

## San Francisco Health Service System

## **Health Service Board**

### **Rates & Benefits**

Review and Approve Health Net CanopyCare Non-Medicare Medical/Rx Flex-Funded HMO Plan 2026 Rates and Contributions

Presented by Mike Clarke, Lead Actuary, Aon

May 8, 2025

## **Agenda**

- Rate Setting Methodology Preface
- Health Net CanopyCare 2026 HMO Plan Rating Renewal Summary
- 2026 Monthly Rate Cards for Health Net CanopyCare HMO Plan
  - Active Employees (93/93/83 and 100/96/83 contribution strategies)
  - Non-Medicare Retirees (per City Charter employer contribution guidance)
- Recommendation for HSB Action
- Appendix Additional Information
  - Rate Card Footnotes
  - 2025 Health Net CanopyCare Monthly Rate Cards
  - Glossary of Terms



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# Rate Setting Methodology Preface



## **Health Plan Funding**

## Method Comparison by SFHSS Plan

Funding Method	Self-Funded	Flex-Funded	Fully Insured
Funding Method Description	Claim dollars based on services delivered to members are paid by the Trust, along with plan administrative fees to manage the plan (process claims, provide call center for members, etc.)	Insurance approach where most claim dollars based on services delivered to members are paid by the Trust, but with fixed costs for certain healthcare services ("capitation") as well as plan administrative fees and large claim reinsurance mechanism ("pooling") at \$1 million per participant annually	Health plan sets fixed dollar plan premiums to cover expected claim costs for healthcare services by members, as well as plan administrative fee costs
Who Calculates the Recommended SFHSS Plan Rates That HSB Approves?	Aon actuary using Aon- determined cost trend assumptions and health plan- determined administrative fees (and required legislative fees)	Aon actuary using plan-determined cost trend assumptions that are validated by Aon actuary, and health plan-determined administrative/large claim pooling fees (and required legislative fees)	Plan's actuary using plan-determined cost trend assumptions which are scrutinized by Aon actuary, and health plan-determined administrative fees/large claim pooling adjustments (and required legislative fees)
SFHSS Plans by Funding Method	Non-Medicare PPO     Delta Dental Active     Employee PPO	Blue Shield of CA Access+ HMO     Blue Shield of CA Trio HMO     Health Net CanopyCare HMO	<ul> <li>All Kaiser HMO plans</li> <li>BSC Medicare Advantage PPO</li> <li>Delta Dental Retiree PPO</li> <li>DeltaCare Dental HMO</li> <li>UHC Dental HMO</li> <li>VSP Vision</li> </ul>
HSB Rate Stabilization Policy Applies?	Yes	Yes	No



## **Health Plan Rate Setting Process for Next Plan Year**

#### **Determining Needed Plan Rate Changes For Next Year — Five Step Process**

Completion of these five steps below produces an aggregate cost projection based on current plan enrollment for the next plan year (right now, the 2026 plan year)



Next, the Aon and plan actuaries compare these next-year cost projections to the total current-year dollars when multiplying rates times enrollment — and that leads to the needed percentage change in rates from this year to next year:





## Non-Medicare Medical Plan 2026 Rate Renewal Summary

Below is a summary of total rate cost increase recommendations that are being presented today for San Francisco Health Service System (SFHSS) Non-Medicare health plans — with each rating action calculated by individual plan based on the process reviewed on the prior page.

Non-Medicare Health Plan	Before Rate Stabilization Adjustment	After Rate Stabilization Adjustment		
BSC Access+ HMO <sup>1</sup>	8.4%	8.7%		
BSC Trio HMO <sup>1</sup>	8.9%	9.2%		
Health Net CanopyCare HMO¹	1.7%	-0.3%		
Kaiser HMO	TBD	Does not apply (insured plan)		
Non-Medicare PPO <sup>1,2</sup>	2.6%	0.5%		

<sup>2</sup> Total rate increase for active employees with Non-Medicare PPO Choice Not Available pricing will follow the total rate increase for the BSC Access+ HMO plan.



<sup>1</sup> Rating action incorporates proposed change to GLP-1 coverage as described in rating recommendation documents for BSC plans, as well as mandated infertility benefit levels (SB729) for HMO plans that are recommended to apply to PPO plan also.

## Non-Medicare Medical Plan 2026 Proposed Total Rates

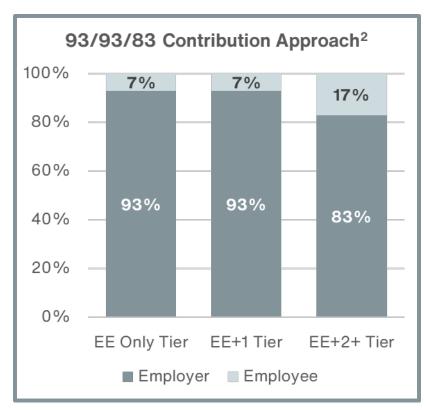
Recommended 2026 **monthly** total cost rates for each SFHSS non-Medicare health plan are shown below (all rate card elements included):

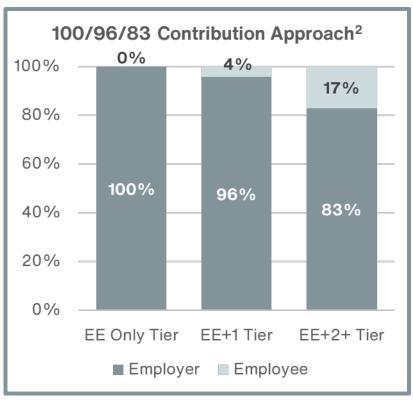
		Active Employees			Non-Medicare Retirees			
SFHSS Health Plan	Plan Year	EE Only	EE + 1	EE + 2+	RET Only	RET + 1	RET + 2+	
Kaiser HMO	PY 2025	\$881.38	\$1,758.78	\$2,487.00	\$1,770.88	\$2,648.28	\$3,376.50	
	PY 2026	TBD	TBD	TBD	TBD	TBD	TBD	
	% Difference	TBD	TBD	TBD	TBD	TBD	TBD	
	PY 2025	\$1,163.91	\$2,323.84	\$3,286.60	\$2,688.54	\$3,894.74	\$4,857.48	
BSC Access+ HMO	PY 2026	\$1,265.37	\$2,524.76	\$3,570.07	\$2,921.19	\$4,230.84	\$5,276.12	
	% Difference	8.7%	8.6%	8.6%	8.7%	8.6%	8.6%	
	PY 2025	\$989.72	\$1,975.47	\$2,793.63	\$2,284.58	\$3,309.61	\$4,127.75	
BSC Trio HMO	PY 2026	\$1,081.36	\$2,156.74	\$3,049.31	\$2,494.45	\$3,612.72	\$4,505.25	
	% Difference	9.3%	9.2%	9.2%	9.2%	9.2%	9.1%	
1111. 11.	PY 2025	\$791.41	\$1,578.85	\$2,232.40	\$1,824.65	\$2,643.43	\$3,296.97	
Health Net CanopyCare HMO	PY 2026	\$789.90	\$1,573.83	\$2,224.46	\$1,818.52	\$2,633.64	\$3,284.27	
canopy care rivie	% Difference	-0.2%	-0.3%	-0.4%	-0.3%	-0.4%	-0.4%	
	PY 2025	\$1,478.50	\$2,867.91	\$4,052.53	\$1,990.63	\$2,887.46	\$3,603.48	
Non-Medicare PPO	PY 2026	\$1,487.03	\$2,882.83	\$4,072.88	\$2,001.54	\$2,902.47	\$3,621.75	
	% Difference	0.6%	0.5%	0.5%	0.5%	0.5%	0.5%	
Non Madiagra DDC	PY 2025	\$1,163.91	\$2,323.84	\$3,286.60	\$1,990.63	\$2,887.46	\$3,603.48	
Non-Medicare PPO (Choice Not Available)	PY 2026	\$1,265.37	\$2,524.76	\$3,570.07	\$2,001.54	\$2,902.47	\$3,621.75	
(S.15155 11517 (Valiable)	% Difference	8.7%	8.6%	8.6%	0.5%	0.5%	0.5%	



## Active Employees (CCSF<sup>1</sup>)

### Segmenting Total Cost Rates into Employer and Member Contributions





- City and County of San Francisco (CCSF) MOU contribution sharing approaches shown above; other employers in SFHSS plans have their employer-specific contribution sharing methodologies for active employees.
- For the highest cost plan (Non-Medicare PPO Plan), based on MOU the employer contribution dollar amounts are set to equal the employer contribution dollar amounts for the second highest-cost plan (which is BSC Access+ HMO), except for the Employee Only tier in the 100/96/83 contribution approach where the member pays no contribution for any plan.

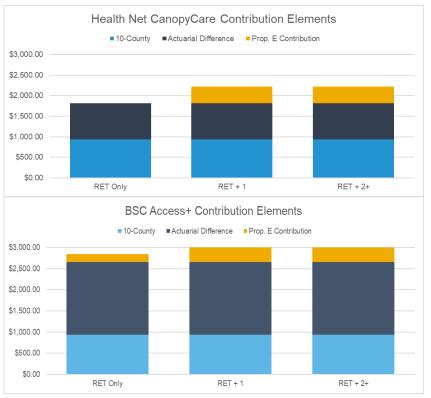


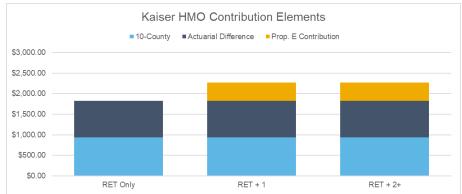
## Non-Medicare Retirees (based on City Charter)

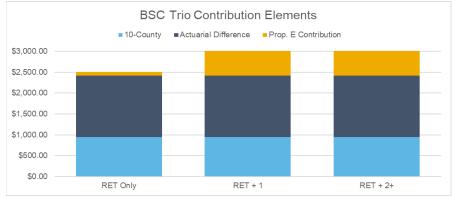
### Segmenting Total Cost Rates into Employer and Member Contributions

Non-Medicare Retirees — 2025 Employer Contribution Components (HMO Plans)

- Light Blue 10-County Amount (same amount for all plans)
- Dark Blue "Actuarial Difference" (plan-specific, same amount for all tiers)
- Gold Retiree Prop. E Contribution (plan-specific, varies for Single tier vs. Family tiers)









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## Recommendation for HSB Action

Health Net CanopyCare HMO Plan



Recommendation

Staff recommends that the Health Service Board (HSB) approve the 2026 Health Net CanopyCare HMO plan rate cards as presented in this material, including the adoption of SB729-required changes to the infertility benefit.

The recommendation reflects an overall **0.3% decrease** in Health Net CanopyCare HMO Plan total medical and prescription drug cost rates from 2025 to 2026. This includes an increase to current infertility benefits provided under this plan as mandated by California Senate Bill 729 signed into law on September 29, 2024 (https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill\_id=202320240SB729).



# 3

Health Net CanopyCare 2026 HMO Plan Rating — Renewal Summary



#### Renewal Summary

- Rates in 2026 for Health Net CanopyCare will likely be less than rates for all other offered active employee and non-Medicare retiree medical/Rx plans. This can be confirmed with the presentation of the Kaiser HMO renewal at the June 12, 2025, HSB meeting.
- Commentary regarding the Health Net CanopyCare 2026 rating proposal follows in this document.
- Active employee rate cards in this presentation are shown for the two most common employer contribution strategies as of the start of this year for City and County of San Francisco (93/93/83 and 100/96/83).
  - There are multiple employer contribution strategies for active employees across the employers participating in the San Francisco Health Service System (SFHSS).
- Non-Medicare retiree rate cards in this presentation are shown for non-Medicare retirees who earn
  the full City contribution levels based on dates of hire and length of service with employer
  contributions determined based on formulas outlined in the City Charter.



#### Renewal Summary

- Health Net CanopyCare provided financial information in their Non-Medicare Health Plan renewal submission that is used to determine 2026 monthly total cost rates within the recommended rate cards later in this material.
- The Health Net CanopyCare HMO plan design major features mirror the designs for the BSC HMO plans.
- The 2026 Health Net CanopyCare HMO plan rate cards include the following cost components:
  - Projected 2026 medical/pharmacy (net of rebates) claim costs;
  - Projected 2026 capitation charges which apply for most medical services;
  - Health Net CanopyCare 2026 fees (including administrative fee, CA MCO tax, and ACA PCORI fees);
  - VSP Basic Plan vision premiums which remain at 2025 levels;
  - The SFHSS Healthcare Sustainability Fund charge of \$6.00 per employee/retiree per month (PEPM), which is an increase of \$2.00 from the 2025 fee; and
  - Rate stabilization buy-down of \$710,000 as approved by the HSB at the April 10, 2025, HSB meeting.



Network and Sustainability Commentary

- Presently, Health Net is not taking on new business into the Health Net CanopyCare HMO product.
   Still, both Health Net and Canopy Health continue their commitment to providing the plan ongoing to SFHSS as a client that meets their strategic alignment in the community.
- The Health Net CanopyCare plan does not have any anticipated changes to provider network into 2026 at this time. Canopy Health will continue to provide notice of any material changes to the network (i.e., the addition or termination of any Independent Physician Association [IPA] or medical group, hospital, free-standing surgical center, home health agency or skilled nursing facility that is directly contracted with Canopy Health) in advance and according to regulatory requirements to ensure appropriate member access to services and facilitate the transfer of care should that ever be needed.



#### Renewal Summary

#### Health Plan Costs Forecast—Per Covered Life Per Month (PMPM) Basis

 Though prescription drug costs and fee-for-service medical claims (primarily behavioral health) are trending at high rates of increase, a reduction in the projected capitation expense from 2024 to 2025 is leading to a no-change total medical/Rx cost forecast.

• Then, an increase in the stabilization buy-down from 2025 to 2026 creates the overall

0.3% total cost rate decrease recommendation.

	2025 PMPM	2026 PMPM	2026 vs 2025
Capitation (professional/institutional/chiropractic)	\$547.23	\$548.90	0.3%
Fee-for-Service Claims	\$80.41	\$57.06	-29.0%
Pharmacy Claims	\$104.59	\$137.13	31.1%
Medical Administrative Fees	\$42.15	\$44.17	4.8%
Pharmacy Administrative Fees	\$3.86	\$3.86	0.0%
Total Projected Plan Cost (Before Stabilization Buy- Down)	\$778.24	\$791.12	1.7%



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# 2026 Monthly Rate Cards for Health Net CanopyCare HMO Plan



## 2026 Health Net CanopyCare HMO Monthly Rate Cards

- Health Net CanopyCare plan 2026 rate cards are presented on the following pages for active employees and non-Medicare retirees — including two employer contribution models for active employees (93/93/83 and 100/96/83).
- The mathematical relationships of rates across each dependent coverage tier and across active employees and non-Medicare retirees are set to be the same for the Health Net CanopyCare HMO plan as exist for the BSC HMO plans.



Monthly Renewal Premiums/Contributions — 2026 versus 2025

Non-Medicare Retirees and 93/93/83 Contribution Strategy for Actives

		A	ctive Employe	es	Non-Medicare Retirees			
PY = P	lan Year	EE	EE+1	EE+2+	RET	RET+1	RET+2+	
Monthly	PY 2025	\$55.40	\$110.52	\$379.51	\$0.00	\$409.39	\$1,062.93	
Employee/	PY 2026	\$55.29	\$110.17	\$378.16	\$0.00	\$407.56	\$1,058.19	
Retiree Contributions	\$ Difference	(\$0.11)	(\$0.35)	(\$1.35)	\$0.00	(\$1.83)	(\$4.74)	
Contributions	% Difference	-0.2%	-0.3%	-0.4%		-0.4%	-0.4%	
	PY 2025	\$736.01	\$1,468.33	\$1,852.89	\$1,824.65	\$2,234.04	\$2,234.04	
Monthly Employer	PY 2026	\$734.61	\$1,463.66	\$1,846.30	\$1,818.52	\$2,226.08	\$2,226.08	
Contributions	\$ Difference	(\$1.40)	(\$4.67)	(\$6.59)	(\$6.13)	(\$7.96)	(\$7.96)	
	% Difference	-0.2%	-0.3%	-0.4%	-0.3%	-0.4%	-0.4%	
	PY 2025	\$791.41	\$1,578.85	\$2,232.40	\$1,824.65	\$2,643.43	\$3,296.97	
Monthly Total Rate	PY 2026	\$789.90	\$1,573.83	\$2,224.46	\$1,818.52	\$2,633.64	\$3,284.27	
	\$ Difference	(\$1.51)	(\$5.02)	(\$7.94)	(\$6.13)	(\$9.79)	(\$12.70)	
	% Difference	-0.2%	-0.3%	-0.4%	-0.3%	-0.4%	-0.4%	



Monthly Renewal Premiums/Contributions — 2026 versus 2025

Non-Medicare Retirees and 100/96/83 Contribution Strategy for Actives

		А	ctive Employe	es	Non-Medicare Retirees			
PY = PI	lan Year	EE	EE+1	EE+2+	RET	RET+1	RET+2+	
Monthly	PY 2025	\$0.00	\$63.15	\$379.51	\$0.00	\$409.39	\$1,062.93	
Employee/	PY 2026	\$0.00	\$62.95	\$378.16	\$0.00	\$407.56	\$1,058.19	
Retiree Contributions	\$ Difference	\$0.00	(\$0.20)	(\$1.35)	\$0.00	(\$1.83)	(\$4.74)	
Contributions	% Difference		-0.3%	-0.4%		-0.4%	-0.4%	
	PY 2025	\$791.41	\$1,515.70	\$1,852.89	\$1,824.65	\$2,234.04	\$2,234.04	
Monthly	PY 2026	\$789.90	\$1,510.88	\$1,846.30	\$1,818.52	\$2,226.08	\$2,226.08	
Employer Contributions	\$ Difference	(\$1.51)	(\$4.82)	(\$6.59)	(\$6.13)	(\$7.96)	(\$7.96)	
	% Difference	-0.2%	-0.3%	-0.4%	-0.3%	-0.4%	-0.4%	
	PY 2025	\$791.41	\$1,578.85	\$2,232.40	\$1,824.65	\$2,643.43	\$3,296.97	
Monthly	PY 2026	\$789.90	\$1,573.83	\$2,224.46	\$1,818.52	\$2,633.64	\$3,284.27	
Total Rate	\$ Difference	(\$1.51)	(\$5.02)	(\$7.94)	(\$6.13)	(\$9.79)	(\$12.70)	
	% Difference	-0.2%	-0.3%	-0.4%	-0.3%	-0.4%	-0.4%	



Proposed Monthly 2026 Rate Card

	Ad	Active Employees			Non-Medicare Retirees		
93/93/83 Contribution (Active Employees)	Employee Only	Employee Plus One Dependent	Employee and Family	Retiree without Medicare	Retiree and Spouse w/o Medicare	Retiree and Family	
Medical	\$818.34	\$1,636.68	\$2,315.90	\$1,897.85	\$2,748.93	\$3,428.15	
Vision	\$4.15	\$8.32	\$11.76	\$4.15	\$8.32	\$11.76	
Expense <sup>1</sup>	\$6.00	\$6.00	\$6.00	\$6.00	\$6.00	\$6.00	
Claims Stabilization Amount/Self-Funded Policy	(\$38.59)	(\$77.17)	(\$109.20)	(\$89.48)	(\$129.61)	(\$161.64)	
Total	\$789.90	\$1,573.83	\$2,224.46	\$1,818.52	\$2,633.64	\$3,284.27	
10-County Amount <sup>2</sup>	\$0.00	\$0.00	\$0.00	\$942.14	\$0.00	\$0.00	
Single Retiree Offset <sup>3</sup>	\$0.00	\$0.00	\$0.00	\$0.00	\$942.14	\$942.14	
"Actuarial Difference"4	\$0.00	\$0.00	\$0.00	\$876.38	\$876.38	\$876.38	
Retiree Prop. E Employer Contribution <sup>5</sup>	\$0.00	\$0.00	\$0.00	\$0.00	\$407.56	\$407.56	
Subtotal City Contributions	\$0.00	\$0.00	\$0.00	\$1,818.52	\$2,226.08	\$2,226.08	
2026 Non-Bargained Contribution Rate	\$789.90	\$1,573.83	\$2,224.46	\$0.00	\$407.56	\$1,058.19	
MOU Negotiated Pickup <sup>6</sup>	\$734.61	\$1,463.66	\$1,846.30				
2026 Typical Bargained Member Contribution	\$55.29	\$110.17	\$378.16				
Final Member Contribution 2025	\$55.40	\$110.52	\$379.51	\$0.00	\$409.39	\$1,062.93	
Difference — 2026 versus 2025	(\$0.11)	(\$0.35)	(\$1.35)	\$0.00	(\$1.83)	(\$4.74)	



Proposed Monthly 2026 Rate Card

	A	Active Employees			Non-Medicare Retirees		
100/96/83 Contribution (Active Employees)	Employee Only	Employee Plus One Dependent	Employee and Family	Retiree without Medicare	Retiree and Spouse w/o Medicare	Retiree and Family	
Medical	\$818.34	\$1,636.68	\$2,315.90	\$1,897.85	\$2,748.93	\$3,428.15	
Vision	\$4.15	\$8.32	\$11.76	\$4.15	\$8.32	\$11.76	
Expense <sup>1</sup>	\$6.00	\$6.00	\$6.00	\$6.00	\$6.00	\$6.00	
Claims Stabilization Amount/Self-Funded Policy	(\$38.59)	(\$77.17)	(\$109.20)	(\$89.48)	(\$129.61)	(\$161.64)	
Total	\$789.90	\$1,573.83	\$2,224.46	\$1,818.52	\$2,633.64	\$3,284.27	
10-County Amount <sup>2</sup>	\$0.00	\$0.00	\$0.00	\$942.14	\$0.00	\$0.00	
Single Retiree Offset <sup>3</sup>	\$0.00	\$0.00	\$0.00	\$0.00	\$942.14	\$942.14	
"Actuarial Difference"4	\$0.00	\$0.00	\$0.00	\$876.38	\$876.38	\$876.38	
Retiree Prop. E Employer Contribution <sup>5</sup>	\$0.00	\$0.00	\$0.00	\$0.00	\$407.56	\$407.56	
Subtotal City Contributions	\$0.00	\$0.00	\$0.00	\$1,818.52	\$2,226.08	\$2,226.08	
2026 Non-Bargained Contribution Rate	\$789.90	\$1,573.83	\$2,224.46	\$0.00	\$407.56	\$1,058.19	
MOU Negotiated Pickup <sup>6</sup>	\$789.90	\$1,510.88	\$1,846.30				
2026 Typical Bargained Member Contribution	\$0.00	\$62.95	\$378.16				
Final Member Contribution 2025	\$0.00	\$63.15	\$379.51	\$0.00	\$409.39	\$1,062.93	
Difference — 2026 versus 2025	\$0.00	(\$0.20)	(\$1.35)	\$0.00	(\$1.83)	(\$4.74)	



# 5

## Recommendation for HSB Action

Health Net CanopyCare HMO Plan



### Recommendation for HSB Action

Staff recommends that the Health Service Board (HSB) approve the 2026 Health Net CanopyCare HMO plan rate cards as presented in this material, including the adoption of SB729-required changes to the infertility benefit.





## Appendix — Additional Information

- Rate Card Footnotes
- 2025 Health Net CanopyCare Monthly Rate Cards
- Glossary of Terms



## Health Net CanopyCare Rate Card Footnotes

- Expense SFHSS Healthcare Sustainability Fund charge.
- 2) "10-County" Employer Contribution Per Charter Section A8.423, the employer contribution must equal the average of the employer contribution to health premiums of the 10 most populous counties in California, not including San Francisco. The monthly amount for 2026 rating is \$942.14 (per March 2025 HSB action).
- **"Single Retiree Offset"** Per Charter Section A8.428; for Non-Medicare Retirees, this is equal to the 10-County Amount.
- **4)** Retiree "Actuarial Difference" Per Charter Section A8.428, employer contributes the difference between a single active Employee and a single non-Medicare Retiree cost of premium. Calculated for non-Medicare retiree only.
- **5) Prop. E Employer Contribution (passed in November 2000 Election)** Per Charter A8.428, the Prop. E employer contribution for Retiree (R) and R+1 = 50% x [Total Rate Cost 10 County Actuarial Difference].
- 6) Currently, the two most common employer contribution formulas in MOU agreements follow are 93% Single/93% E+1/83% E+2+ and 100% Single/96% E+1/83% E+2+.



2025 Monthly Rate Card

	Active Employees			Non-Medicare Retirees		
93/93/83 Contribution (Active Employees)	Employee Only	Employee Plus One Dependent	Employee and Family	Retiree without Medicare	Retiree and Spouse w/o Medicare	Retiree and Family
Medical	\$805.01	\$1,610.03	\$2,278.19	\$1,866.94	\$2,704.17	\$3,372.32
Vision	\$4.15	\$8.32	\$11.76	\$4.15	\$8.32	\$11.76
Expense <sup>1</sup>	\$4.00	\$4.00	\$4.00	\$4.00	\$4.00	\$4.00
Claims Stabilization Amount/Self-Funded Policy	(\$21.75)	(\$43.50)	(\$61.55)	(\$50.44)	(\$73.06)	(\$91.11)
Total	\$791.41	\$1,578.85	\$2,232.40	\$1,824.65	\$2,643.43	\$3,296.97
10-County Amount <sup>2</sup>	\$0.00	\$0.00	\$0.00	\$882.05	\$0.00	\$0.00
Single Retiree Offset <sup>3</sup>	\$0.00	\$0.00	\$0.00	\$0.00	\$882.05	\$882.05
"Actuarial Difference"4	\$0.00	\$0.00	\$0.00	\$942.60	\$942.60	\$942.60
Retiree Prop. E Employer Contribution <sup>5</sup>	\$0.00	\$0.00	\$0.00	\$0.00	\$409.39	\$409.39
Subtotal City Contributions	\$0.00	\$0.00	\$0.00	\$1,824.65	\$2,234.04	\$2,234.04
2025 Non-Bargained Contribution Rate	\$791.41	\$1,578.85	\$2,232.40	\$0.00	\$409.39	\$1,062.93
MOU Negotiated Pickup <sup>6</sup>	\$736.01	\$1,468.33	\$1,852.89			
2025 Typical Bargained Member Contribution	\$55.40	\$110.52	\$379.51			
Final Member Contribution 2024	\$55.90	\$111.58	\$383.24	\$0.00	\$413.60	\$1,073.87
Difference — 2025 versus 2024	(\$0.50)	(\$1.06)	(\$3.73)	\$0.00	(\$4.21)	(\$10.94)



2025 Monthly Rate Card

	A	ctive Employe	es	Non-Medicare Retirees		
100/96/83 Contribution (Active Employees)	Employee Only	Employee Plus One Dependent	Employee and Family	Retiree without Medicare	Retiree and Spouse w/o Medicare	Retiree and Family
Medical	\$805.01	\$1,610.03	\$2,278.19	\$1,866.94	\$2,704.17	\$3,372.32
Vision	\$4.15	\$8.32	\$11.76	\$4.15	\$8.32	\$11.76
Expense <sup>1</sup>	\$4.00	\$4.00	\$4.00	\$4.00	\$4.00	\$4.00
Claims Stabilization Amount/Self-Funded Policy	(\$21.75)	(\$43.50)	(\$61.55)	(\$50.44)	(\$73.06)	(\$91.11)
Total	\$791.41	\$1,578.85	\$2,232.40	\$1,824.65	\$2,643.43	\$3,296.97
10-County Amount <sup>2</sup>	\$0.00	\$0.00	\$0.00	\$882.05	\$0.00	\$0.00
Single Retiree Offset <sup>3</sup>	\$0.00	\$0.00	\$0.00	\$0.00	\$882.05	\$882.05
"Actuarial Difference" <sup>4</sup>	\$0.00	\$0.00	\$0.00	\$942.60	\$942.60	\$942.60
Retiree Prop. E Employer Contribution <sup>5</sup>	\$0.00	\$0.00	\$0.00	\$0.00	\$409.39	\$409.39
Subtotal City Contributions	\$0.00	\$0.00	\$0.00	\$1,824.65	\$2,234.04	\$2,234.04
2025 Non-Bargained Contribution Rate	\$791.41	\$1,578.85	\$2,232.40	\$0.00	\$409.39	\$1,062.93
MOU Negotiated Pickup <sup>6</sup>	\$791.41	\$1,515.70	\$1,852.89			
2025 Typical Bargained Member Contribution	\$0.00	\$63.15	\$379.51			
Final Member Contribution 2024	\$0.00	\$63.76	\$383.24	\$0.00	\$413.60	\$1,073.87
Difference — 2025 versus 2024	\$0.00	(\$0.61)	(\$3.73)	\$0.00	(\$4.21)	(\$10.94)



## **Glossary of Terms**

#### **ACA PCORI Fee**

 The Affordable Care Act's Patient Centered Outcomes Research Institute fee that was extended beyond its original 2019 expiration to the year 2029 as part of the federal SECURE Act signed into law in December 2019.

#### Capitation

• Fixed per member cost that SFHSS pays to Health Net for most health care services (in 2026, 94% of projected medical cost in Health Net CanopyCare is capitated).

#### **Risk Corridor**

• The percentage of expected claims, beyond those expected claims, which the employer is responsible to fund before the insurer covers the remaining claims that exceed the risk corridor percentage (this is set at 125% of expected claims for Health Net CanopyCare).



## **Glossary of Terms**

#### Rate Stabilization Reserve

HSB policy establishes use of a stabilization reserve to spread any underwriting gains or losses
into the following year's premium calculation in a consistent manner to reduce volatility from yearover-year changes in premium. The underwriting gains or losses are added or subtracted from the
premium amounts to adjust for previous losses or gains. Per HSB policy, each year's loss or gain is
spread over the next three years.

#### Ten (10)-County Average Survey

• Per Charter Section A8.423, the employer contribution must equal the average of the employer contribution to health premiums of the ten most populous counties in California, not including San Francisco.

