273	00001	Jun-24	Dec-23	\$196
00273	00001	Jun-24	Jan-24	\$356
00273	00001	Jun-24	Feb-24	\$4,654
00273	00001	Jun-24	Mar-24	\$7,153
00273	00001	Jun-24	Apr-24	\$6,944
00273	00001	Jun-24	May-24	\$98,500
00273	00001	Jun-24	Jun-24	\$126,475
00273	00001	Jul-24	Sep-23	\$330
00273	00001	Jul-24	Nov-23	\$76
00273	00001	Jul-24	Jan-24	\$410
00273	00001	Jul-24	Feb-24	\$3,565
00273	00001	Jul-24	Mar-24	\$1,739
00273	00001	Jul-24	Apr-24	\$2,950
00273	00001	Jul-24	May-24	\$5,675
00273	00001	Jul-24	Jun-24	\$85,873
00273	00001	Jul-24	Jul-24	\$111,377
00273	00001	Aug-24	Mar-23	\$137
00273	00001	Aug-24	Jul-23	\$375
00273	00001	Aug-24	Sep-23	\$39
00273	00001	Aug-24	Oct-23	\$359
00273	00001	Aug-24	Nov-23	\$795
00273	00001	Aug-24	Dec-23	\$153
00273	00001	Aug-24	Jan-24	\$1,537
00273	00001	Aug-24	Feb-24	\$1,727
00273	00001	Aug-24	Mar-24	\$1,228
00273	00001	Aug-24	Apr-24	\$5,643
00273	00001	Aug-24	May-24	\$2,694
00273	00001	Aug-24	Jun-24	\$11,609
00273	00001	Aug-24	Jul-24	\$159,546
00273	00001	Aug-24	Aug-24	\$176,178
00273	00001	Sep-24	Aug-23	\$76
00273	00001	Sep-24	Sep-23	\$721
00273	00001	Sep-24	Nov-23	\$147
00273	00001	Sep-24	Dec-23	\$91
00273	00001	Sep-24	Feb-24	\$957
00273	00001	Sep-24	Mar-24	\$2,112
00273	00001	Sep-24	Apr-24	\$2,472
00273	00001	Sep-24	May-24	\$1,691
00273	00001	Sep-24	Jun-24	\$2,686
00273	00001	Sep-24	Jul-24	\$9,972
00273	00001	Sep-24	Aug-24	\$112,660
00273	00001	Sep-24	Sep-24	\$130,114
00273	00001	Oct-24	Sep-23	\$110
00273	00001	Oct-24	Jan-24	\$499
00273	00001	Oct-24	Mar-24	\$576
00273	00001	Oct-24	Apr-24	\$337
00273	00001	Oct-24	May-24	\$3,081
00273	00001	Oct-24	Jun-24	\$1,330

00273	00001	Oct-24	Jul-24	\$7,056
00273	00001	Oct-24	Aug-24	\$13,878
00273	00001	Oct-24	Sep-24	\$109,048
00273	00001	Oct-24	Oct-24	\$168,172
00273	00001	Nov-24	Nov-23	\$96
00273	00001	Nov-24	Dec-23	\$164
00273	00001	Nov-24	Jan-24	\$1,098
00273	00001	Nov-24	Feb-24	\$52
00273	00001	Nov-24	Mar-24	\$1,038
00273	00001	Nov-24	Apr-24	\$824
00273	00001	Nov-24	May-24	\$172
00273	00001	Nov-24	Jun-24	\$1,411
00273	00001	Nov-24	Jul-24	\$3,032
00273	00001	Nov-24	Aug-24	\$2,766
00273	00001	Nov-24	Sep-24	\$5,280
00273	00001	Nov-24	Oct-24	\$78,996
00273	00001	Nov-24	Nov-24	\$122,568
00273	00001	Dec-24	Dec-23	\$377
00273	00001	Dec-24	Feb-24	\$149
00273	00001	Dec-24	Apr-24	\$1,337
00273	00001	Dec-24	May-24	\$586
00273	00001	Dec-24	Jun-24	\$587
00273	00001	Dec-24	Jul-24	\$3,045
00273	00001	Dec-24	Aug-24	\$1,275
00273	00001	Dec-24	Sep-24	\$2,591
00273	00001	Dec-24	Oct-24	\$10,185
00273	00001	Dec-24	Nov-24	\$89,804
00273	00001	Dec-24	Dec-24	\$118,686
00273	00001	Jan-25	Nov-23	\$750
00273	00001	Jan-25	Jan-24	\$1,590
00273	00001	Jan-25	Feb-24	\$56
00273	00001	Jan-25	Mar-24	\$659
00273	00001	Jan-25	Apr-24	\$366
00273	00001	Jan-25	May-24	\$312
00273	00001	Jan-25	Jun-24	\$584
00273	00001	Jan-25	Jul-24	\$181
00273	00001	Jan-25	Aug-24	\$763
00273	00001	Jan-25	Sep-24	\$2,034
00273	00001	Jan-25	Oct-24	\$10,018
00273	00001	Jan-25	Nov-24	\$18,468
00273	00001	Jan-25	Dec-24	\$72,988
00273	00001	Jan-25	Jan-25	\$129,822
00273	00001	Feb-25	Feb-24	\$482
00273	00001	Feb-25	Mar-24	\$26
00273	00001	Feb-25	Apr-24	\$300
00273	00001	Feb-25	May-24	\$893
00273	00001	Feb-25	Jun-24	\$257
00273	00001	Feb-25	Jul-24	\$364
00273	00001	Feb-25	Aug-24	\$1,735

00273	00001	Feb-25	Sep-24	\$2,094
00273	00001	Feb-25	Oct-24	\$2,480
00273	00001	Feb-25	Nov-24	\$4,876
00273	00001	Feb-25	Dec-24	\$9,974
00273	00001	Feb-25	Jan-25	\$95,027
00273	00001	Feb-25	Feb-25	\$123,949
00273	00001	Mar-25	Feb-24	\$900
00273	00001	Mar-25	Mar-24	\$957
00273	00001	Mar-25	May-24	\$116
00273	00001	Mar-25	Jun-24	\$723
00273	00001	Mar-25	Jul-24	\$179
00273	00001	Mar-25	Aug-24	\$117
00273	00001	Mar-25	Sep-24	\$776
00273	00001	Mar-25	Oct-24	\$105
00273	00001	Mar-25	Nov-24	\$3,381
00273	00001	Mar-25	Dec-24	\$3,733
00273	00001	Mar-25	Jan-25	\$8,700
00273	00001	Mar-25	Feb-25	\$96,991
00273	00001	Mar-25	Mar-25	\$130,883
00273	00001	Apr-25	May-24	\$572
00273	00001	Apr-25	Jun-24	\$358
00273	00001	Apr-25	Jul-24	\$174
00273	00001	Apr-25	Aug-24	\$111
00273	00001	Apr-25	Sep-24	\$645
00273	00001	Apr-25	Oct-24	\$208
00273	00001	Apr-25	Nov-24	\$463
00273	00001	Apr-25	Dec-24	\$814
00273	00001	Apr-25	Jan-25	\$1,870
00273	00001	Apr-25	Feb-25	\$8,872
00273	00001	Apr-25	Mar-25	\$113,529
00273	00001	Apr-25	Apr-25	\$121,732
00273	00001	May-25	Jun-24	\$1,628
00273	00001	May-25	Jul-24	\$691
00273	00001	May-25	Aug-24	\$74
00273	00001	May-25	Sep-24	\$1,488
00273	00001	May-25	Oct-24	\$121
00273	00001	May-25	Nov-24	\$577
00273	00001	May-25	Dec-24	\$3,403
00273	00001	May-25	Jan-25	\$2,864
00273	00001	May-25	Feb-25	\$1,579
00273	00001	May-25	Mar-25	\$12,726
00273	00001	May-25	Apr-25	\$130,541
00273	00001	May-25	May-25	\$151,572
00273	00001	Jun-25	Feb-24	\$322
00273	00001	Jun-25	Mar-24	\$134
00273	00001	Jun-25	Sep-24	\$197
00273	00001	Jun-25	Oct-24	\$197
00273	00001	Jun-25	Nov-24	\$750
00273	00001	Jun-25	Dec-24	\$179

00273	00001	Jun-25	Jan-25	\$1,650
00273	00001	Jun-25	Feb-25	\$1,192
00273	00001	Jun-25	Mar-25	\$2,345
00273	00001	Jun-25	Apr-25	\$11,994
00273	00001	Jun-25	May-25	\$94,034
00273	00001	Jun-25	Jun-25	\$120,559
00273	00001	Jul-25	Dec-23	\$367
00273	00001	Jul-25	Mar-24	\$116
00273	00001	Jul-25	May-24	\$10
00273	00001	Jul-25	Jun-24	\$919
00273	00001	Jul-25	Jul-24	\$104
00273	00001	Jul-25	Aug-24	\$482
00273	00001	Jul-25	Sep-24	\$501
00273	00001	Jul-25	Oct-24	\$947
00273	00001	Jul-25	Nov-24	\$1,313
00273	00001	Jul-25	Dec-24	\$239
00273	00001	Jul-25	Jan-25	\$882
00273	00001	Jul-25	Feb-25	\$480
00273	00001	Jul-25	Mar-25	\$2,696
00273	00001	Jul-25	Apr-25	\$7,163
00273	00001	Jul-25	May-25	\$10,014
00273	00001	Jul-25	Jun-25	\$107,042
00273	00001	Jul-25	Jul-25	\$174,977
00273	00001	Aug-25	Nov-23	\$32
00273	00001	Aug-25	Jan-24	\$92
00273	00001	Aug-25	Feb-24	\$144
00273	00001	Aug-25	Apr-24	\$222
00273	00001	Aug-25	Jun-24	\$150
00273	00001	Aug-25	Jul-24	\$311
00273	00001	Aug-25	Aug-24	\$293
00273	00001	Aug-25	Sep-24	\$50
00273	00001	Aug-25	Nov-24	\$223
00273	00001	Aug-25	Jan-25	\$375
00273	00001	Aug-25	Feb-25	\$2,489
00273	00001	Aug-25	Mar-25	\$1,674
00273	00001	Aug-25	Apr-25	\$2,155
00273	00001	Aug-25	May-25	\$1,581
00273	00001	Aug-25	Jun-25	\$11,144
00273	00001	Aug-25	Jul-25	\$93,434
00273	00001	Aug-25	Aug-25	\$153,643
00273	00001	Sep-25	Aug-24	\$59
00273	00001	Sep-25	Dec-24	\$1,487
00273	00001	Sep-25	Feb-25	\$263
00273	00001	Sep-25	Mar-25	\$1,895
00273	00001	Sep-25	Apr-25	\$687
00273	00001	Sep-25	May-25	\$1,125
00273	00001	Sep-25	Jun-25	\$4,674
00273	00001	Sep-25	Jul-25	\$13,238
00273	00001	Sep-25	Aug-25	\$97,769

00273	00001	Sep-25	Sep-25	\$150,393
00273	00001	Oct-25	Nov-24	\$203
00273	00001	Oct-25	Dec-24	\$50
00273	00001	Oct-25	Jan-25	\$979
00273	00001	Oct-25	Feb-25	\$526
00273	00001	Oct-25	Mar-25	\$66
00273	00001	Oct-25	Apr-25	\$462
00273	00001	Oct-25	May-25	\$1,241
00273	00001	Oct-25	Jun-25	\$1,704
00273	00001	Oct-25	Jul-25	\$7,272
00273	00001	Oct-25	Aug-25	\$19,419
00273	00001	Oct-25	Sep-25	\$134,942
00273	00001	Oct-25	Oct-25	\$160,830
00273	00001	Nov-25	Sep-24	\$147
00273	00001	Nov-25	Nov-24	\$145
00273	00001	Nov-25	Feb-25	\$529
00273	00001	Nov-25	Mar-25	\$188
00273	00001	Nov-25	Apr-25	\$137
00273	00001	Nov-25	May-25	\$349
00273	00001	Nov-25	Jun-25	\$970
00273	00001	Nov-25	Jul-25	\$5,146
00273	00001	Nov-25	Aug-25	\$2,565
00273	00001	Nov-25	Sep-25	\$11,755
00273	00001	Nov-25	Oct-25	\$100,991
00273	00001	Nov-25	Nov-25	\$138,220
00273	00001	Dec-25	Nov-24	\$75
00273	00001	Dec-25	Mar-25	\$36
00273	00001	Dec-25	Apr-25	\$557
00273	00001	Dec-25	May-25	\$153
00273	00001	Dec-25	Jun-25	\$715
00273	00001	Dec-25	Jul-25	\$3,661
00273	00001	Dec-25	Aug-25	\$4,904
00273	00001	Dec-25	Sep-25	\$4,154
00273	00001	Dec-25	Oct-25	\$5,336
00273	00001	Dec-25	Nov-25	\$96,808
00273	00001	Dec-25	Dec-25	\$144,967
00273	00001	Jan-26	May-24	\$2
00273	00001	Jan-26	Jan-25	\$179
00273	00001	Jan-26	Feb-25	\$153
00273	00001	Jan-26	May-25	\$106
00273	00001	Jan-26	Jun-25	\$115
00273	00001	Jan-26	Jul-25	\$582
00273	00001	Jan-26	Aug-25	\$317
00273	00001	Jan-26	Sep-25	\$3,710
00273	00001	Jan-26	Oct-25	\$1,139
00273	00001	Jan-26	Nov-25	\$13,344
00273	00001	Jan-26	Dec-25	\$65,515
00273	00001	Jan-26	Jan-26	\$150,717
00273	00001	Feb-26	Apr-25	\$889

00273	00001	Feb-26	Jun-25	\$215
00273	00001	Feb-26	Jul-25	\$605
00273	00001	Feb-26	Aug-25	\$1,097
00273	00001	Feb-26	Sep-25	\$394
00273	00001	Feb-26	Oct-25	\$2,313
00273	00001	Feb-26	Nov-25	\$5,593
00273	00001	Feb-26	Dec-25	\$9,422
00273	00001	Feb-26	Jan-26	\$96,935
00273	00001	Feb-26	Feb-26	\$124,165
00273	00001	Mar-26	Jan-25	\$750
00273	00001	Mar-26	Mar-25	\$124
00273	00001	Mar-26	Apr-25	\$750
00273	00001	Mar-26	May-25	-\$469
00273	00001	Mar-26	Jul-25	\$2,156
00273	00001	Mar-26	Aug-25	\$1,071
00273	00001	Mar-26	Sep-25	\$441
00273	00001	Mar-26	Oct-25	\$540
00273	00001	Mar-26	Nov-25	\$1,435
00273	00001	Mar-26	Dec-25	\$1,785
00273	00001	Mar-26	Jan-26	\$12,200
00273	00001	Mar-26	Feb-26	\$77,205
00273	00001	Mar-26	Mar-26	\$116,574
00273	00002	Apr-24	Jan-24	\$231
00273	00002	Apr-24	Feb-24	\$1,180
00273	00002	Apr-24	Mar-24	\$15,865
00273	00002	Apr-24	Apr-24	\$10,163
00273	00002	May-24	Jul-23	\$50
00273	00002	May-24	Aug-23	\$126
00273	00002	May-24	Jan-24	\$1,653
00273	00002	May-24	Feb-24	\$1,636
00273	00002	May-24	Mar-24	\$2,079
00273	00002	May-24	Apr-24	\$12,415
00273	00002	May-24	May-24	\$14,085
00273	00002	Jun-24	Dec-23	\$262
00273	00002	Jun-24	Feb-24	\$560
00273	00002	Jun-24	May-24	\$10,850
00273	00002	Jun-24	Jun-24	\$12,686
00273	00002	Jul-24	Feb-24	\$66
00273	00002	Jul-24	Mar-24	\$448
00273	00002	Jul-24	Apr-24	\$283
00273	00002	Jul-24	May-24	\$233
00273	00002	Jul-24	Jun-24	\$3,944
00273	00002	Jul-24	Jul-24	\$9,245
00273	00002	Aug-24	Mar-24	\$60
00273	00002	Aug-24	Apr-24	\$44
00273	00002	Aug-24	May-24	\$347
00273	00002	Aug-24	Jun-24	\$667
00273	00002	Aug-24	Jul-24	\$9,824
00273	00002	Aug-24	Aug-24	\$14,790

00273	00002	Sep-24	Jan-24	\$127
00273	00002	Sep-24	Apr-24	\$255
00273	00002	Sep-24	May-24	\$163
00273	00002	Sep-24	Jun-24	\$72
00273	00002	Sep-24	Jul-24	\$2,882
00273	00002	Sep-24	Aug-24	\$6,223
00273	00002	Sep-24	Sep-24	\$18,573
00273	00002	Oct-24	Mar-24	\$90
00273	00002	Oct-24	Apr-24	\$358
00273	00002	Oct-24	May-24	\$1,330
00273	00002	Oct-24	Jun-24	\$179
00273	00002	Oct-24	Aug-24	\$635
00273	00002	Oct-24	Sep-24	\$9,631
00273	00002	Oct-24	Oct-24	\$18,581
00273	00002	Nov-24	Jun-24	\$186
00273	00002	Nov-24	Sep-24	\$464
00273	00002	Nov-24	Oct-24	\$6,880
00273	00002	Nov-24	Nov-24	\$12,784
00273	00002	Dec-24	Aug-24	\$89
00273	00002	Dec-24	Sep-24	\$72
00273	00002	Dec-24	Oct-24	\$165
00273	00002	Dec-24	Nov-24	\$6,704
00273	00002	Dec-24	Dec-24	\$15,328
00273	00002	Jan-25	Jan-24	\$91
00273	00002	Jan-25	Jun-24	\$148
00273	00002	Jan-25	Jul-24	\$54
00273	00002	Jan-25	Aug-24	\$468
00273	00002	Jan-25	Sep-24	\$187
00273	00002	Jan-25	Nov-24	\$1,453
00273	00002	Jan-25	Dec-24	\$3,902
00273	00002	Jan-25	Jan-25	\$10,828
00273	00002	Feb-25	May-24	\$88
00273	00002	Feb-25	Jul-24	\$73
00273	00002	Feb-25	Oct-24	\$176
00273	00002	Feb-25	Nov-24	\$268
00273	00002	Feb-25	Dec-24	\$75
00273	00002	Feb-25	Jan-25	\$5,486
00273	00002	Feb-25	Feb-25	\$11,066
00273	00002	Mar-25	Apr-24	\$39
00273	00002	Mar-25	May-24	\$93
00273	00002	Mar-25	Nov-24	\$136
00273	00002	Mar-25	Dec-24	\$207
00273	00002	Mar-25	Jan-25	\$635
00273	00002	Mar-25	Feb-25	\$7,928
00273	00002	Mar-25	Mar-25	\$12,355
00273	00002	Apr-25	Jan-25	\$145
00273	00002	Apr-25	Feb-25	\$1,018
00273	00002	Apr-25	Mar-25	\$9,089
00273	00002	Apr-25	Apr-25	\$8,664

00273	00002	May-25	Nov-24	\$132
00273	00002	May-25	Feb-25	\$184
00273	00002	May-25	Mar-25	\$444
00273	00002	May-25	Apr-25	\$10,593
00273	00002	May-25	May-25	\$13,160
00273	00002	Jun-25	Nov-24	\$1,145
00273	00002	Jun-25	Apr-25	\$269
00273	00002	Jun-25	May-25	\$6,380
00273	00002	Jun-25	Jun-25	\$10,536
00273	00002	Jul-25	May-24	\$603
00273	00002	Jul-25	Feb-25	\$750
00273	00002	Jul-25	Apr-25	\$89
00273	00002	Jul-25	May-25	\$429
00273	00002	Jul-25	Jun-25	\$11,209
00273	00002	Jul-25	Jul-25	\$16,449
00273	00002	Aug-25	Apr-25	\$198
00273	00002	Aug-25	May-25	\$2,326
00273	00002	Aug-25	Jun-25	-\$250
00273	00002	Aug-25	Jul-25	\$3,903
00273	00002	Aug-25	Aug-25	\$10,889
00273	00002	Sep-25	Apr-25	\$1,375
00273	00002	Sep-25	Jul-25	\$1,144
00273	00002	Sep-25	Aug-25	\$11,047
00273	00002	Sep-25	Sep-25	\$13,581
00273	00002	Oct-25	Apr-25	\$669
00273	00002	Oct-25	May-25	\$125
00273	00002	Oct-25	Jul-25	\$674
00273	00002	Oct-25	Aug-25	\$1,390
00273	00002	Oct-25	Sep-25	\$11,755
00273	00002	Oct-25	Oct-25	\$16,630
00273	00002	Nov-25	Aug-25	\$970
00273	00002	Nov-25	Sep-25	\$3,163
00273	00002	Nov-25	Oct-25	\$10,514
00273	00002	Nov-25	Nov-25	\$12,324
00273	00002	Dec-25	Aug-25	\$1,650
00273	00002	Dec-25	Sep-25	\$104
00273	00002	Dec-25	Oct-25	\$1,024
00273	00002	Dec-25	Nov-25	\$4,687
00273	00002	Dec-25	Dec-25	\$12,197
00273	00002	Jan-26	May-24	-\$15
00273	00002	Jan-26	Jan-25	\$936
00273	00002	Jan-26	Oct-25	\$21
00273	00002	Jan-26	Dec-25	\$8,365
00273	00002	Jan-26	Jan-26	\$12,147
00273	00002	Feb-26	Jul-25	\$140
00273	00002	Feb-26	Aug-25	\$698
00273	00002	Feb-26	Nov-25	\$600
00273	00002	Feb-26	Dec-25	\$1,645
00273	00002	Feb-26	Jan-26	\$6,376

00273	00002	Feb-26	Feb-26	\$10,376
00273	00002	Mar-26	May-25	\$30
00273	00002	Mar-26	Aug-25	\$2,998
00273	00002	Mar-26	Dec-25	\$244
00273	00002	Mar-26	Jan-26	\$1,148
00273	00002	Mar-26	Feb-26	\$7,378
00273	00002	Mar-26	Mar-26	\$10,268
00273	00003	Apr-24	Nov-23	\$375
00273	00003	Apr-24	Jan-24	\$386
00273	00003	Apr-24	Feb-24	\$639
00273	00003	Apr-24	Mar-24	\$4,615
00273	00003	Apr-24	Apr-24	\$8,469
00273	00003	May-24	Jan-24	\$153
00273	00003	May-24	Feb-24	\$996
00273	00003	May-24	Mar-24	\$575
00273	00003	May-24	Apr-24	\$8,448
00273	00003	May-24	May-24	\$6,527
00273	00003	Jun-24	May-24	\$5,356
00273	00003	Jun-24	Jun-24	\$8,398
00273	00003	Jul-24	May-24	\$555
00273	00003	Jul-24	Jun-24	\$4,674
00273	00003	Jul-24	Jul-24	\$4,039
00273	00003	Aug-24	Jun-24	\$4
00273	00003	Aug-24	Jul-24	\$9,428
00273	00003	Aug-24	Aug-24	\$10,887
00273	00003	Sep-24	Mar-24	\$197
00273	00003	Sep-24	May-24	\$113
00273	00003	Sep-24	Aug-24	\$6,174
00273	00003	Sep-24	Sep-24	\$11,408
00273	00003	Oct-24	Apr-24	\$73
00273	00003	Oct-24	Aug-24	\$1,206
00273	00003	Oct-24	Sep-24	\$4,174
00273	00003	Oct-24	Oct-24	\$7,405
00273	00003	Nov-24	Sep-24	\$1,309
00273	00003	Nov-24	Oct-24	\$5,973
00273	00003	Nov-24	Nov-24	\$7,106
00273	00003	Dec-24	Sep-24	\$160
00273	00003	Dec-24	Oct-24	\$2,370
00273	00003	Dec-24	Nov-24	\$5,345
00273	00003	Dec-24	Dec-24	\$6,684
00273	00003	Jan-25	Aug-24	\$136
00273	00003	Jan-25	Sep-24	\$97
00273	00003	Jan-25	Nov-24	\$72
00273	00003	Jan-25	Dec-24	\$3,642
00273	00003	Jan-25	Jan-25	\$7,874
00273	00003	Feb-25	Nov-24	\$95
00273	00003	Feb-25	Dec-24	\$88
00273	00003	Feb-25	Jan-25	\$5,023
00273	00003	Feb-25	Feb-25	\$7,745

00273	00003	Mar-25	Dec-24	\$69
00273	00003	Mar-25	Jan-25	\$2,893
00273	00003	Mar-25	Feb-25	\$8,998
00273	00003	Mar-25	Mar-25	\$8,662
00273	00003	Apr-25	Aug-24	\$66
00273	00003	Apr-25	Mar-25	\$4,316
00273	00003	Apr-25	Apr-25	\$9,385
00273	00003	May-25	Aug-24	\$115
00273	00003	May-25	Feb-25	\$1,265
00273	00003	May-25	Mar-25	\$1,590
00273	00003	May-25	Apr-25	\$11,662
00273	00003	May-25	May-25	\$9,846
00273	00003	Jun-25	Oct-24	\$480
00273	00003	Jun-25	Nov-24	\$91
00273	00003	Jun-25	Mar-25	\$713
00273	00003	Jun-25	Apr-25	\$393
00273	00003	Jun-25	May-25	\$5,187
00273	00003	Jun-25	Jun-25	\$11,942
00273	00003	Jul-25	Feb-25	\$179
00273	00003	Jul-25	Apr-25	\$172
00273	00003	Jul-25	May-25	\$997
00273	00003	Jul-25	Jun-25	\$7,226
00273	00003	Jul-25	Jul-25	\$12,769
00273	00003	Aug-25	Jan-25	\$94
00273	00003	Aug-25	Apr-25	\$318
00273	00003	Aug-25	May-25	\$153
00273	00003	Aug-25	Jul-25	\$5,656
00273	00003	Aug-25	Aug-25	\$7,061
00273	00003	Sep-25	Apr-25	\$130
00273	00003	Sep-25	Jul-25	\$874
00273	00003	Sep-25	Aug-25	\$9,174
00273	00003	Sep-25	Sep-25	\$9,117
00273	00003	Oct-25	Apr-25	\$104
00273	00003	Oct-25	Jun-25	\$431
00273	00003	Oct-25	Aug-25	\$215
00273	00003	Oct-25	Sep-25	\$10,465
00273	00003	Oct-25	Oct-25	\$9,492
00273	00003	Nov-25	May-25	\$795
00273	00003	Nov-25	Aug-25	\$154
00273	00003	Nov-25	Sep-25	\$79
00273	00003	Nov-25	Oct-25	\$5,846
00273	00003	Nov-25	Nov-25	\$10,243
00273	00003	Dec-25	Mar-25	\$206
00273	00003	Dec-25	Aug-25	\$373
00273	00003	Dec-25	Sep-25	\$203
00273	00003	Dec-25	Oct-25	\$1,327
00273	00003	Dec-25	Nov-25	\$7,297
00273	00003	Dec-25	Dec-25	\$10,433
00273	00003	Jan-26	Nov-25	\$322

00273	00003	Jan-26	Dec-25	\$6,289
00273	00003	Jan-26	Jan-26	\$10,398
00273	00003	Feb-26	Aug-25	\$92
00273	00003	Feb-26	Nov-25	\$195
00273	00003	Feb-26	Dec-25	\$159
00273	00003	Feb-26	Jan-26	\$8,163
00273	00003	Feb-26	Feb-26	\$7,781
00273	00003	Mar-26	Dec-25	\$577
00273	00003	Mar-26	Jan-26	\$90
00273	00003	Mar-26	Feb-26	\$4,119
00273	00003	Mar-26	Mar-26	\$8,584
00273	00004	Apr-24	Mar-24	\$240
00273	00004	Apr-24	Apr-24	\$370
00273	00004	May-24	Mar-24	\$132
00273	00004	May-24	Apr-24	\$227
00273	00004	May-24	May-24	\$904
00273	00004	Jun-24	May-24	\$883
00273	00004	Jun-24	Jun-24	\$1,250
00273	00004	Jul-24	Apr-24	\$338
00273	00004	Jul-24	Jun-24	\$1,415
00273	00004	Jul-24	Jul-24	\$337
00273	00004	Aug-24	Jun-24	\$45
00273	00004	Aug-24	Jul-24	\$628
00273	00004	Aug-24	Aug-24	\$1,006
00273	00004	Sep-24	Feb-24	\$479
00273	00004	Sep-24	Jul-24	\$111
00273	00004	Sep-24	Aug-24	\$526
00273	00004	Sep-24	Sep-24	\$706
00273	00004	Oct-24	Sep-24	\$189
00273	00004	Oct-24	Oct-24	\$1,657
00273	00004	Nov-24	Feb-24	\$110
00273	00004	Nov-24	Oct-24	\$340
00273	00004	Nov-24	Nov-24	\$1,386
00273	00004	Dec-24	Nov-24	\$897
00273	00004	Dec-24	Dec-24	\$1,165
00273	00004	Jan-25	Dec-24	\$931
00273	00004	Jan-25	Jan-25	\$429
00273	00004	Feb-25	Jan-25	\$566
00273	00004	Feb-25	Feb-25	\$1,028
00273	00004	Mar-25	Jan-25	\$865
00273	00004	Mar-25	Mar-25	\$1,715
00273	00004	Apr-25	Dec-24	\$184
00273	00004	Apr-25	Mar-25	\$72
00273	00004	Apr-25	Apr-25	\$240
00273	00004	May-25	Apr-25	\$423
00273	00004	May-25	May-25	\$253
00273	00004	Jun-25	May-25	\$358
00273	00004	Jun-25	Jun-25	\$2,842
00273	00004	Jul-25	Jun-25	\$2,061

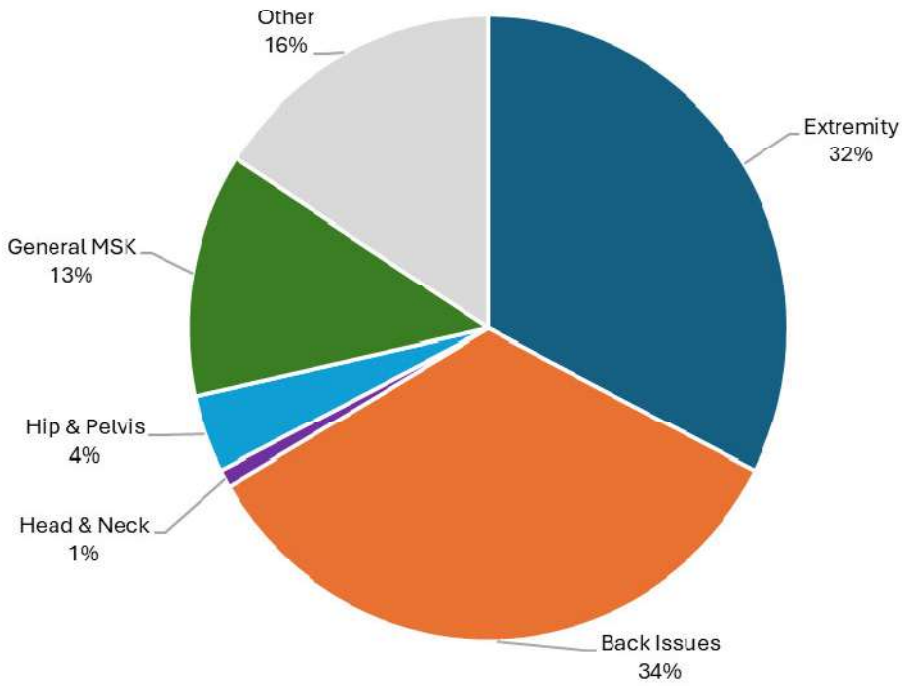
00273	00004	Jul-25	Jul-25	\$1,100
00273	00004	Aug-25	Jul-25	\$345
00273	00004	Aug-25	Aug-25	\$878
00273	00004	Sep-25	Aug-25	\$82
00273	00004	Sep-25	Sep-25	\$197
00273	00004	Oct-25	Sep-25	\$468
00273	00004	Oct-25	Oct-25	\$310
00273	00004	Nov-25	Oct-25	\$82
00273	00004	Nov-25	Nov-25	\$947
00273	00004	Dec-25	Dec-25	\$853
00273	00004	Jan-26	Dec-25	\$1,058
00273	00004	Jan-26	Jan-26	\$161
00273	00004	Feb-26	Jan-26	\$750
00273	00004	Feb-26	Feb-26	\$633
00273	00004	Mar-26	Jan-26	\$56
00273	00004	Mar-26	Feb-26	\$410
00273	00004	Mar-26	Mar-26	\$1,452
00273	09001	May-24	Apr-24	\$119
00273	09001	May-24	May-24	\$507
00273	09001	Jun-24	May-24	\$594
00273	09001	Jun-24	Jun-24	\$445
00273	09001	Jul-24	Jul-24	\$382
00273	09001	Aug-24	Jul-24	\$424
00273	09001	Aug-24	Aug-24	\$91
00273	09001	Sep-24	Sep-24	\$152
00273	09001	Nov-24	Jul-24	\$212
00273	09001	Nov-24	Nov-24	\$93
00273	09001	Dec-24	Dec-24	\$742
00273	09001	May-25	May-25	\$66
00273	09001	Jun-25	Jun-25	\$505
00273	09001	Sep-25	Sep-25	\$440
00273	09001	Nov-25	Nov-25	\$317
00273	09001	Dec-25	Dec-25	\$314
00273	09001	Jan-26	Dec-25	\$834
00273	09001	Feb-26	Feb-26	\$348
00273	09001	Mar-26	Mar-26	\$366
Total				\$7,271,386



**Fresno City Employees'
Health and Welfare Trust**

	January 2026	February 2026	Benefit Year July 2025 To June 2026
Benefit Utilization			
Covered Employees	4,458	4,432	
Covered Dependents	7,288	7,247	
Total Covered Members	11,746	11,679	
Unique Employees Accessing Benefit	226	224	611
Unique Dependents Accessing Benefit	201	206	631
Total Unique Members Accessing Benefit	427	430	1,242
Unique Dates of Service Paid	1,018	1,138	9,206
Utilization Management			
		January 2026	February 2026
Pre-Treatment Requests Reviewed for Medical Necessity:			
<ul style="list-style-type: none"> • After 12th Visit • Massage • Minor (Under Age 18) 			
Chiropractic		38	58
Pre-Treatment Requests Reviewed for Medical Necessity:			
<ul style="list-style-type: none"> • After 10th Visit 			
Physical Therapy		22	35
Occupational Therapy		1	4
Speech and Language Therapy		5	7
Total Physical Medicine Requests Reviewed		66	104

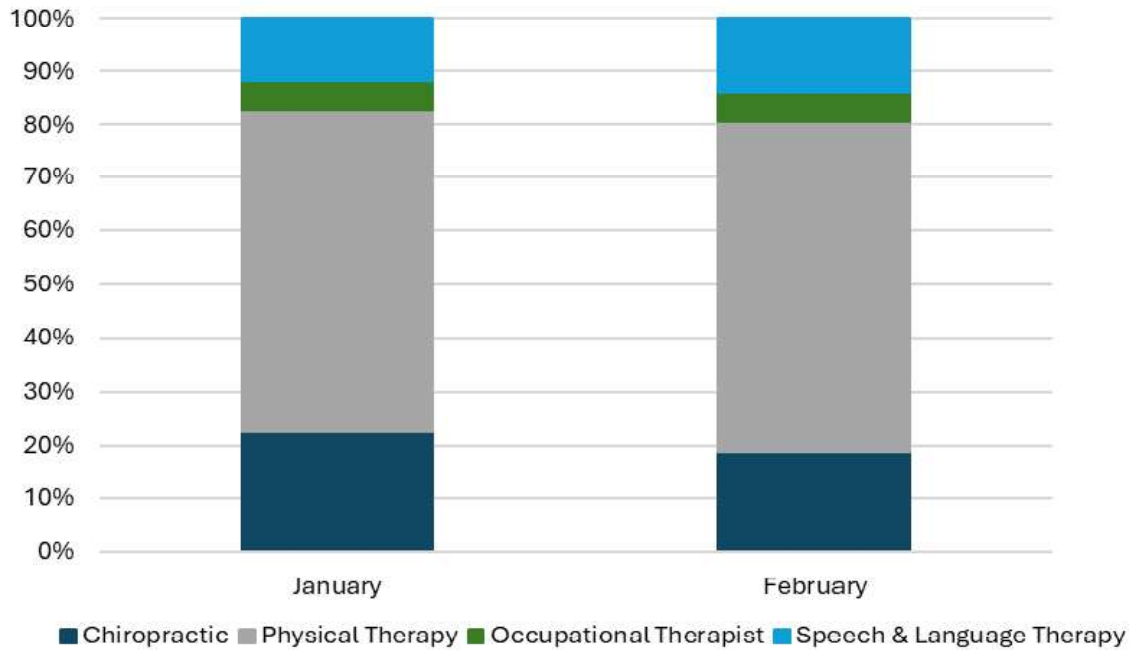
Diagnosis Code Activity



Issues	Percent (%)*
Extremity	32
Back Issues	34
Head & Neck	1
Hip & Pelvis	4
General MSK	13
Other	16

*Average over two (2) months (January-February 2026)

Monthly Utilization by Specialty



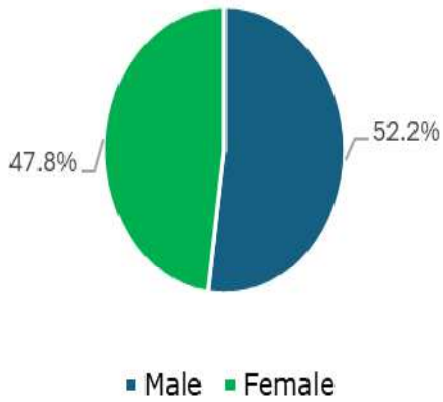
Top 10 Procedure Code Activity by Total Pricing for Month of: January 2026	# of Unique Patients	Percentage (%) of Total Pricing
97110-THERAPEUTIC EXERCISES	155	27.0%
97530-THERAPEUTIC ACTIVITIES	77	14.1%
98941-CHIROPRACT MANJ 3-4 REGIONS	206	12.4%
92507-TX SP LANG VOICE COMM INDIV	25	10.1%
97140-MANUAL THERAPY 1/> REGIONS	87	9.8%
97112-NEUROMUSCULAR REEDUCATION	72	9.0%
98940-CHIROPRACT MANJ 1-2 REGIONS	75	3.6%
97161-PT EVAL LOW COMPLEX 20 MIN	19	2.3%
97014-ELECTRIC STIMULATION THERAPY	69	2.1%
98943-CHIROPRACT MANJ XTRSPINL 1/>	66	1.3%

Top 10 Procedure Code Activity by Total Pricing for Month of: February 2026	# of Unique Patients	Percentage (%) Of Total Pricing
97110-THERAPEUTIC EXERCISES	168	24.9%
97530-THERAPEUTIC ACTIVITIES	76	19.9%
92507-TX SP LANG VOICE COMM INDIV	23	13.0%
98941-CHIROPRACT MANJ 3-4 REGIONS	200	8.9%
97112-NEUROMUSCULAR REEDUCATION	73	8.0%
97140-MANUAL THERAPY 1/> REGIONS	97	7.4%
98940-CHIROPRACT MANJ 1-2 REGIONS	88	4.3%
97161-PT EVAL LOW COMPLEX 20 MIN	25	2.8%
97162-PT EVAL MOD COMPLEX 30 MIN	13	1.6%
97014-ELECTRIC STIMULATION THERAPY	68	1.5%

Top 10 Provider Activity by Total Pricing for Month of: January 2026	# of Unique Patients	Percentage (%) of Total Pricing
Clovis Community - Outpatient Therapy	4	5.2%
Joshua Ritter DC	65	4.6%
Jason Bowen DC	39	4.5%
Vickie Nguyen OT	5	3.7%
Valley Children's Hospital	2	3.0%
Courtney Gebhart SLP	6	2.9%
Joanne Steele PT	6	2.6%
Corrie Talbert SLP	8	2.6%
Jason Gray PT	4	2.6%
Matthew Vinson DC	23	2.4%

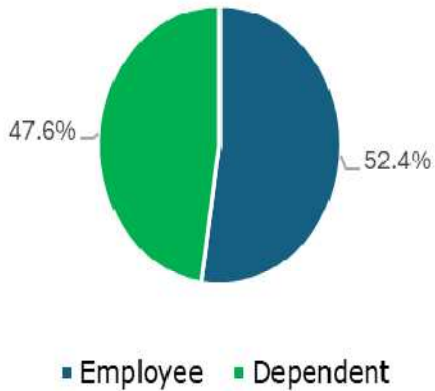
Top 10 Provider Activity by Total Pricing for Month of: February 2026	# of Unique Patients	Percentage (%) of Total Pricing
Valley Children's Hospital	9	8.1%
Clovis Community - Outpatient Therapy	5	4.7%
Corrie Talbert SLP	7	3.8%
Joshua Friesen PT	6	3.7%
George Drysdale PT	6	3.7%
Vickie Nguyen OT	5	3.6%
Joshua Ritter DC	60	3.3%
Jason Gray PT	4	2.7%
Matthew Vinson DC	26	2.6%
Glen Duncan PT	3	2.4%

Gender



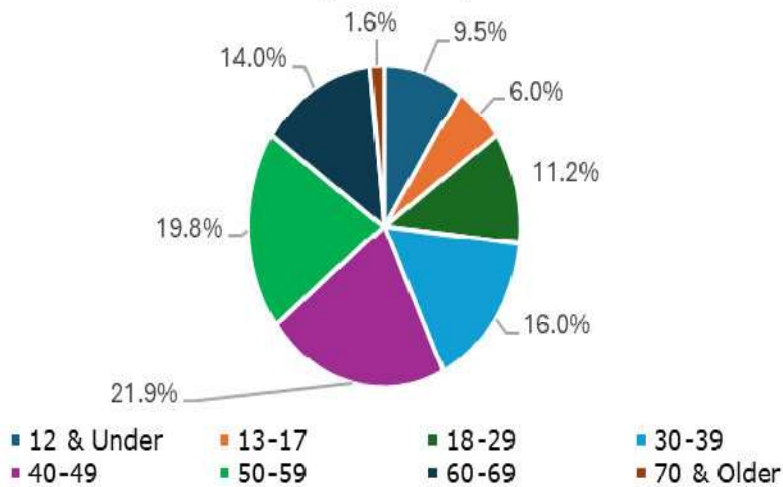
Gender	Percent (%)*
Male	52.2
Female	47.8
Total	

Classification



Classification	Percent (%)*
Employee	52.4
Dependent	47.6
Total	

Age Group



Age Group	Percent (%)*
12 and Under	9.5
13-17	6.0
18-29	11.2
30-39	16.0
40-49	21.9
50-59	19.8
60-69	14.0
70 and Older	1.6
Total	

*Average over two (2) months (January - February 2026)

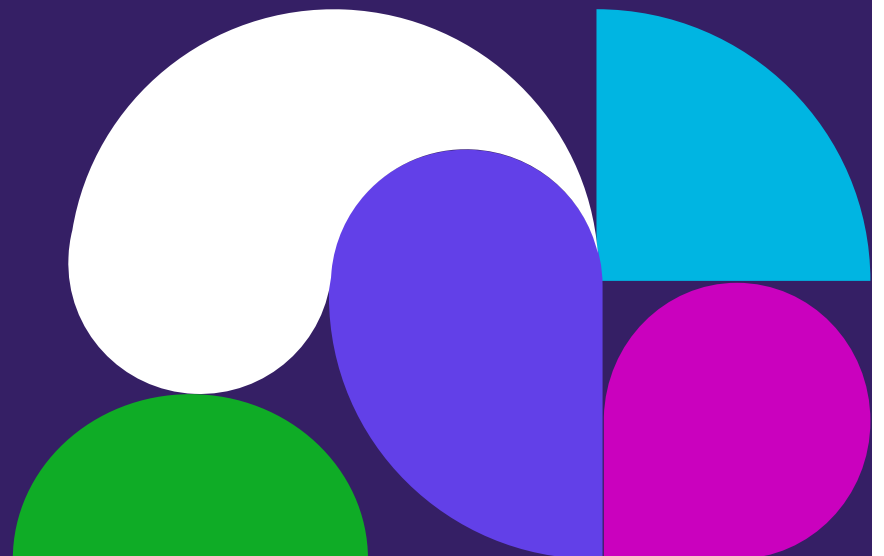
Portfolio Performance Summary

Fresno City Trust PPO High Option

2026-03-31

Teladoc
HEALTH

80



Overview: Product Portfolio

January to March 2026

Product Category	Product	Eligible Lives	Lives Ready for Care	Lives Utilized Care	Visits/Cases	Net Savings (\$)	Section Visible*	Page Number
Telehealth	24/7 Care	11,432	2,108	207	243	111,512	Yes	6
Mental Health	Mental Health Care	11,432	2,108	4	6	584	No	

Overview: Summary

March 2026

11,432

Total Eligible Lives

Eligible Lives: individuals who currently have access to any product. Specific products may have more limited eligible populations.

2,347
(20.5%)

Eligible Lives
Currently Registered

Currently Registered: Eligible lives that have registered for any product.

+57.1

NPS score

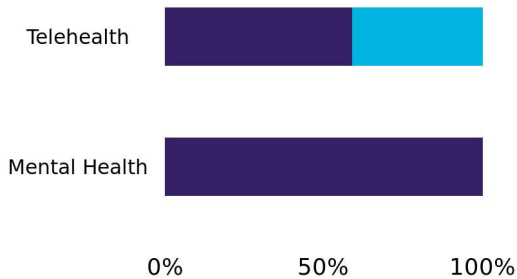
100% response rate

Surveys: all responses for completed services YTD. Late-arriving responses are incorporated into the following month's reporting. NPS metrics are not statistically meaningful with fewer than 50 responses.

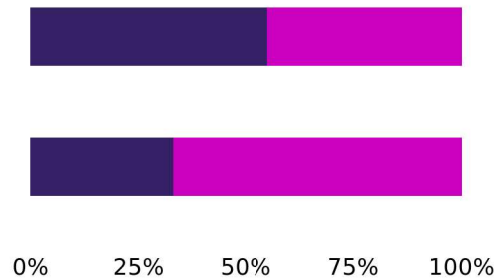
Annualized Utilization Rate

Product	Annualized Utilization
24/7 Care	21.9%
Mental Health Care	0.5%

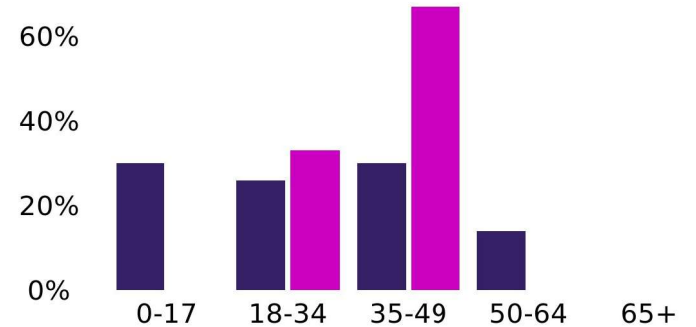
Sex assigned at birth



Relationship type



Age



Female Male
Other

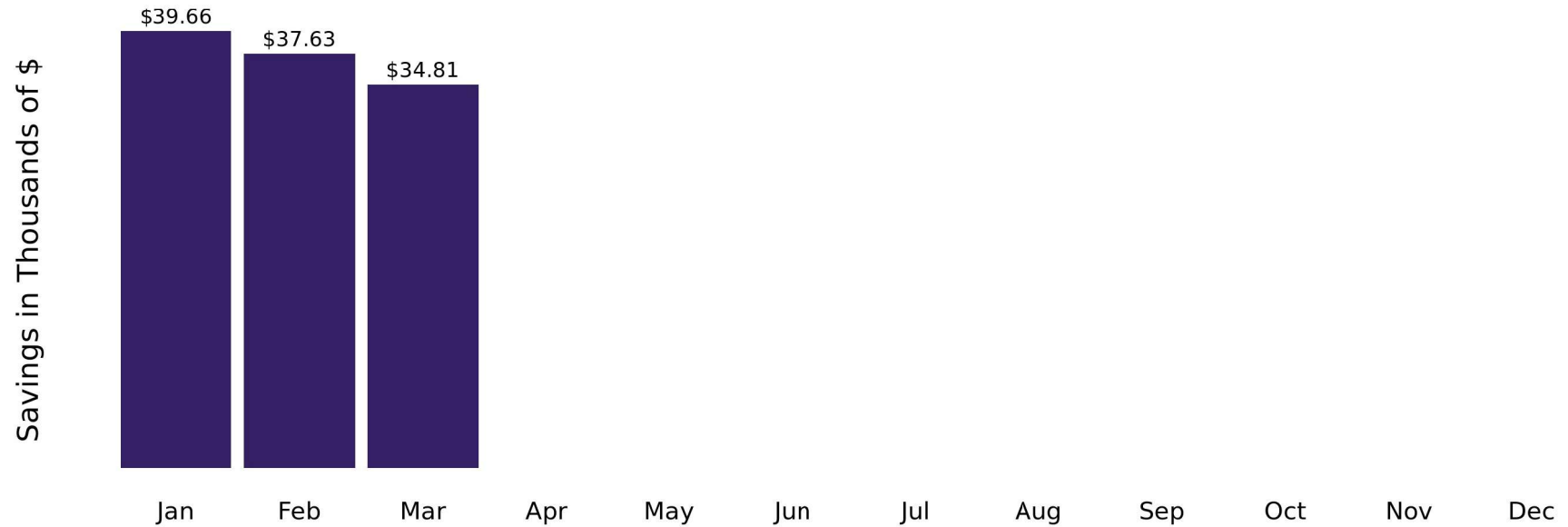
Dependent Primary

Telehealth
Mental Health

Demographics for Telehealth products are among members who utilized care in the past month.

Overview: Net Savings

January to March 2026



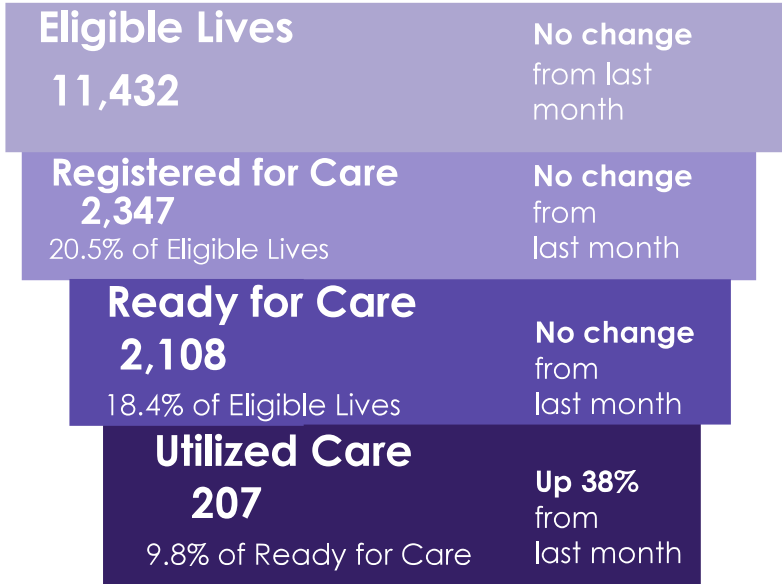
Total Net Savings YTD
\$111,512

Telehealth
\$111,512
Savings per visit x number of visits YTD

Telehealth

Value and Utilization

March 2026



Eligible Lives: Number of people who are eligible for 24/7 Care

Registered for Care: Number of currently eligible lives who completed registration (ITD)

Ready for Care: Number of currently eligible lives who have completed their online medical history (ITD)

Utilized Care: Number of participants who have completed a 24/7 Care visit (YTD)

+57.1

NPS score YTD*

5.8% response rate

84.6%

Satisfaction YTD

5.3% response rate

Total Net Savings YTD Calculated as number of visits YTD X savings per visit

\$111,512

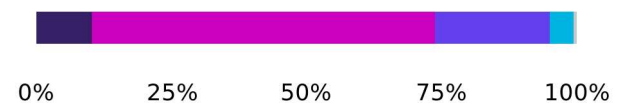
*Due to late-arriving responses, up to 2.5% of survey responses may arrive after report preparation, potentially shifting the NPS by an average of 0.6 points. These responses are incorporated into the following month's reporting. NPS metrics are not statistically meaningful with fewer than 50 responses.

Where eligible lives would have gone if Teladoc were not an option

10.3%

Would have forgone treatment

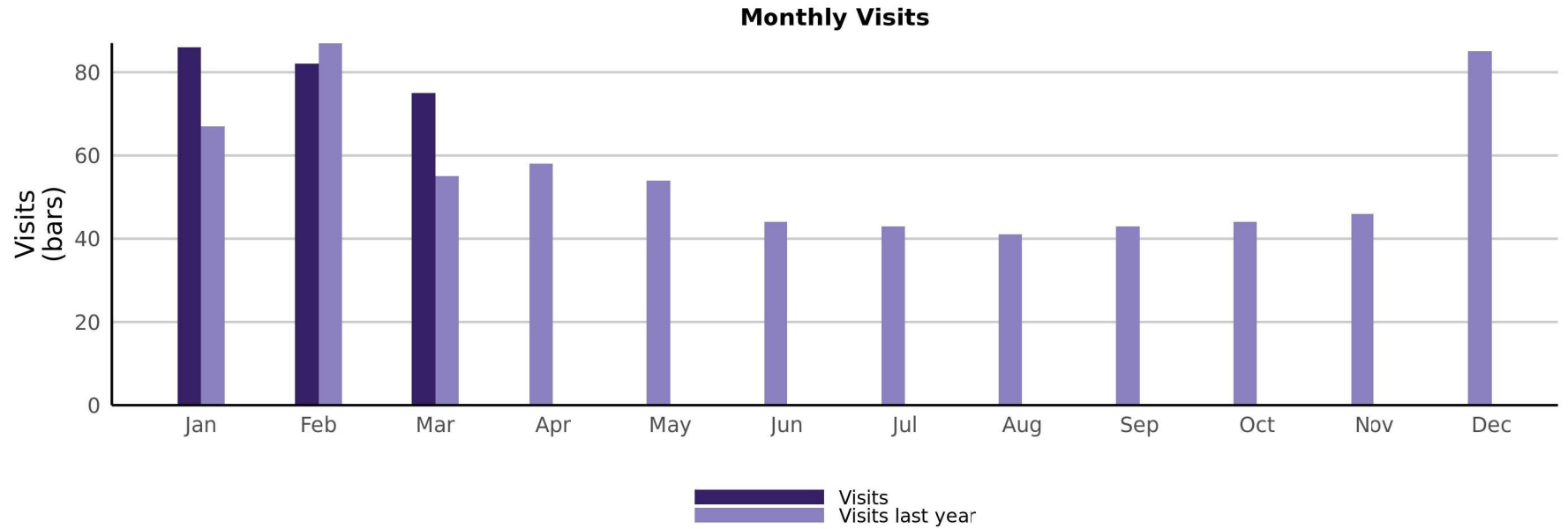
Based on responses in pre-visit intake survey (YTD)



- No Treatment 10.3%
- Urgent Care 63.5%
- PCP 21.2%
- Emergency Room 4.4%
- Specialist 0.5%

Value and Utilization

March 2026

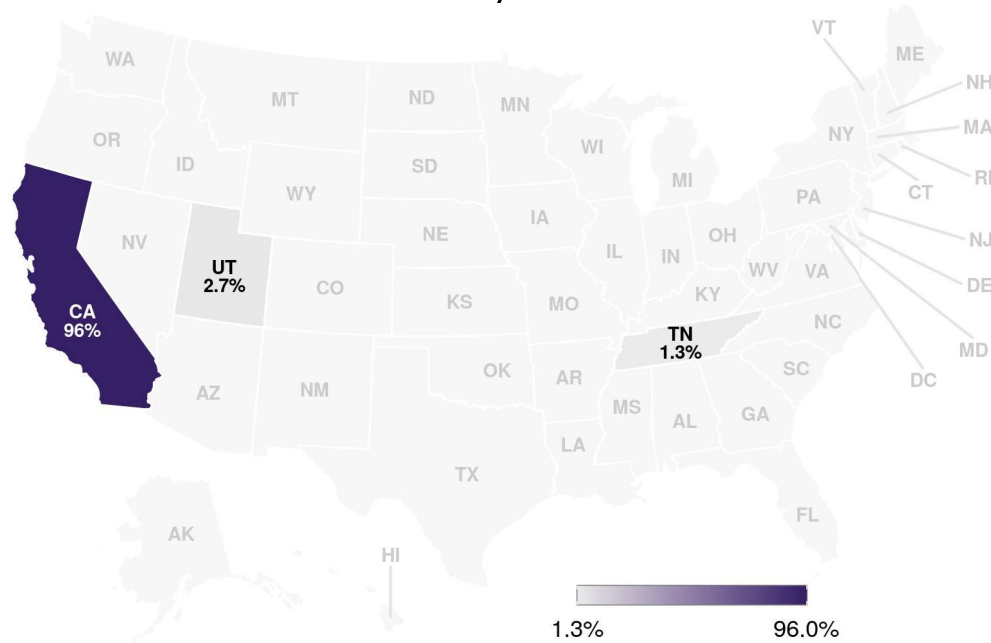


Metric	Period	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Visits	Current Year	86	82	75									
Visits	Prior Year	67	87	55	58	54	44	43	41	43	44	46	85
Participants with more than one visit	Current Year	7	17	32									
Eligible Lives	Current Year	11,505	11,463	11,432									
Eligible Lives	Prior Year	7,701	7,665	7,680	7,661	7,636	7,616	7,646	7,654	7,649	7,597	7,587	7,552
Annualized Utilization % *	Current Year	23.2	22.7	21.9									

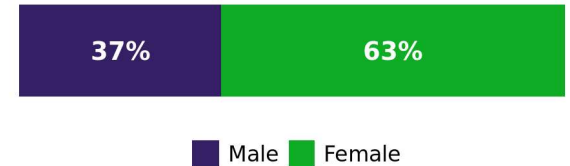
About your members

March 2026

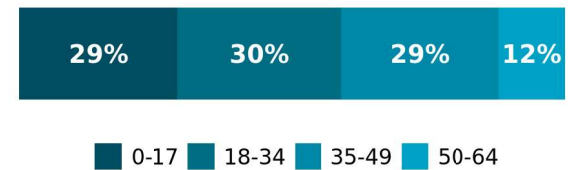
% Visits by State



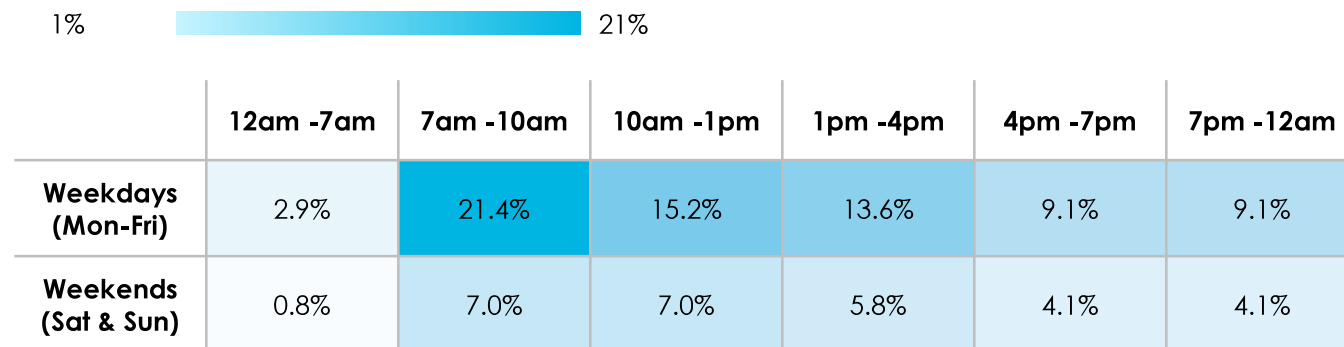
% Completed Visits by Sex assigned at birth



% Completed Visits by Age



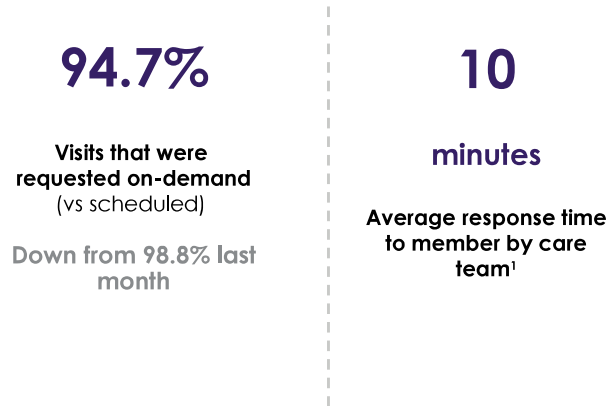
Visits by day of week & time of day YTD (member local time)



Clinical Details

March 2026

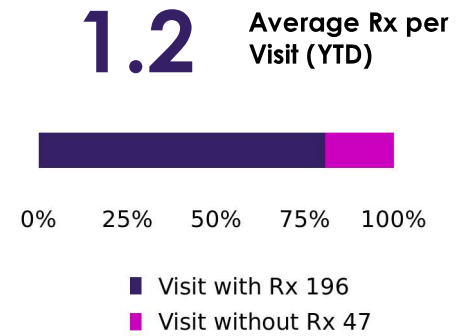
Members can receive on-demand care for a variety of conditions



Top prescriptions this month

Prescription	Number (percent)
Antitussives	11 (12.9%)
Urinary Anti-Infectives	8 (9.4%)
Nasal Antihistamines And Decongestants	6 (7.1%)
Penicillins/Beta-Lactamase Inhibitors	6 (7.1%)
Adrenergic Bronchodilators	5 (5.9%)

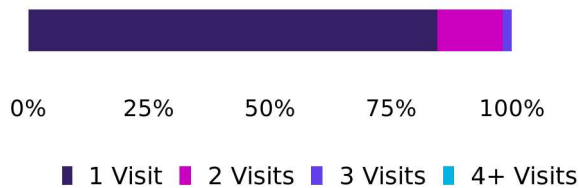
Prescriptions by Visit (YTD)



93.1% Rx can be filled as generic
91.2% last month

Access to medical care, anytime, anywhere

1.2 Average visits per member (YTD)
(for members with at least one visit)



Top diagnoses this month

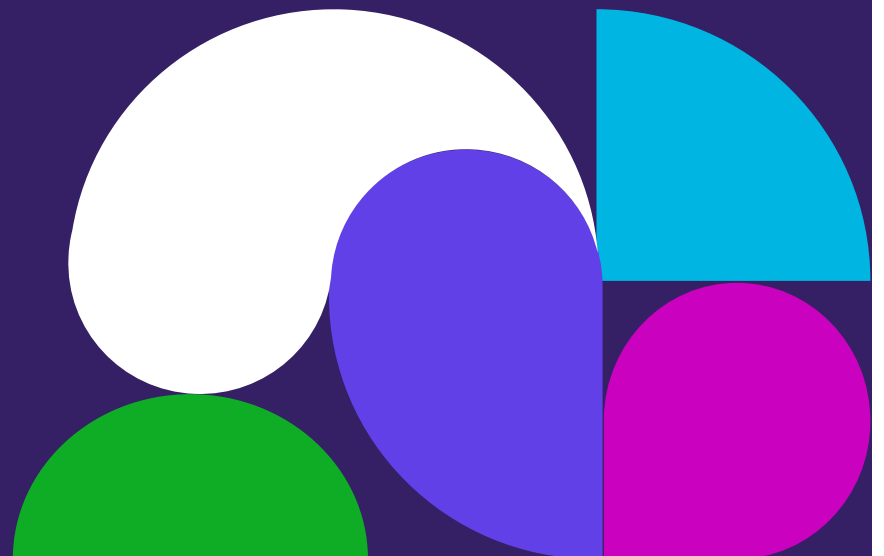
Diagnosis	Number with diagnosis (percent)
Acute upper respiratory infection, unspecified	6 (8.0%)
Urinary tract infection, site not specified	5 (6.7%)
Acute maxillary sinusitis, unspecified	3 (4.0%)
Other acute sinusitis	3 (4.0%)
Rash and other nonspecific skin eruption	3 (4.0%)

(1) The calculation methodology used here may differ from those specified in contractual performance guarantees or service level agreements.

Portfolio Performance Summary

Fresno City Trust PPO Low Option

2026-03-31



Overview: Product Portfolio

January to March 2026

Product Category	Product	Eligible Lives	Lives Ready for Care	Lives Utilized Care	Visits/Cases	Net Savings (\$)	Section Visible*	Page Number
Telehealth	24/7 Care	259	41	19	25	11,472	Yes	6
Mental Health	Mental Health Care	259	41	3	11	1,071	No	

Overview: Summary

March 2026

259

Total Eligible Lives

47
(18.1%)

Eligible Lives
Currently Registered

--

NPS score

--% response rate

Eligible Lives: individuals who currently have access to any product. Specific products may have more limited eligible populations.

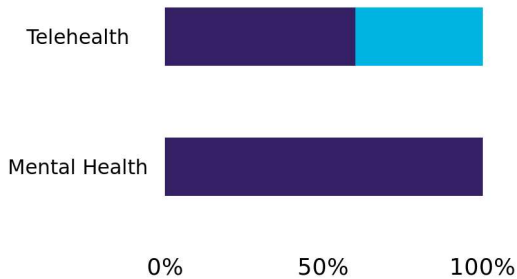
Currently Registered: Eligible lives that have registered for any product.

Surveys: all responses for completed services YTD. Late-arriving responses are incorporated into the following month's reporting. NPS metrics are not statistically meaningful with fewer than 50 responses, and are not displayed until at least 1 product has received at least 10 responses.

Annualized Utilization Rate

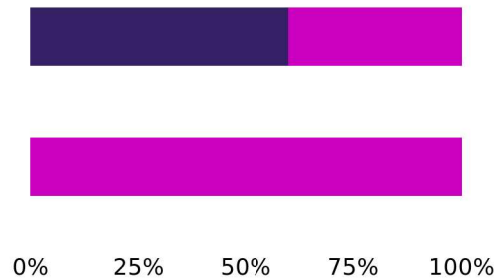
Product	Annualized Utilization
24/7 Care	87%
Mental Health Care	38.3%

Sex assigned at birth



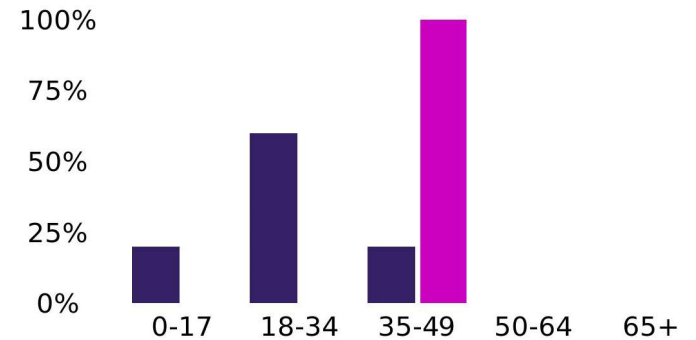
Female Male
Other

Relationship type



Dependent Primary

Age

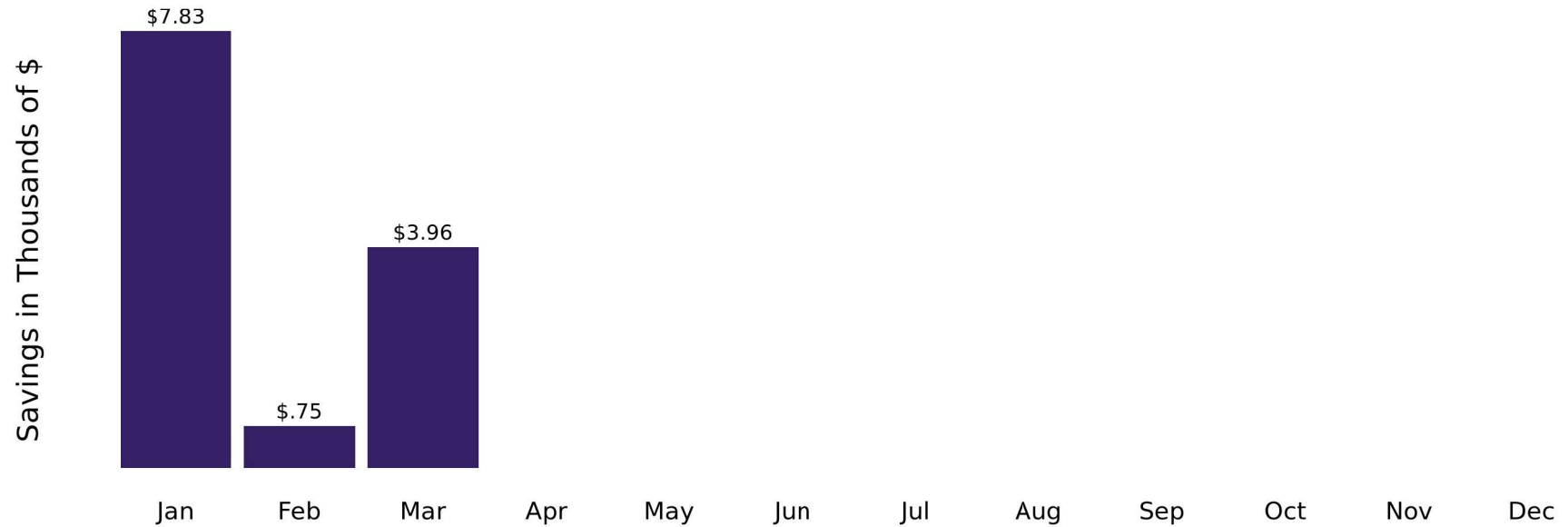


Telehealth
Mental Health

Demographics for Telehealth products are among members who utilized care in the past month.

Overview: Net Savings

January to March 2026



Total Net Savings YTD

\$11,472

Telehealth

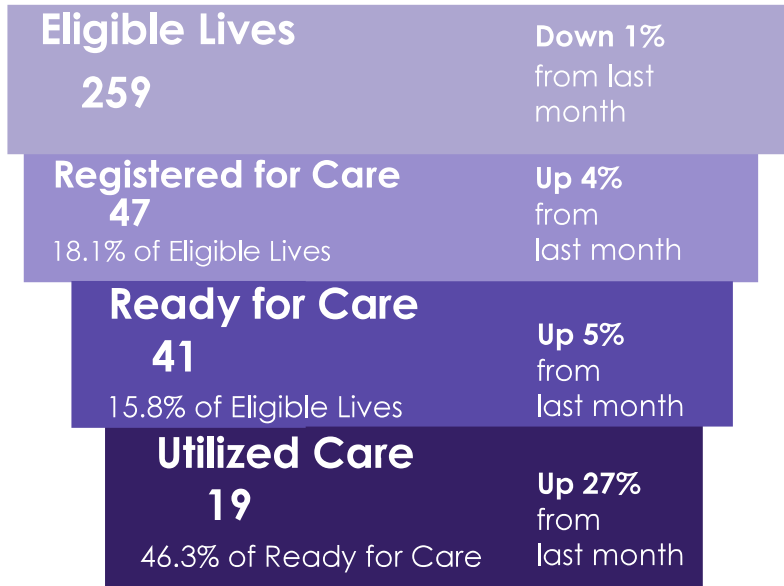
\$11,472

Savings per visit x number of visits YTD

Telehealth

Value and Utilization

March 2026



Eligible Lives: Number of people who are eligible for 24/7 Care

Registered for Care: Number of currently eligible lives who completed registration (ITD)

Ready for Care: Number of currently eligible lives who have completed their online medical history (ITD)

Utilized Care: Number of participants who have completed a 24/7 Care visit (YTD)



NPS score YTD*
0% response rate



Satisfaction YTD
0% response rate

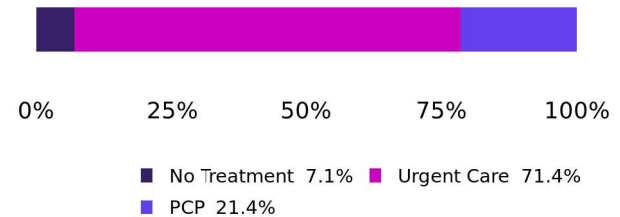
Total Net Savings YTD Calculated as number of visits YTD X savings per visit
\$11,472

*Satisfaction metrics are not displayed due to lack of minimal survey responses. *NPS metrics are not statistically meaningful with fewer than 50 responses, and are not displayed until at least 10 responses are received.



Where eligible lives would have gone if Teladoc were not an option

7.1% **Would have forgone treatment**
Based on responses in pre-visit intake survey (YTD)



Value and Utilization

March 2026

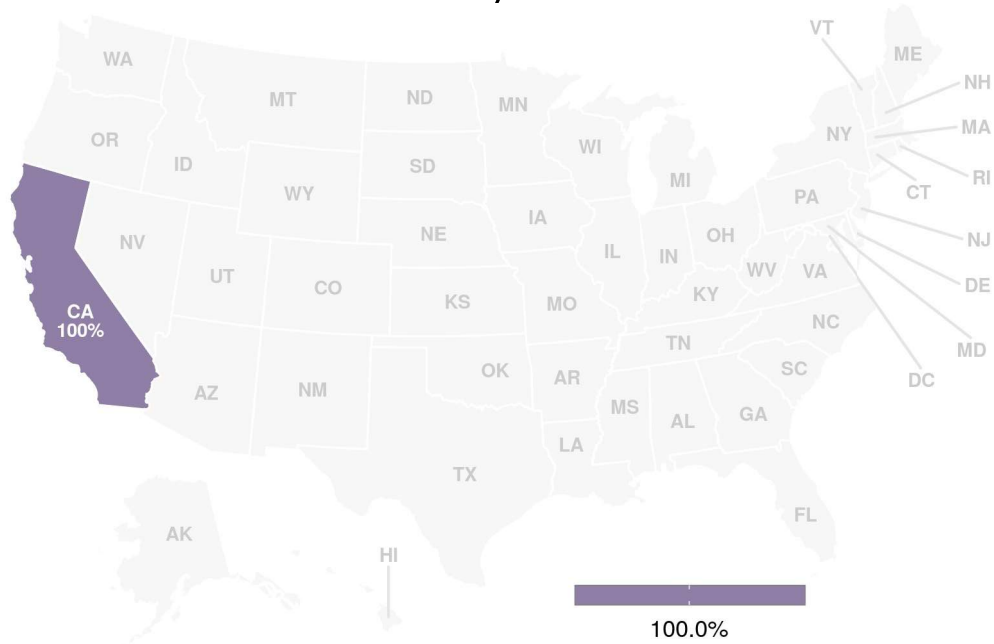


Metric	Period	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Visits	Current Year	16	1	8									
Visits	Prior Year	31	45	28	19	31	27	27	12	24	17	15	28
Participants with more than one visit	Current Year	2	2	4									
Eligible Lives	Current Year	285	261	259									
Eligible Lives	Prior Year	3,908	3,886	3,931	3,935	3,954	4,010	4,064	4,092	4,093	4,113	4,115	4,147
Annualized Utilization % *	Current Year	158.7	87.9	87.0									

About your members

March 2026

% Visits by State



% Completed Visits by Sex assigned at birth



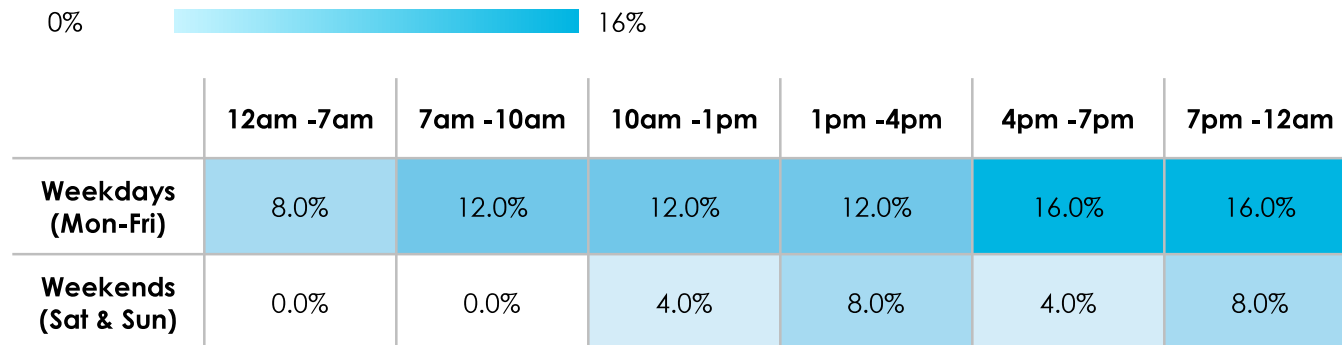
Male Female

% Completed Visits by Age



0-17 18-34 35-49

Visits by day of week & time of day YTD (member local time)



Clinical Details

March 2026

Members can receive on-demand care for a variety of conditions

100.0%

Visits that were requested on-demand (vs scheduled)

No change from last month

16

minutes

Average response time to member by care team¹

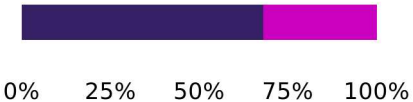
Top prescriptions this month

Prescription	Number (percent)
Antitussives	2 (22.2%)
Miscellaneous Genitourinary Tract Agents	1 (11.1%)
Nasal Antihistamines And Decongestants	1 (11.1%)
Nasal Steroids	1 (11.1%)
Neuraminidase Inhibitors	1 (11.1%)

Prescriptions by Visit (YTD)

1

Average Rx per Visit (YTD)



■ Visit with Rx 17.0
■ Visit without Rx 8.0

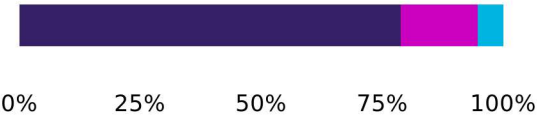
100%

Rx can be filled as generic 0% last month

Access to medical care, anytime, anywhere

1.3

Average visits per member (YTD) (for members with at least one visit)



■ 1 Visit ■ 2 Visits ■ 3 Visits ■ 4+ Visits

Top diagnoses this month

Diagnosis	Number with diagnosis (percent)
Acute upper respiratory infection, unspecified	2 (25.0%)
Urinary tract infection, site not specified	1 (12.5%)
Other specified disorders of nose and nasal sinuses	1 (12.5%)
Encounter for immunization	1 (12.5%)
Contact with and (suspected) exposure to other viral communicable diseases	1 (12.5%)

(1) The calculation methodology used here may differ from those specified in contractual performance guarantees or service level agreements.

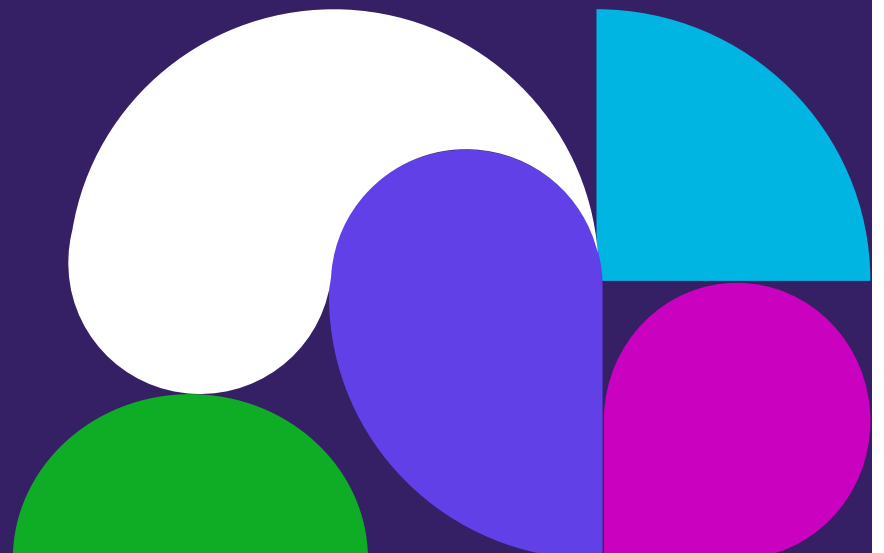
Portfolio Performance Summary

Fresno City Trust

2026-03-31

Teladoc
HEALTH

98



Overview: Product Portfolio

January to March 2026

Product Category	Product	Eligible Lives	Lives Ready for Care	Lives Utilized Care	Visits/Cases	Net Savings (\$)	Section Visible*	Page Number
Telehealth	24/7 Care	11,691	2,149	226	268	122,985	Yes	7
Mental Health	Mental Health Care	11,691	2,149	7	17	1,655	Yes	12

Overview: Key Impacts

March 2026

Telemedicine

83

Number of consults across all telemedicine¹ services for 11,691 unique eligible lives.

Mental Health

*

Percentage of clinical acuity members who have experienced improvement to their mental health.

*Clinical outcomes not displayed: cohort size (n = 1) is below reporting threshold (n ≥ 10), withheld for privacy and statistical validity.

Overview: Summary

March 2026

11,691

Total Eligible Lives

Eligible Lives: individuals who currently have access to any product. Specific products may have more limited eligible populations.

2,394
(20.5%)

Eligible Lives
Currently Registered

Currently Registered: Eligible lives that have registered for any product.

+57.1

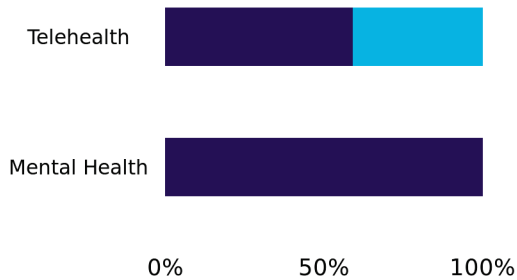
NPS score
100% response rate

Surveys: all responses for completed services YTD. Late-arriving responses are incorporated into the following month's reporting. NPS metrics are not statistically meaningful with fewer than 50 responses.

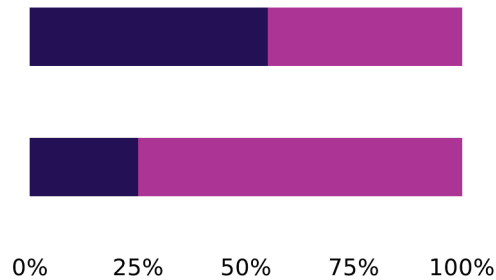
Annualized Utilization Rate

Product	Annualized Utilization
24/7 Care	23.5%
Mental Health Care	1.5%

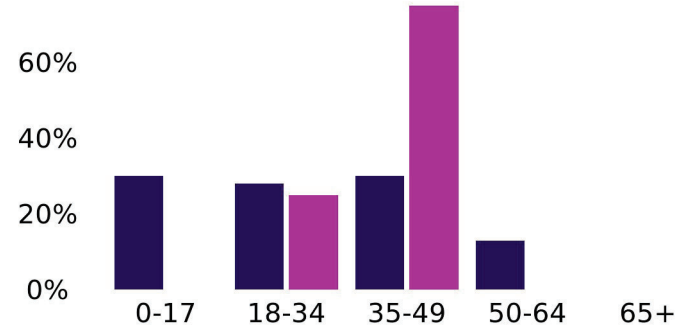
Sex assigned at birth



Relationship type



Age



■ Female ■ Male
■ Other

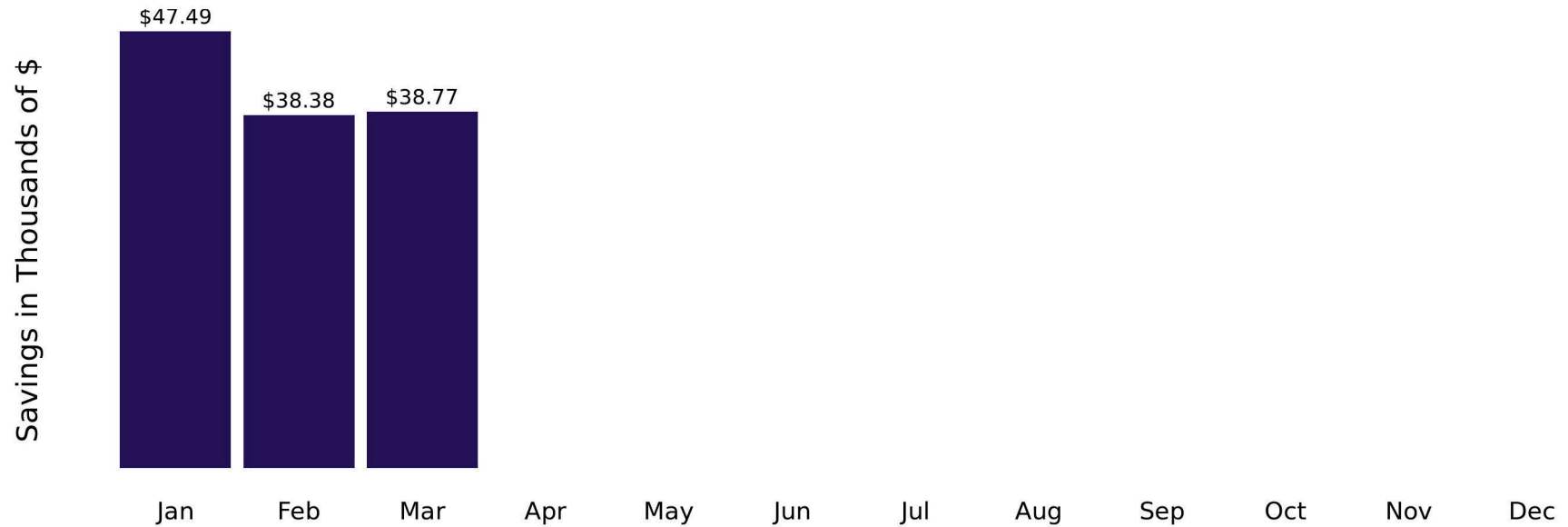
■ Dependent ■ Primary

■ Telehealth ■ Mental Health

Demographics for Telehealth products are among members who utilized care in the past month. For Mental Health, demographics are among registered members.

Overview: Net Savings

January to March 2026



Total Net Savings YTD
\$124,640

Telehealth

\$122,985

Savings per visit x number of visits YTD

Mental Health

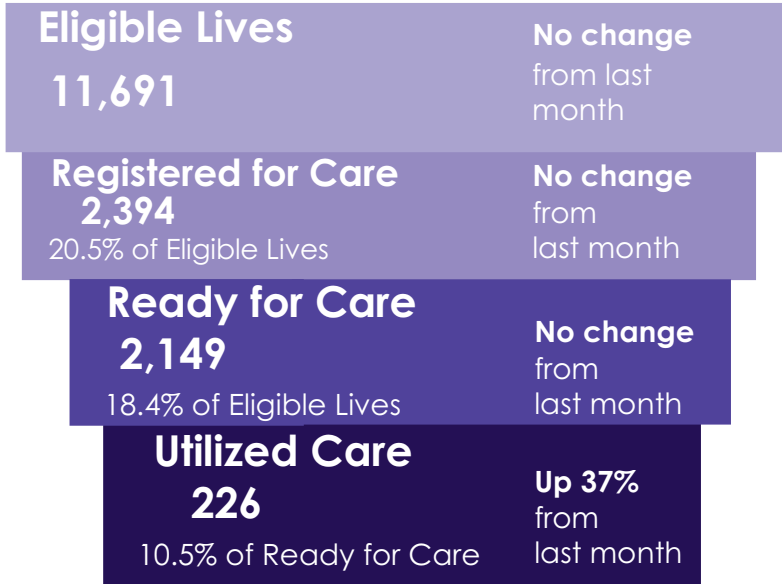
\$1,655

Savings per episode x Number of visits YTD

Telehealth

Value and Utilization

March 2026



Eligible Lives: Number of people who are eligible for 24/7 Care

Registered for Care: Number of currently eligible lives who completed registration (ITD)

Ready for Care: Number of currently eligible lives who have completed their online medical history (ITD)

Utilized Care: Number of participants who have completed a 24/7 Care visit (YTD)

+57.1

NPS score YTD*

5.2% response rate

84.6%

Satisfaction YTD

4.9% response rate

Total Net Savings YTD Calculated as number of visits YTD X savings per visit

\$122,985

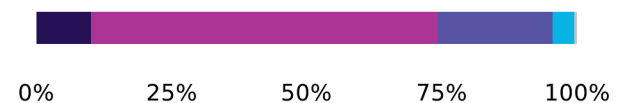
*Due to late-arriving responses, up to 2.5% of survey responses may arrive after report preparation, potentially shifting the NPS by an average of 0.6 points. These responses are incorporated into the following month's reporting. NPS metrics are not statistically meaningful with fewer than 50 responses.

Where eligible lives would have gone if Teladoc were not an option

10.1%

Would have forgone treatment

Based on responses in pre-visit intake survey (YTD)



- No Treatment 10.1%
- Urgent Care 64.1%
- PCP 21.2%
- Emergency Room 4.1%
- Specialist 0.5%

Value and Utilization

March 2026

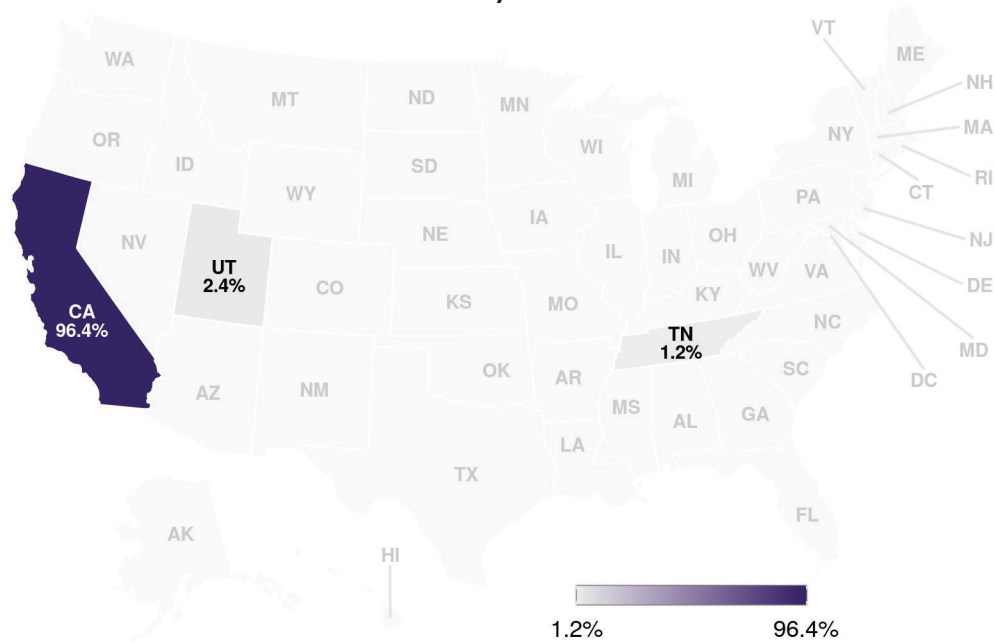


Metric	Period	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Visits	Current Year	102	83	83									
Visits	Prior Year	98	132	83	77	85	71	70	53	67	61	61	113
Participants with more than one visit	Current Year	9	19	36									
Eligible Lives	Current Year	11,790	11,724	11,691									
Eligible Lives	Prior Year	11,609	11,551	11,611	11,596	11,590	11,626	11,710	11,746	11,742	11,710	11,702	11,699
Annualized Utilization % *	Current Year	26.8	24.3	23.5									

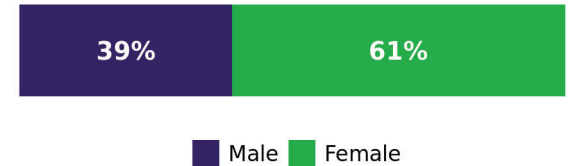
About your members

March 2026

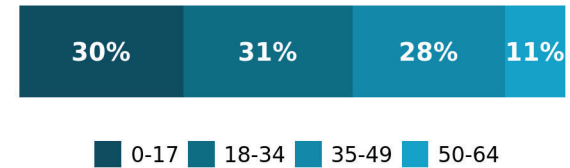
% Visits by State



% Completed Visits by Sex assigned at birth



% Completed Visits by Age



Visits by day of week & time of day YTD (member local time)



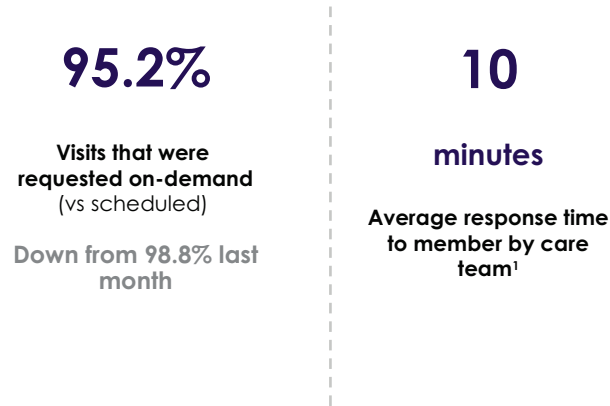
	12am -7am	7am -10am	10am -1pm	1pm -4pm	4pm -7pm	7pm -12am
Weekdays (Mon-Fri)	3.4%	20.5%	14.9%	13.4%	9.7%	9.7%
Weekends (Sat & Sun)	0.7%	6.3%	6.7%	6.0%	4.1%	4.5%

Clinical Details

March 2026

24/7 Care

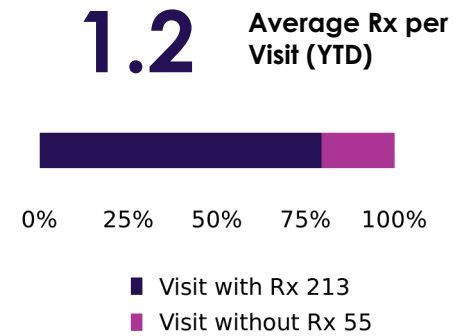
Members can receive on-demand care for a variety of conditions



Top prescriptions this month

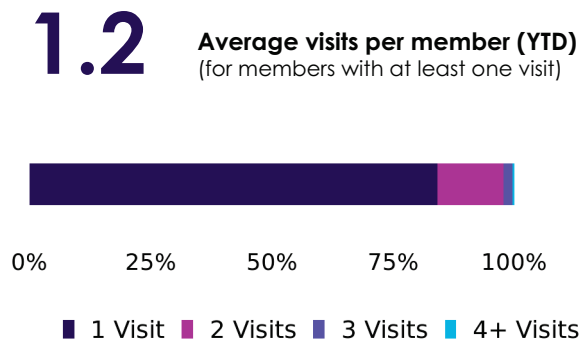
Prescription	Number (percent)
Antitussives	13 (13.8%)
Urinary Anti-Infectives	9 (9.6%)
Nasal Antihistamines And Decongestants	7 (7.4%)
Penicillins/Beta-Lactamase Inhibitors	7 (7.4%)
Adrenergic Bronchodilators	5 (5.3%)

Prescriptions by Visit (YTD)



94% Rx can be filled as generic
89.7% last month

Access to medical care, anytime, anywhere



Top diagnoses this month

Diagnosis	Number with diagnosis (percent)
Acute upper respiratory infection, unspecified	8 (9.6%)
Urinary tract infection, site not specified	6 (7.2%)
Acute candidiasis of vulva and vagina	3 (3.6%)
Acute cystitis without hematuria	3 (3.6%)
Acute maxillary sinusitis, unspecified	3 (3.6%)

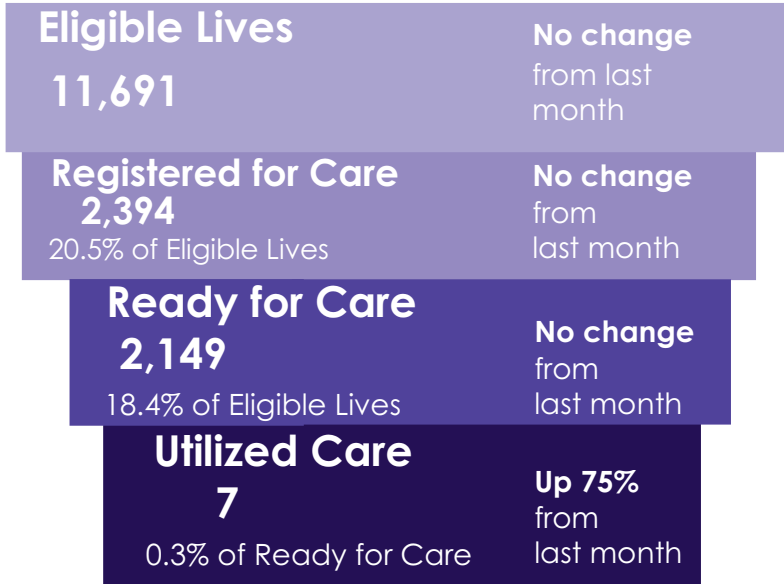
(1) The calculation methodology used here may differ from those specified in contractual performance guarantees or service level agreements.

Mental Health

Value and Utilization

March 2026

Mental Health Care



Eligible Lives: Number of people who are eligible for Mental Health Care

Registered for Care: Number of currently eligible lives who completed registration (ITD)

Ready for Care: Number of currently eligible lives who have completed their online medical history (ITD)

Utilized Care: Number of participants who have completed a Mental Health Care visit (YTD)

*** NPS score YTD***
0% response rate

***% Satisfaction YTD**
0% response rate

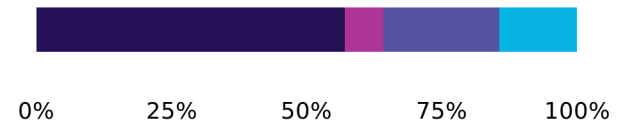
Total Net Savings YTD Calculated as number of visits YTD X savings per visit

\$1,655

*Satisfaction metrics are not displayed due to lack of minimal survey responses. *NPS metrics are not statistically meaningful with fewer than 50 responses, and are not displayed until at least 10 responses are received.

Where eligible lives would have gone if Teladoc were not an option

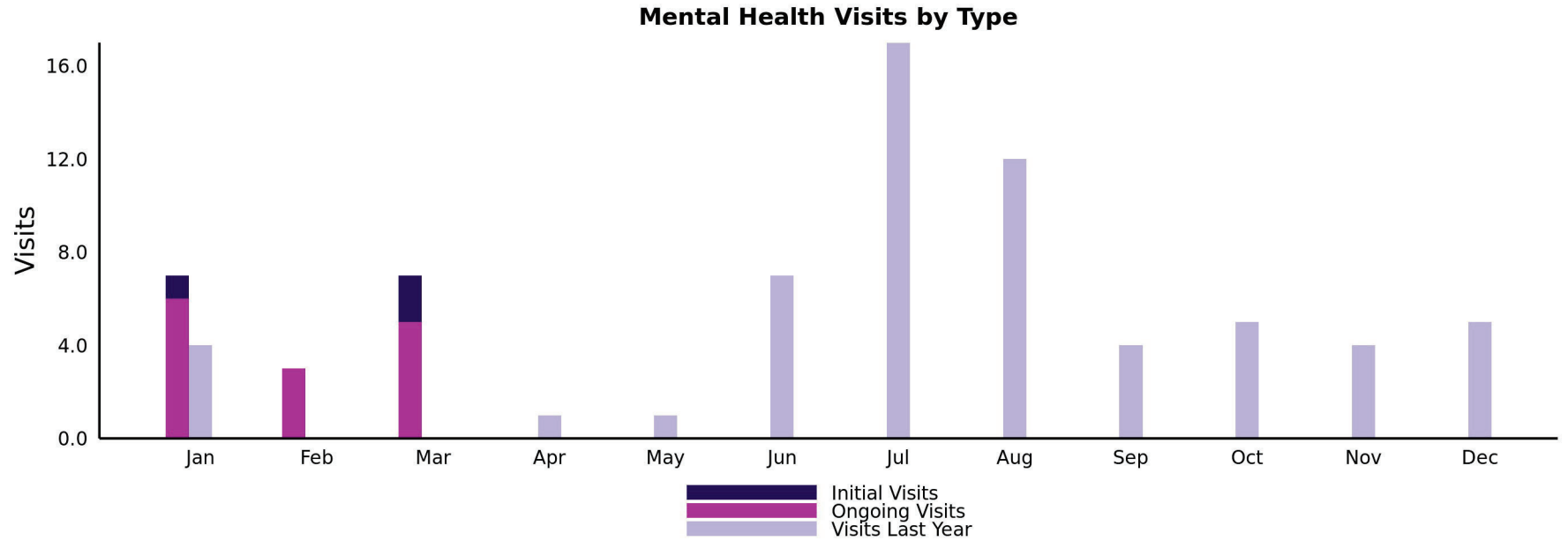
57.1% **Would have forgone treatment**
Based on responses in pre-visit intake survey (YTD)



■ No Treatment 57.1% ■ Therapist/Psychologist 7.1%
■ PCP 21.4% ■ EAP 14.3%

Value and Utilization

March 2026



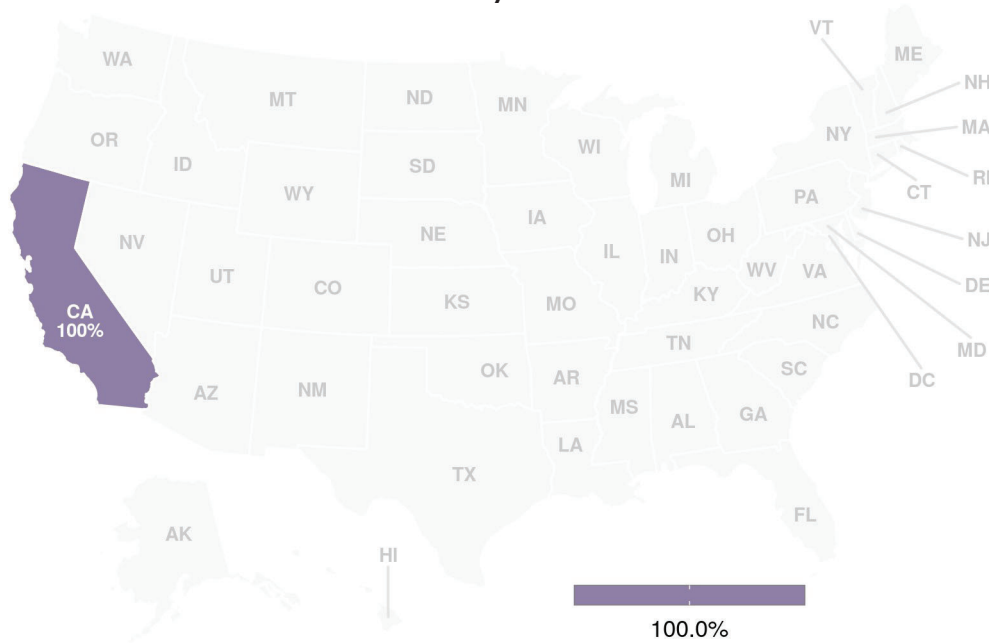
Metric	Period	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Visits	Current Year	7	3	7									
Visits	Prior Year	4	0	0	1	1	7	17	12	4	5	4	5
Participants with more than one visit	Current Year	2	3	5									
Eligible Lives	Current Year	11,790	11,724	11,691									
Eligible Lives	Prior Year	11,609	11,551	11,611	11,596	11,590	11,626	11,710	11,746	11,742	11,710	11,702	11,699
Annualized Utilization %*	Current Year	1.8	1.3	1.5									

About your members

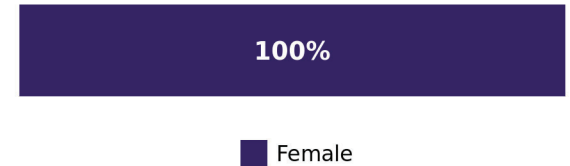
March 2026

Mental Health Care

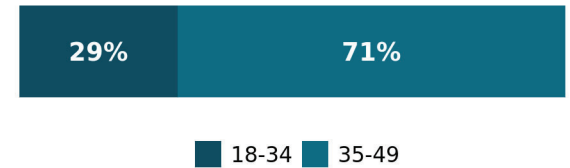
% Visits by State



% Completed Visits by Sex assigned at birth



% Completed Visits by Age



Visits by day of week & time of day YTD (member local time)

0% 35%

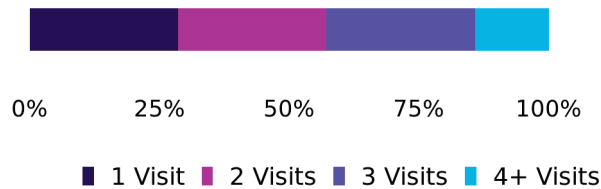
	12am -7am	7am -10am	10am -1pm	1pm -4pm	4pm -7pm	7pm -12am
Weekdays (Mon-Fri)	6.0%	17.7%	11.7%	11.8%	34.9%	5.7%
Weekends (Sat & Sun)	0.0%	0.0%	6.0%	6.0%	0.0%	0.0%

Clinical Details

March 2026

Mental Health provides the type of care members need when they need it

2.4 Average visits per member with a visit (YTD)

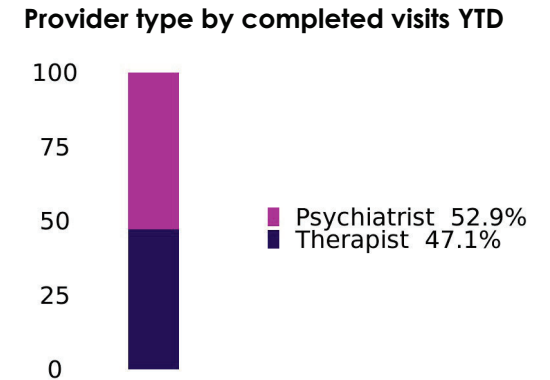


6

Total upcoming visits

Licensed psychiatrists and psychologists are available to reach members no matter where they live

<1
minute
Average response time to member by provider YTD



Top diagnoses this month

Diagnosis	Number with diagnosis (percent)
Anxiety disorder, unspecified	2 (28.6%)
Generalized anxiety disorder	2 (28.6%)
Major depressive disorder, recurrent, mild	1 (14.3%)
Depression, unspecified	1 (14.3%)
Adjustment disorder with mixed anxiety and depressed mood	1 (14.3%)

Top prescriptions this month

Prescription	Number (percent)
Miscellaneous Antidepressants; Smoking Cessation Agents	2 (33.3%)
Ssri Antidepressants	2 (33.3%)
Beta Blockers, Non-Cardioselective; Group II Antiarrhythmics	1 (16.7%)
Miscellaneous Anxiolytics, Sedatives And Hypnotics	1 (16.7%)



100%

Rx can be filled as generic
100% last month **112**

Clinical Details

Last 90 Days

Depression (PHQ-9)

75%

Book of Business
Clinical members experience any score reduction

60%

Book of Business
Clinical members experience a clinically meaningful treatment response (5-point score reduction) or achieve subclinical acuity (0-9)

90%

Book of Business
Subclinical members remain subclinical (0-9)

To be included in clinical outcomes reporting, there must be 10+ members who completed 2+ assessments in the last 90 days. This time period aligns with the industry standard of 12 weeks of care. Right now there are fewer than 10 reportable members in your population, so their outcomes are not reported to ensure member privacy. Instead, Book of Business outcomes are shown, as they represent performance members are expected to achieve.

SYMPTOM REDUCTION

RELIABLE IMPROVEMENT AND REMISSION

SYMPTOM PREVENTION

Anxiety (GAD-7)

75%

Book of Business
Clinical members experience any score reduction

60%

Book of Business
Clinical members experience a clinically meaningful treatment response (4-point score reduction) or achieve subclinical acuity (0-9)

90%

Book of Business
Subclinical members remain subclinical (0-9)

Utilization Report - 04/25 to 03/26

Fresno City Employees Health and Welfare Trust

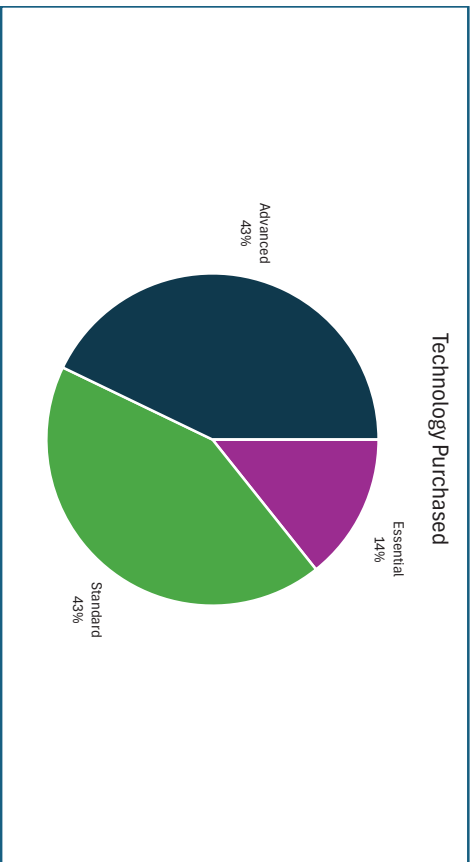
12 Months
Activations
15

Members Purchased
7

Devices Purchased
14

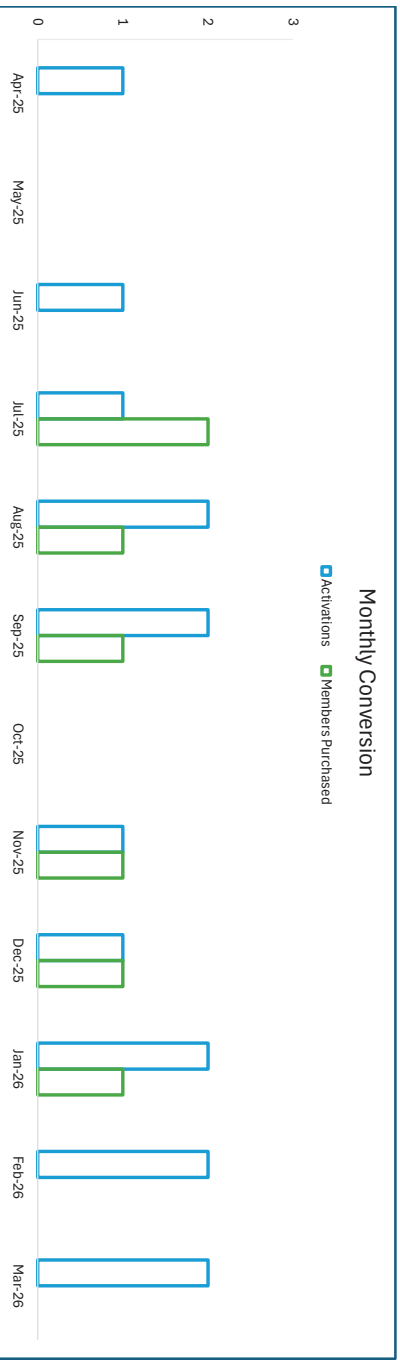
Conversion
47%

Average Purchase Price
\$1,542



Technology Purchased

OTC	0
Silver	0
Gold	0
Platinum	0
Essential	2
Standard	6
Advanced	6
Premium	0
Total	14



Month

Apr-25	1
May-25	0
Jun-25	1
Jul-25	1
AUG-25	2
Sep-25	2
Oct-25	0
Nov-25	1
Dec-25	1
Jan-26	2
Feb-26	2
Mar-26	2
Total	15

Activations

Apr-25	1
May-25	0
Jun-25	1
Jul-25	1
AUG-25	2
Sep-25	2
Oct-25	0
Nov-25	1
Dec-25	1
Jan-26	2
Feb-26	2
Mar-26	2
Total	15

Members Purchased

Apr-25	0
May-25	0
Jun-25	0
Jul-25	2
AUG-25	1
Sep-25	1
Oct-25	0
Nov-25	1
Dec-25	1
Jan-26	1
Feb-26	0
Mar-26	0
Total	7

Devices Purchased

Apr-25	0
May-25	0
Jun-25	0
Jul-25	4
AUG-25	2
Sep-25	2
Oct-25	0
Nov-25	2
Dec-25	2
Jan-26	1
Feb-26	1
Mar-26	1
Total	14

Average Sales Price

Apr-25	\$0
May-25	\$0
Jun-25	\$0
Jul-25	\$1,649
AUG-25	\$1,799
Sep-25	\$1,799
Oct-25	\$0
Nov-25	\$1,399
Dec-25	\$1,099
Jan-26	\$1,399
Feb-26	\$0
Mar-26	\$1,399
Total	\$1,542



Insurance Plan Name	Activations	Purchases	Devices Sold	Sales (\$)
Contributory Plan	10	5	10	\$ 15,790
Non-Contributory Plan	5	2	4	\$ 5,796
Grand Total	15	7	14	\$ 21,586

GLOSSARY

Program Activations	Number of members that contacted EPIC to start their journey with an EPIC provider
Members Purchased	Number of members that purchased one or more hearing aids or accessories
Devices Purchased	Number of total hearing aids purchased after exchanges and returns
Conversion	Ratio of program activations that purchased hearing aids or accessories
Average Purchase Price	The average price of a single device purchased

Technology Levels

Premium	The most innovative hearing aid technology, delivering exceptional sound quality and intelligent automation with highly customizable, sophisticated features that provide outstanding background noise reduction and optimal listening across all environments—from noisy restaurants and sporting events to places of worship and quiet conversations.
Advanced	A superior hearing aid technology that balances price and advanced functionality, delivering strong noise reduction, clear sound quality in most listening environments, and automatic adjustments—ideal for active individuals with varied lifestyles, including office environments, small gatherings, and moderate background noise.
Standard	A practical, great-value hearing aid option that balances price and modern technology, delivering dependable sound, helpful noise reduction, and automatic adjustments for everyday use—from small meetings and casual social settings to active daily routines with moderate background noise.
Essential	An entry-level hearing aid designed for quieter situations like conversations and watching TV, featuring a simple design with good sound quality, basic noise reduction, and easy, essential adjustments.
Platinum	A premium technology level solution ideal for active lifestyles, delivering exceptional sound quality, advanced automation, and smart self-adjusting features that seamlessly adapt from quiet conversations to the most challenging, noisy environments.
Gold	An advanced technology level option ideal for those navigating both noisy and quiet environments, offering excellent sound quality, specialized listening modes, and smart self-adjusting features that automatically adapt from quiet conversations to complex, noisy situations.
Silver	An entry-level technology option ideal for quieter environments like conversations or watching TV, offering a simplified design with good sound quality, entry-level noise suppression, and programming flexibility.
OTC (Over-the-counter)	OTC hearing aids are designed for adults with perceived mild to moderate hearing loss, offering a self-guided solution without the need for a prescription or appointment. Built for everyday life, they help you stay connected in conversations, social settings, and daily activities—designed for easy setup and controls. Some devices also include access to hearing experts for additional support with setup and fine-tuning.

From: [FCEA Office](#)
[Georgianne White](#); [Diana Cavazos](#)
To: [Toni Machado](#); [Nikki Vang](#); [David Broome](#); [Tom Georgouses](#); [Michael Moss](#)
Cc: [Toni Machado](#); [Nikki Vang](#); [David Broome](#); [Tom Georgouses](#); [Michael Moss](#)
Subject: RE: FCEHWT -BSI Spring Announcement 2026-ACTION REQUIRED
Date: Friday, April 3, 2026 10:24:47 AM
Attachments: [image001.png](#)

External Email: This message originated from outside Personify Health.

Me too.

From: Georgianne White <Georgianne.White@fresno.gov>
Sent: Friday, April 3, 2026 10:23 AM
To: Diana Cavazos <Diana.Cavazos@PersonifyHealth.com>; FCEA Office <Office@fceamail.com>
Cc: Toni Machado <Toni.Machado@fresno.gov>; Nikki Vang <Nikki.Vang@PersonifyHealth.com>; David Broome <davidb@rael-letson.com>; Tom Georgouses <Thomas.Georgouses@PersonifyHealth.com>; Michael Moss <mossfirm.org>
Subject: RE: FCEHWT -BSI Spring Announcement 2026-ACTION REQUIRED

Looks fine to me

From: Diana Cavazos <Diana.Cavazos@PersonifyHealth.com>
Sent: Friday, April 3, 2026 10:06 AM
To: Georgianne White <Georgianne.White@fresno.gov>; office@fceamail.com
Cc: Toni Machado <Toni.Machado@fresno.gov>; Nikki Vang <Nikki.Vang@PersonifyHealth.com>; David Broome <davidb@rael-letson.com>; Tom Georgouses <Thomas.Georgouses@PersonifyHealth.com>; Michael Moss <mossfirm.org>
Subject: [WARNING: UNSCANNABLE EXTRACTION FAILED]FCEHWT -BSI Spring Announcement 2026-ACTION REQUIRED

External Email: Use caution with links and attachments

Hello Georgianne and Sam,

Attached are the proposed letter and email blast for the upcoming BSI visit.

Please provide both of your approvals. Personify Health will send out the letter and Phillip will coordinate with the city to send out the email blast.

Let me know if you have any questions,

Diana Cavazos

Client Success Manager

Diana.Cavazos@PersonifyHealth.com

M 1.559.312.2295

F (559) 499-2464

personifyhealth.com



Confidentiality Notice: This email was securely sent using TLS Encryption. The contents, including attachments, are intended solely for the designated recipient(s) and may be confidential or privileged. Unauthorized use or distribution is prohibited and may be unlawful. Views expressed are solely those of the author and not necessarily of Personify Health, Inc. If you received this in error, please notify the sender and delete the email.

V4.09

Fresno City Employees Health and Welfare Trust

P.O. BOX 45018
FRESNO, CA 93718-5018



(559) 499-2450
(800) 442-7247
FAX (559) 499-2464

Date, XX, 2026

«First_Name» «Last_Name»
«ADDR1» «ADDR2»
«City», «ST» «Zip»

Dear Trust Participant:

As previously announced, the Trust has contracted with Body Scan International (BSI) to provide Preventive Medicine Body Scans to active employees. BSI's mobile unit will visit Fresno periodically so that eligible members can participate in BSI's Body Scan Program at a convenient location. **The Trust has scheduled for BSI to visit Fresno from May 4, 2026 through May 8, 2026.**

To learn more about the Body Scan Program or to make an appointment, please call the BSI center at (877) 274-5577 or go to <http://bodyscanintl.com/fcehwf> (provide your contact information, and a BSI representative will reach out to you for more information). **Walk-in appointments are not available.** A priority waitlist is maintained for those who are unable to secure an appointment. You must provide your contact information to BSI to be added to the waitlist. BSI will prioritize the waitlist for subsequent Fresno visits in chronological order according to when they receive a participant's contact information. It is anticipated, but not assured, that BSI's next visit will occur in Autumn, 2026

Place	Date	Scan Hours
Police & Fire Wellness Center 1617 S. Cedar Avenue Fresno, CA 93702	May 4, 2026 – May 8, 2026	06:30 – 13:30 (M – F)

WHAT TO EXPECT

The Body Scan Program consists of two main components: the detailed scan and the comprehensive physician (radiologist) consultation/scan review. Participants are required to fast (solids for eight hours and liquids for six hours) prior to their scan. The scan will take place in the BSI Mobile Telemedicine Van. The onsite time will be approximately 30 minutes. The physician consultation will take place virtually through video conferencing at your chosen location and typically lasts 45-60 minutes. The virtual consultation is scheduled based on mutual availability and is often scheduled for the same day.

There is a \$335 copay for the Body Scan Program. This copay must be made at the time of service. Please note that this copay does not apply to your Plan deductible or out-of-pocket maximum.

WHAT YOU WILL NEED TO BRING WITH YOU

You will each need to bring **TWO** forms of identification with you so that your eligibility for health benefits can be verified: a **Personify Health Identification Card AND** either a **Driver's License** or a **CA Identification Card**. If you have lost or misplaced your ID card, contact **Personify Health** at **(559) 499-2450** to obtain a replacement. You **will not be allowed** to participate in the Body Scan Program without the above forms of identification.

WHO IS ELIGIBLE FOR THE BODY SCAN PROGRAM

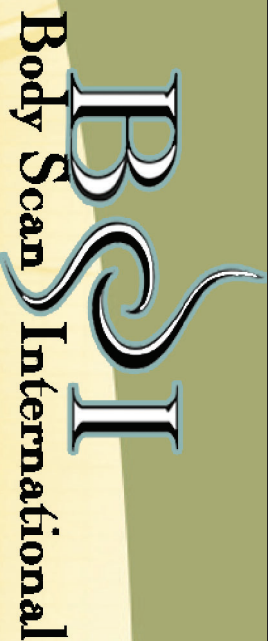
Only active employees enrolled in the Plan's medical benefit on the date of service are eligible. Spouses and dependents are not eligible for this benefit. **There is a frequency limit of one scan every three Plan Years.** The Plan Year is July 1st through June 30th.

IN RESPONSE TO COVID-19

If you or anyone in your family is feeling ill, please do not participate in this event. All participants will be required to fill out a COVID screening survey. If the patient does not pass the screening, they will not be permitted to participate. Participants will be provided with masks upon request. Our healthcare staff follows the CDC guidelines for a risk-based assessment. Social distancing protocols are in effect. Hand sanitizer will be available, and stations will be sanitized after each participant.

Sincerely,
Board of Trustees.

Fresno Public Safety
Wellness Center
1617 S. Cedar Avenue
Fresno, CA 93702



BSI MEDICAL BODY SCAN PROGRAM UPCOMING CITY OF FRESNO DATES: MAY 4 - 8, 2026

Body Scan International is looking forward to a return visit to the City of Fresno to provide the BSI Body Scan Program onsite.

BSI provides you with a preventive medicine screening program designed to confidentially look for early signs of heart/cardiovascular diseases, lower back and neck pathologies, over 20 different types of cancer, chronic lung disease, and many other health issues.

Have your scan onsite in Fresno, followed by a BSI physician scan review/consultation conducted securely into a location of your choosing via the BSI HIPAA-compliant WebEx portal.

Coverage for this examination is available once every three plan years to qualified active employees enrolled in the Fresno City Employees Health and Welfare Trust Medical Plan. The 2025 / 26 plan year Body Scan copayment is \$335.

Examinations are by appointment only (06:30 - 13:30 M-F)
To schedule (or for more information) contact BSI directly

Tel: 877-274-5577, or click/scan the QR code

You may also go to www.bodyscaninternational.com/fcehwt



BODY SCAN INTERNATIONAL 877-BSI-5577 www.bodyscaninternational.com

Diana Cavazos

From: Diana Cavazos
Sent: Tuesday, April 28, 2026 4:02 PM
To: Georgetanne White (Georgetanne.White@fresno.gov); office@freamail.com; Phillip Carbajal
Cc: Tom Georgouses; Michael Moss; David Broome
Subject: RE: ACTION REQUIRED -Fresno City HW Trust-Open Enrollment Letters
Attachments: Retirees 26-27 (Manual Enrollment).pdf; Retirees 26-27 (HCONline).pdf; Actives 26-27 (80%-20%).pdf; Actives 26-27 (70%-30%).pdf

Thank you both Sam and Georgetanne for the approvals of the OE letters. Our team will get started on preparing the OE packets for mailing.

I have attached the final copies for your records.

From: Diana Cavazos
Sent: Wednesday, April 22, 2026 3:41 PM
To: Georgetanne White (Georgetanne.White@fresno.gov) <Georgetanne.White@fresno.gov>; office@freamail.com
Cc: Tom Georgouses <Thomas.Georgouses@PersonifyHealth.com>; Michael Moss <mrmoss@mossfirm.org>; David Broome <davidb@rael-letson.com>
Subject: ACTION REQUIRED -Fresno City HW Trust-Open Enrollment Letters

Hello Georgetanne and Sam

Attached, you will find the open enrollment letters that are set to be included in this year's enrollment packets. Additionally, I have included the redline documents that highlight the changes made to the letters in alignment with the updated contribution rates. These letters have been reviewed by all plan professionals to ensure accuracy and compliance.

Please review the materials at your earliest convenience and provide your approval so we can proceed with the distribution.

Thank you for your attention to this matter. If you have any questions or need further clarification, feel free to reach out.

Fresno City Employees Health and Welfare Trust

Fiscal Year July `26 – June `27



P.O. BOX 45018
FRESNO, CA 93718-5018

IMPORTANT ANNOUNCEMENT

May 1, 2026

TO: FRESNO CITY EMPLOYEES HEALTH & WELFARE TRUST ACTIVE PARTICIPANTS
RE: OPEN ENROLLMENT MAY 1 – MAY 31

The annual open enrollment period will be from May 1 to May 31, 2026. During open enrollment you have the opportunity to change your dental/vision plan selection, your contribution election and verify or update any information we have about you or your dependents.

EVEN IF YOU ARE NOT MAKING ANY CHANGES, YOU MUST COMPLETE THE ONLINE OPEN ENROLLMENT BY MAY 31, 2026. ANY CHANGES YOU MAKE WILL BE EFFECTIVE JULY 1, 2026.

PLEASE NOTE: The Affordable Care Act requires Social Security numbers be provided for all plan participants. To comply with this requirement, you must provide Social Security numbers for all plan participants.

The contribution election you made on your most recent Premium Conversion Plan/Payroll Deduction Authorization will carry over into the 2026-2027 plan year. If you previously chose the non-contributory plan, it will automatically transition to the LOW Plan at a \$49.00 contribution rate. You will be defaulted into this LOW Plan unless you opt for a different election. Please note that while your election will carry over, your coverage will remain on hold until you complete the 2026-2027 Premium Conversion Plan/Payroll Deduction Authorization. Please be aware that vendors may not conduct a retroactive adjustment to coverage elections, thus it is essential that open enrollment elections are made in a timely manner.

The rate for medical, pharmacy, dental and vision benefits will increase for the new plan year beginning July 1, 2026. A contribution equal to 70% of the Trust rate of \$1,664.00 in the amount of \$1,165.00 will be made by the City on behalf of eligible employees defined under the MOU. The contribution from the City of Fresno into the Trust Fund is not enough to cover the full rate. In order to receive full benefits, active employees will be required to contribute by payroll deduction, the difference between the \$1,664.00 Trust Fund rate and the City contribution. In order to receive full benefits, the employee's 30% contribution will be \$499.00 per month.

IF YOU MAKE THE FULL CONTRIBUTION OF \$499.00, FOR MEDICAL, PHARMACY, DENTAL AND VISION SERVICES, A DEDUCTIBLE OF \$200 PER INDIVIDUAL AND \$600 PER FAMILY WILL APPLY; AND AFTER MEETING THE DEDUCTIBLE, A MEMBER CO-INSURANCE RESPONSIBILITY OF 20% FOR IN-NETWORK SERVICES WILL APPLY UNTIL THE OUT-OF-POCKET IN-NETWORK LIMIT OF \$3,200 PER INDIVIDUAL AND \$6,400 PER FAMILY IS REACHED. (A SEPARATE OUT-OF-POCKET LIMIT OF \$3,400 PER INDIVIDUAL AND \$6,800 PER FAMILY WILL APPLY FOR PRESCRIPTION DRUG EXPENSES.)

IF YOU MAKE THE LOW PLAN CONTRIBUTION OF \$49.00 AND THE TRUST FUND RECEIVES A \$1,165.00 CONTRIBUTION FROM THE CITY, FOR MEDICAL, PHARMACY, DENTAL AND VISION SERVICES, A DEDUCTIBLE OF \$2,000 PER INDIVIDUAL AND \$4,000 PER FAMILY WILL APPLY; AND AFTER MEETING THE DEDUCTIBLE, A MEMBER CO-INSURANCE RESPONSIBILITY OF 48% FOR IN-NETWORK SERVICES WILL APPLY UNTIL THE OUT-OF-POCKET IN-NETWORK LIMIT OF \$6,000 PER INDIVIDUAL AND \$12,000 PER FAMILY IS REACHED. (SIMILAR REDUCTIONS WILL APPLY FOR PRESCRIPTION DRUG EXPENSES INCLUDING A SEPARATE OUT-OF-POCKET LIMIT OF \$3,400 PER INDIVIDUAL AND \$6,800 PER FAMILY.)

If you elect the LOW Plan Monthly Employee contribution, this may result in a substantial patient liability for medical and walk-in prescription drug services. In the following example, Employee A is paying his/her full monthly employee contribution. Employee B elected to pay the LOW Plan payroll deduction. The following chart shows how their benefits would be calculated for a \$5,000 in-network charge, assuming the respective deductibles have not previously been satisfied.

	Employee A* High Plan	Employee B** Low Plan
City Contribution	\$ 1,165.00	\$ 1,165.00
Employee Contribution	\$ 499.00	\$ 49.00
Total Monthly Contribution	\$ 1,664.00	\$ 1,214.00
In-Network Medical Charge	\$ 5,000	\$ 5,000
Employee Deductible	\$ 200	\$ 2,000
Employee Co-Insurance	\$ 960	\$ 1,440
Employee Pays	\$ 1,160	\$ 3,440
Plan Pays	\$ 3,840	\$ 1,560

* After the first \$200 was applied to the deductible, Employee A pays 20% of the next \$4,800 in charges or \$960 for a total employee payment of \$1,160.

**After the first \$2,000 was applied to the deductible, Employee B pays 48% of the next \$3,000 in charges or \$1,440 for a total employee payment of \$3,440.

A full description of your benefits may be found in the July 1, 2026 Fresno City Employees Health and Welfare Trust Plan Booklet, which will be posted on the Fresno City website when finalized. Up-to-date links to provider directories from Blue Shield, EyeMed, United HealthCare Dental, and Delta Dental will also be posted on the Fresno City website when made available: <https://www.fresno.gov/personnel/human-resources-support/#benefits>

Checklist for Open Enrollment Completion

- Verify/Change Personal and Dependent Information**
- Add Dependent Social Security Numbers**
- Verify/Change Medical Plan Election**
- Verify/Change Dental Plan Election**
- Verify/Change Vision Plan Election**
- Verify/Change Other Insurance Questionnaire Form (REQUIRED)**
- Verify All Information and Submit**

If you have any questions regarding your open enrollment selection or would like to receive a printed version of the July 1, 2026 Plan Booklet, please contact Personify Health at (833) 319-5697

The Board of Trustees

Fresno City Employees Health and Welfare Trust

Fiscal Year July '26 – June '27



P.O. BOX 45018
FRESNO, CA 93718-5018

IMPORTANT ANNOUNCEMENT

May 1, 2026

TO: FRESNO CITY EMPLOYEES HEALTH & WELFARE TRUST ACTIVE PARTICIPANTS
RE: OPEN ENROLLMENT MAY 1 – MAY 31

The annual open enrollment period will be from May 1 to May 31, 2026. During open enrollment you have the opportunity to change your dental/vision plan selection, your contribution election and verify or update any information we have about you or your dependents.

EVEN IF YOU ARE NOT MAKING ANY CHANGES, YOU MUST COMPLETE THE ONLINE OPEN ENROLLMENT BY MAY 31, 2026. ANY CHANGES YOU MAKE WILL BE EFFECTIVE JULY 1, 2026.

PLEASE NOTE: The Affordable Care Act requires Social Security numbers be provided for all plan participants. To comply with this requirement, you must provide Social Security numbers for all plan participants.

The contribution election you made on your most recent Premium Conversion Plan/Payroll Deduction Authorization will carry over into the 2026-2027 plan year. If you previously chose the non-contributory plan, it will automatically transition to the LOW Plan at a \$49.00 contribution rate. You will be defaulted into this LOW Plan unless you opt for a different election. Please note that while your election will carry over, your coverage will remain on hold until you complete the 2026-2027 Premium Conversion Plan/Payroll Deduction Authorization. Please be aware that vendors may not conduct a retroactive adjustment to coverage elections, it is essential that open enrollment elections are made in a timely manner.

The rate for medical, pharmacy, dental and vision benefits will increase for the new plan year beginning July 1, 2026. A contribution equal to 80% of the Trust rate of \$1,664.00 in the amount of \$1,331.00 will be made by the City on behalf of eligible employees defined under the MOU. The contribution from the City of Fresno into the Trust Fund is not enough to cover the full rate. In order to receive full benefits, active employees will be required to contribute by payroll deduction, the difference between the \$1,664.00 Trust Fund rate and the City contribution. In order to receive full benefits, the employee's 20% contribution will be \$333.00 per month.

IF YOU MAKE THE FULL CONTRIBUTION OF \$333.00, FOR MEDICAL, PHARMACY, DENTAL AND VISION SERVICES, A DEDUCTIBLE OF \$200 PER INDIVIDUAL AND \$600 PER FAMILY WILL APPLY; AND AFTER MEETING THE DEDUCTIBLE, A MEMBER CO-INSURANCE RESPONSIBILITY OF 20% FOR IN-NETWORK SERVICES WILL APPLY UNTIL THE OUT-OF-POCKET IN-NETWORK LIMIT OF \$3,200 PER INDIVIDUAL AND \$6,400 PER FAMILY IS REACHED. (A SEPARATE OUT-OF-POCKET LIMIT OF \$3,400 PER INDIVIDUAL AND \$6,800 PER FAMILY WILL APPLY FOR PRESCRIPTION DRUG EXPENSES.)

IF YOU MAKE THE LOW PLAN CONTRIBUTION OF \$49.00 AND THE TRUST FUND RECEIVES A \$1,331.00 CONTRIBUTION FROM THE CITY, FOR MEDICAL, PHARMACY, DENTAL AND VISION CARE SERVICES, A DEDUCTIBLE OF \$2,000 PER INDIVIDUAL AND \$4,000 PER FAMILY WILL APPLY; AND AFTER MEETING THE DEDUCTIBLE, A MEMBER CO-INSURANCE RESPONSIBILITY OF 40% FOR IN-NETWORK SERVICES WILL APPLY UNTIL THE OUT-OF-POCKET IN-NETWORK LIMIT OF \$6,000 PER INDIVIDUAL AND \$12,000 PER FAMILY IS REACHED. (SIMILAR REDUCTIONS WILL APPLY FOR PRESCRIPTION DRUG EXPENSES INCLUDING A SEPARATE OUT-OF-POCKET LIMIT OF \$3,400 PER INDIVIDUAL AND \$6,800 PER FAMILY.)

If you elect the LOW Plan Monthly Employee contribution, this may result in a substantial patient liability for medical and walk-in prescription drug services. In the following example, Employee A is paying his/her full monthly employee contribution. Employee B elected to pay the LOW Plan payroll deduction. The following chart shows how their benefits would be calculated for a \$5,000 in-network charge, assuming the respective deductibles have not previously been satisfied.

	Employee A* High Plan	Employee B** Low Plan
City Contribution	\$1,331.00	\$1,331.00
Employee Contribution	\$ 333.00	\$ 49.00
Total Monthly Contribution	\$1,664.00	\$1,380.00
In-Network Medical Charge	\$ 5,000	\$ 5,000
Employee Deductible	\$ 200	\$ 2,000
Employee Co-Insurance	\$ 960	\$ 1,200
Employee Pays	\$ 1,160	\$ 3,200
Plan Pays	\$ 3,840	\$ 1,800

* After the first \$200 was applied to the deductible, Employee A pays 20% of the next \$4,800 in charges or \$960 for a total employee payment of \$1,160.

** After the first \$2,000 was applied to the deductible, Employee B pays 40% of the next \$3,000 in charges or \$1,200 for a total employee payment of \$3,200.

A full description of your benefits may be found in the July 1, 2026 Fresno City Employees Health and Welfare Trust Plan Booklet, which will be posted on the Fresno City website when finalized. Up-to-date links to provider directories from Blue Shield, EyeMed, United HealthCare Dental, and Delta Dental will also be posted on the Fresno City website when made available: <https://www.fresno.gov/personnel/human-resources-support/#benefits>

Checklist for Open Enrollment Completion

- Verify/Change Personal and Dependent Information**
- Add Dependent Social Security Numbers**
- Verify/Change Medical Plan Election**
- Verify/Change Dental Plan Election**
- Verify/Change Vision Plan Election**
- Verify/Change Other Insurance Questionnaire Form (REQUIRED)**
- Verify All Information and Submit**

If you have any questions regarding your open enrollment selection or would like to receive a printed version of the July 1, 2026 Plan Booklet, please contact Personify Health at (833) 319-5697.

The Board of Trustees

Fresno City Employees Health and Welfare Trust

Fiscal Year July '26 – June '27



P.O. BOX 45018
FRESNO, CA 93718-5018

IMPORTANT ANNOUNCEMENT

May 1, 2026

TO: RETIRED FRESNO CITY EMPLOYEES HEALTH & WELFARE TRUST PARTICIPANTS

RE: OPEN ENROLLMENT MAY 1 – MAY 31

The annual open enrollment period will be from May 1 to May 31, 2026. During open enrollment you have the opportunity to change your dental plan selection and/or verify or update any information we have about you or your dependents.

EVEN IF YOU ARE NOT MAKING ANY CHANGES, YOU MUST COMPLETE THE ONLINE OPEN ENROLLMENT BY MAY 31, 2026. ANY CHANGES YOU MAKE WILL BE EFFECTIVE JULY 1, 2026.

PLEASE NOTE: The Affordable Care Act requires Social Security numbers be provided for all plan participants. To comply with this requirement, you must provide Social Security numbers for all plan participants

The monthly rates for Medical and Dental benefits will increase for the new plan year beginning July 1, 2026:

	<u>Rate</u>
<u>Retirees under 65:</u>	
Health only	\$1,540.00
Dental only	\$124.00
Health and Dental	\$1,664.00
<u>Over 65 (with Medicare):</u>	
Health only (per individual)	\$837.00
Dental only (per family)	\$124.00
Health and Dental:	
One Person	\$961.00
Two Person	\$1,798.00
<u>Over 65 (without Medicare):</u>	
Health only	\$1,858.00
Dental only	\$124.00
Health and Dental	\$1,982.00

When you enroll in the Optum Rx Medicare Prescription Drug Plan your monthly premium for your health benefits will be reduced by \$50. You will receive a \$50 reduction in your health premium beginning the first of the month following your approval from Medicare.

A full description of your benefits may be found in the July 1, 2026 Fresno City Employees Health and Welfare Trust Plan Booklet, which will be posted on the Fresno City website when finalized. Up-to-date links to provider directories from Blue Shield, EyeMed, United HealthCare Dental, and Delta Dental will also be posted on the Fresno City website when made available: <https://www.fresno.gov/personnel/human-resources-support/#benefits>

Checklist for Open Enrollment Completion

- Verify/Change Personal and Dependent Information**
- Add Dependent Social Security Number**
- Verify/Change Medical Plan Election**
- Verify/Change Dental Plan Election**
- Verify/Change Other Insurance Information**
- Verify All Information and Submit**

If you have any questions regarding your open enrollment selection or would like to receive a printed version of the July 1, 2026 Plan Booklet, please contact Personify Health at (833) 319-5697.

The Board of Trustees

Fresno City Employees Health and Welfare Trust

Fiscal Year July '26 – June '27



P.O. BOX 45018
FRESNO, CA 93718-5018

IMPORTANT ANNOUNCEMENT

May 1, 2026

TO: RETIRED FRESNO CITY EMPLOYEES HEALTH & WELFARE TRUST PARTICIPANTS

RE: OPEN ENROLLMENT MAY 1 – MAY 31

The annual open enrollment period will be from May 1 to May 31, 2026. During open enrollment you have the opportunity to change your dental plan selection and/or verify or update any information we have about you or your dependents.

EVEN IF YOU ARE NOT MAKING ANY CHANGES, YOU MUST COMPLETE AND RETURN THE ENCLOSED FORMS TO PERSONIFY HEALTH BY MAY 31, 2026. ANY CHANGES YOU MAKE WILL BE EFFECTIVE JULY 1, 2026.

PLEASE NOTE: The Affordable Care Act requires Social Security numbers be provided for all plan participants. To comply with this requirement, you must provide Social Security numbers for all plan participants on the Open Enrollment Verification/Change Form.

The monthly rates for Medical and Dental benefits will increase for the new plan year beginning July 1, 2026:

	<u>Rate</u>
<u>Retirees under 65:</u>	
Health only	\$1,540.00
Dental only	\$124.00
Health and Dental	\$1,664.00
<u>Over 65 (with Medicare):</u>	
Health only (per individual)	\$837.00
Dental only (per family)	\$124.00
Health and Dental:	
One Person	\$961.00
Two Person	\$1,798.00
<u>Over 65 (without Medicare):</u>	
Health only	\$1,858.00
Dental only	\$124.00
Health and Dental	\$1,982.00

When you enroll in the Optum Rx Medicare Prescription Drug Plan your monthly premium for your health benefits will be reduced by \$50. You will receive a \$50 reduction in your health premium beginning the first of the month following your approval from Medicare.

A full description of your benefits may be found in the July 1, 2026 Fresno City Employees Health and Welfare Trust Plan Booklet, which will be posted on the Fresno City website when finalized. Up-to-date links to provider directories from Blue Shield, EyeMed, United HealthCare Dental, and Delta Dental will also be posted on the Fresno City website when made available: <https://www.fresno.gov/personnel/human-resources-support/#benefits>

Checklist for Open Enrollment Completion

- Complete Open Enrollment Verification/Change Form (REQUIRED)**
 - Verify/Change Personal and Dependent Information
 - Add Dependent Social Security Number
 - Verify/Change Medical Plan Election
 - Verify/Change Dental Plan Election
 - Sign and Date
- Complete Other Insurance Information Questionnaire Form (REQUIRED)**
- A stamped self-addressed envelope has been enclosed for your convenience.**

If you have any questions regarding your open enrollment selection or would like to receive a printed version of the July 1, 2026 Plan Booklet, please contact Personify Health at (833) 319-5697.

The Board of Trustees

Diana Cavazos

From: Georganne White <Georganne.White@fresno.gov>
Sent: Monday, April 27, 2026 7:54 PM
To: 'FCEA Office'; Diana Cavazos
Cc: David Broome; Michael Moss; Tom Georgouses; Karla Ray; Nikki Vang
Subject: RE: ACTION REQUIRED Fresno City EE H&W Trust - Dual Coverage Flyer V2

External Email: This message originated from outside Personify Health.

Mine too.

From: FCEA Office <Office@fceamail.com>
Sent: Monday, April 27, 2026 4:18 PM
To: Diana Cavazos <Diana.Cavazos@PersonifyHealth.com>; Georganne White <Georganne.White@fresno.gov>
Cc: David Broome <davidb@rael-letson.com>; Michael Moss <mmoss@mossfirm.org>; Tom Georgouses <Thomas.Georgouses@PersonifyHealth.com>; Karla Ray <Karla.Ray@personifyhealth.com>; Nikki Vang <Nikki.Vang@PersonifyHealth.com>
Subject: RE: ACTION REQUIRED Fresno City EE H&W Trust - Dual Coverage Flyer V2

External Email: Use caution with links and attachments

You have my approval. Thank you.
Sam

From: Diana Cavazos <Diana.Cavazos@PersonifyHealth.com>
Sent: Monday, April 27, 2026 1:31 PM
To: Georganne White (Georganne.White@fresno.gov) <Georganne.White@fresno.gov>; FCEA Office <Office@fceamail.com>
Cc: David Broome <davidb@rael-letson.com>; Michael Moss <mmoss@mossfirm.org>; Tom Georgouses <Thomas.Georgouses@PersonifyHealth.com>; Karla Ray <Karla.Ray@personifyhealth.com>; Nikki Vang <Nikki.Vang@PersonifyHealth.com>
Subject: ACTION REQUIRED Fresno City EE H&W Trust - Dual Coverage Flyer V2

Hello Georganne and Same

I hope this message finds you well. I wanted to inform you that Personify has made edits to the previously approved dual coverage flyer. These changes reflect the transition from the non-contributory plan to the new low plan, with the associated cost now set at \$49.

Please review the updated flyer at your earliest convenience. I kindly request your approval by tomorrow to ensure we can proceed with sending out the open enrollment materials.

Thank you for your attention to this matter.

Diana Cavazos

Client Success Manager

Diana.Cavazos@PersonifyHealth.com

M 1.559.312.2295

F (559) 499-2464

personifyhealth.com



Confidentiality Notice: This email was securely sent using TLS Encryption. The contents, including attachments, are intended solely for the designated recipient(s) and may be confidential or privileged. Unauthorized use or distribution is prohibited and may be unlawful. Views expressed are solely those of the author and not necessarily of Personify Health, Inc. If you received this in error, please notify the sender and delete the email.

V4.09



Your guide to dual coverage

What is dual coverage?

Dual coverage is available when you and a family member (spouse, domestic partner, parent, or single dependent under 26) both work for the City of Fresno and enroll in the health plan, allowing you to receive enhanced benefits.

Plan advantages

- **Full coverage:** You receive **100% in-network coverage** under the health plan.
- **Deductible advantage:** Your deductible is **\$200**, compared to **\$2,000** under a standard LOW plan.
- **Contribution cost:** There is a **\$49** per employee contribution for dual coverage.
- **Claims processing:** Claims are processed under the LOW plan and applied to both plans, functioning like primary and secondary coverage to ensure full benefits.

What you need to do

Notify HR if you and a qualifying family member both work for the City of Fresno. This ensures:

- Correct enrollment
- Full access to dual-coverage benefits
- Accurate claims processing

Once you receive your ID cards, provide **both** cards to your provider's office so they can coordinate benefits correctly.

Questions? For assistance, call **559-621-6950** or email benefits@fresno.gov. For more information

about coordination of benefits, refer to the coordination of benefits section in the plan document.

Diana Cavazos

From: Georganne White <Georganne.White@fresno.gov>
Sent: Monday, May 4, 2026 1:39 PM
To: 'FCEA Office'; Diana Cavazos
Cc: Tom Georgouses; Nikki Vang; Michael Moss; David Broome
Subject: RE: ACTION REQUIRES -Member Announcement Personify Phone Number Change

External Email: This message originated from outside Personify Health.

Me too. Do we have the open enrollment portal accurately operating?

From: FCEA Office <Office@freamail.com>
Sent: Monday, May 4, 2026 10:15 AM
To: Diana Cavazos <Diana.Cavazos@PersonifyHealth.com>; Georganne White <Georganne.White@fresno.gov>
Cc: Tom Georgouses <Thomas.Georgouses@PersonifyHealth.com>; Nikki Vang <Nikki.Vang@PersonifyHealth.com>; Michael Moss <mross@mossfirm.org>; David Broome <davidb@rael-letson.com>
Subject: RE: ACTION REQUIRES -Member Announcement Personify Phone Number Change

External Email: Use caution with links and attachments

Good Morning, Diana,
Approved.
Sam

From: Diana Cavazos <Diana.Cavazos@PersonifyHealth.com>
Sent: Monday, May 4, 2026 10:09 AM
To: FCEA Office <Office@freamail.com>; Georganne White (Georganne.White@fresno.gov) <Georganne.White@fresno.gov>
Cc: Tom Georgouses <Thomas.Georgouses@PersonifyHealth.com>; Nikki Vang <Nikki.Vang@PersonifyHealth.com>; Michael Moss <mross@mossfirm.org>; David Broome <davidb@rael-letson.com>
Subject: ACTION REQUIRES -Member Announcement Personify Phone Number Change

Hello Georganne and Sam

Personify Health is requesting your approval for the attached member announcement regarding a change to the Personify phone number.

This new number will take effect starting July 1, 2026 and will be the dedicated phone number for Fresno City H&W Trust. The reason for this change is to improve the reporting we have surrounding our call statistics for member/provider calls. However, I want to reassure that if members continue to call the old number after this date, it will still be answered. We would like to encourage the new number be used after July 1, 2026.

We would like to include this announcement in the open enrollment materials. Please review the attached document at your earliest convenience.

Should you have any questions or require further information, feel free to reach out.

Thank you,

Diana Cavazos

Account Manager

Diana.Cavazos@PersonifyHealth.com

M 1.559.312.2295

F (559) 499-2464

personifyhealth.com



Confidentiality Notice: This email was securely sent using TLS Encryption. The contents, including attachments, are intended solely for the designated recipient(s) and may be confidential or privileged. Unauthorized use or distribution is prohibited and may be unlawful. Views expressed are solely those of the author and not necessarily of Personify Health, Inc. If you received this in error, please notify the sender and delete the email.

v4.09



A new way to reach us is coming

Effective **July 1, 2026**, you'll have a new dedicated number for reaching Personify Health. Whether you have questions about your benefits, claims, or anything else, call **833-319-5697**. You'll also see it reflected on your updated ID cards.

In the meantime, please continue to use the number listed on the back of your current ID card: **800-442-7247**. We're happy to help.

Diana Cavazos

From: Kathy Nguyen <kathy.nguyen@hingehhealth.com>
Sent: Thursday, April 2, 2026 1:04 PM
To: Diana Cavazos
Subject: Hinge Health Migraine Care for City of Fresno
Attachments: Migraine Care Overview and FAQ (5).pdf; Migraine Care Overview.pdf

External Email: This message originated from outside Personify Health.

Hi Diana,

We have an exciting product enhancement launching July 1, 2026 for the City of Fresno. Migraine Care is approved by the partnership and the great news is that there are no changes to existing pricing or contracting. Migraine Care will be part of our Chronic program. When members enroll in the program, they can choose the body area to focus on (ex. back, hip). Migraine Care will be another option available.

In order to turn on Migraine Care for the City of Fresno, I am hoping to share a couple of overview slides with them (attached). I then send the language below (to you or the City of Fresno team):

- Migraine care: we're excited to integrate Migraine Care into our Chronic program.
 - Please reply "Approved" to proceed with adding it to the program for your members. If we don't hear from you by **June 1**, we'll treat that as your approval to turn on Migraine care in July, in line with all our other clients.

Please let me know your preferred way to present this to the team (whether you prefer to present it or if receiving approval from Personify is sufficient).

Best,
Kathy

Kathy Nguyen (she/her)
Senior Client Success Manager, [Hinge Health](#)
Phone: 617-750-4228



This email may contain or attach information that is privileged and confidential and/or protected health information (PHI) intended solely for the use of Hinge Health, Inc. and the recipient(s). If you are not the intended recipient, you are hereby notified that any review, dissemination, distribution, printing or copying of this email message and/or any attachments is strictly prohibited. If you have received this transmission in error, please notify the sender immediately at 855-902-2777 and permanently delete this email and any attachments.



Migraine Care Overview

Overview

Hinge Health is integrating Migraine Care into our chronic program, so members can find effective pain relief and migraine prevention that minimizes missed workdays and unnecessary healthcare costs. This closes gaps in access, affordability, and efficacy while addressing the reality that 3 in 4 people with migraine also have neck pain¹. With Hinge Health's migraine care, members receive:

- **Fast, drug-free pain relief:** During migraine attacks, members can quickly access FDA-cleared Enso for Migraine, delivering rapid, drug-free pain relief.
- **Trigger Tracking & Insights:** Members use AI-powered insights to easily identify and manage personal migraine triggers – like lifestyle, environmental, and dietary factors.
- **Proactive Prevention:** Clinically proven lifestyle changes and exercise therapy reduce how often and how severe migraines are, so members can stop pain before it starts.
- **Led by Expert Care teams:** Experienced care teams guide members to effective, evidence-based treatments – minimizing trial and error, prioritizing proven first-line care, and supporting lifestyle changes.

By empowering employees with proven, accessible care, we help reduce overall costs and support a healthier, more engaged workforce.

¹ Prevalence of neck pain in migraine and tension-type headache: A population study. Cephalalgia. 2015;35(3):211-219. doi:10.1177/0333102414535110

Frequently Asked Questions

Why is Hinge Health addressing Migraine care?

Migraine is a widespread condition, and a costly, often-overlooked challenge for employers. Affecting 1 in 6 people², **Migraine patients cost employers \$16,714 annually** in medical and pharmacy costs annually, 2-3x those without Migraine³. Migraine is also a top driver of absenteeism, with employees losing an average of 19.8 workdays annually⁴.

Despite its impact, migraine care remains full of gaps, leaving many employees struggling:

- **Access:** Over 80% of U.S. countries lack a headache specialist, with wait times up to 14 months⁵ and only a few hundred headache specialists nationwide⁶.
- **Efficacy:** 3 in 5 migraine patients are dissatisfied with their care⁷.

Additionally, **3 in 4 people with migraine also suffer from MSK pain**⁸, and many of Hinge Health's MSK treatment modalities are also best practices for Migraine care, as defined by American Headache Society, International Headache Society, and American Migraine Foundation, making this a natural extension of our expertise in chronic pain management. By integrating Migraine Care, we are closing gaps in access and affordability, offering a solution that drives costs and empowers members to better manage their Migraine pain.

What is the price of Migraine Care?

There is no change to our pricing, with Migraine care included in our digital care program and existing pricing and contracting. Our definition of a billable session is not currently changing.

Does adopting Migraine Care require a contract amendment?

We will offer Migraine Care as part of our digital care program. This means that, in most cases, only verbal approvals are required, no contract amendments are necessary.

What clinical studies have been conducted on Hinge Health's Migraine Care?

In the Enso for Migraine Study, Enso was **2.4x** more likely to result in pain relief than placebo and **56%** of users experiencing pain relief from severe or moderate pain down to mild or no pain with at least one waveform. Enso for Migraine is FDA cleared for migraine headache as of April 16th, 2026.

²Burch, R., Rizzoli, P., & Loder, E. (2018). The prevalence and impact of migraine and severe headache in the United States: Figures and trends from government health studies. *Headache: The Journal of Head and Face Pain*, 58(4), 486–505. <https://doi.org/10.1111/head.13281>

³Hinge Health analysis of Merative MarketScan® Commercial Claims and Encounters Database (2023)

⁴Schoetz, L., Rimmer, T., Rothak, P., et al. *Employee and Employer Benefits from a Migraine Management Program*. *Disease Outcomes and Cost Analysis*. *Headache*. 2020;60(9):1947–1960. doi:10.1111/head.13933

⁵ <https://pubmed.ncbi.nlm.nih.gov/32767268/>

⁶American Headache Society.

⁷2022 Migraine in America Survey.

⁸Prevalence of neck pain in migraine and tension-type headache: A population study. *Cephalalgia*. 2015;35(3):211-219. doi:10.1177/0333102414535110



Migraine Care

© Hinge Health Confidential

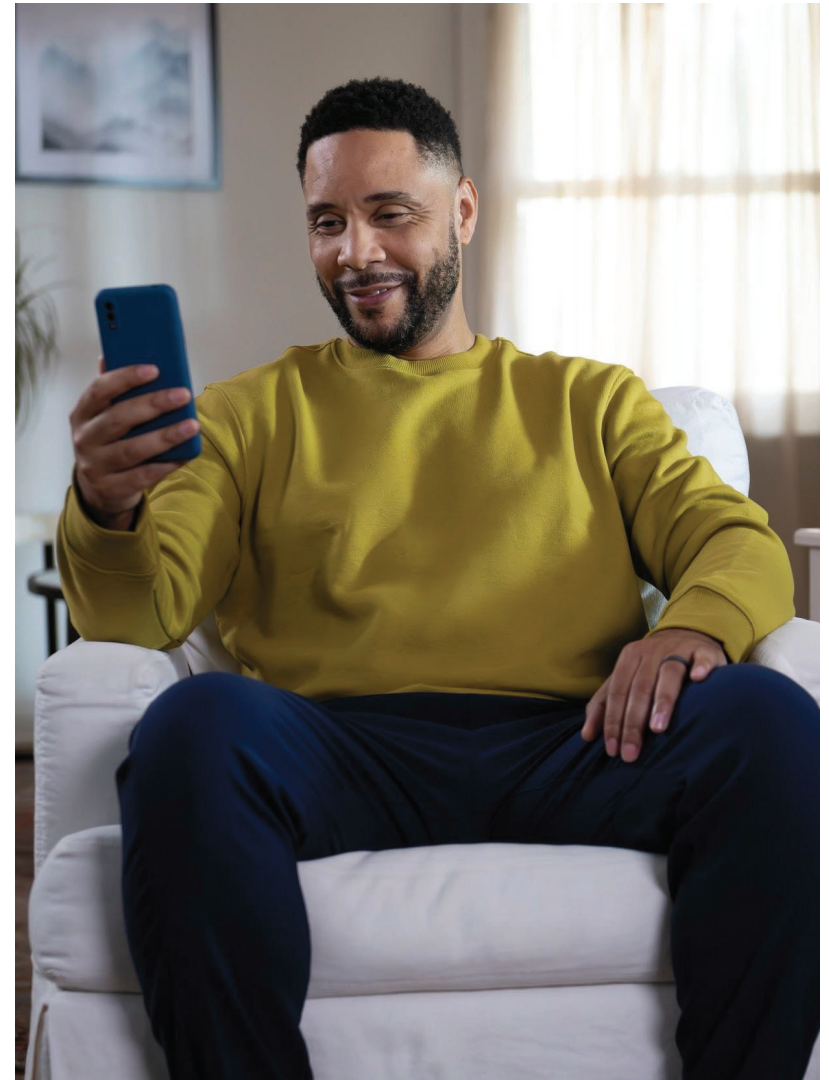
139



Legal disclaimers

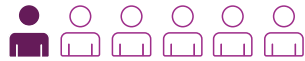
Forward Looking Statements

This presentation contains forward-looking statements about Hinge Health and our business; all statements other than statements of historical facts contained in this presentation are forward-looking statements. In some cases, you can identify these statements by forward-looking words such as “may,” “might,” “will,” “should,” “expects,” “plans,” “anticipates,” “believes,” “estimates,” “predicts,” “potential” or “continue,” and similar expressions, and the negative of these terms. Forward-looking statements in this presentation include, but are not limited to, statements regarding our business strategy and plans, including with respect to products and services. You are cautioned not to place undue reliance on these forward-looking statements. Forward-looking statements are only predictions based on our current expectations, estimates, and assumptions, valid only as of the date they are made, and subject to risks and uncertainties, some of which we are not currently aware. Important factors that could cause our actual results to differ materially from those indicated in the forward-looking statements are discussed in our filings with the Securities and Exchange Commission.



Low Access, High Costs

\$16K plan cost per migraine member



1 in 6 people

suffer from migraines

2x more common in women vs men



4-7 months

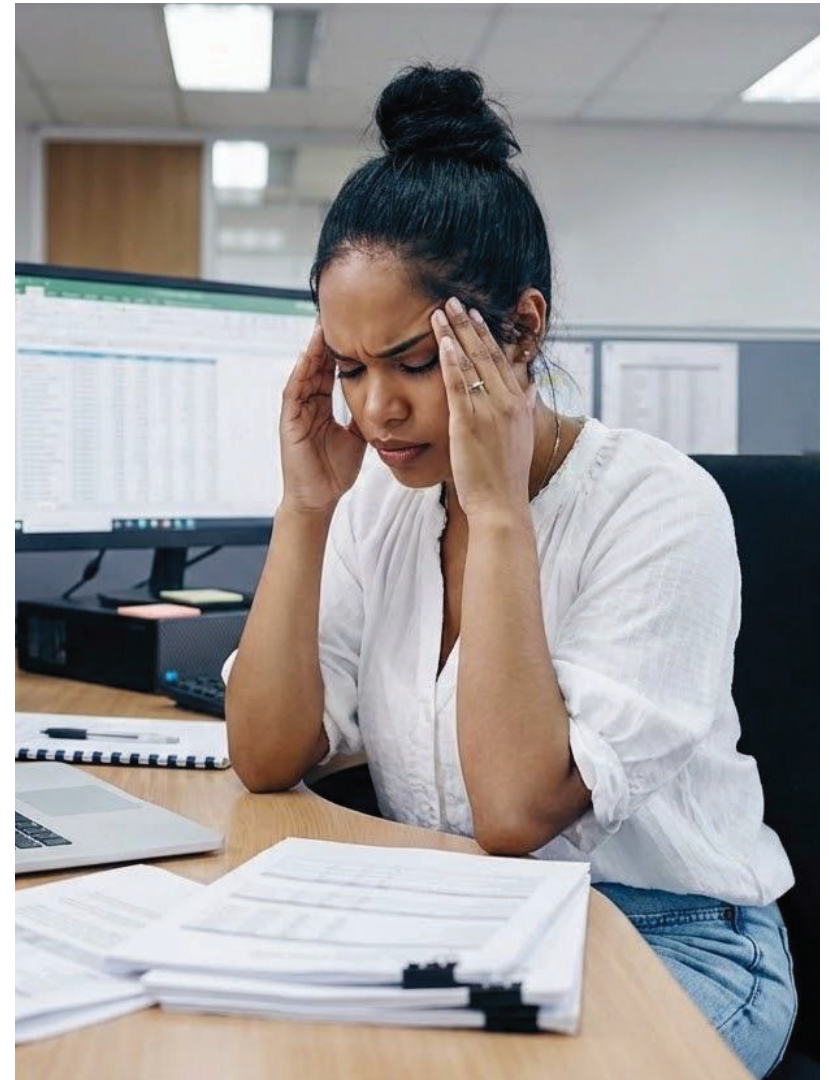
Average wait time to see a headache specialist

60% report dissatisfaction

with migraine treatment options

Source: ¹Campbell BA, Cohen JD, Hao Y, Li VW, Prassl S, Thomas R. Migraine Disease Burden and the Benefits of Improved Disease Management: Estimating Long-Term Workforce and Economic Impact of Effective Migraine Care. Headache. ²American Headache Society. ³2022 Migraine in America Survey.





© Hinge Health Confidential



Migraine Care

- ✔ **Fast, effective pain relief** in minutes with Enso for Migraine
- ✔ **Intelligent, personalized insights** on triggers
- ✔ **Fewer migraines** with exercise therapy and lifestyle changes

Welcome, Jordan
All-in-one rapid migraine relief, personalized prevention, and expert care.

-  **Free Enso device for migraine relief**
Enso users see a 33% reduction in migraine pain on average
-  **Relieve tension through movement**
Stop migraine pain signals at the source.
-  **Track what matters**
Understand your migraines by mapping symptoms to triggers.
-  **Access expert guidance**
You'll have a team to guide you for questions and support.


Did you know?
Light movement can help reduce migraine frequency by stopping pain signals at the source.
Try 3 quick moves to start your program.



Next





Start new treatment



Migraine relief
Up to 1 hour

Past sessions >

-  59 min · 20% avg
No change
-  1 hr · 20% avg
Very much improved

Clinical proof points

FDA-cleared Enso for Migraine

56%

Of participants reduced pain from
severe/moderate to mild/none

2.4x

More likely to reduce pain
vs placebo

© Hinge Health Confidential

143



FRESNO CITY EMPLOYEES HEALTH & WELFARE TRUST
 MONTHLY CLAIMS EXPERIENCE ANALYSIS
 MEDICAL AND PRESCRIPTION DRUGS
 NINE MONTHS ENDING MARCH 31, 2026

		<u>PER ELIGIBLE</u>
ACTIVES	\$ 48,865,310.52	\$ 1,303.67
COBRA	599,183.38	11,983.67
RETIREES	4,164,554.53	2,537.82
	<u>\$ 53,629,048.43</u>	\$ 1,369.00
MEDICARE SUPPLEMENT SELF-PAY OVER 65	\$ 2,662,765.10 283,770.74	\$ 1,897.91 1,891.80
	<u>\$ 56,575,584.27</u>	\$ 1,389.14
AVERAGE MONTHLY COST - YTD	<u>\$ 6,286,176.03</u>	\$ 1,389.14
PRIOR YEAR AVERAGE MONTHLY COST - YTD NINE MONTHS ENDING MARCH 31, 2025	\$ 5,394,072.00	\$ 1,190.19
PRIOR PLAN YEAR AVERAGE MONTHLY COST JULY 2024 - JUNE 2025	\$ 5,659,931.50	\$ 1,248.24
TWELVE MONTH ROLLING AVERAGE April 1, 2025 - March 31, 2026	\$ 6,329,009.52	\$ 1,568.11



FRESNO CITY EMPLOYEES HEALTH & WELFARE TRUST

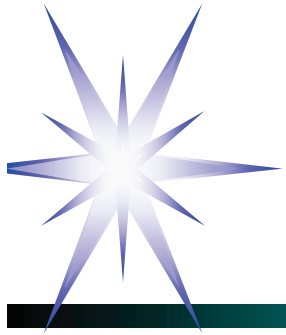
MONTHLY CLAIMS EXPERIENCE ANALYSIS
 DENTAL BENEFIT SECTION
 NINE MONTHS ENDING MARCH 31, 2026

<u>DELTA DENTAL</u>	<u>PAYMENTS</u>	<u>PER ELIGIBLE</u>
ACTIVES	\$ 2,297,759.01	\$ 65.41
RETIREES	371,010.62	75.33
TOTAL FOR DELTA DENTAL	<u>\$ 2,668,769.63</u>	66.63
AVERAGE MONTHLY COST	\$ 296,529.96	\$ 66.63
PUD HMO AVG MONTHLY PREM	10,208.52	\$ 42.32
TOTAL AVG MONTHLY COST - YTD	<u>\$ 306,738.48</u>	\$ 65.38

PRIOR YEAR AVERAGE MONTHLY COST : DELTA DENTAL
 JULY 2024 - JUNE 2025

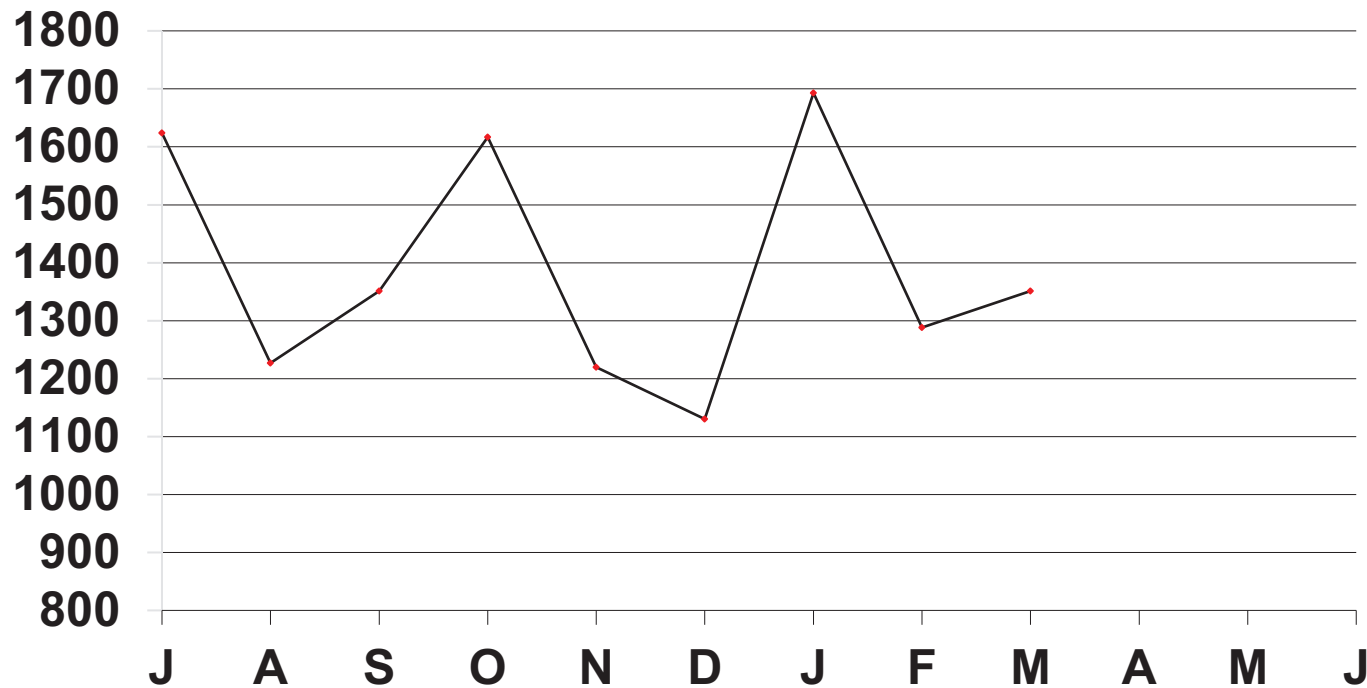
ACTIVES	\$ 67.05
RETIREES	\$ 70.77
COMBINED	\$ 67.51

TWELVE MONTH ROLLING AVERAGE
 DELTA DENTAL
 April 1, 2025 - March 31, 2026
 \$ 67.14



Average Cost Per Participant Monthly

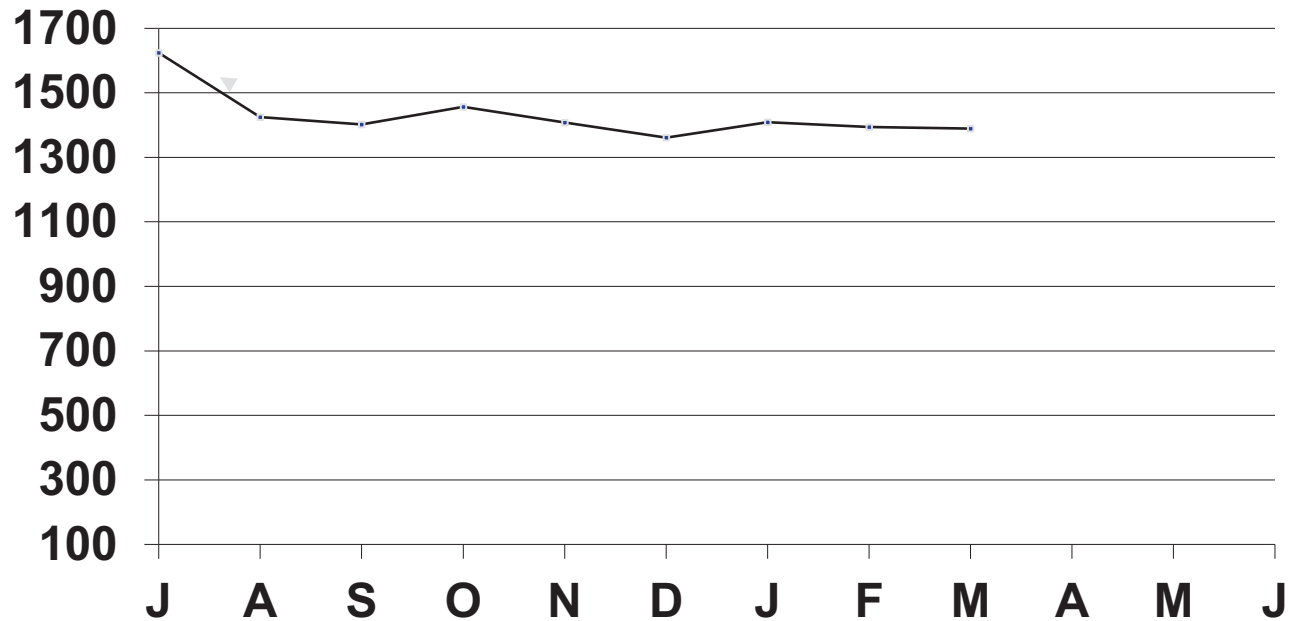
Fresno City Employees H & W Trust
July 25 – Jun 26





Average Cost Per Participant Year to Date

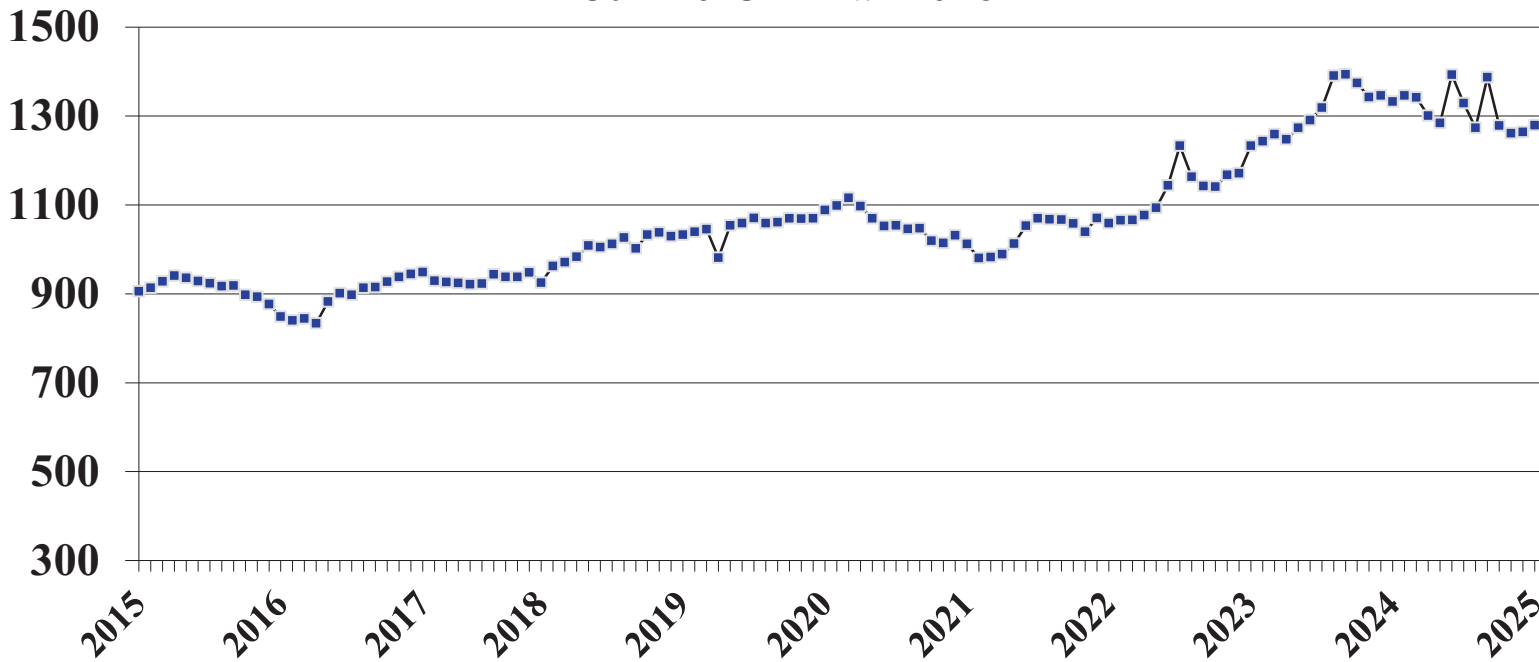
Fresno City Employees H & W Trust
July 25 – Jun 26





Average Cost Per Participant 12 Month Rolling Average

Fresno City Employees H & W Trust
Jun 2015 – Mar 2026



FRESNO CITY EMPLOYEES HEALTH & WELFARE TRUST
FINANCIAL ANALYSIS FOR MEDICAL, VISION AND PRESCRIPTION DRUG
NINE MONTHS ENDING MARCH 31, 2026

CATEGORY	CENSUS COUNT	CLAIMS COSTS	FIXED COSTS	TOTAL COSTS	RATE	INTEREST	NET GAIN(LOSS)	YTD GAIN(LOSS)
ACTIVES								
PPO Contributing	2,598	\$ 1,687.40	\$ 133.58	\$ 1,820.98	\$ 1,389.00	\$ 3.32	\$ (428.66)	\$ (10,022,928.12)
PPO Non-Cont 35	1,483	\$ 691.89	\$ 133.58	\$ 825.47	\$ 939.00	\$ 3.32	\$ 116.85	\$ 1,559,596.95
PPO Non-Cont 25	84	\$ 239.05	\$ 133.58	\$ 372.63	\$ 1,089.00	\$ 3.32	\$ 719.69	\$ 544,085.64
								\$ -
TOTAL (a)	4165	\$ 1,303.73	\$ 133.58	\$ 1,437.31	\$ 1,222.72	\$ 3.32	\$ (211.27)	\$ (7,919,245.53)
RETIREES								
PPO Plan	182	\$ 2,537.82	\$ 133.58	\$ 2,671.40	\$ 1,389.00	\$ 3.32	\$ (1,279.08)	\$ (2,098,962.19)
TOTAL	182	2,537.82	\$ 133.58	\$ 2,671.40	\$ 1,389.00	\$ 3.32	\$ (1,279.08)	\$ (2,098,962.19)
COBRA								
PPO Plan	6	\$ 11,983.67	\$ 133.58	\$ 12,117.25	\$ 1,416.78	\$ 3.32	\$ (10,697.15)	\$ (577,646.10)
TOTAL	6	\$ 11,983.67	\$ 133.58	\$ 12,117.25	\$ 1,416.78	\$ 3.32	\$ (10,697.15)	\$ (577,646.10)
MEDICARE SUPP								
PPO Plan	156	\$ 1,897.91	\$ 29.96	\$ 1,927.87	\$ 759.00	\$ 3.32	\$ (1,165.55)	\$ (1,636,432.20)
TOTAL	156	\$ 1,897.91	\$ 29.96	\$ 1,927.87	\$ 759.00	\$ 3.32	\$ (1,165.55)	\$ (1,636,432.20)
SELF-PAY								
PPO Plan	17	\$ 1,891.80	\$ 133.58	\$ 2,025.38	\$ 1,675.00	\$ 3.32	\$ (347.06)	\$ (53,100.18)
TOTAL	17	\$ 1,891.80	\$ 133.58	\$ 2,025.38	\$ 1,675.00	\$ 3.32	\$ (347.06)	\$ (53,100.18)
Stop-Loss Reimbursement								\$ 670,689.74
Prescription Drug Rebates								\$ 6,400,721.27
TOTAL								\$ (5,213,975.19)

NOTES:

Claims Costs and Census Count represent average per month over the reporting period.

Fixed Costs include all plan costs for Blue Shield, Simple Behavioral, SimpleMSK, Optum, Personify Health, Rael & Letson, Moss Law Firm, EyeMed, EPIC and ULL Insurance Company.

Interest revenue is based upon \$14,400 per month, and has been entirely allocated to the above benefits.

Rates are calculated on an average basis over the reporting period.

(a) Total Claims Cost and Rate are based upon a weighted average of contributing and non-contributing.

FRESNO CITY EMPLOYEES HEALTH & WELFARE TRUST

**FINANCIAL ANALYSIS FOR DENTAL
NINE MONTHS ENDING MARCH 31, 2026**

CATEGORY	CENSUS COUNT	CLAIMS COSTS	FIXED COSTS	TOTAL COSTS	RATE	INTEREST	NET GAIN(LOSS)	YTD GAIN(LOSS)
Delta PPO	4450	\$ 66.63	\$ 5.60	\$ 72.23	\$ 111.00		\$ 38.77	\$ 1,552,738.50
PUD HMO	241	\$ -	\$ 42.32	\$ 42.32	\$ 111.00		\$ 68.68	\$ 148,966.92
TOTAL								\$ 1,701,705.42

NOTES:

Claims Costs and Census Count represent average per month over the reporting period.

All interest revenue has been allocated to Medical.

Rates are calculated on an average basis over the reporting period.

FRESNO CITY EMPLOYEES HEALTH & WELFARE TRUST
 MONTHLY CLAIMS EXPERIENCE ANALYSIS
 MEDICAL AND PRESCRIPTION DRUGS
 TEN MONTHS ENDING APRIL 30, 2026

	<u>PER ELIGIBLE</u>
ACTIVES	\$ 54,647,373.26
COBRA	647,481.17
RETIREES	4,686,839.84
	<u>\$ 59,981,694.27</u>
MEDICARE SUPPLEMENT	
SELF-PAY OVER 65	\$ 3,024,887.96
	302,200.20
	<u>\$ 63,308,782.43</u>
AVERAGE MONTHLY COST - YTD	<u>\$ 6,330,878.24</u>
	\$ 1,397.70
PRIOR YEAR AVERAGE MONTHLY COST - YTD	
TEN MONTHS ENDING APRIL 30, 2025	\$ 5,589,612.84
	\$ 1,232.96
PRIOR PLAN YEAR AVERAGE MONTHLY COST	
JULY 2024 - JUNE 2025	\$ 5,659,931.50
	\$ 1,248.24
TWELVE MONTH ROLLING AVERAGE	
May 1, 2025 - April 30, 2026	\$ 6,277,652.67
	\$ 1,554.68



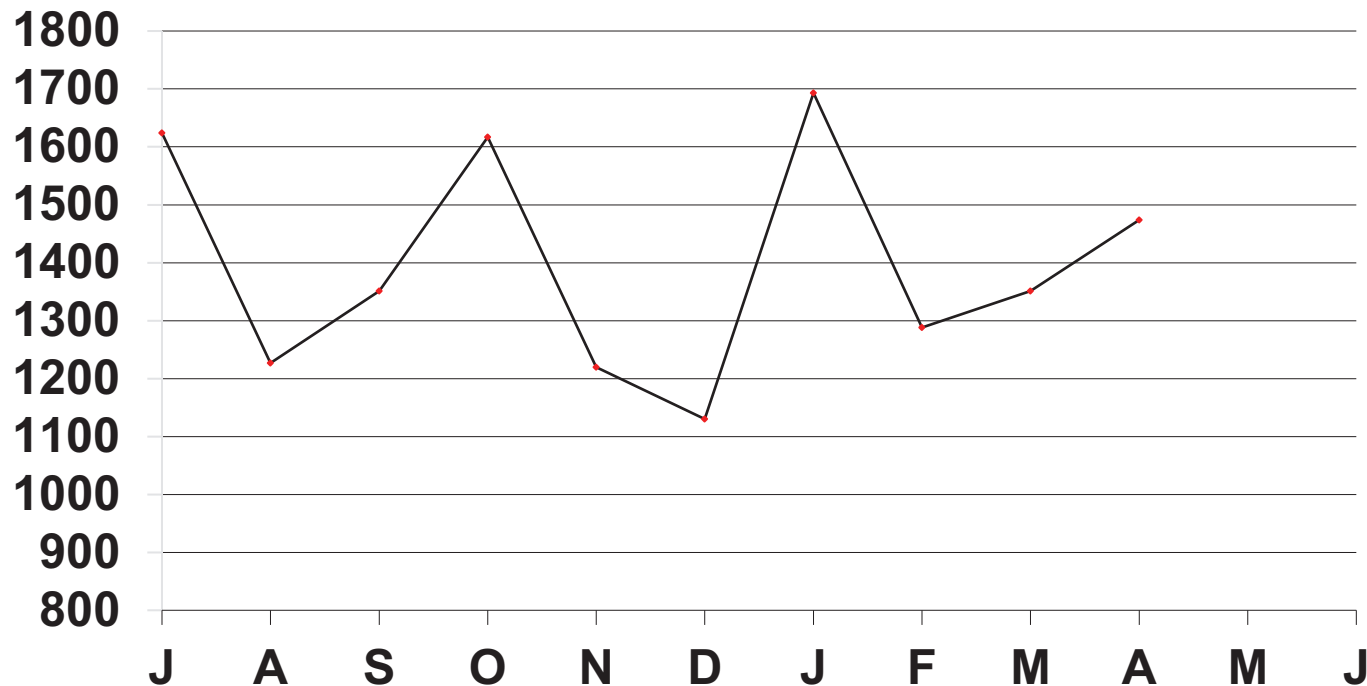
FRESNO CITY EMPLOYEES HEALTH & WELFARE TRUST
 MONTHLY CLAIMS EXPERIENCE ANALYSIS
 DENTAL BENEFIT SECTION
 TEN MONTHS ENDING APRIL 30, 2026

DELTA DENTAL	PAYMENTS	PER ELIGIBLE
ACTIVES	\$ 2,537,637.66	\$ 65.01
RETIREEES	405,259.32	74.02
TOTAL FOR DELTA DENTAL	<u><u>\$ 2,942,896.98</u></u>	\$ 66.12
AVERAGE MONTHLY COST	\$ 294,289.70	\$ 66.12
PUD HMO AVG MONTHLY PREM	10,220.28	\$ 42.32
TOTAL AVG MONTHLY COST - YTD	<u><u>\$ 304,509.98</u></u>	\$ 64.89
PRIOR YEAR AVERAGE MONTHLY COST: DELTA DENTAL		
JULY 2024 - JUNE 2025		
ACTIVES	\$	67.05
RETIREEES	\$	70.77
COMBINED	\$	67.51
TWELVE MONTH ROLLING AVERAGE		
DELTA DENTAL		
May 1, 2025 - April 30, 2026	\$	66.96



Average Cost Per Participant Monthly

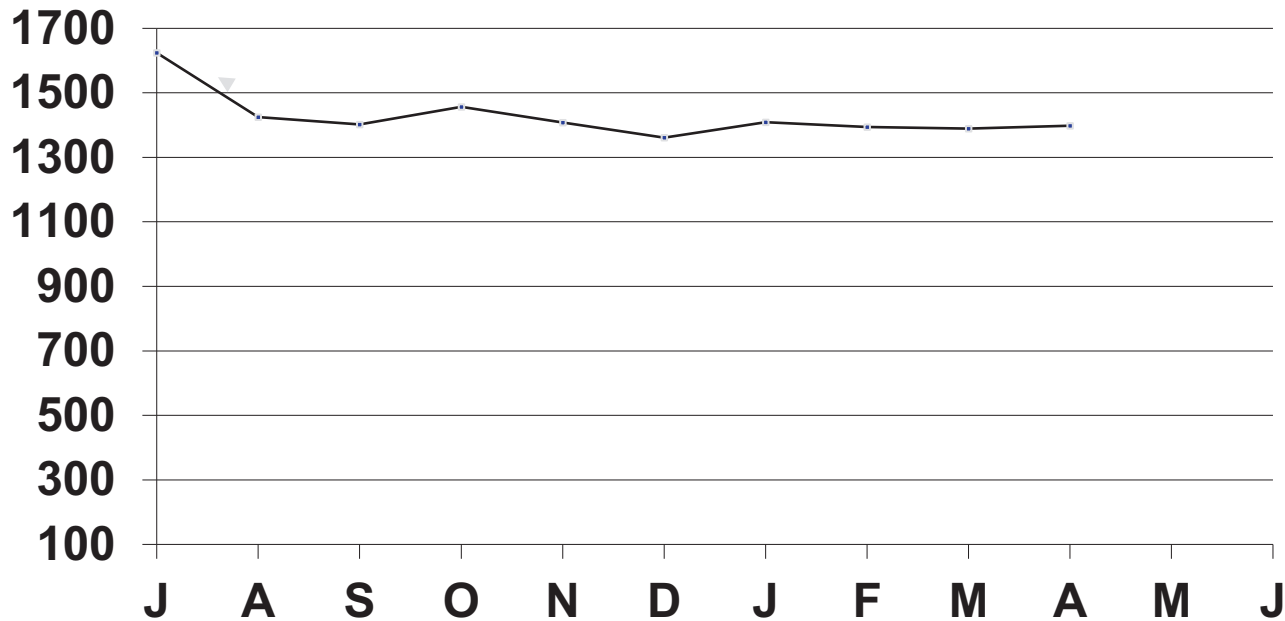
Fresno City Employees H & W Trust
July 25 – Jun 26





Average Cost Per Participant Year to Date

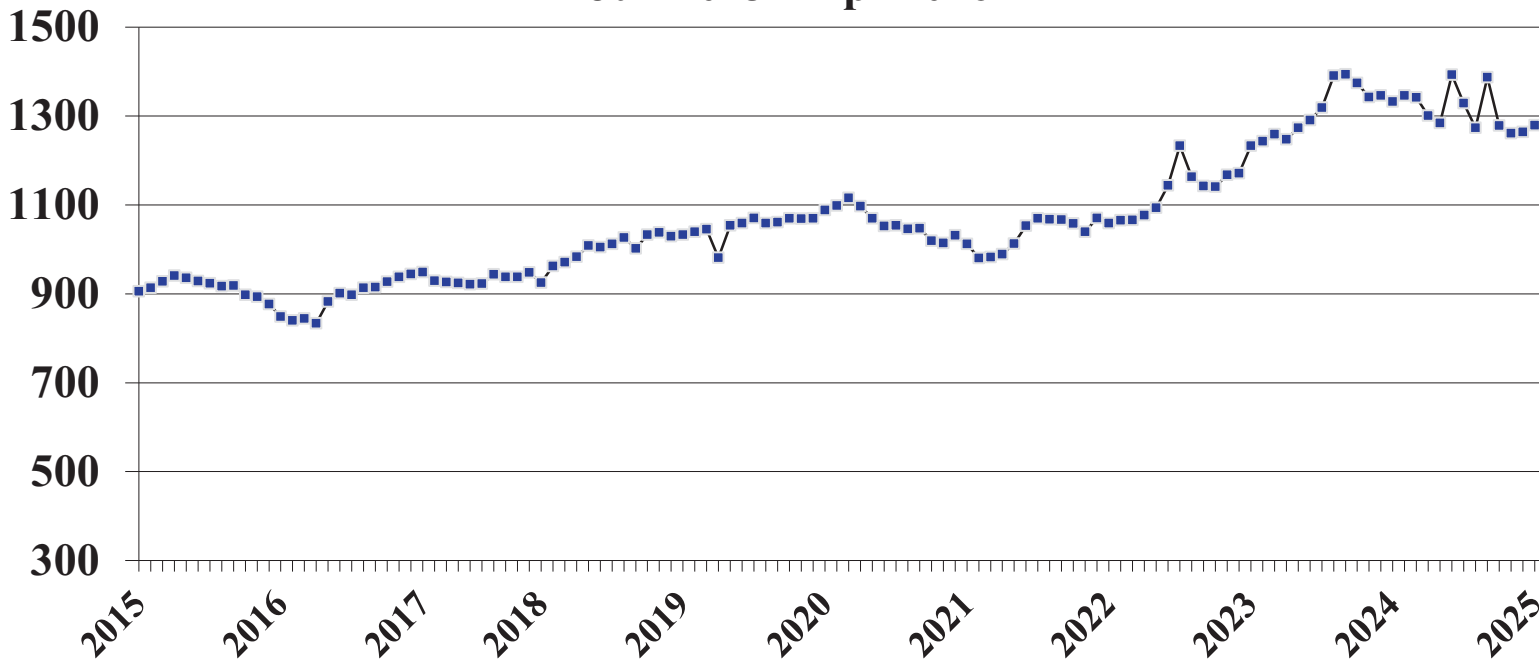
Fresno City Employees H & W Trust
July 25 – Jun 26





Average Cost Per Participant 12 Month Rolling Average

Fresno City Employees H & W Trust
Jun 2015 – Apr 2026



FRESNO CITY EMPLOYEES HEALTH & WELFARE TRUST
FINANCIAL ANALYSIS FOR MEDICAL, VISION AND PRESCRIPTION DRUG
TEN MONTHS ENDING APRIL 30, 2026

CATEGORY	CENSUS COUNT	CLAIMS COSTS	FIXED COSTS	TOTAL COSTS	RATE	INTEREST	NET GAIN(LOSS)	YTD GAIN(LOSS)
ACTIVES								
PPO Contributing	2,598	\$ 1,700.35	\$ 133.58	\$ 1,833.93	\$ 1,389.00	\$ 3.32	\$ (441.61)	\$ (11,473,027.80)
PPO Non-Cont 35	1,487	\$ 692.40	\$ 133.58	\$ 825.98	\$ 939.00	\$ 3.32	\$ 116.34	\$ 1,729,975.80
PPO Non-Cont 25	84	\$ 218.12	\$ 133.58	\$ 351.70	\$ 1,089.00	\$ 3.32	\$ 740.62	\$ 622,120.80
								\$ -
TOTAL (a)	4169	\$ 1,310.97	\$ 133.58	\$ 1,444.55	\$ 1,222.45	\$ 3.32	\$ (218.78)	\$ (9,120,931.20)
RETIREES								
PPO Plan	183	\$ 2,566.72	\$ 133.58	\$ 2,700.30	\$ 1,389.00	\$ 3.32	\$ (1,307.98)	\$ (2,388,380.60)
TOTAL	183	2,566.72	\$ 133.58	\$ 2,700.30	\$ 1,389.00	\$ 3.32	\$ (1,307.98)	\$ (2,388,380.60)
COBRA								
PPO Plan	5	\$ 11,990.39	\$ 133.58	\$ 12,123.97	\$ 1,416.78	\$ 3.32	\$ (10,703.87)	\$ (535,193.50)
TOTAL	5	\$ 11,990.39	\$ 133.58	\$ 12,123.97	\$ 1,416.78	\$ 3.32	\$ (10,703.87)	\$ (535,193.50)
MEDICARE SUPP								
PPO Plan	156	\$ 1,937.79	\$ 29.96	\$ 1,967.75	\$ 759.00	\$ 3.32	\$ (1,205.43)	\$ (1,880,470.80)
TOTAL	156	\$ 1,937.79	\$ 29.96	\$ 1,967.75	\$ 759.00	\$ 3.32	\$ (1,205.43)	\$ (1,880,470.80)
SELF-PAY								
PPO Plan	17	\$ 1,820.48	\$ 133.58	\$ 1,954.06	\$ 1,675.00	\$ 3.32	\$ (275.74)	\$ (46,875.80)
TOTAL	17	\$ 1,820.48	\$ 133.58	\$ 1,954.06	\$ 1,675.00	\$ 3.32	\$ (275.74)	\$ (46,875.80)
Stop-Loss Reimbursement								\$ 670,689.74
Prescription Drug Rebates								\$ 8,645,061.91
TOTAL								\$ (4,656,100.25)

NOTES:

Claims Costs and Census Count represent average per month over the reporting period.

Fixed Costs include all plan costs for Blue Shield, Simple Behavioral, SimpleMSK, Optum, Personify Health, Rael & Letson, Moss Law Firm, EyeMed, EPIC and ULL Insurance Company.

Interest revenue is based upon \$14,400 per month, and has been entirely allocated to the above benefits.

Rates are calculated on an average basis over the reporting period.

(a) Total Claims Cost and Rate are based upon a weighted average of contributing and non-contributing.

FRESNO CITY EMPLOYEES HEALTH & WELFARE TRUST

**FINANCIAL ANALYSIS FOR DENTAL
TEN MONTHS ENDING APRIL 30, 2026**

CATEGORY	CENSUS COUNT	CLAIMS COSTS	FIXED COSTS	TOTAL COSTS	RATE	INTEREST	NET GAIN(LOSS)	YTD GAIN(LOSS)
Delta PPO	4451	\$ 66.12	\$ 5.60	\$ 71.72	\$ 111.00		\$ 39.28	\$ 1,748,352.80
PUD HMO	242	\$ -	\$ 42.32	\$ 42.32	\$ 111.00		\$ 68.68	\$ 166,205.60
TOTAL								\$ 1,914,558.40

NOTES:

Claims Costs and Census Count represent average per month over the reporting period.
 All interest revenue has been allocated to Medical.
 Rates are calculated on an average basis over the reporting period.

Paid Claims Lag Time Analysis by Input Date

INCURRED: 01/01/1990 - 03/31/2026 | PAID: 03/01/2026 - 03/31/2026

FRESNO CITY EMP H&W TRUST Summary												
Range of Days Lagged	Incurred Date to Input Date			Input Date to Processed Date			Processed Date to Paid Date			Input Date to Paid Date		
	Claims	% Total	% Cum	Claims	% Total	% Cum	Claims	% Total	% Cum	Claims	% Total	% Cum
0 - 10	5,875	50.5 %	50.5 %	11,546	99.3 %	99.3 %	11,588	99.6 %	99.6 %	11,388	97.9 %	97.9 %
11 - 14	1,258	10.8 %	61.3 %	43	0.4 %	99.6 %	28	0.2 %	99.9 %	146	1.3 %	99.2 %
15 - 21	1,159	10.0 %	71.3 %	37	0.3 %	99.9 %	13	0.1 %	100.0 %	79	0.7 %	99.8 %
22 - 28	635	5.5 %	76.7 %	1	0.0 %	100.0 %	3	0.0 %	100.0 %	13	0.1 %	99.9 %
Over 28	2,705	23.3 %	100.0 %	5	0.0 %	100.0 %	0	0.0 %	100.0 %	6	0.1 %	100.0 %

Total # of claims: 11,632

Average days from incurred to input: 45.7

Average days from input to processed: .7

Average days from processed to paid: 3.1

Average days from input to paid: 3.9

Paid Claims Lag Time Analysis by Input Date

INCURRED: 01/01/1990 - 04/30/2026 | PAID: 04/01/2026 - 04/30/2026

FRESNO CITY EMP H&W TRUST Summary												
Range of Days Lagged	Incurred Date to Input Date			Input Date to Processed Date			Processed Date to Paid Date			Input Date to Paid Date		
	Claims	% Total	% Cum	Claims	% Total	% Cum	Claims	% Total	% Cum	Claims	% Total	% Cum
0 - 10	7,548	52.1 %	52.1 %	14,190	97.9 %	97.9 %	14,434	99.6 %	99.6 %	13,909	96.0 %	96.0 %
11 - 14	1,423	9.8 %	61.9 %	162	1.1 %	99.0 %	1	0.0 %	99.6 %	306	2.1 %	98.1 %
15 - 21	1,503	10.4 %	72.3 %	81	0.6 %	99.6 %	4	0.0 %	99.6 %	135	0.9 %	99.0 %
22 - 28	889	6.1 %	78.4 %	35	0.2 %	99.8 %	51	0.4 %	100.0 %	89	0.6 %	99.6 %
Over 28	3,129	21.6 %	100.0 %	24	0.2 %	100.0 %	2	0.0 %	100.0 %	53	0.4 %	100.0 %

Total # of claims: 14,492

Average days from incurred to input: 32.4

Average days from input to processed: 1

Average days from processed to paid: 3.4

Average days from input to paid: 4.3

**APR & MAY
OPEN CASES**

Case Number:	Date of Accident	Case Status	Claims Paid
20230711-004650	11/04/2022	Active	\$ 2,566.89
20250204-002671	11/07/2024	Active	\$ 19,928.29
20240425-000044	04/02/2024	Active	\$ 2,192.47
20230818-003487	06/05/2023	Active	\$ 8,548.46
20241218-000868	12/27/2022	Active	\$ 8,840.20
20230719-001247	05/30/2023	Active	\$ 622.28
20250612-002071	05/15/2025	Active	\$ 253.43
20230927-001086	09/01/2023	Active	\$ 6,716.41
20240409-001207	2/13/2024	Active	\$ 45,946.23
20250103-000040	11/05/2024	Active	\$ 371.00
20250228-003539	02/14/2025	Active	\$ 5,393.65
20250627-000065	6/20/2520	Active	\$ 4,890.51
20250715-001544	5/29/2025	Active	\$ 289.60
20250812-001714	6/27/2025	Active	\$ 423.77
20250104-000639	10/5/2024	Active	\$ 9,398.67
20240123-000698	1/2/2024	Active	\$ 5,384.22
20250104-000802	10/5/2024	Active	\$ 5,765.09
20250903-002516	8/15/2025	Active	\$ 4,122.69
20251020-007457	7/12/2025	Active	\$ 1,366.05
20260113-001703	10/04/2025	Active	\$ 86.22
20251222-000017	12/06/2025	Active	\$ 4,109.84
20251102-003222	10/04/2025	Active	\$ 3,220.70
20251102-002995	10/04/2025	Active	\$ 3,523.87
20250929-002170	9/9/2025	Active	\$ 1,430.52
20230912-000974	6/17/2023	Active	\$ 170.94
20230818-000184	2/19/2023	Active	\$ 820.48
20230912-001299	8/26/2023	Active	\$ 4,091.28
20240123-000238	1/2/2024	Active	\$ 871.52
20250102-000895	9/8/2024	Active	\$ 73,435.75
20250812-001618	6/30/2025	Active	\$ 481.20
20250812-003199	8/19/2025	Active	\$ 487.14
20251216-000394	11/8/2025	Active=ve	\$ 71,268.89

Total \$297,018.26

**APR & MAY
CLOSED CASES**

Case Number:	Status	Closed date:	Claims Paid:	Recovered Amount:
20260307-008371	Closed	4/15/2026	\$5,786.94	\$ -
20250630-000067	Closed	4/23/2026	\$54,834.02	\$10,000.00
20250321-000523	Closed	4/15/2026	\$4,966.01	\$4,966.01
20260119-000947	Closed	4/23/2026	\$5,000.00	\$5,000.00
20260119-000947	Closed	4/30/2026	\$1,852.46	\$1,852.46

DENTAL ADMINISTRATIVE SERVICES CONTRACT

This Contract is entered into between **FRESNO CITY EMPLOYEES HEALTH & WELFARE TRUST** (Contractholder) and **Delta Dental of California** (hereinafter referred to as Delta Dental). This Contract supersedes and replaces all previous dental administrative services contract(s) issued by Delta Dental of California.

Whereas, Contractholder has adopted an employee dental benefit plan (the Plan, as defined below), which is set forth in the Employee Benefit Booklet, as shown in Section 7, mutually agreed upon by Contractholder and Delta Dental, and for which Contractholder retains all liabilities not otherwise identified in this Contract;

Whereas, Contractholder has requested Delta Dental to provide certain administrative services to the Plan and Delta Dental has agreed to provide such services in accordance with this Contract and, without assuming any liability of the Contractholder under the Plan not otherwise identified in this Contract;

Now therefore, in consideration of the mutual promises and covenants contained in this Contract, it is hereby agreed as follows:

SECTION 1. DEFINITIONS

Terms with capital letters appearing in this Contract shall have the meaning given to them in the Plan attached hereto as shown in Section 7. In addition, the following terms shall have these meanings:

- 1.01 **Contract** means this agreement between Delta Dental and Contractholder including the attached appendices, endorsements and riders, if any. This Contract constitutes the entire agreement between the parties.
- 1.02 **Contract Term** means the period during which this Contract is in effect. The Contract Term is shown in Appendix A.
- 1.03 **Plan** means the self-funded dental benefits program for Contractholder's employees or members and their eligible dependents as set forth in the appendices identified in Section 7 and incorporated into this Contract.

SECTION 2. DUTIES OF DELTA DENTAL

For the administrative charge set forth in Appendix A, Delta Dental will provide Contractholder with the following services for the administration and operation of the Plan:

- 2.01 **Claims Services**
Delta Dental shall provide the following claim services:
 - a) Evaluate and process claims presented for Benefits described in the employee dental benefit booklet or Contractholder's dental section of its summary plan description approved by Delta Dental and Contractholder. Claims shall be processed in accordance with Delta Dental's standard processing policies and the employee dental plan booklet as shown in Section 7 of this Contract or Contractholder's dental section of its summary plan description approved by Delta Dental. Services shall not be covered when received by a patient who is not an Enrollee at the time of treatment except for Single Procedures started while the patient was covered. Proof of loss must be furnished to Delta Dental within twelve (12) months after care is received. Failure to furnish proof of loss within this time period shall not invalidate nor reduce any claim if it shall be shown not to have been reasonably possible to furnish such proof of loss within such time and that such proof of loss was furnished as soon as reasonably possible. Proof of loss must be given no later than twelve (12) months from such time (unless the claimant was legally incapacitated). All written proof of loss must be given to Delta Dental within twelve (12) months of the termination of the Contract.
 - b) Predetermine the amount of Benefits payable under the Contract. Pre-Treatment Estimate will be valid for twelve (12) months from the date of the Pre-Treatment Estimate, or until an earlier occurrence of any one of the following events:
 - the date this Contract terminates;
 - the date the Enrollee's coverage ends; or
 - the date the Delta Dental Premier® Provider's (Premier Provider) or Delta Dental PPO Provider's (PPO Provider) agreement with Delta Dental ends.

- c) Investigate claims when appropriate. This includes, but is not limited to, referring claims to professional consultants. In addition, Delta Dental may obtain to the extent permitted by law, from any Provider or from hospitals in which a Provider's care is provided, such information and records relating to an Enrollee as Delta Dental may require to determine the claim, or Delta Dental may require that an Enrollee be examined by a dental consultant retained by Delta Dental in or near the Enrollee's community or residence. Such information and records will be kept confidential.
- d) Coordinate Benefit coverage when Benefits are being provided under two (2) or more group benefit plans or group health care programs as described in the Employee Benefit Booklet prepared by Delta Dental and approved by Contractholder or Contractholder's dental section of its summary plan description approved by Delta Dental.
- e) Delta Dental may suspend claims for Enrollees if it does not receive all amounts due, in the amount and manner required by Section 3 and Appendix A. Also, Delta Dental shall not pay claims for any person unless included on the monthly eligibility list when the dental services are performed. However, a child shall be covered if notice of birth and payment are received within 31 days after birth. All payments for services performed by a PPO or Premier Provider will be made directly to the Provider. All other payments will be payable to the Primary Enrollee, or to the estate, or to an alternate recipient as directed by court order, except that if the person is a minor or otherwise not competent to give a valid release may be payable to an individual legally supporting the person.
- f) Document claim payments to Providers for the purpose of reporting to the Internal Revenue Service.
- g) Furnish to any Provider or any Enrollee, on request, a Claim Form to make a claim for payment for services under the Plan.
- h) Notify the Primary Enrollee if any Benefits are denied for services submitted on a Claim Form. An Enrollee has 180 days after receiving a notice of denial to appeal it by writing to Delta Dental giving reason why the denial is disputed. The Enrollee may also ask Delta Dental to examine any records to aid an appeal. Delta Dental will review the denial in accordance with the Plan and render a decision. Should the Primary Enrollee further appeal Delta Dental's decision to Contractholder, Delta Dental shall assist Contractholder by providing information necessary to conduct its review.
- i) Provide Contractholder with an annual projection of paid claims.
- j) Provide Contractholder with standard claim activity reports.

2.02 **Employee Benefit Booklet**

Delta Dental shall be responsible for drafting an Employee Benefit Booklet which summarizes the Benefits and to whom Benefits are payable. Delta Dental is also responsible for providing this booklet to the Contractholder in an electronic format.

The booklet is non-assignable and the Benefits are non-assignable with the exception of payment of a claim to a PPO or Premier Provider or as required by law. If any amendment to this Contract shall materially affect any Benefits described in such booklet, Delta Dental will issue new booklets and amendments showing the change, subject to approval by the Contractholder.

2.03 **Identification Card**

Delta Dental will make a non-transferable identification card available for each Primary Enrollees to download from Delta Dental's website (deltadentalins.com).

2.04 **PPO Providers and Premier Providers**

Delta Dental will provide access to PPO Provider and Premier Provider network listings on the Internet. Delta Dental's website address is deltadentalins.com. Delta Dental shall provide Contractholder with an electronic version of the PPO Provider Directory.

- a) Contractholder understands and agrees that any agreement between Delta Dental and a Provider in a Delta Dental network is that of an independent contractor. Delta Dental shall not be responsible for any care rendered or not rendered by a Provider.
- b) Any information relating to PPO Providers and Premier Providers will be considered the sole property of Delta Dental and shall not be distributed to third parties or for any

purpose other than one which is reasonably necessary to carry out the terms of the Contract.

- c) Delta Dental does not guarantee the availability of any Provider nor is it required that dental services be provided by any specific Provider.

SECTION 3. DUTIES OF CONTRACTHOLDER

3.01 Eligibility

On or before the Effective Date, Contractholder will furnish to Delta Dental, in writing or in electronic media format agreed by Delta Dental and the Contractholder, a listing of eligible Primary Enrollees and Dependent Enrollees. The listing must show the names, Enrollee ID numbers, dates of hire, dates of birth, dependent status and location codes, if any. The eligibility list shall include all active employees unless the employee waives coverage in writing or the Eligible Employee enrolls in an alternate dental plan offered by Contractholder. The eligibility list may also include retired employees.

Thereafter, before the 10th of each month, Contractholder must furnish to Delta Dental in the format agreed to above, a listing indicating specific additions, changes or terminations made during the prior month.

Contractholder will notify Delta Dental in writing of any requests for administrative fee adjustments for Enrollees who should have been terminated in the event Delta Dental was not previously notified of the termination(s). Said termination date will be adjusted retroactively to the immediately preceding three (3) months plus the current month, provided:

- a) no claims were submitted to be processed on said Enrollee subsequent to the date of retroactive termination; and
 - b) The administrative fees were actually paid for the Enrollee subsequent to the date of retroactive termination.
- Delta Dental will notify the Contractholder in writing of the revised termination date and administrative fees will be adjusted accordingly.

Delta Dental will not pay any Benefits for an Enrollee or Dependent Enrollee if proof of eligibility is not submitted. Also, Delta Dental will not pay Benefits for an Enrollee if the administrative fees are not paid for the month in which dental services are rendered.

3.02 Audits

Contractholder shall permit Delta Dental to audit its records to determine whether the lists of Primary Enrollees are correct, to prevent fraudulent enrollment, and to verify the monthly payments match the administrative charges. Delta Dental shall give Contractholder written notice within a reasonable time before the audit date.

3.03 Printing and Distribution

Contractholder agrees to consult with Delta Dental to the extent reasonably practical concerning any material published or distributed relating to the Contract. No such material shall be published or distributed which is contrary to the terms of the Contract.

Contractholder will make the Employee Benefit Booklet drafted by Delta Dental available to each Primary Enrollee via its internal computer network or through its website. Contractholder will neither change nor revise the Employee Benefit Booklet without the prior written approval of Delta Dental.

3.04 Electronic Transfer of Funds

Delta Dental will produce a summary of administrative fees, claims paid and other payments due to providers for services rendered, which may include, but are not limited to, any value-based care, pay for performance or other incentive payments to participating providers, for which Contractholder is responsible. Delta Dental will transmit the summary by notification to the Contractholder.

Delta Dental will initiate the Automatic Clearing House Debit against the designated bank account to reimburse Delta Dental for the payments in the summary within three (3) business days of sending the notification of the summary.

Delta Dental may suspend claims payments at any time if the requested electronic funds transfer is not received within the allotted time frame.

SECTION 4. RELATIONSHIP OF THE PARTIES

- 4.01 Delta Dental and Contractholder are independent contractors for the purposes of this Contract.
- 4.02 Delta Dental shall be responsible for fulfilling its administrative duties and obligations as set forth in this Contract. Notwithstanding the foregoing, Delta Dental may, in its discretion, delegate one or more functions or tasks to one or more subsidiaries or affiliated companies (companies under common control with or by Delta Dental). Such delegation shall not in any way affect Delta Dental's continuing obligation to perform its stated duties and obligations under this Contract.
- 4.03 **Impossibility of Performance and Force Majeure**
Neither party shall be liable to the other or be deemed to be in breach of this Contract for any failure or delay in performance arising out of causes beyond its reasonable control. Such causes are limited to acts of God or of a public enemy, government action, outbreak of disease, explosion, fires, unusually severe weather, or other events(s) outside of the reasonable control of a party. Dates and times of performance shall be extended to the extent of the delays excused by this paragraph, provided that the party whose performance is affected notifies the other within a reasonable time of the existence and nature of the delay.

SECTION 5. GENERAL PROVISIONS

- 5.01 If during the Contract Term any new or increased tax, assessment, or fee is imposed on the amounts payable to, or by, Delta Dental under this Contract or any immediately preceding contract between Delta Dental and the Contractholder, the amount stated in Appendix A will be increased by the amount of any such new or increased tax, assessment, or fee. Delta Dental will therefore provide written notice of such circumstance to Contractholder, and the Contract shall thereby be modified on the date set forth in the notice.
- 5.02 The parties agree that all questions regarding interpretation or enforcement of the Contract shall be governed by the laws of the State of California, where the Contract was entered into and is to be performed. Any provision of the Contract which, on its Effective Date, is in conflict with statutes of said state is hereby amended to conform to minimum requirements of such statutes, except in circumstances where Federal law preempts State law vis a vis a Government Plan.
- 5.03 Delta Dental is a member of the Delta Dental of California Holding Company System (the "Enterprise") under common management and administration. It is expected that some services under this Contract (i.e., claims processing or call center support) may be performed by Enterprise companies which operate under strict confidentiality and/or business associate agreements and for which Delta Dental remains responsible.
- 5.04 Delta Dental will not be responsible or liable for any incorrect, obsolete or unreadable data or information supplied to Delta Dental including, but not limited to, eligibility and enrollment information.
- 5.05 All formal notices required under the Contract must be in writing and sent by email, first-class United States Mail, overnight delivery service or personal delivery. Notice by first class United States Mail shall be effective forty-eight (48) hours after mailing.
- Notice to Delta Dental shall be to:
- Delta Dental of California
560 Mission Street, Suite 1300
San Francisco, CA 94105
Website Address: deltadentalins.com
- Notice to Contractholder shall be to:
- Fresno City Employees Health & Welfare Trust
621 Santa Fe Ave
Fresno, CA 93721-1272
www.measurec.com
- 5.06 Both parties to the Contract agree to permit and encourage the professional relationship between Provider and patient to be maintained without interference.
- 5.07 The Contract may not be amended except where expressly stated herein or in writing by mutual consent of Delta Dental and Contractholder.

- 5.08 If any portion of the Contract or any amendment thereto shall be determined by a court or other competent authority to be illegal, void, or unenforceable, such determination shall not abrogate the Contract or any portion thereof other than such portion determined to be illegal, void, or unenforceable, and all other portions of the Contract shall remain in full force and effect.
- 5.09 Contractholder shall comply in all respects with applicable federal, state, and local laws and regulations relating to administrative simplification, security, and privacy of individually identifiable Enrollee information. The Contractholder agrees that this Contract may be amended as necessary to comply with federal regulations issued under the Health Insurance Portability and Accountability Act of 1996 or to comply with any other enacted administrative simplifications, security, or privacy laws or regulations.
- 5.10 Absent fraud, each statement made by the Contractholder or Enrollee is considered to be a representation and not a warranty.
- 5.11 The parties agree to maintain confidential information using the same degree of care (which will be no less than reasonable care) as each uses to protect its own confidential information of a similar nature and to use confidential information only for specified purposes. Confidential information includes any information which the owner deems confidential, whether marked as confidential or otherwise clearly identifiable as confidential and includes information not known by the public or by parties which are competitive with or otherwise in an industry, trade or business similar to the owner of the confidential information. Subject to the terms of the Business Associate Agreement agreed hereto, the recipient of confidential information will notify the owner of any unauthorized disclosure or breach of confidentiality as soon as possible after discovery and without unreasonable delay.

SECTION 6. TERMINATION AND RENEWAL

- 6.01 The Term of the Contract shall be for the period set forth in Appendix A.
Delta Dental will notify the Contractholder in writing within 120 days prior to the end of each Contract Term of the renewal information.
- 6.02 The Contract may be terminated only for the following:
- a) By Delta Dental, upon Contractholder's failure (i) to furnish Delta Dental with a list of all Primary Enrollees and Dependent Enrollees as required under Section 3.01; (ii) to permit the inspection of records as called for under Section 3.02; or (iii) to pay all amounts due, in the amount and manner required by Section 3 and Appendix A.
 - b) By either Contractholder or Delta Dental, upon expiration of a Contract Term, with no less than sixty (60) days' written notice.
 - c) By Delta Dental, in the event that the number of Primary Enrollees reported by Contractholder to Delta Dental shall be less than the minimum number of Primary Enrollees (shown in Appendix A) in each of three (3) consecutive months, but only upon written notice, given not more than 15 days after receipt of the list of Primary Enrollees which indicates that such grounds for termination exist, effective as of the last day of the month in which notice of termination is given.
 - d) By Delta Dental, in the event that the bank account for claim payment remains underfunded as a result of insufficient funds for more than fifteen (15) days. The Contract shall terminate as of the last day of the month after the fifteen (15) days under funding has occurred.
 - e) By Contractholder or Delta Dental, upon thirty (30) days' written notice from the terminating party, for reasons which include, but are not limited to, misuse of funds, fraud, lack of compliance with applicable rules, laws, regulations, and ordinances, and failure to perform in a timely manner any provision of this Contract.
 - f) Either party may terminate this contract at anytime without cause by giving at least a 30 day prior written notice.
- 6.03 In the event of termination by Delta Dental, all Benefits shall terminate and Delta Dental shall be released from all further obligations of the Contract other than administration of the claims run-

out period identified below, effective on the last day of the month for which written notice of termination is given. Contractholder shall remain liable for claims incurred, paid or otherwise discharged during the term of the Contract and during the twelve (12) month claims run-out period.

6.04 In the event of termination, Delta Dental shall be paid its compensation for services performed prior to the termination date, including all reimbursable expenses then due or incurred to the date of termination, within thirty (30) days following the date of termination. Delta Dental and the Contractholder understand and agree that at the expiration of this Contract or any extension thereto, the Contractholder shall not otherwise be further obligated to Delta Dental except for claims and other payments due to providers incurred, paid, or otherwise discharged during the term of the Contract and during the twelve (12) month claims run-out period.

SECTION 7. ATTACHMENTS

The following documents are attached to this Contract and made a part hereof:

Appendix A Administrative Contract Variables

Appendix B Employee Benefit Booklet

SECTION 8. SIGNATURES

The terms of this Contract are agreed to by:

DELTA DENTAL OF CALIFORNIA



FRESNO CITY EMPLOYEES HEALTH & WELFARE TRUST

Name of Officer: Michael G. Hankinson, Esq.

Name of Officer: _____

Title: EVP, Chief Legal Officer

Title: _____

Date: May 14, 2025

Date: _____

Name of Officer: _____

Title: _____

Date: _____

APPENDIX A

ADMINISTRATIVE CONTRACT VARIABLES

- A. Contract Number: 00273
- B. The administrative services performed by Delta Dental under this Contract shall be effective commencing on July 1, 2025.
- C. The Contract Term shall be for the period commencing on July 1, 2025 and concluding on June 30, 2027.
- D. The monthly administrative charge is based on a minimum of 4,499 covered employees and the composition of the Contractholder's group at the beginning of each Contract Term. Delta Dental may propose a choice of changes in administrative charges for a 15 percent change in composition during the Contract Term, such as an increase or decrease in enrollment, change in location, change in job classifications, change in mix of active versus retiree enrollment or other similar change in the Contractholder's group composition that lasts three (3) months in a row or longer and results in an increase in cost per person of the Contractholder's group. Within 31 days of receipt of the proposed change(s), Contractholder will select one of the choices by written notice to Delta Dental. If Contractholder fails to do so, Delta Dental may select one of the choices by written notice to Contractholder. This Contract will be modified for all dental services predetermined and incurred after notice.
- E. Delta Dental on a monthly basis will reconcile and bill for the administration of the Plan. Contractholder shall furnish to Delta Dental monthly payments of \$5.60 for each Primary Enrollee as compensation for administering the program. Any payment received after 90 days of the due date shall be subject to interest equal to one percentage point above the then current three month U.S. Treasury Bill rate.
- F. Delta Dental may change the amounts charge whenever the Contract is amended or whenever the Contractholder requests a change in Benefits or eligibility or when applicable under 5.01. Any change in amounts due shall not be effective during a Contract Term unless Contractholder and Delta Dental agree in writing (except as provided in D and E above or when applicable under 5.01).
- G. The minimum number of Primary Enrollees for termination purposes is less than 10 or a reduction of 30% or more over three (3) consecutive months.



Fresno City Employees
Health and Welfare Trust

Member Name:

JOHN SAMPLE

Member ID:

XEL SMP L0001

Group: 200

RxBIN: 610011

RxPCN: NMHC

RxGRP: 00494

TEST

In-Net Medical Deductible IND/FAM \$200/\$600
Out-of-Net Medical Deductible IND/FAM \$200/\$600
In-Net Medical Copay IND/FAM \$3,200/\$900
Out-of-Net Medical Copay IND/FAM \$3,200/\$900
In-Net Medical Out-of-Pocket IND/FAM N/A
Out-of-Net Medical Out-of-Pocket IND/FAM N/A



Fresno City Employees
Health and Welfare Trust

Member Name:

JOHN SAMPLE

Member ID:

XEL SMP L0001

Group: 200

RxBIN: 610011

RxPCN: NMHC

RxGRP: 00494

TEST

In-Net Medical Deductible IND/FAM \$200/\$600
Out-of-Net Medical Deductible IND/FAM \$200/\$600
In-Net Medical Copay IND/FAM \$3,200/\$900
Out-of-Net Medical Copay IND/FAM \$3,200/\$900
In-Net Medical Out-of-Pocket IND/FAM N/A
Out-of-Net Medical Out-of-Pocket IND/FAM N/A



74764HW71D61C7 100200-1002004GH-M7D7D7D
20260427T39 Sh: 0 Bin 2
J033 Env [1] C Sets 1 of 2

74764HW71D61C7 100200-1002004GH-M7D7D7D
20260427T39 Sh: 0 Bin 2
J033 Env [1] C Sets 1 of 2

20260427T39 Sh: 0 Bin 2
J033 Env [1] Csets 1 of 2

Participants: Use Blue Shield of California Preferred physicians and hospitals (the PPO Network) to receive maximum benefits.

Providers: File all claims with your local BCBS plan or, when Medicare is primary, file all Medicare claims with Medicare.

Blue Shield of California, an independent member of the Blue Shield Association, provides administrative services only and does not assume any financial risk or obligation with respect to claims.

Submit All Dental Claims to: **Submit All Vision Claims to:**
DOB: 06/23/2007 **Mail:** P.O. Box 6504
Sacramento, CA 95899 **Mail:** Mason, OH 45940
For Dental Eligibility/Benefits: **For Eligibility/Benefits:**
(800) 785-6005 (866) 7250513

healthline.healthcomp.com
800-541-6652

Prior Authorizations
Outpatient Physical, Occupational
and Speech Therapy
Mental Health/Substance Abuse
Chiropractic: SimpleMSK
Hearing Aids: EPIC
Prescription Health Customer Service
Optum Rx Customer Service
Locate a Provider Outside of CA
Teladoc

Send California Medical Claims to: **Submit Physical, Occupational,
and Speech Therapy and
Chiropractic Claims to:**
Mail: Blue Shield of California **Mail:** Simple MSK
P.O. Box 272640 **Mail:** Simple MSK
Chicago, IL 60697-2640 **Mail:** P.O. Box 25230
Fresno, CA 93729-5230



*Pharmacy Benefits Administrator
Contracts Separately with Group.



20260427T39 Sh: 0 Bin 2
J033 Env [1] Csets 1 of 2

Participants: Use Blue Shield of California Preferred physicians and hospitals (the PPO Network) to receive maximum benefits.

Providers: File all claims with your local BCBS plan or, when Medicare is primary, file all Medicare claims with Medicare.

Blue Shield of California, an independent member of the Blue Shield Association, provides administrative services only and does not assume any financial risk or obligation with respect to claims.

Submit All Dental Claims to: **Submit All Vision Claims to:**
DOB: 06/23/2007 **Mail:** P.O. Box 6504
Sacramento, CA 95899 **Mail:** Mason, OH 45940
For Dental Eligibility/Benefits: **For Eligibility/Benefits:**
(800) 785-6005 (866) 7250513

healthline.healthcomp.com
800-541-6652

Prior Authorizations
Outpatient Physical, Occupational
and Speech Therapy
Mental Health/Substance Abuse
Chiropractic: SimpleMSK
Hearing Aids: EPIC
Prescription Health Customer Service
Optum Rx Customer Service
Locate a Provider Outside of CA
Teladoc

Send California Medical Claims to: **Submit Physical, Occupational,
and Speech Therapy and
Chiropractic Claims to:**
Mail: Blue Shield of California **Mail:** Simple MSK
Chicago, IL 60697-2640 **Mail:** P.O. Box 25230
Fresno, CA 93729-5230



*Pharmacy Benefits Administrator
Contracts Separately with Group.



Subscriber: Fresno City Employees Health and Welfare Trust
Subscriber ID #: XEL
Group #: 200

In-Net Medical Deductible (ND/FAM)	\$200/\$500	For Pre-Certification call:
Out-of-Net Medical Deductible (ND/FAM)	\$200/\$500	Outpatient Physical, Occupational and Speech Therapy, Physicals (844) 854-4861
In-Net Medical Out-of-Pocket (ND/FAM)	\$3,200/\$6,400	Mental Health / Substance Abuse: Halcyon (888) 425-4800
Out-of-Net Medical Out-of-Pocket (ND/FAM)	N/A	All Other Medical: Blue Shield (800) 541-6652
Medical Insurance 50% (In Net) / 50% (Non-Net)		

For Eligibility and Benefits call:
Medical: (800) 442-7247
Dental: (800) 765-6003
Vision: (866) 723-0513

OPTUMRx: (800) 777-0074, PCN: NMHC Group#: 00494 Bin #: 61001
 For detailed benefit information, including deductible and out of pocket, please contact healthcomp.com

blue of california

Providers: Please file all medical claims with local Blue Cross/Blue Shield license. Blue Shield of California, an independent member of the Blue Shield Association, provides network services only and does not assume any financial risk or obligation with respect to claims.

www.blueshieldca.com/findaprovider

Locate a provider out of state:

Teladoc: (800) 835-2362

(800) 810-2583

Halcyon Behavioral: (888) 425-4800

BlueCard Eligibility: (800) 676-2583

Medical Claims to:

Blue Shield of California
 PO Box 272540
 Chico, CA 95927-2540

Physical, Occupational, Speech Therapy, and Chiropractic Claims to:

PhysiMetrics
 PO Box 25220
 Fresno, CA 93729-5220

Dental Claims to:

Delta Dental – Group# 0273
 PO Box 997330
 Sacramento, CA 95899-7330

Vision Claims to:

EyeMed
 PO Box 8504
 Mason, OH 45040A

Fresno City Employees Health and Welfare Trust Fund Consultant's Report Items – May 13, 2026

1. Blue Shield and Community Health Systems and Affiliates Contract Negotiations (verbal)
2. Physical, Occupational and Speech Therapy Out of State Access (verbal)
3. HMO Plan Option Discussion (verbal)
4. Request for Information for PPO Network Vendor
5. Stop Loss Renewal for July 1, 2026
6. Summary Plan Description (SPD) updates for July 1, 2026
7. Minimum Value Coverage (Low Plan)
8. Mental Health Parity – Non-Quantitative Treatment Limitation (NQTL) - 2026 Report
9. Pharmacy Performance Review – through Q1 2026

Memorandum

To: Board of Trustees
Fresno City Employees Health & Welfare Trust

From: David Broome, Consultant

Date: May 8, 2026

Re: Consultant’s Report for May 13, 2026 Board of Trustees Meeting -
PPO Network RFI update

As directed by the Board, we have released a request for information (RFI) to evaluate alternative medical PPO network vendors to potentially replace the Blue Shield contract. The RFI timelines are as follows:

Timeline	Date	Completed
Release RFI to Bidders	April 17, 2026	X
Intent to Bid Form Due	April 24, 2026	X
Bidder Questions Due	April 29, 2026	X
Response Due	May 12, 2026	
Effective Date	January 1, 2027	

The bidders included in the RFP were Aetna, Anthem Blue Cross, Blue Shield of California, CIGNA and United Healthcare all of which have comparable contracts, services, and administrative capabilities of the incumbent vendor. We received a response from CIGNA stating they would not be participating.

This item will be discussed at your May 13, 2026 meeting. If there are any questions before or after that meeting, please let me know.

DB:rs

cc: Tom Georgousses
Diana Cavazos
Michael Moss, Esq.
Andrew Desa
Martin Fornitaro

Memorandum

To: Board of Trustees
Fresno City Employees Health & Welfare Trust

From: David Broome, Consultant

Date: May 8, 2026

Re: Consultant's Report for May 13, 2026 Board of Trustees Meeting -
Stop Loss Renewal (initial)

We recently received the stop loss renewal from the stop loss broker, Stealth Partner Group, for the policy effective July 1, 2026. The incumbent, Ullico, initially proposed a 7.0% premium increase. Following some back and forth, Ullico is now offering a 5.9% premium increase. The negotiated renewal would result in an annual increase of \$157,800 in stop loss premiums, assuming no change to the deductible.

As a reminder, stop loss coverage undergoes competitive bidding each year. This year eight carriers were solicited, of which three carriers declined to quote citing the Plan's recent loss history, and four have yet to provide a firm proposal. Thus, due to the high-dollar claims experience the Plan has recently incurred, at this time no other carrier was able to provide a firm quote that is competitive with the incumbent Ullico.

The exhibit on the next page summarizes the initial results. The highlights are as follows:

- ▶ Ullico is quoting a 12/18 contract policy. This means that it will cover claims incurred during the 12-month policy period, with six months of claims run-out. Thus, a claim is covered as long as it is paid before the six months following the end of the policy period (i.e. December 31, 2027).
- ▶ An alternative deductible of \$600,000 was provided for consideration. The current deductible has been in effect since July 1, 2022 when it was increased from \$500,000 to \$550,000. The previous \$500,000 deductible was in place from 2016 to 2022.
- ▶ Ullico has removed the one laser in the existing stop loss policy.
- ▶ The current and proposed policy covers retirees and includes coverage for prescription drugs.

Specific Stop-Loss	Current	Renewal Option 1	Renewal Option 2
General Provisions	Ultico	Ultico	Ultico
Carrier Rating	A	A	A
Covered Benefits	Medical, Rx	Medical, Rx	Medical, Rx
Contract Basis	12/18	12/18	12/18
Specific (Individual) Coverage			
Specific Deductible	\$550,000	\$550,000	\$600,000
Policy Maximum Amount	Unlimited	Unlimited	Unlimited
Lifetime Maximum	Unlimited	Unlimited	Unlimited
Lasered Individuals	Yes - (1) ¹	No	No
Composite Rate Per Month	\$50.43	\$53.42	\$47.65
Estimated Annual Premium ²	\$2,661,500	\$2,819,300	\$2,514,800
Percent Change vs Current		5.9%	-5.5%
Maximum Cost Liability			
Annual Fixed Premium	\$2,661,500	\$2,819,300	\$2,514,800
Additional Possible Laser Liability	\$425,000	\$0	\$0
Max Cost Liability with Lasers	\$3,086,500	\$2,819,300	\$2,514,800
		-8.7%	-18.5%

¹ \$975,000 laser, contingent on a stem cell transplant.

² Based on 4,398 eligibles per month.

Increasing the deductible to \$600,000 would result in annual premium savings of approximately \$305,000 versus the status quo renewal, by taking on an additional \$50,000 in liability per high-cost claimant.

This item will be discussed at your May 13, 2026 meeting. If there are any questions before or after that meeting, please let us know.

DB

cc: Michael Moss, Esq.
 Tom Georgousses
 Diana Cavazos
 Andrew Desa
 Martin Fornataro

Memorandum

To: Board of Trustees
Fresno City Employees Health & Welfare Trust

From: David Broome, Consultant

Date: May 8, 2026

Re: Consultant's Report for May 13, 2026 Board of Trustees Meeting -
Summary Plan Description

The Summary Plan Description (SPD) is updated each fiscal year (July 1st – June 30th). Below is a summary of the updates that are expected to be reflected in the SPD effective July 1, 2026:

- ▶ Update all dates where appropriate (e.g., July 1, 2026)
- ▶ Other updates related to:
 - Changes to Employee Contributions
 - Inclusion of new Low Plan option and benefits
 - PT/OT/ST out-of-state network transition to Blue Card
 - New Employee Trustees

Our office is working with the other plan professionals to reflect the updates summarized above.

We recommend establishing a Trust subcommittee to review and approve the July 1, 2026 SPD.

This item will be discussed at your May 13, 2026 meeting. If there are any questions before or after that meeting, please let me know.

DB:rs

cc: Tom Georgousses
Diana Cavazos
Michael Moss, Esq.
Andrew Desa
Martin Fornitaro

Memorandum

To: Board of Trustees
Fresno City Employees Health & Welfare Trust

From: David Broome, Consultant

Date: May 8, 2026

Re: Consultant’s Report for March 25, 2026 Board of Trustees Meeting -
Minimum Value for Low Plan (formerly non-contributing plan)

The Patient Protection and Affordable Care Act (PPACA) require that “large employers” (defined as having at least 50 full-time equivalent employees) give full-time employees the opportunity to enroll in an employer-sponsored group health plan that is both affordable and provides a minimum value of at least 60% of total allowed costs. In determining whether Fresno City Employees Health and Welfare Trust satisfy the “60% minimum value” portion of the requirement, we tested the Fresno Low 70 plan using these inputs:

MINIMUM VALUE: 67%

Low Plan (PPO)	Medical	Drugs
Deductible (\$)	\$2,000	\$0.00
Coinsurance (% , Plan's Cost Share)	52%	70%
OOP Maximum (Separate) (\$)	\$6,000	\$3,400
Emergency Room Services	\$200	n/a
All Inpatient Hospital Services (inc. MHSA)	\$250	n/a

The plan value is based on our analysis of the proposed plan benefit summary (effective July 1, 2026) and results from the minimum value calculator (as promulgated by the Department of Health and Human Services). We feel the above result is an accurate representation of the value of the Plan. By virtue of the fact that all other Plans offered by the Trust provide richer benefits than the tested Plan, we are able to conclude that all Trust Plans will exceed the above value.

We will be discussing this matter at the upcoming Board of Trustees meeting scheduled for May 13, 2026. If you have any questions, please let us know.

cc: Tom Georgousses
Diana Cavazos
Mike Moss, Esq.
Andrew Desa

Memorandum

To: Board of Trustees
Fresno City Employees Health & Welfare Trust

From: David Broome, Consultant

Date: May 8, 2026

Re: Consultant's Report for May 13, 2026 Board of Trustees Meeting -
Mental Health Parity – Non-Quantitative Treatment Limitation (NQTL) Report

At the request of the Board, MedExpert was engaged to conduct a comprehensive review of the Trust's group health plan for compliance with the federal Mental Health Parity and Addiction Equity Act (MHPAEA), including the Nonquantitative Treatment Limitations (NQTL) comparative analysis requirements. Compliance with MHPAEA is enforced jointly by the U.S. Departments of Labor, Health and Human Services, and the Treasury, which may require production of NQTL comparative analyses and claims data and may pursue corrective action or penalties for noncompliance. In the event of a DOL audit, MedExpert confirmed they will manage the process and prepare all necessary responses to the Departments, ensuring alignment with MHPAEA requirements.

The 2026 NQTL Report, which assesses whether the processes, strategies, standards, and other factors used to apply benefit cost share and treatment limitations for mental health and substance use disorder (MH/SUD) benefits are comparable to, and no more restrictive than, those applied to medical/surgical (M/S) benefits, as required under MHPAEA.

MedExpert has determined that the MHPAEA Nonquantitative Treatment Limitation (NQTL) **requirements have been satisfied** for the Fresno City Employees Health and Welfare Trust Indemnity Plans.

This item will be discussed at your May 13, 2026 meeting. If there are any questions before or after that meeting, please let us know.

DB:rs
Enclosure

cc: Tom Georgouses
Diana Cavazos
Michael Moss, Esq.
Andrew Desa
Martin Fornataro

APPENDIX

Executive Summary Pharmacy Performance Overview April 2025 – March 2026

—

Fresno City Employees' Health & Welfare Trust

May 13, 2026



Executive Summary

Pharmacy Performance Overview

April 2025 - March 2026 Pharmacy Net of Rebate* Plan Paid was \$19,165,275 which was up from \$14,905,871 in April 2024 – March 2025

- April 2025 - March 2026 Net of Rebate Plan Paid PMPM was \$134.08
- April 2024 - March 2025 Net of Rebate Plan Paid PMPM was \$104.70

Pharmacy Plan Paid Drivers

- Drug Mix:** Members are using different medications
 - Spend on weight loss GLP-1 medications sharply increased to ~\$5M for April 2025 - March 2026; Zepbound was ~\$3.3M from April 2025 – March 2026, up from \$885K in April 2024 - March 2025.
 - Average Generic Dispensing Rate decreased to 83.4%; gradual decline July-October, then increased through 1q2026.
 - Specialty medication accounts for 44.0% of all pharmacy spend, driven by 1.7% of all prescriptions
- Utilization**
 - >65% of members accessed the pharmacy benefit from April 2025 - March 2026
 - Average member filled 7.6 prescriptions per year, which was similar to April 2024 - March 2025
 - 90-day prescription supplies are 35% (EGWP) and 56% (Commercial)

* 4q2025 and 1q2026 rebates are estimates

Key Performance Indicators

	April 2024 - March 2025	April 2025 - March 2026	Trend
Eligible members	11,864	11,912	0.4%
Utilizing members	3,043	3,167	4.1%
Utilizing %	25.7%	26.6%	3.7%
Prescription Count	87,953	90,373	2.8%
Prescription Count PMPY	7.4	7.6	2.3%
Plan Paid	\$22,134,491	\$27,718,332	25.2%
Plan Paid PMPM	\$155.47	\$193.92	24.7%
Non-Specialty Plan Paid PMPM	\$83.34	\$108.67	30.4%
Specialty Plan Paid PMPM	\$72.13	\$85.25	18.2%
Rebates*	(\$7,228,931)	(\$8,553,445)	18.3%
Net Plan Paid	\$14,905,871	\$19,165,275	28.6%
Net Plan Paid PMPM	\$104.70	\$134.08	28.1%
Net Plan Paid / Rx	\$169.48	\$212.07	25.1%
Generic Dispensing (%)	84.9%	83.4%	-1.8%
Member Copay / Rx	\$25.26	\$24.36	-3.6%
Member Cost Share %	14.9%	11.5%	-22.9%
Specialty Plan Paid (\$)	\$10,269,604	\$12,184,899	18.7%
Specialty Plan Paid (%)	46.4%	44.0%	-5.3%

Key Observations

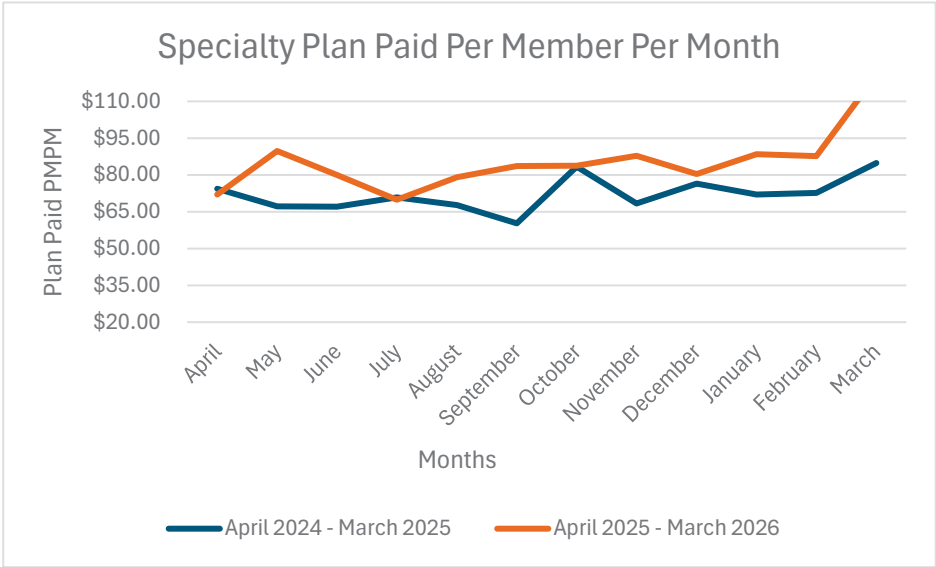
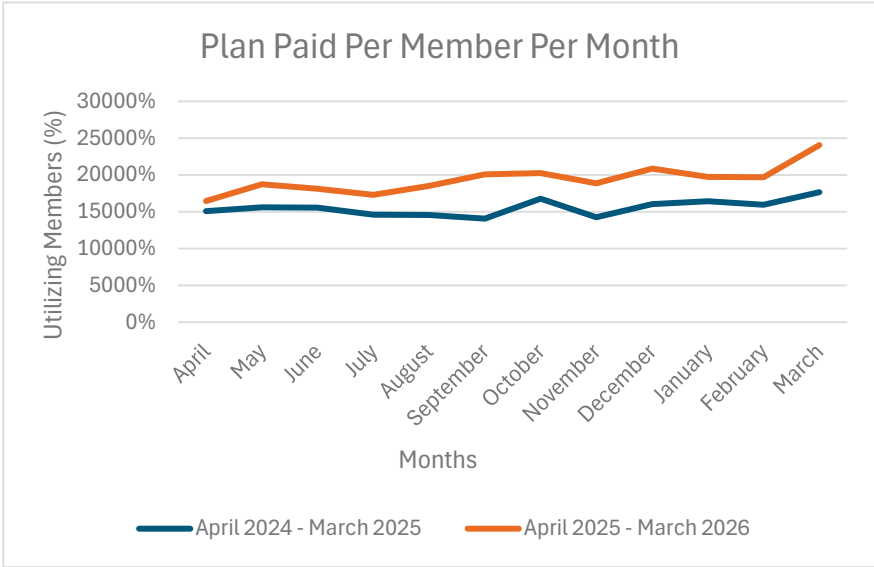
- Utilization has slightly increased
 - More members and prescriptions
- Plan Paid PMPM trend is 25.2%, which is above the norm for Public Sector clients
- GLP1 (Weight Loss and Diabetes) and Specialty medication use represent ~80% of plan costs
- Generic Dispensing Rate (%) declined by ~1.8% mainly due to higher GLP1 use.
 - The average generic medication is 10x less expensive than a brand medication
- Specialty costs increased \$1.9M

*4q2025 and 1q2026 rebates are estimates

Pharmacy Cost Drivers

Plan Paid PMPM tracking

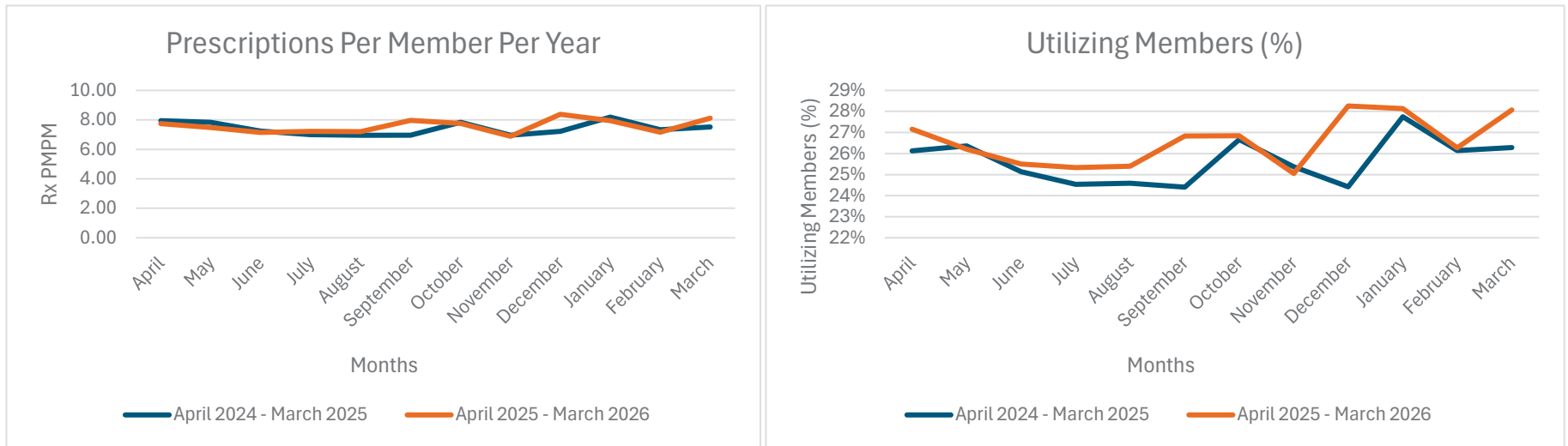
- On average, plan costs have been higher between April 2025 - March 2026 vs April 2024 - March 2025



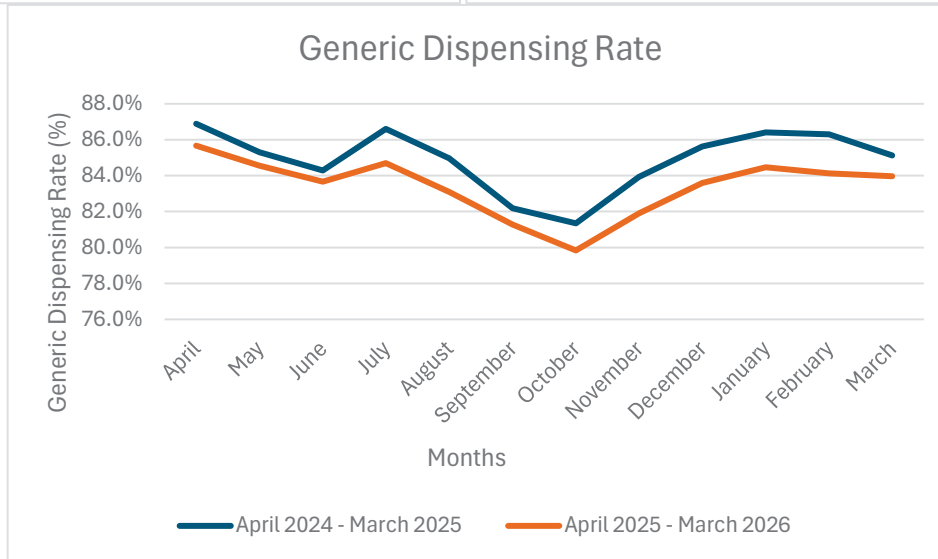
Pharmacy Cost Drivers

Utilization and Drug Mix

Average utilizing members has slightly increased when comparing the two time periods



End of year rise in generic medications use decreases plan costs



Disease States Sorted by Plan Paid

Top 5 Disease States represent ~\$17.9M in Plan Costs

	April 2025 - March 2026		
Condition	Member Count	Plan Paid	Plan Paid PMPM
Inflammatory Conditions	181	\$ 6,146,225	\$ 42.94
Weight Loss	742	\$ 4,960,368	\$ 34.65
Diabetes	783	\$ 4,367,979	\$ 30.52
Asthma / COPD	1,612	\$ 1,305,073	\$ 9.12
Cholesterol Lowering Agents	1,471	\$ 1,136,145	\$ 7.94
Oncology	216	\$ 989,408	\$ 6.91
Cystic Fibrosis	2	\$ 544,978	\$ 3.81
HIV	34	\$ 525,344	\$ 3.67
Multiple Sclerosis	5	\$ 506,584	\$ 3.54
Seizure Disorders	574	\$ 409,264	\$ 2.86
Total	5620	\$ 20,891,370	\$ 145.95

Key Observations

- Inflammatory plan costs increased by \$602K to \$6.1M
 - Primarily driven by higher prescription counts and utilizers
- Weight Loss spend increased by ~\$2.6M to ~\$5M
 - Primarily driven by higher Zepbound utilization (members and prescription counts)
- Diabetes spend increased ~\$870K to \$4.4M
 - Primarily driven by higher GLP1 utilization (members and prescription counts)
- Oncology costs decreased ~\$506K
- Juxtapid (lomitapide) is ~\$660K of cholesterol spend (one member)

Non-Specialty Utilization Top 10 Drugs by Plan Paid

Seven (7) of the top 10 drugs treat diabetes or weight loss

		April 2025 - March 2026					April 2024 - March 2025						
Drug	Condition	Member Count	Rx Count	Plan Paid	Plan Paid PMPM	Plan Paid / Rx	Member Count	Rx Count	Plan Paid	Plan Paid PMPM	Plan Paid / Rx		
Zepbound	Weight Loss	480	2651	\$3,251,739	\$22.75	\$1,227	194	799	\$884,748	\$6.21	\$1,107		
Wegovy	Weight Loss	245	1080	\$1,709,449	\$11.96	\$1,583	240	1,121	\$1,507,175	\$10.59	\$1,344		
Mounjaro	Diabetes	194	967	\$1,447,895	\$10.13	\$1,497	123	594	\$754,230	\$5.30	\$1,270		
Ozempic	Diabetes	213	909	\$1,439,912	\$10.07	\$1,584	215	869	\$1,195,908	\$8.40	\$1,376		
Jardiance	Diabetes	157	416	\$462,438	\$3.24	\$1,112	150	397	\$442,894	\$3.11	\$1,116		
Farxiga	Diabetes	89	337	\$313,761	\$2.20	\$931	83	281	\$265,224	\$1.86	\$944		
Biktarvy	Antiviral	9	45	\$306,951	\$2.15	\$6,821	10	41	\$278,565	\$1.96	\$6,794		
Repatha	PCSK9 inhibitor	80	266	\$279,520	\$1.96	\$1,051	43	188	\$134,092	\$0.94	\$713		
Eliquis	Blood Thinner	84	307	\$256,412	\$1.79	\$835	74	282	\$220,073	\$1.55	\$780		
Dexcom	Diabetes	95	355	\$250,414	\$1.75	\$705	76	209	\$142,988	\$1.00	\$684		
			7,333	\$9,718,491	\$67.99	\$1,325				4,781	\$5,825,897	\$40.92	\$1,219

Jardiance has cardiovascular protection and should stay high.

All belong to GLP1 medication class. Zepbound and Mounjaro utilization continues to increase. Both are made by Eli Lilly.

Specialty Utilization

Top 10 Drugs by Plan Paid

Six(6) of the top 10 drugs are biologic medications

		April 2025 - March 2026					January - December 2024						
Drug	Condition	Member Count	Rx Count	Plan Paid	Plan Paid / PMPM	Plan Paid / Rx	Member Count	Rx Count	Plan Paid	Plan Paid / PMPM	Plan Paid / Rx		
Skyrizi	Inflammation	13	41	\$898,749	\$6.29	\$21,921	12	38	\$798,417	\$5.61	\$21,011		
Wezlana	Inflammation	6	34	\$874,434	\$6.12	\$25,719	0	0	\$0	\$0	\$0		
Dupixent	Inflammation/ Asthma	31	220	\$813,317	\$5.69	\$3,697	30	165	\$624,073	\$4.38	\$3,782		
Juxtapid	Hypercholest erolemia	1	11	\$659,755	\$4.62	\$59,978	1	3	\$178,682	\$1.26	\$59,561		
Tremfya	Inflammation	14	44	\$604,798	\$4.23	\$13,745	7	21	\$266,875	\$1.87	\$12,708		
Amjevita	Inflammation	13	116	\$559,572	\$3.91	\$4,824	0	0	\$0	\$0	\$0		
Trikafta	Cystic- fibrosis	2	19	\$523,217	\$3.66	\$27,538	1	13	\$336,359	\$2.36	\$25,874		
Imaavy	Myasthenia Gravis	1	9	\$403,314	\$2.82	\$44,813	0	0	\$0	\$0	\$0		
Rinvoq	Inflammation	12	59	\$381,773	\$2.67	\$6,471	8	45	\$337,945	\$2.37	\$7,510		
Kesimpta	Multiple Sclerosis	4	41	\$369,956	\$2.59	\$9,023	4	40	\$356,450	\$2.50	\$8,911		
			594	\$6,088,886	\$42.60	\$10,251				325	\$2,898,800	\$20.36	\$8,919

Wezlana is the biosimilar to Stelara.

Humira is no longer in the top 10, as biosimilar options for Humira have reduced claim costs in 2025 costs.

New claim in 2025. Juxtapid treats homozygous familial hypercholesterolemia (HoFH), a rare condition. Not used for general high cholesterol.

Next steps

Based on current plan performance, Rael & Letson recommends Fresno City Employees Health & Welfare Trust consider the following:

- ▶ Continue to monitor plan paid performance for increases in select medical conditions / drug categories
- ▶ Determine whether there are additional OptumRx clinical management programs to roll out to drive higher quality of care without service and access decrements
 - Programs to more aggressively address rising diabetes and weight management costs
- ▶ Monitor whether OptumRx is meeting the Fund's service, financial, and quality of care objectives



Thank You