Bickmore

Examination of the California Public Sector Self-Insured Workers' Compensation Program

California Commission of Health and Safety and Workers' Compensation

October 22, 2014

Bickmore

October 22, 2014

Mr. Eduardo Enz
California Commission of Health and Safety and Workers' Compensation
1515 Clay Street, 17th Floor
Oakland, California 94612

RE: Examination of California Public Sector Self-Insurance Worker's Compensation Program

Dear Mr. Enz:

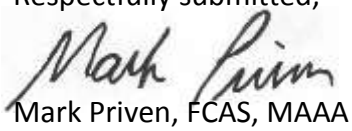
We are pleased to provide the California Commission of Health and Safety and Workers' Compensation (CHSWC) with the report on public entity self-insurance in California. As documented in previous annual reports prepared by CHSWC, the public sector (including local and state governments and the university systems), comprises a significant portion the workers' compensation market.

This report would not have been possible without the support of the Department of Industrial Relation and the Office of Self Insurance Plans. Nor would the study results have been as extensive without the participation of the public entity survey participants who submitted detailed data and information. I also want to express my appreciation to the Bickmore consultants who were an integral part of conducting the analysis and developing the findings and recommendations.

We appreciate this opportunity to be part of the process to learn more about public sector self-insurance, both for individual entities and joint powers agencies. We hope this report is a meaningful step forward.

We welcome your further input and questions. I can be reached at 916.244.1161 or via email at mpriven@bickmore.net.

Respectfully submitted,



Mark Priven, FCAS, MAAA
Director, Regulatory & Actuarial Consulting

Table of Contents

Tables

Charts

Appendices

Executive Summary

On September 18, 2012, Governor Brown signed Senate Bill 863 which, among other provisions, added Labor Code Section 3702.4 requiring the Commission on Health and Safety and Workers' Commission (CHSWC) to conduct a study to examine the public self-insured program and provide recommendations to improve the addressing of costs for administration, workers' compensation benefit expenditures, solvency, and performance of self-insured workers' compensation program and provisions in the event an insolvency occurs for a public self-insured entity.

California law requires that every employer, with few exceptions such as the State of California, secure payment of its workers' compensation responsibilities by purchasing traditional insurance from a licensed and admitted California insurance company or by obtaining a certificate of consent to self-insure from the Director of the Department of Industrial Relations.

The workers' compensation market is comprised of approximately 66% employers who purchase traditional insurance, 4% the California State government, and the remaining 30% self-insured.

Recent municipal bankruptcies have drawn attention to public entity employers and the adequacy of the resources they possess to meet their workers' compensation obligations. It is unclear what the impact to employees and taxpayers would be in the event that large or multiple public entities become unable to provide for their workers' compensation liabilities.

The purpose of this study is to identify variances in the performance of public employers' self-insured workers' compensation and to recommend areas for improvement. In addition, the study is to provide information that facilitates benchmarking public self-insured workers' compensation programs.

Findings

A. Benefits Expenditures

1. **Region**: We found a self-insurer's region has a significant impact on the claims costs. Self-insurers in southern California have experienced higher claim frequency, higher average claim size, and higher overall cost per $100 of payroll. Over the past several years this disparity between southern California and the rest of the State has increased. In addition, claims of southern California self-insurers tend to stay open longer in comparison to those in the rest of the State.

2. **Type**: The type of agency has a major impact on the loss rates, claims severity, and claims frequencies. Municipalities tend to have the highest costs, whereas educational entities (schools, colleges, and universities) have the lowest. Over the past several years

the cost of municipal claims has risen at a faster pace than that of counties or educational entities. This is primarily due to increases in the average claim cost. Also, claims of education self-insurers tend to close faster in comparison to those of counties and cities.

3. **JPAs Versus Individual Self-Insurers**: In general, JPAs have experienced lower costs per $100 of payroll than individual self-insurers. However, JPA costs have been increasing at a faster rate than those of individual self-insurers over the past several years.

4. **Claim Administrator**: We found almost no difference in loss rates between self-insurers that utilize a TPA versus those that self-administer. Those that self-administer tend to have a higher claim frequency; however, this is offset by a lower average claim size. In addition, loss rates have been increasing at a slower pace for those that self-administer than for those that utilize a TPA.

5. **Benchmarking**: The results in this section can be helpful in benchmarking. Understanding the impact of self-insurer characteristics on claims results should help entities to determine who to benchmark against and what adjustments to make if the comparison group has different characteristics.

6. **Distribution of Claims by Type**: We found the distribution of temporary disability (TD) and permanent disability (PD) claims to be similar between the public self-insurers who responded to our survey and the insured experience as reported by the WCIRB. Differences in our results are probably due to the fact that the self-insurance findings are based on a snapshot, whereas WCIRB data is developed to ultimate.

7. **Impact of Claimant Age**: We found that claimant age is significantly correlated with claims costs. On average, the cost per claim increases with the age of the injured worker. This is true of small as well as larger claims, and one of the key drivers is that PD is more likely to be involved in injuries involving older claimants.

B. Claims Administration

1. **Region**. As with claims costs, we found the region of the claims administrator had a measurable impact on performance audit review (PAR) results. Out-of-state administrators tended to have the worst PAR results, followed by the Los Angeles area and then the rest of the State. This pattern was also consistent regarding the number of penalties per audited claim, in which out of state administrators had the most, the Los Angeles area had the second most, and the rest of California had the least.

2. **Type**. The type of adjuster also had a measurable impact on PAR results, but the effect was smaller than that of region. In general, insurers tended to have the worst PAR results, and public agencies that self-administer their claims had the best. Third party claims administrators and private self-insurers that self-administer their claims were in

the middle. The same pattern held true for the number of penalties per claim, in which insurers had the highest and public agencies that self-administered had the fewest.

3. **Public Self-Insurer that Self-Administer - JPAs Versus Individuals**. We found no significant differences between the PAR results of JPAs versus individuals among public self-insurers that self-administer their claims. On a statewide basis, the JPA results are more favorable than those of individuals. However, this is likely because none of the JPAs are inside the Los Angeles area, whereas 11 of the 20 individuals are inside the area. Comparing the results of only those entities that are outside of Southern California shows the JPA and individual results to be quite similar.

4. **Bill Review (BR).** There is little public information available to employers and JPAs to evaluate the effectiveness of their BR programs. Our analysis of BR found the following.

    a. **Savings.** Bill review saved the survey respondents about two thirds of medical expenses, primarily due to reductions to the OMFS. The percentage reduction due to BR varied by type of service. Inpatient and outpatient hospital services experienced the greatest percentage savings.

    b. **Costs.** The average cost of BR per bill was relatively consistent among the survey respondents after hospital bills were excluded. BR costs as a percentage of medical payments were relatively consistent between 2008/09 and 2011/12. The percentage increased in 2012/13, but this may be because that year is still immature in relation to the prior years.

5. **Utilization Review (UR)**. There is little public information available to employers and JPAs to evaluate the effectiveness of their UR programs. The State does not collect UR savings or the cost of UR through OSIP or through the WCIS. Our findings are based on a relatively small database of five self-insured public entities that provided us with UR data. The variability of UR results by entity and the relatively small sample size in this study means that one needs to be cautious about drawing conclusions from our results. A more robust collection of UR and medical data would greatly enhance our ability to provide benchmarking data as well as determine differences by region or type of entity.

    a. **The Reviewer.** The percentage of reviews referred to registered nurses (RNs) and medical doctors (MDs) varied by entity, anywhere from 31% to 67%. This percentage also varied greatly by type of service. The services that are most likely to be referred to an RN or MD are durable medical equipment (DME) (60%) and surgical services (90%).

    b. **UR Outcomes.** Within our sample we found that of the services referred to elevated UR, 25.6% were rejected by a medical doctor and 9.0% resulted in modified treatment. These percentages are higher than the CWCI has reported based on their industry-wide database.

c. **Costs.** We found that between 2008/09 and 2012/13, UR costs have ranged between 6.1% and 7.8% of paid medical costs, with no obvious trend upwards or downwards. If we restrict our analysis to only indemnity claims, then UR costs have ranged between 6.4% and 9.0% of medical costs during the years 2008/09 and 2012/13.

C. Solvency

1. There is inconsistency in the manner in which public sector self-insurance activities are accounted for and reported.

2. It is difficult to compare actuarial information to the entity's financial statements.

3. Very little financial and actuarial information is provided to OSIP on self-insurance activities.

4. Without clearer and standardized financial reporting, the public employees and regulators such as OSIP are unable to evaluate the solvency of self-insured programs. Individual public self-insurers commonly comingle multiple lines of coverage in one fund or account for their activities in the general fund. JPAs maintain separate fund accounting.

Many public entity self-insurers obtain an actuarial estimate of the liability for unpaid losses despite the fact there is no regulatory requirement to do so. The standard for actuarial studies was developed by the Governmental Accounting Standards Board in the early 1990s (referred to as GASB 10). For the actuarial reports we reviewed, it was difficult to compare the independent actuarial estimates to the financial statements. This is often due to the actuary using claim data valued as of a date that does not coincide with the entity's fiscal year end. As a result, the actuary's estimates of unpaid liability will include projections of payments and case reserves for the period from the valuation date to the fiscal year end, but the financial statements will reflect actual activity through that date.

Recommendations

A. Benefit Expenditures

1. **Investigate Disparities by Region.** The analysis of insurance company data by the California Workers' Compensation Insurance Rating Bureau (WCIRB) has pointed to disparities between claim frequencies and costs between different regions of the State. Our analysis confirms that these disparities also exist for public self-insurers. Since one of the goals of the workers' compensation system is to have equal treatment of and benefits for injured workers, we believe it is worth exploring the root causes of this disparity.

2. **Further Study Regarding Medical and Indemnity Costs.** Medical and indemnity costs were combined together for the portion of this analysis that investigated differences in claims costs, claim frequencies, payment patterns, and claim closing rates by employer characteristic. However, these costs are split out on the OSIP annual report and it would be possible to evaluate them separately, given the current information that is available. For example, this would help to shed light on the differences in costs we found by region.

3. **Make Benchmarking Data Publicly Available.** This study shows it would be quite possible to release statewide information for the purposes of benchmarking. Several years ago the California Institute for Public Risk Analysis (CIPRA) produced annual benchmarking reports based on OSIP data. These CIPRA reports evaluated claims frequency, average claim size, and loss rates. This current analysis extends the CIPRA reports in several ways: losses are developed to 60 months to adjust for differences in case reserve adequacy; trends over time are calculated; claims closing rates are evaluated; and the impact of employer characteristics were also analyzed. The State may want to consider reviving the CIPRA-type reports with the additional methods utilized in this report.

4. **Further Study Regarding Impact of Claimant Age.** The high correlation between claimant age and claims costs suggests this could be a fruitful area of further study, particularly if it leads to risk control solutions tailored to employee age.

5. **Changes to the OSIP Annual Self-Insurance Report.** The OSIP reports are foundational to the findings in this study. However, they have had little modification over time and we believe it would be useful to reevaluate what data is collected. Data storage and computing power is quite inexpensive in comparison to when this report was first designed, and so it is possible OSIP could collect more data without creating difficulties for self-insurers. The following are potential modifications to the OSIP report that could increase their utility over time.

    a. **Add Allocated Loss Adjustment Expense (ALAE).** The OSIP report currently only collects medical and indemnity payments. Over the past several years ALAE costs have been increasing more quickly than losses and medical cost containment expenses have been moved from medical to ALAE. As a result, ALAE is now a much bigger portion of total costs than it used to be. We estimate it probably accounts for as much cost as temporary or permanent disability.

    b. **Split Temporary and Permanent Disability Costs.** These two types of benefits behave very differently in terms of average claim size and payout pattern. In addition, recent reforms have impacted these benefits quite differently. Therefore, we feel it would be beneficial to explore breaking them out.

c. **Split Out More Years.** The OSIP report currently requires claims experience from the past five years to be broken by year, and reserves for all prior years are lumped together. Given that the payout pattern for workers' compensation has become more and more extended, this leaves an increasing portion of total liabilities lumped together in a way that is difficult to analyze. For example, public agencies reported about $7.4 billion in case reserves on the OSIP annual report as of June 30, 2013. Of that $7.4 billion, over $4.0 billion was bucketed together because they are associated with claims that are over five years old.

d. **Report Self-Insured Retention (SIR).** The SIR functions much like a deductible in that it represents the maximum cost associated with an individual occurrence retained by a self-insurer. Self-insurers include their SIR on the OSIP annual report, but the SIR is not included in the publicly available file that summarizes public self-insurance data by member. Including the SIR in the public file would greatly assist in benchmarking efforts among public self-insurers.

e. **Accident Year Versus Report Year.** The OSIP annual report requires claims to be organized by year in which the claim is reported. This is useful in tracking case reserve adequacy because it facilitates tracking the experience of a fixed set of claims over time. However, tracking claims by report year makes it difficult to estimate total liabilities because it does not account for unreported claims associated with injuries which have already occurred. This has become a bigger issue over the past few years as statewide statistics from the WCIRB suggest the reporting of indemnity claims has become increasingly extended. We believe OSIP should consider requiring claims and losses to be reported on an accident year basis in order to facilitate the estimation of total liabilities and evaluate whether or not a significant portion of claims are reported late.

f. **Include Geography Code**. The findings of this report suggest that geographical region plays an important role in claims costs, thus it is an important part of benchmarking. However, it is difficult to assign region based on the OSIP data made publicly available for two reasons. First, there is no way to identify which JPAs are confined to a specific region and which operate on a statewide basis. Second, one must extract the zip code from self-insurers and assign that to a region. There are many ways of defining regions and so different reports may draw different conclusions. OSIP may want to consider assigning a region to each self-insurer in order to standardize the process and facilitate comparisons.

g. **Identify Primary Versus Excess JPAs.** Some JPAs are considered "primary," meaning they cover claims from the first dollar of cost; other JPAs provide

excess coverage, meaning they cover costs above a specific retention. By definition primary and excess JPAs have very different claims characteristics. Primary JPAs will tend to have a larger volume of smaller claims, and excess JPAs will have a smaller volume of claims but those claims tend to be large. As a result, it is very important to distinguish primary from excess JPAs when comparing claims costs, and it would be very helpful if OSIP were to include a primary versus excess JPA identifier in the information made public.

6. **Collection of Detailed Data.** Claimant age is an example of a key factor impacting claims costs, and this is driven by more than just higher wages associated with older employees. Examples such as this show that while summarized data such as what is available from OSIP or an actuarial report is useful, those sources are not sufficient if the goal is to understand key cost drivers and facilitate more effective risk control. Sources of detailed claims information, such as claims listings or the WCIS, are necessary to better understand the dynamics affecting injuries and claims costs. Making this information more readily available or portions of it public would facilitate greater understanding of the dynamics of public entity self-insurance.

B. Claims Administration

We believe this is one of the first studies to utilize the Performance Audit Reviews (PAR Audit) reports to evaluate systematic differences in claims handling practices.

1. **Investigate Disparities in PAR Results by Region.** We feel the systematic differences in claims handling practices by region warrant further investigation and perhaps changes in claims oversight. In particular, we are concerned about the less favorable scores of out-of-state adjusters.

2. **Reevaluate Items Included in Performance Audits.** The performance audits provide a good check, primarily regarding the timeliness and accuracy of indemnity payments. While indemnity benefits are extremely important, they make up only a little over 30% of projected ultimate loss and ALAE costs. We recommend the DWC consider other factors in their audits in order to give a broader sense of an administrator's performance.

3. **Revise Data Format of PAR Reports.** While the PAR reports are publicly available, they are in an electronic file format that makes analysis difficult. For this project our team had to manually type in the data from two years of reports in order to perform this analysis. It would be very helpful if the State maintained the PAR data in a format that facilitates data analysis.

4. Industry information regarding UR costs and savings would be helpful to employers and JPAs in evaluating their own UR programs. The following are examples of the kinds of information that public self-insurers could find helpful.

    a. **Industry UR Savings by Category.** The State could collect and make public UR savings by categories such as type of medical cost. In addition, breaking down who does the review (examiner, registered nurse, or medical doctor) would be helpful in determining if a UR program is in line with industry norms.

    b. **Utilization Review Cost**. The cost of UR by review or by claim for different types of medical costs. This would allow public employers to compare their cost of utilization review to industry averages.

    c. **Transactional Data.** Collecting transactional level data or claims listing at successive intervals would facilitate comparing UR and medical costs at similar stages of maturity. This is critical in evaluating UR trends over time.

C. Solvency

OSIP should consider developing guidelines, rules, or regulations to require actuarial reports be obtained by all public entity self-insurers, and that the actuarial reports include specific items and disclosures.

We recommend that actuarial requirements include the following elements.

1. Actuarial reports should separately state the self-insured workers' compensation liabilities for unpaid loss and loss adjustment expenses.

2. Actuarial reports should be performed by an actuary with experience performing actuarial estimates involving California workers' compensation. The actuary must be an Associate or Fellow of the Casualty Actuarial Society or a Member of the American Academy of Actuaries.

3. The actuary's estimate of ultimate loss must reflect potential loss development (IBNR).

4. Estimates of unallocated loss adjustment expenses (ULAE) should include the ultimate estimated cost to adjust claims arising during the program (even if those claims are reported after the end of the program year) and be actuarially determined.

5. Projections at the expected confidence level should be point estimates and not ranges.

6. The actuarial report should present unpaid loss and loss adjustment expenses both on an undiscounted and net present value basis and the assumed interest rate should be disclosed in the report.

7. Estimates of the liabilities for unpaid loss and loss adjustment expenses should be presented on a gross, ceded, and net basis.

8. The actuarial report should document significant changes in the exposure or composition of a JPA over time.

9. Actuarial reports must conform to actuarial standards as detailed in the Actuarial Standards of Practice, including but not limited to #9 (Documentation & Disclosure); #13 (Trending in P/C Ratemaking), and #29 (Expenses in P/C Ratemaking).

OSIP should also consider developing standardized prescribed financial reports to be submitted by all individual public entities and JPAs that self-insure for workers' compensation. The format for these reports could be developed jointly with the State Controller's Office, which currently requires annual filing of financial transaction reports. Such reports could allow OSIP to monitor the financial condition and activities of self-insurance programs in a consistent manner and provide reports to the public on the condition of public entity self-insurance. Newly prescribed reports could include forms that collect the following information.

Assets	Detail of all assets in the workers' compensation fund including: cash and investments, receivables, amounts due from other funds, amounts due from excess insurers, assessments receivable, and other assets.
Claim Liability	Detail on the liability for unpaid loss and allocated loss adjustment expenses, and unallocated loss adjustment expense liability. Liabilities should be presented gross of ceded losses and on an undiscounted basis, with adjustments for amounts recoverable from excess insurance and net present value.
Other Liabilities	Detail on the liability for unpaid loss and allocated loss adjustment expenses, unallocated loss adjustment expense liability, dividends payable, unearned revenue, amounts due to other funds, assessments payable to other agencies, and other accrued expenses payable
Net Position	Detail of net position including unrestricted, designated, and restricted amounts. A statement that indicates the amount of risk margin maintained in net position using a confidence level measure.
Revenues and Expenses	Detail of all revenues, including contributions from members of JPAs or other departments, assessments, investment income, other income.
Expenses	Detail of all expenses, including claim expense, excess insurance, claims adjusting, cost containment expenses, risk control, broker fees, transfers to other funds, dividends, and all other professional and administrative costs.
Claims Development	Schedule reconciling the claim liability and showing: Beginning liability for unpaid loss and loss adjustment expenses + ultimate loss estimate for claims of the current fiscal year +/- changes in the ultimate loss estimate for claims of all prior years - payments on claims incurred during the current fiscal year - payments on claims incurred during all prior years = Ending liability for unpaid loss and loss adjustment expenses

Actuarial Schedule	A schedule that reconciles the actuarial estimates of unpaid loss to those reported in the prescribed reports and audited financial statements.
Other Disclosures	A schedule that displays the unpaid loss and loss adjustment expenses, and net position at different discount rates, but at a minimum using 0% and the selected discount rate for financial statement purposes. Such a disclosure would show the risk and variability at various discount factors.

Most of the reporting listed above would be applicable to both individual self-insurers and JPAs. OSIP may also want to consider requiring public entity self-insurers to report their self-insured workers' compensation activities in a separate fund and not comingled with any other activities. JPAs that offer other lines of coverage often prepare combining statements of net position, and statement of changes in net position as supplemental information in the audited financial statements. These supplemental statements would show each line of coverage separately.

D. General Recommendation for Future Data Collection and Analysis

Pursuant to Labor Code Section 3702, public entities are required to submit a "self-insurer's annual report" in a form prescribed by the Director of DIR. SB863, passed in 2013, added an additional provision:

"Public self-insured employers shall provide detailed information as the director determines necessary to evaluate the costs of administration, workers compensation benefit expenditures and solvency and performance of the public self-insured employer workers' compensation programs, on a schedule established by the director. The director shall grant deferrals to the public self-insured employers that are not yet capable of accurately reporting the information required, giving priority to bringing larger programs into compliance with the more detailed reporting." (Labor Code 3702.2).

Based upon the recommendations in the report and input from key stakeholders in the public sector, we recommend that DIR move forward with the consolidation and improvement in public sector workers compensation data collection. Technology and the continual evolution of public sector self- insurance best practices will enable the Director of DIR to move quickly in identifying the necessary data and processes for collection. This will provide access to public policymakers, regulators, and members of the public of more accurate and meaningful information about the costs and benefits of self-insurance and workers compensation.

I. Scope and Objectives of this Study

This study reports on specific issues related to the self-insurance of workers' compensation exposures among California public entities. These issues include public sector self-insurers' benefit expenditures, claims administration performance, claims administration costs, and solvency. Bickmore was awarded the contract to conduct this study based on response to the Department of Industrial Relations (DIR) Request for Proposal (RFP) DIR/CHSWC RFP #13-002 entitled *"Assessment of Policy Options for Examination of the Public Sector Self-Insured Program in California's Workers' Compensation"* ("Public Sector Study").

The objective and scope of the study as outlined in the RFP includes the following.

To conduct an examination of California public self-insured employers that would:

- *Identify variances in performance of public employers' self-insurance workers' compensation programs to target areas for improvements in relevant areas, including costs of administration, timeliness of benefit payments, benefit expenditures, and prospective ability to pay compensation when due; and*

- *Establish benchmarks against which the performance of a public employer's program can be usefully compared to other public employers and to identify outliers, using public available information to the extent feasible and identify where possible impacts of different administrative practices upon the various performance parameters.*

II. Background

This report is a response to an element of California's Senate Bill 863, signed into law on September 18, 2012. This element updated Section 3702.4 of the Labor Code to read as follows:

> *(a) The Commission on Health and Safety and Workers' Compensation shall conduct an examination of the public self-insured program and publish, on its Internet Website, a preliminary draft report and recommendations for improvement of the program no later than October 1, 2013, and a final report no later than December 31, 2013. The recommendations shall address costs of administration, workers' compensation benefit expenditures, and solvency and performance of public self-insured workers' compensation programs, as well as provisions in the event of insolvencies.*

The Commission on Health and Safety and Workers' Compensation (CHSWC) is a joint labor-management body that monitors California's system and recommends changes to improve its operations. CHSWC has overseen this analysis, including facilitating data collection and other aspects of the analysis.

A. Obtaining Workers' Compensation in California

California law requires employers (other than the State) to have workers' compensation insurance. There are two ways an employer can meet this requirement.

1. **Traditional Insurance.** Employers can purchase a workers' compensation policy from a commercial insurer licensed to write policies in California. Roughly **67%** of injuries are covered by traditionally insured employers.[1]

2. **Self-Insurance.** As an alternative to purchasing a commercial policy, qualified employers can provide their own coverage for workers' compensation liabilities or join with other employers to self-insure as a group. About **29%** of workers' compensation claims are covered by self-insured employers.1

The State its various agencies are not required by the DIR to secure payment of compensation by either of the two methods described above and is therefore a "permissibly uninsured" employer. About **4%** of occupational injury claims are covered by the State as a permissibly uninsured empoloyer.1

[1] California Health and Safety and Workers' Compensation Annual Report, December 2013. Based on average claim counts for 2010-2012.

B. Traditional Versus Self-Insurance

Up until the mid-1970s, all but the largest California public entities obtained coverage for workers' compensation exclusively through the State Compensation Insurance Fund (SCIF), the designated insurer for all public entities. At the time, public entities were not permitted to purchase coverage from commercial insurers. As workers' compensation costs escalated over time, many public entities left SCIF in favor of lower-cost self-insurance. Commercial insurance became another option in the 1980s.

By self-insuring, an employer takes on the direct responsibility for making sure claims are handled, either by employing one or more qualified claims examiners or contracting with a professional third party claims administration firm for the services. All self-insured employers must report results and be subject to the regulations of the DIR.

The California Self-Insurers' Security Fund (SISF) is a non-profit organization responsible for managing the shared liabilities of workers' compensation claims arising from private self-insured employers that become insolvent. SISF provides a backstop for private sector self-insurers who default on their workers' compensation obligations. All private self-insurers must participate in SISF, and this may entail purchasing security (such as surety bonds or letters of credit), making payments into the SISF Alternative Security Program (ASP), or both. There is no single fund that provides a backstop for the self-insured workers' compensation obligations of public sector self-insurers.

Self-insurers may purchase excess insurance in order to protect against the cost of large claims and stabilize its costs.

1. Advantages of Self-Insurance

A few of the more important advantages for public agencies to self-insure workers' compensation are as follows.

1. **Cost Savings.** Self-Insurance eliminates the overhead and profit loads that insurance companies charge. In addition, cash outflow is stretched for self-insureds, matching the long claim payment tail. This is in contrast to up-front premium payments typically required of insured employers. Both of these factors produce savings in the long run for the self-insured employer.

2. **Claims Adjusting.** A self-insured employer has more control over the handling of workers' compensation claims than a commercially-insured employer whose claims are typically under the auspices of the carrier's examiners. This means a self-insured employer has more input over whether or not to accept, deny, or challenge claims. It should be noted that some employers who participate in large deductible programs may have similar control over their claims handling process.

3. **Loss Control.** Self-insurance provides a direct incentive to prevent injuries and mitigate the costs of those that do occur. When an employer pays for its own loss costs, there is a direct relationship between the bottom line and effective risk control. Thus, self-insured employers direct vested interest in the outcome of claims motivates their managers to promote safe work practices.

4. **Cost Stability**: The workers' compensation market in California has experienced dramatic changes in premium rates at different times during the past 30 years. While some of these swings are driven by changes to claims costs, other factors such as competition and reinsurance have also played a role. Self-insurance offers the opportunity to have a more stable cost structure over time.

2. Disadvantages of Self-Insurance

Not all employers are suited for self-insurance. Below are some of the disadvantages of self-insurance.

1. **Administrative Burden.** Self-insured employers are responsible for certain services normally provided by an insurance carrier. These services include claims adjusting, safety engineering, and regulatory filings. Like anything else in business, if these services are not performed expertly and funded adequately poor results can occur and the cost will fall on the employer's shoulders.

2. **Contracting Difficulties.** It is commonplace in business for one party to a contract to ask for minimum levels of insurance from the other party to the contract. These types of requirements apply to construction contracts, maintenance agreements, leases, and other situations. It is customary to ask for evidence of workers' compensation insurance. A self-insured employer does not have insurance and therefore must convince the other party to the contract that it is nonetheless a responsible contracting party. This situation requires more time to resolve and may result in the loss of business opportunities for the self-insured employer.

3. **Volatility.** When a self-insured employer retains losses (as opposed to paying for them upfront in the form of an insurance premium) it assumes the risk those losses will be more than it budgeted. An unprecedented or unplanned run of claims can create financial strain for the self-insured employer, negatively impact earnings, impair banking relationships, and even push an entity toward bankruptcy. The self-insured employer must carefully plan for such contingencies to avoid financial disruptions.

C. Oversight of Self-Insureds by Department of Industrial Relations, Office of Self Insurance

1. Required Reporting to Office of Self Insurance Plans

California has the largest self-insurance community in the country. In 2012 self-insurance covered over 2.1 million private sector employees and 1.8 million public agency employees.[2] The Office of Self Insurance Plans (OSIP), a program within the DIR, oversees and regulates self-insured employers.

Application. Employers wishing to self-insure must be qualified through an OSIP application process. Private sector employers must also meet certain financial requirements demonstrating fiscal strength and the ability to pay future liabilities.

Once OSIP grants permission to self-insure there are on-going requirements an employer must meet in order to retain their self-insurance certification. Public sector self-insureds have very few requirements compared to private sector self-insureds.

Benefit Delivery Requirements. Claims must be adjusted in California. New self-insurers must use licensed third party administrators (TPAs) for the first three years, and all self-insurers are subject to periodic audits by OSIP for claims reserving practices.

Reporting. Self-insurers must submit an annual self-insurance report to OSIP. This report contains aggregate claims and benefit information that drives the State's calculation of the employer's self-insurance fees. Private employers are also required to submit an actuarial study and an audited financial statement.

Fees. Both private and public sector self-insurers receive an assessment fee authorized by the Labor Code to fund the regulatory costs of workers' compensation. Private sector self-insurers receive an additional invoice from SISF.

D. Public Sector Self-Insurance

As cited in Section A of this Chapter, self-insured employers account for about 30% of the statewide claims reported in the three-year period from 2010-2012. Self-insured employers are either (1) individually self-insured; or (2) joined with other employers in a self-insured group. In the private sector, these groups are called self-insurance groups (SIGs). In the public sector, these groups are Joint Powers Authorities (JPAs). Appendix B provides a complete list of JPAs and individual self-insured employers maintained by OSIP.

[2] California Health and Safety and Workers' Compensation Annual Report, December 2013, pages 45 and 47.

1. Individually Self-Insured

As of June 30, 2013, there were 368 individual self-insured public entities. Most individually self-insured public entities and JPAs retain (that is, pay for) losses up to a certain amount, otherwise known as their self-insured retention (SIR). Above that amount, an insurance policy is purchased from an excess insurance carrier that, in return for a premium, pays for workers' compensation claims that exceed the employer's self-insured retention. There is no requirement that individual self-insureds buy excess insurance coverage. There are a few very large California employers that do not purchase excess insurance. Two of those are Los Angeles Unified School District and the City and County of San Francisco.[3]

2. Joint Powers Authorities for Self-Insurance

Beginning in the 1970s, governmental agencies began joining together as JPAs to pool resources and provide workers' compensation coverage to their members. Although they are a self-insurance vehicle, JPAs provide services similar to those provided by insurance companies. The difference is the JPA participants are also the "owners" of the JPA, which is a separate public entity. Each "owner" is jointly and severally liable for claims liabilities and other obligations of the JPA. This means a claimant may pursue an obligation against any one JPA member as if all members were jointly liable, and it is the defendants' responsibility to sort out their respective proportions of liability. As of June 30, 2013, there were 81 JPAs self-insured for workers' compensation in California. Those 81 JPAs have close to 3,000 employer participants.[4]

Participants in a JPA seek all of the previously listed advantages of self-insurance, plus the following.

- **Improved Cost Stability.** By combining with other employers in a single program, the volume of claims in the financial model used for projecting future costs is larger and the predictability of outcome is improved.

- **Less Reliance on Insurance.** Commercial insurance to cover truly large losses is needed by most individual self-insureds. In a JPA, the attachment point of the insurance can be raised to a higher level because the combined financial resources of the participating entities are able to absorb more fluctuation. In the long run, this will reduce costs even more.

- **Economies of Scale.** In a JPA purchasing claims management, risk control, excess insurance, and other products and services is less costly per unit than an individual member would pay on its own. This is due to the bulk purchasing power of the group.

[3] Annual self-insurer reports submitted to Office of Self Insurance Plans (FY 2013).
[4] Department of Industrial Relations, Office of Self Insurance Plans' website, http:www.dir.ca.gov.

- **Collegial Management.** JPA participants work in a governance structure to manage outcomes. With common interests, the self-insured public entity representatives on the JPA board tend to understand and resolve problems more easily than could be negotiated with an insurer. Thus, they tend to tailor the premium-charging mechanism, claims and risk control service offerings, and other program aspects to the unique needs of the participating entities.

Unlike private SIGs which are required to secure excess coverage at SIRs no greater than $500,000 (CCR § 15478), JPAs have no such requirement. However, all but two of the JPAs reported having excess insurance policies in place for 2012/13. The two that did not were *PTSC-MTA Risk Management Authority* and *County Sanitation District of Los Angeles County*.

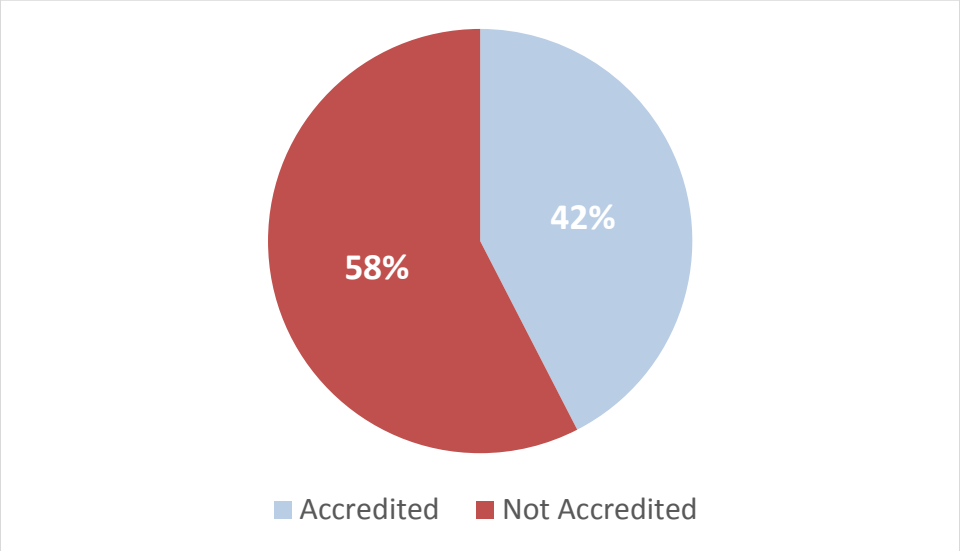
E. CAPJA Accreditation Program

The California Association of Joint Powers Authorities (CAJPA) is a statewide association for public sector risk-sharing pools. CAJPA provides continuing education, legislative advocacy, and active involvement in regulatory matters on behalf of its JPA members. In 1984, CAJPA developed a voluntary Accreditation Program for its members to promote best practices in JPA management and reduce the potential for any JPA failures.

CAJPA's Accreditation Program maintains a continually evolving set of very extensive professional standards for risk management pools (refer to Appendix C). Accreditation consultants engaged by CAJPA examine a pool's governing documents, management structure and practices, loss control, claims practices, funding, and statutory compliance. After review of the consultants' findings, a committee of peers issues a report and designates an accreditation status.

There are currently 57 JPAs Accredited with Excellence and four JPAs with Full Accreditation.

Chart II-1
Accredited Versus Not Accredited Measured in Payroll



F. Demographics

Based on annual reports filed with OSIP for fiscal year ending June 30, 2013, (and excluding the State as an employer), 30% of public employers that self-insure for workers' compensation do so in a JPA. The five largest JPAs based on 2012/13 payroll are listed in Table II-1.

Table II-1
Largest JPAs by 2012/13 Payroll[5]

JPA	Total Payroll	Percent of Total JPA Payroll
CSAC EIA (counties, municipalities, other various public entities)	$2.74 billion	8.8%
Alpha Fund (hospitals)	$1.47 billion	4.7%
San Diego Schools Risk Management JPA (schools)	$1.42 billion	4.6%
Self-Insured Schools of California (schools)	$1.29 billion	4.2%
Alliance of Schools for Cooperative Insurance Programs (schools)	$1.26 billion	4.1%

The other 70% of California's public self-insured employers do so as individual self-insureds, although some secure excess coverage through JPAs. The five largest individual public self-insurers by payroll are listed in the following table.

[5] 2012/13 payroll from the June 30, 2013, annual self-insurance reports submitted to California's Department of Industrial Relations, Office of Self Insurance Plans.

Table II-2
Largest Public Individual Self-Insurers by 2012/13 Payroll[6]

JPA	Total Payroll	Percent of Total Individual Payroll
University of California Regents	$11.7 billion	16.4%
County of Los Angeles	$7.31 billion	10.3%
Los Angeles Unified School District	$3.68 billion	5.2%
City of Los Angeles	$2.90 billion	4.1%
City and County of San Francisco	$2.38 billion	3.4%

G. Excess Insurers

With very few exceptions, self-Insured public entities purchase excess insurance above their retention levels. There are seven excess insurance providers that each had a market share of at least 5% for the five-year period of 2008/09 through 2012/13.[7] Those providers and their market share based on payroll are as follows.

Table II-3
Excess Insurance Providers

Excess **Insurance Provider**	**Market Share**[8]
Safety National	17%
CSAC Excess Insurance Authority	14%
National Union Insurance Co.	13%
California State Compensation Insurance Fund (SCIF)	10%
Zurich Insurance Group	9%
Protected Insurance Program for Schools and Community Colleges	8%
Star Insurance Company	5%

It is worth noting that the second biggest excess insurer, CSAC EIA, is also a JPA. Also, SCIF is one of the biggest excess insurers by virtue of insuring a few very large entities (County of Los

7 2012/13 payroll from June 30, 2013, annual self-insurance reports submitted to California's Department of Industrial Relations, Office of Self Insurance Plans.

[7] Based on payroll and excess policy information provided on the annual self-insurer reports submitted to the Office of Self Insurance Plans, 2008/09 – 2012/13.

[8] 2012/13 payroll from the June 30, 2013, annual self-insurance reports submitted to California's Department of Industrial Relations, Office of Self Insurance Plans.

Angeles, City of Los Angeles, and City of San Diego). Lastly, the composition of the excess insurance market may vary greatly over time.

III. Benefits Expenditures: Impact of Employer Characteristics

The purpose of this section is to discuss public self-insurers' expenditures related to medical and indemnity benefits. We evaluated the impact on the claims experience of four key characteristics: type of entity, region, JPA versus individual, and claims administrator. For each of these characteristics we evaluated loss rates, average claim size, claim frequency, claim closing rates, and the speed of claim payments.

A. Methodology

This section describes the methods we used to analyze claims costs. The following are the major steps of our analysis.

1. **Compile Data**. We compiled nine years of annual filings into one database, utilizing information valued as of June 30, 2005, through June 30, 2013. This allowed us to track the historical claim and loss development of self-insurers over time. Utilizing multiple filings also allowed us to collect payroll information over several years. This was crucial in analyzing claim frequency and loss rates.

2. **Entity Characteristics**. For each filing entity we identified the region, type, JPA versus individual, and claims administrator. These characteristics were identified as follows.

    a. **Region**. We utilized three regions in our analysis: northern, central, and southern California. The region of each entity was identified based on the entity's zip code reported in the annual filing. We are aware there are several JPAs that have statewide membership, and these were excluded from our analysis. Similarly, individual self-insurers with statewide exposures, such as California State University (CSU) and the University of California (UC), were excluded from our analysis.

    b. **Type of Entity**. We grouped entities into four different types: municipalities, counties, educational, and other. Entities categorized as "other" include an assortment of types such as vector control (mosquito abatement), water and sewer districts, housing authorities, and parks and recreation. Entities were categorized by their type based on the entity name. Municipalities include cities and towns. Educational entities include K-12 districts, elementary school districts, high school districts, and community colleges. As discussed in the previous section, CSU and UC were excluded from this analysis because they encompass exposures in all three regions. Some entities have multiple "types," such as the City and County of San Francisco. Agencies with multiple types were excluded from our analysis.

    c. **JPA Versus Individual Self-Insurers.** Both JPAs and individual self-insurers submit annual filings with OSIP. We identified JPAs based on their names. If an entity

switched between individual self-insurer to (or from) membership in a JPA during the experience period, then we excluded it from this portion of the analysis.

d. **Claims Administrator**. The annual filing identifies the claims administrator and there is a code for those that are self-administered. Based on this code we divided those entities that are self-administered versus those that utilize a TPA. If an entity switched between self-administered to (or from) utilizing a TPA during the experience period, then we excluded it from this portion of the analysis.

3. **Historical Development Triangles**. By lining up the reported claims information by entity and evaluation date, we were able to establish triangles for claims reporting, claims closing, paid loss development, and incurred loss development. Medical and indemnity costs were combined.

4. **Claims and Loss Development Factors**. Using the triangles in the prior step we established paid, incurred, and claim count development factors. We calculated three-year and five-year average factors.

5. **Incurred Losses at 60 Months of Age**. Using the paid and incurred loss development factors from the prior step, we developed incurred losses at 60 months of age. One estimate was based on incurred losses valued as of June 30, 2013, multiplied by the three-year average incurred loss development factors. A second estimate was based on paid losses valued as of June 30, 2013, multiplied by the three-year average paid development factors. This was then adjusted by an incurred to paid ratio in order to estimate incurred losses. Our final estimate of incurred losses at 60 months was based on an average of the results of the incurred and paid development methods. Medical and indemnity losses were combined.

6. **Reported Claims at 60 Months**. We multiplied reported claims counts as of June 30, 2013, times the reported claim count development factors established in Step #4 to estimate reported claims as of 60 months.

7. **Loss Rate.** Incurred loss rate at 60 months (Step 5) divided by payroll in hundreds.

8. **Loss Rate Trend.** Based on the exponential trend of the loss rates from the most recent five years (fiscal years ending 2009 through 2013).

9. **Average Claim Size**. Incurred loss rate at 60 months (Step 5) divided by reported claims at 60 months (Step 6).

10. **Average Claim Size Trend.** Based on the exponential trend of the average claim size from the most recent five years (fiscal years ending 2009 through 2013).

11. **Claim Frequency.** Reported claims at 60 months (Step 6) divided by payroll (in hundreds of thousands).

12. **Claim Frequency Trend.** Based on the exponential trend of claim frequency from the most recent five years (fiscal years ending 2009 through 2013).

13. **Average Payment Year.** This represents the average year after an injury is reported in which the payment is made. The percent of loss that is paid in each year of development is derived from three-year average paid loss development patterns (Step 4). Assuming payments happen mid-year; these percentages are then used to estimate the average year of payment. This only includes payments through 60 months. Payments for medical and indemnity benefits are combined.

14. **Percent of Claims Closed.** Closed divided by reported claims as of June 30, 2013 (fiscal years ending 2009 through 2013).

15. **Average Year of Claim Closure.** The percent of claims that close in each year of development is derived using reported and closed claims valued as of June 30, 2013. Assuming that claim closures happen mid-year, these percentages are then used to estimate the average year of closure. We assumed claims open as of 60 months will close on average in month 78.

16. **Average Case Reserve per Open Claim.** Case reserves divided by open claims as of June 30, 2013 (fiscal years ending 2009 through 2013).

Each time we tested one of the characteristics we controlled for the other three characteristics. For example, in testing the impact of region we controlled for differences in type of entity, JPA versus individual, and TPA versus self-administered. All losses and claim counts are developed to 60 months age of maturity using standard actuarial development methods.

The analysis in this section is based on the annual data filed by self-insurers with OSIP, which is described in the "data" section of this report. The following sections provide a more detailed analysis and discussion of our results.

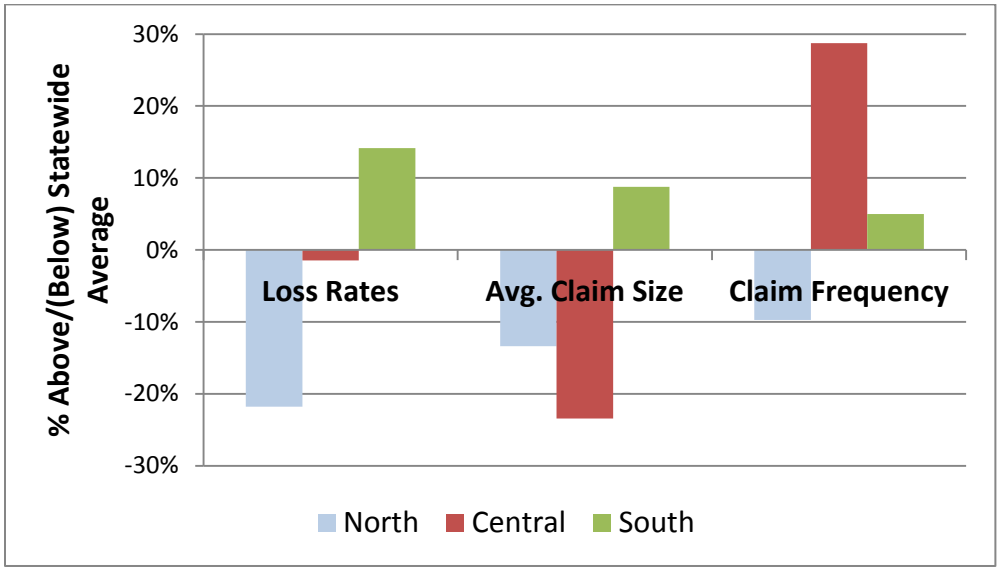
B. Results

1. Region

We found the self-insurer's region has a significant impact on claims costs and other key characteristics. After controlling for the other self-insurer characteristics, claims in the southern California region tend to cost more, have a slower payout, and close more slowly than those in the northern and central regions. The payroll in our study was divided into region as follows: 40% north, 9% central, and 51% south.

The following chart shows that loss rates tend to be lower in northern California, roughly average in central California, and higher in southern California. This pattern was consistent among municipalities, counties, and educational self-insurers. The lower rates in northern California are a result of lower claim frequency and lower average claim size. The higher rates in southern California are driven primarily by higher average claim size, with higher claim frequency also playing a role.

Chart III-1
Comparison of Loss Rates, Average Claim Size, and Claim Frequency by Region



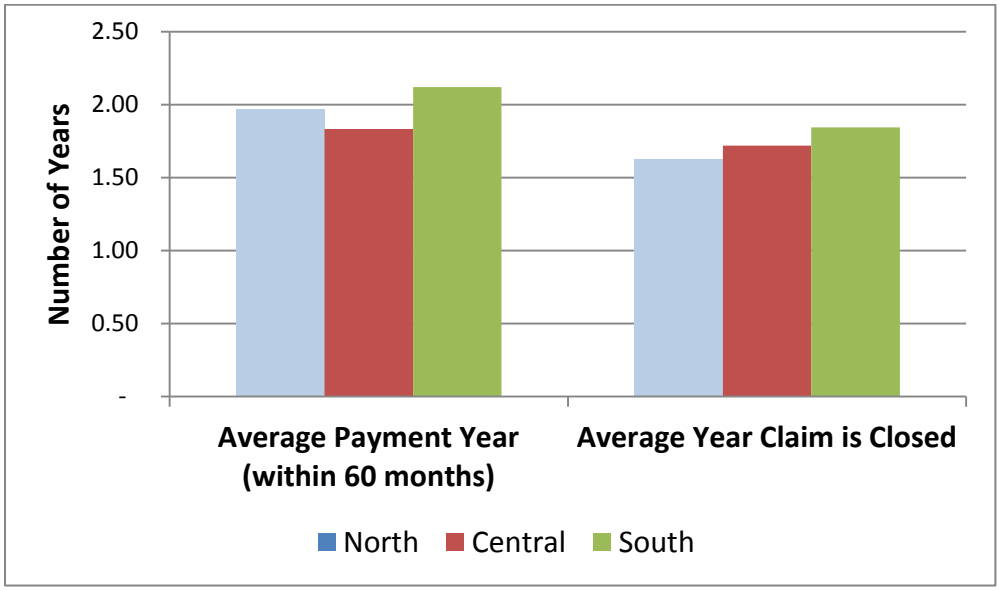
Loss Rate = Incurred loss developed to age 60 months / Payroll

Not only are average rates in southern California higher than statewide averages, but the following chart shows that over the past five years the rates have trended upwards faster in the south than in the north and central regions.

Chart III-2
Comparison of Annualized Trends by Region

The following chart shows that claims in southern California tend to be paid and to close more slowly than those in the other regions.

Chart III-3
Comparison of Payout and Claim Closure by Region

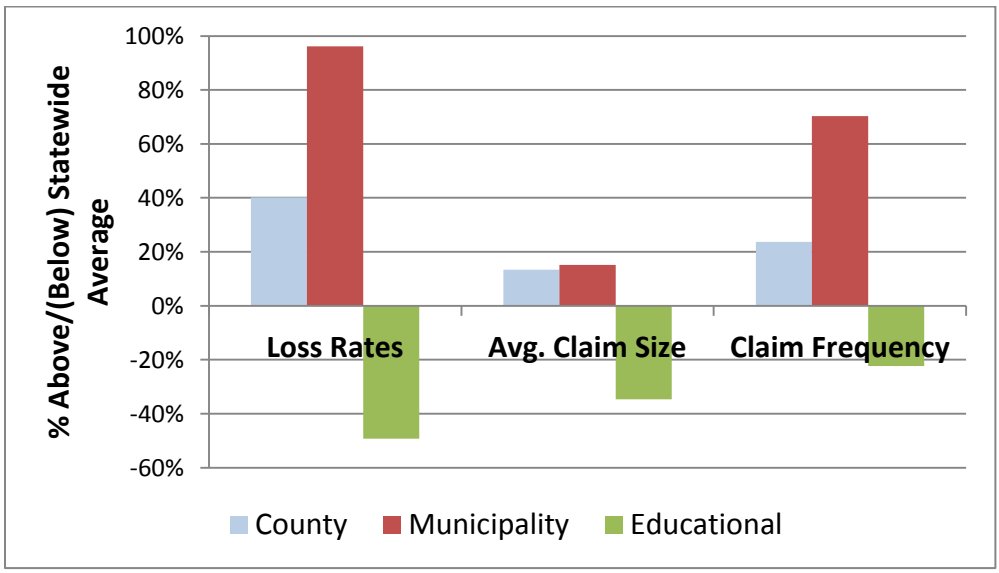


2. Type of Agency

Not surprisingly, the type of agency has a major impact on the loss rates, claims severity, and claims frequencies. The payroll in our study was divided into type as: 22% county, 19% municipality, and 59% educational.

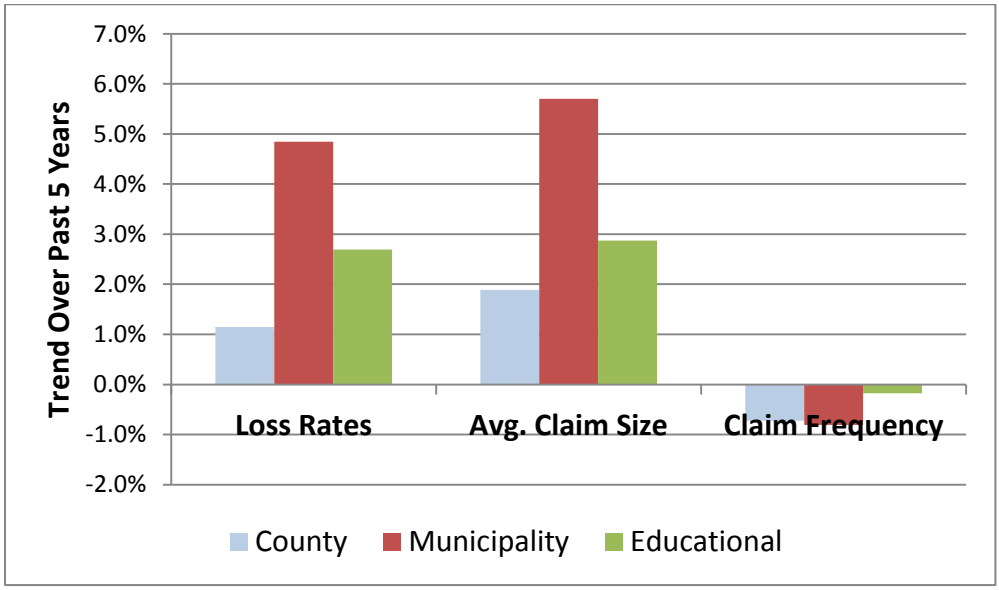
The following chart shows loss rates tend to be lower for educational agencies, driven by both lower frequency and lower average claim size. Municipalities have higher rates than counties, mostly due to higher claim frequencies.

Chart III-4
Comparison of Loss Rates, Average Claim Size, and Claim Frequency by Type of Self-Insurer



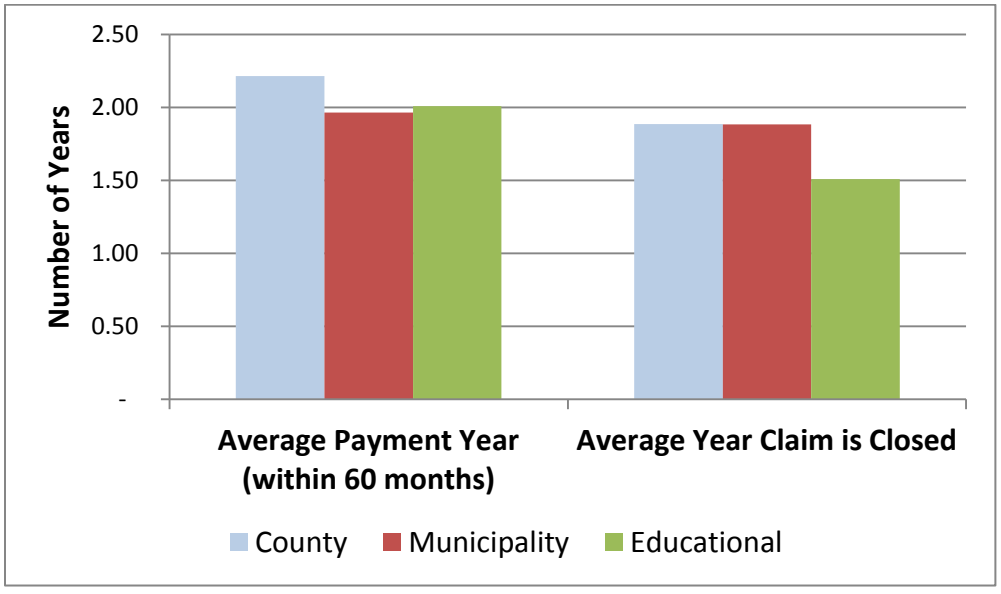
Not only are municipality average rates higher than those of other agencies, but the following chart shows that over the past five years the municipality loss rates have trended upwards faster than those of other types of agencies. This is driven by trends in the average claim size.

Chart III-5
Comparison of Annualized Trends by Type of Self-Insurer



The following chart shows that educational entities close claims more quickly than municipalities and counties do.

Chart III-6
Comparison of Payout and Claim Closure by Type of Self-Insurer

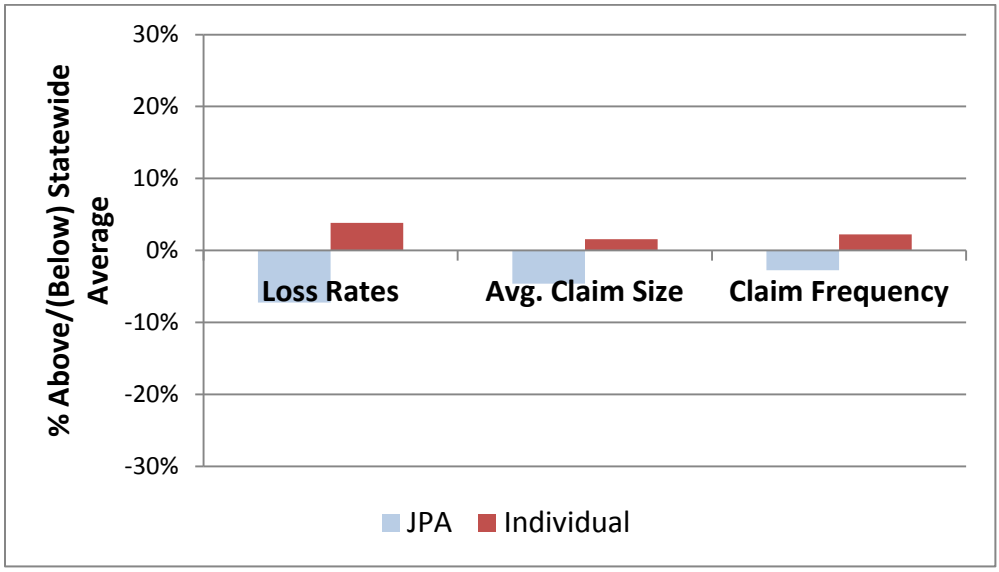


3. JPA Versus Individual Self-Insurers

Loss rates, claims severity, and claims frequencies do vary for entities in JPAs versus those individually self-insured, but the differences are not nearly as big as those by region or type of entity. The payroll in our study was divided as 35% entities in JPAs and 65% entities that are individually self-insured.

The following chart shows that loss rates tend to be lower for entities in JPAs, driven by both lower frequency and lower average claim size.

Chart III-7
Comparison of Loss Rates, Average Claim Size, and Claim Frequency for JPAs Versus Individuals



Given that larger insured employers tend to have lower experience modification factors than smaller insured employers, we expected individual self-insurers (who tend to be larger) to have lower loss rates than those who participate in JPAs. The following are possible reasons why JPA loss rates are lower than those of individuals.

1. **Urban/Rural**. Individual self-insurers are probably more likely to be in urban settings, and this could contribute to higher loss rates, particularly among law enforcement employees.

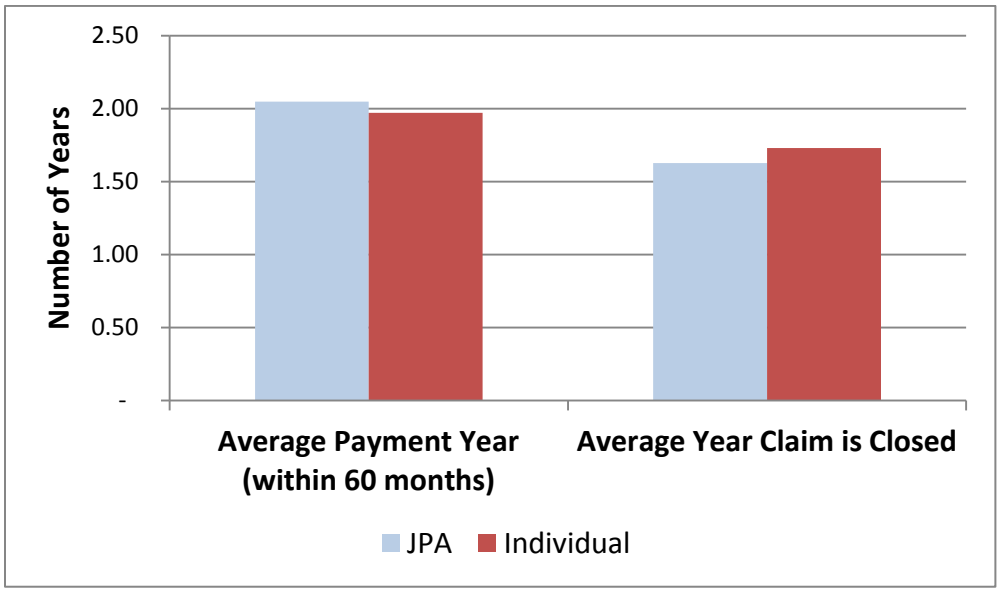
2. **JPA Services**. It is possible that key JPA services such as safety, ergonomic reviews, and return-to-work programs assist small and medium-size self-insurers to mitigate costs in a way not experienced by small and medium-size employers who are self-insured as individuals.

Over the past five years JPA loss rates increased at a faster pace than those of individual self-insurers. This is driven by trends in the average claim size.

Chart III-8
Comparison of Annualized Trends for JPAs Versus Individuals

The following chart shows that JPA claims tend to be paid slightly more slowly than those of individual self-insurers, and JPAs tend to close claims slightly more quickly than average.

Chart III-9
Comparison of Payout and Claim Closure for JPAs Versus Individuals

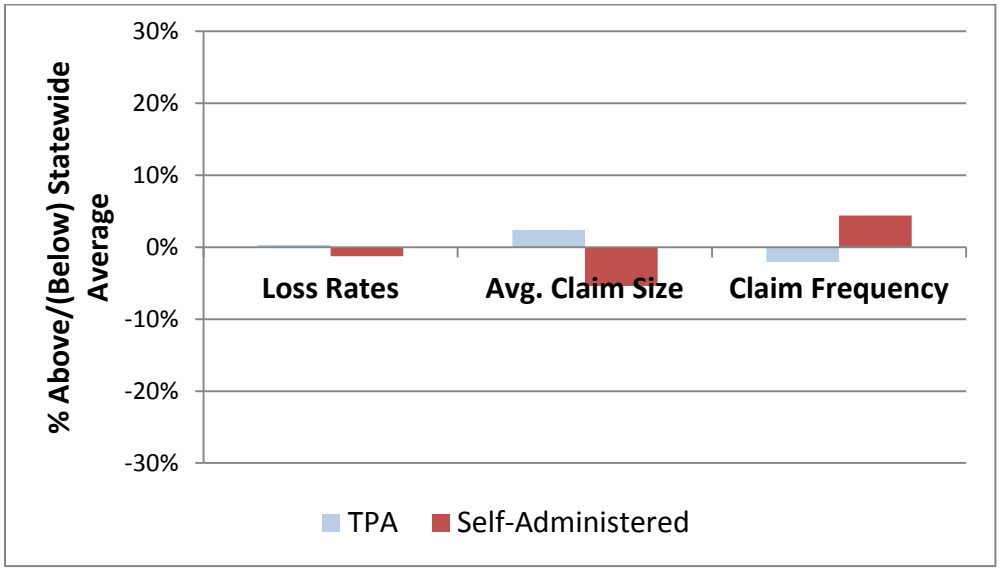


4. Claims Administrators

Loss rates, claims severity, and claims frequencies do vary for entities that use TPAs versus those that self-administer, but the differences are not nearly as big as those by region or type of entity. The payroll in our study was divided as 80% entities that use TPAs and 20% entities that self-administer.

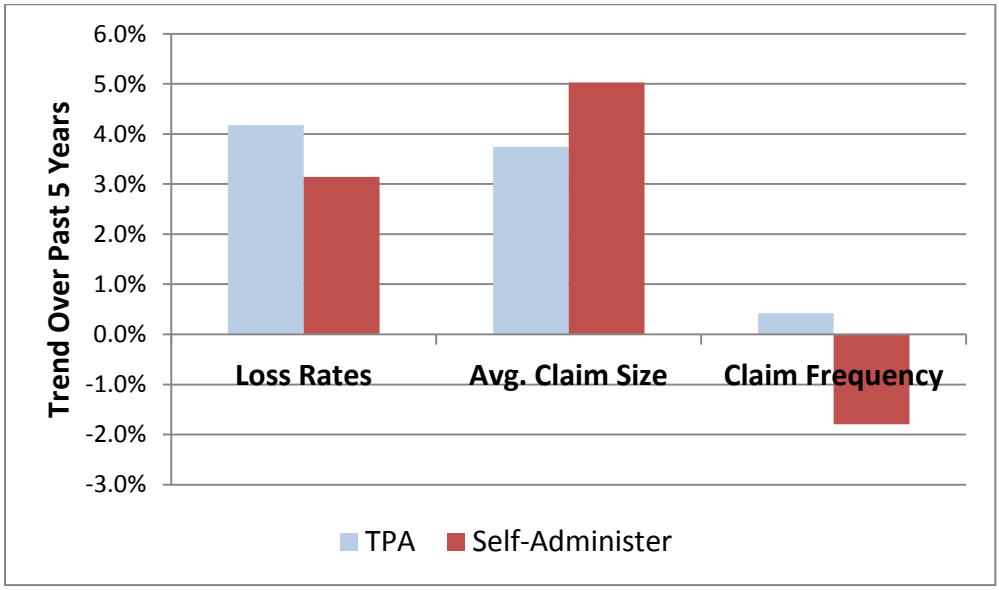
The following chart shows that loss rates are virtually identical for entities that utilize TPAs versus those that self-administer. Those that use TPAs tend to have slightly higher average claim size and slightly lower claim frequency, whereas the opposite is true of those that self-administer.

Chart III-10
Comparison of Loss Rates, Average Claim Size, and Claim Frequency for TPAs Versus Self-Administered



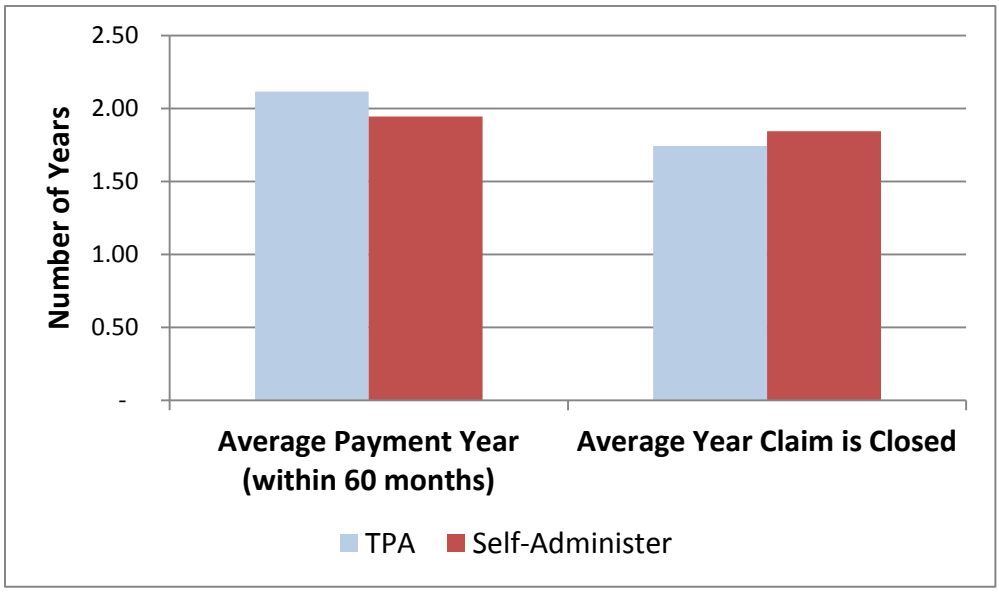
Over the past five years entities with TPAs have had loss rates increase at a slightly higher rate than those that self-administer. Those with TPAs have experienced lower increases in average claim size but higher frequency trends.

Chart III-11
Comparison of Annualized Trends for TPAs Versus Self-Administered



The following chart shows that entities with TPAs tend to pay claims more slowly than self-administered self-insurers, and they tend to close claims slightly more quickly than average.

Chart III-12
Comparison of Payout and Claim Closure for TPA Versus Self-Administered



C. Findings

The following summarizes our findings.

1. **Region**: We found a self-insurer's region has a significant impact on the claims costs. Self-insurers in southern California have experienced higher claim frequency, higher average claim size, and higher overall cost per $100 of payroll. Over the past several years this disparity between southern California and the rest of the State has increased. In addition, claims of southern California self-insurers tend to stay open longer in comparison to those in the rest of the State.

2. **Type**: The type of agency has a major impact on the loss rates, claims severity, and claims frequencies. Municipalities tend to have the highest costs, whereas educational entities (schools, colleges, and universities) have the lowest. Over the past several years the cost of municipal claims has risen at a faster pace than that of counties or educational entities. This is primarily due to increases in the average claim size. Also, claims of education self-insurers tend to close faster in comparison to those of counties and cities.

3. **JPAs Versus Individual Self-Insurers**: In general, JPAs have experienced lower costs per $100 of payroll than individual self-insurers. However, JPA costs have been increasing at a faster rate than those of individual self-insurers over the past several years.

4. **Claim Administrator**: We found almost no difference in loss rates between self-insurers that utilize a TPA versus those that self-administer. Those that self-administer tend to have a higher claim frequency, but this is offset by a lower average claim size. In addition, loss rates have been increasing at a slower pace for those that self-administer than for those that utilize a TPA.

5. **Benchmarking**: The results in this section can be helpful in benchmarking. Understanding the impact of self-insurer characteristics on claims results should help entities to determine who to benchmark against and what adjustments to make if the comparison group has different characteristics.

D. Recommendations

We believe this is one of the first studies to compare the experience of California public self-insurers after taking into account key employer characteristics, as well as adjusting for loss and claim development. The following are recommendations based on our findings.

1. **Investigate Disparities by Region.** The analysis of insurance company data by the WCIRB has pointed to disparities between claim frequencies and costs between different regions

of the State and our analysis confirms these disparities also exist for public self-insurers. Since one of the goals of the workers' compensation system is to have equal treatment of and benefits for injured workers, we believe it is worth exploring the root causes of this disparity.

2. **Medical and Indemnity Costs.** This analysis combines medical and indemnity costs together. However, these costs are split out on the OSIP annual report and it would be possible to evaluate them separately, given the current information that is available. This would be helpful in gaining a better understanding of some of the variances that we found.

3. **Make Benchmarking Data Publicly Available.** This study shows it would be quite possible to release statewide information for the purposes of benchmarking. Several years ago the California Institute for Public Risk Analysis (CIPRA) produced annual benchmarking reports based on OSIP data. These CIPRA reports evaluated claims frequency, average claim size, and loss rates. This current analysis extends the CIPRA reports in several ways: losses are developed to 60 months to adjust for differences in case reserve adequacy; trends over time are calculated; claims closing rates are evaluated; and the impact of employer characteristics were also analyzed. The CWCI currently produces annual reports based on OSIP data and the WCIRB utilizes OSIP data for benchmarking in the ratemaking process. The State may want to consider reviving the CIPRA reports with the additional methods utilized in this report.

4. **Changes to the OSIP Annual Self-Insurance Report.** All self-insureds, JPAs, and SIGs are required to submit an annual report to OSIP (CCR §15250). The OSIP reports are foundational to the findings in this study. However, they have had little modification over time and we believe it would be useful to reevaluate what data is collected. Data storage and computing power is quite inexpensive in comparison to when this report was first designed, and so it is possible that OSIP could collect more data without creating difficulties for self-insurers. The following are potential modifications to the OSIP report that could increase their utility over time.

    a. **Add Allocated Loss Adjustment Expense (ALAE).** The OSIP report currently only collects medical and indemnity payments. Over the past several years ALAE costs have been increasing more quickly than losses, and medical cost containment expenses have been moved from medical to ALAE. As a result, ALAE is now a much bigger portion of total costs than it used to be. We estimate it probably accounts for as much cost as temporary or permanent disability.

    b. **Split Temporary and Permanent Disability Costs.** These two types of benefits behave very differently in terms of average claim size and payout pattern. In addition, recent reforms have impacted these benefits quite differently. Therefore, we feel it would be beneficial to explore breaking them out.

c. **Split Out More Years.** The OSIP report currently requires claims experience from the past five years to be broken by year, and reserves for all prior years are lumped together. Given that the payout pattern for workers' compensation has become more and more extended, this leaves an increasing portion of total liabilities lumped together in a way that is difficult to analyze. For example, public agencies reported about $7.4 billion in case reserves on the OSIP annual report as of June 30, 2013. Of that $7.4 billion, over $4.0 billion was bucketed together because they are associated with claims that are over five years old.

d. **Report Self-Insured Retention.** Self-insurers include their SIR on the OSIP annual report, but the SIR is not included in the publicly-available file that summarizes public self-insurance data by member. Including the SIR in the public file would greatly assist in benchmarking efforts among public self-insurers.

e. **Accident Year Versus Report Year.** The OSIP annual report requires claims to be organized by year in which the claim is reported. This is useful in tracking case reserve adequacy because it facilitates tracking the experience of a fixed set of claims over time. However, tracking claims by report year makes it difficult to estimate total liabilities because it does not account for unreported claims associated with injuries which have already occurred. This has become a bigger issue over the past few years, as statewide statistics from the WCIRB suggest the reporting of indemnity claims has become increasingly extended. We believe OSIP should consider requiring claims and losses to be reported on an accident year basis in order to facilitate the estimation of total liabilities and evaluate whether or not a significant portion of claims are reported late.

f. **Include Geography Code**. The findings of this report suggest that geographical region plays an important role in claims costs, thus it is an important part of benchmarking. However, it is difficult to assign region based on the OSIP data made publicly available for two reasons. First, there is no way to identify which JPAs are confined to a specific region and which operate on a statewide basis. Second, one must extract the zip code from self-insurers and assign that to a region. There are many ways of defining regions and so different reports may draw different conclusions. OSIP may want to consider assigning a region to each self-insurer in order to standardize the process and facilitate comparisons.

g. **Identify Primary Versus Excess JPAs.** Some JPAs are considered "primary," meaning they cover claims from the first dollar of cost. Other JPAs provide excess coverage, meaning they cover costs above a specific retention. By definition primary and excess JPAs have very different claims characteristics. Primary JPAs will tend to have a larger volume of smaller claims, and excess JPAs will have a smaller volume of claims but those claims tend to be large. As a result, it is very important to distinguish primary from excess JPAs when comparing claims costs,

and it would be very helpful if OSIP were to include a primary versus excess JPA identifier in the information that is made public.

E. Limitations

There are several limitations we have identified that are associated with using the OSIP data in our analysis. These include the following.

1. **Unaudited.** The OSIP data is not audited, thus there is no guarantee regarding its accuracy. We performed some basic reasonability checks of the data, but that is no substitute for auditing the data.

2. **Definition of Payroll.** For workers' compensation underwriting and rating purposes, payroll has a very specific definition. There are defined ways to handle overtime, bonuses, and volunteers. It is quite possible different entities do not report payroll to OSIP on a consistent basis. This would impact the loss rates and frequencies calculated in our analysis.

3. **Definition of a Claim.** It is possible that agencies are inconsistent in how they report minor incidents, such as events requiring no medical treatment or only first aid. Some agencies may report these incidents as workers' compensation claims, while other agencies may not. Agencies may also be inconsistent regarding the definition of an "indemnity" claim. This would impact the claim frequencies, average claim sizes, and closing rates in our analysis.

4. **Self-Insured Retention (SIR).** Entities that self-insure may retain different levels of risk. For example, some may retain only the first $250,000 of each self-insured claim, while others may retain the first $1,000,000 (or more). The SIR impacts the loss rates, average claim sizes, and even payout patterns of self-insured entities. While the SIR is reported to OSIP in the annual filing, it is not included in OSIP's excel summary of self-insured information. As a result we were not able to adjust for differences in SIR.

5. **Treatment of 4850 Benefits.** In accordance with labor code 4850, certain safety personnel receive lost wage benefits above and beyond the typical workers' compensation temporary disability benefits received by other injured employees. It is possible that agencies are inconsistent regarding whether or not they include 4850 benefits in their annual reports to OSIP.

6. **Loss Development after 60 Months.** Each annual filing contains summarized information on open and closed claims broken out for the most recent five years. For all older years the information for open claims is summarized together. As a result, we were only able to create claims and loss development triangles up to 60 months of age. This means loss rates and average claim sizes were developed to 60 months of age but

not to their ultimate values. As a result, this analysis does not reflect differences in loss development or claim closure patterns that occur after age 60 months.

7. **Loss Only.** The claims cost information reported to OSIP only includes medical and indemnity costs. This means our analysis excludes the following types of expenses: 1) Allocated Loss Adjustment Expense (ALAE, mostly legal and medical cost containment expenses); 2) Unallocated Loss Adjustment Expense (ULAE, mostly claims administration fees); and 3) other program costs (such as risk management, pool administration, safety, brokerage, etc.). As a result the OSIP data provides an important but limited picture of self-insured workers' compensation costs.

8. **Report Year.** The claim year in the annual filings is meant to be based on the date a claim is reported. This is quite different from data used in most actuarial reports and ratemaking agencies (such as the WCIRB), which typically utilize claims information summarized by accident or policy year. As a result, it is difficult to compare results based on OSIP data to those in most actuarial studies. In addition, it is possible that agencies are inconsistent in how they report claims to OSIP, with some using report year and others using accident year. We developed claim triangles to track the number of claims reported for a given year over time. It appears that there is little movement over time in the number of claims reported to OSIP for a given year. This gives us some comfort that most agencies are utilizing report year as opposed to accident year.

9. **Departments.** Key workers' compensation exposures for many agencies include police, fire, and public works. However, the treatment of these exposures is not always consistent. For example some municipalities may include police, fire, and public works departments in their workers' compensation program. On the other hand, other municipalities may have some or all of these services provided by third parties and the outsourced exposures are not part of these municipalities' self-insured workers' compensation program. As a result, one needs to be very careful in comparing the experience of one municipality to another, since they may treat any number of services differently. This also means that in this study the type of entity identified as "municipality" is not homogeneous.

IV. Benefits Expenditures: Permanent Disability and Claimant Age

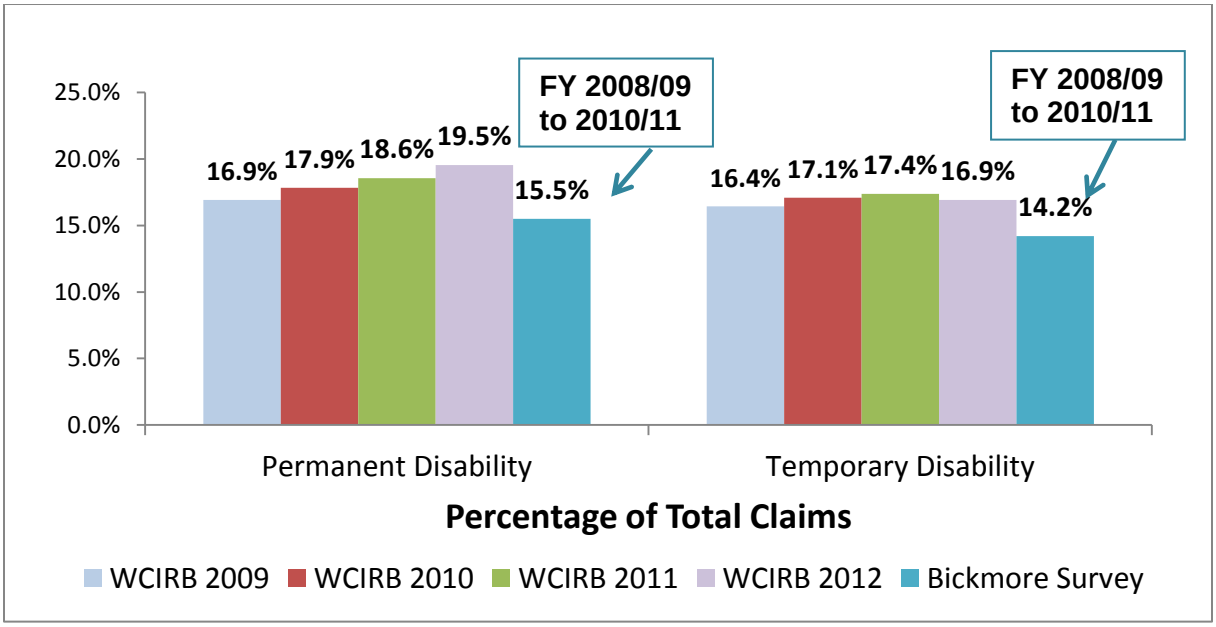
A. Permanent Disability

In addition to analyzing the general cost of benefits in the previous section, we performed additional analysis on permanent disability (PD) claims. We did this extra analysis for two major reasons. First, the great majority of total costs are associated with PD claims. In our database, over 83% of total incurred costs for the years 2008/09 through 2010/11 were associated with PD claims. Second, PD claims were one of the primary focuses of SB 863. Therefore, any differences regarding PD claims between California self-insurers and other employers are particularly important.

Our findings regarding PD claims are based on claims listings provided by 12 survey respondents that separately identified PD, temporary disability (TD), other indemnity, and medical benefits. More information regarding the surveys is available in Section VIII of this report.

In general, we found our data had a smaller percentage of PD and TD claims than industry data reported by the WCIRB. It should be noted the WCIRB estimates are "at ultimate," whereas our findings are based on reported claims. For that reason we restricted this comparison to more mature years. In addition, the WCIRB has a much larger database than we worked with in this study. The WCIRB database is composed of experience of insured employers, whereas ours is from a sampling of public self-insurers.

Chart IV-1
Distribution of Claims by Type of Claim



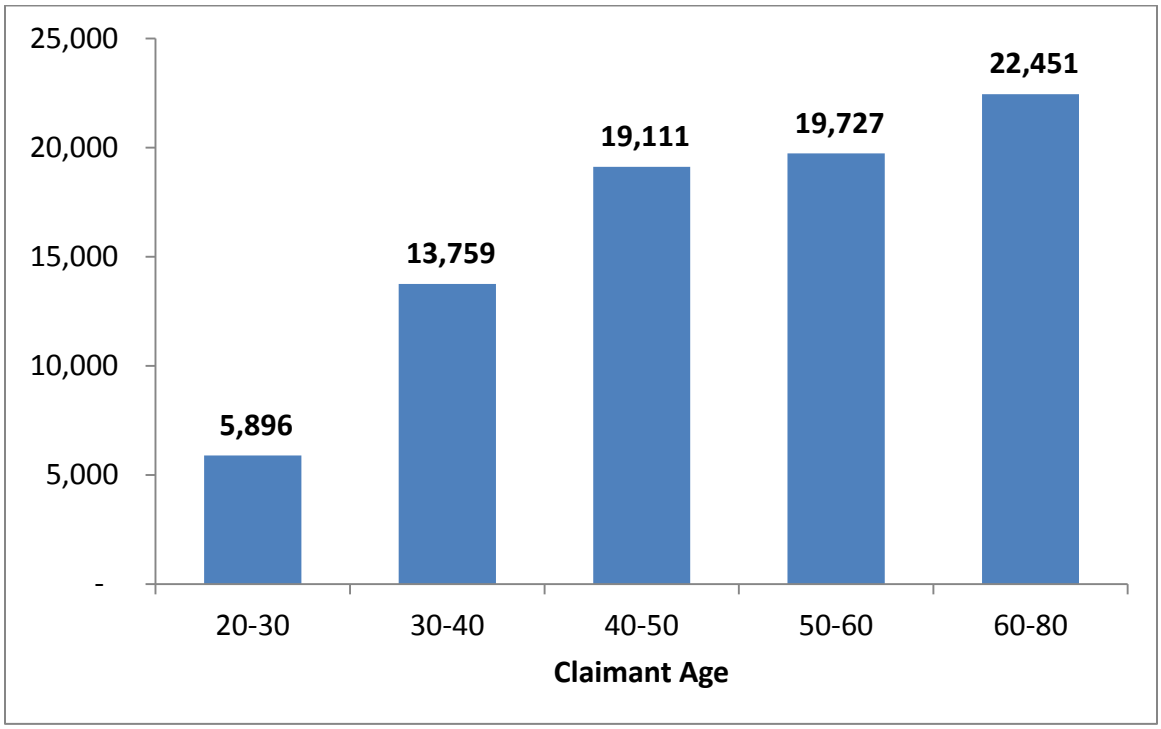
* WCIRB Results from Actuarial Committee Agenda 3/19/14, Page IV-A-7 (WCIRB 2012 results are preliminary, based on PY 2011)

B. Claimant Age

Several drivers of workers' compensation claims have been well documented. For example, we have already explored the impact that geographical region within California has on workers' compensation costs (Section III). In addition, the California Workers' Compensation Institute (CWCI) has identified several factors affecting claims costs, including litigation and pharmacy utilization. The following is a discussion of the impact of the age of the injured worker in affecting the average claim size. We found age has a major impact on the average claim size, mostly related to permanent disability.

The following chart shows claimant age has a major impact on average claim size.

Chart IV-2
Average Incurred Loss and ALAE by Claimant Age Category
(Accident Years 2008/09-2010/11 Valued as of 12/31/13)



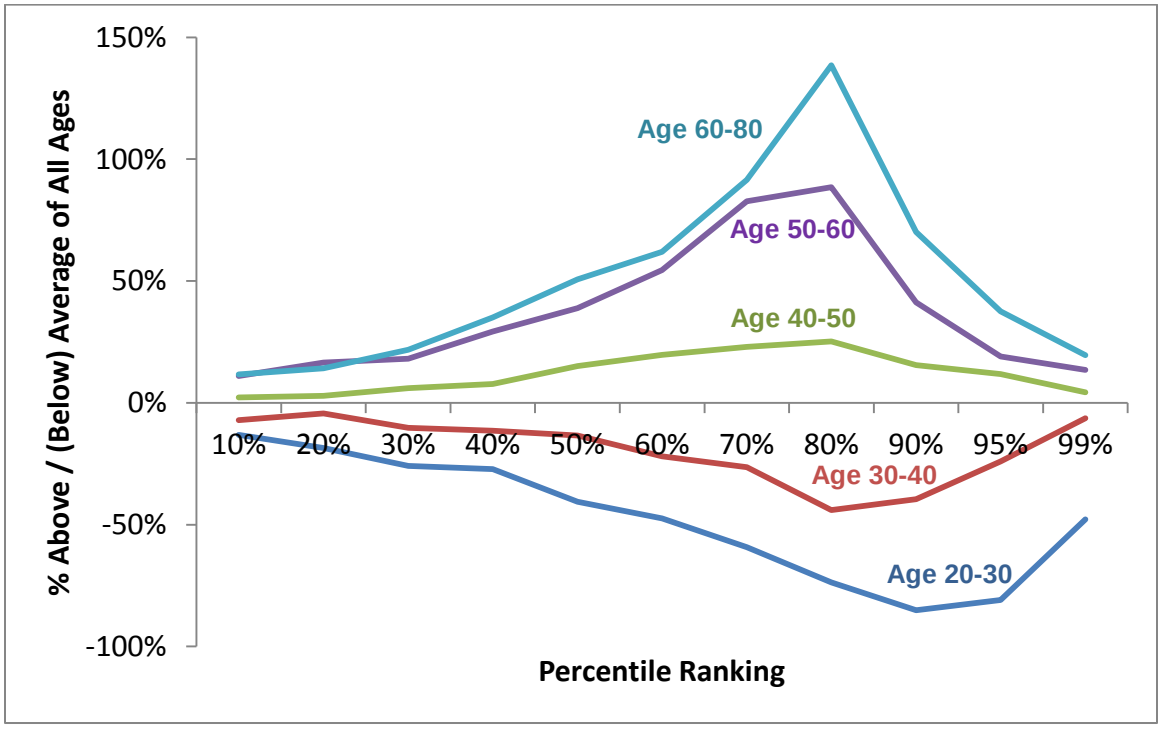
The findings in the preceding chart are similar to but even more pronounced than those found by the NCCI in their study of the impact of age on workers' compensation costs.[9] The NCCI found that "In terms of loss costs per worker, the major difference among age groups occurs between the 25 to 34 and the 35 to 44 age groups. All groups of workers age 35 to 64 appear to have similar costs per worker."[10] Our age categories are somewhat different than those of the

[9] NCCI Research Brief, "Workers' Compensation and the Aging Workforce, December 2011.
[10] NCCI Research Brief, "Workers' Compensation and the Aging Workforce, December 2011, Page 1.

NCCI, but we also found that the highest increase in claim size was associated with claimants aged 40 and below.

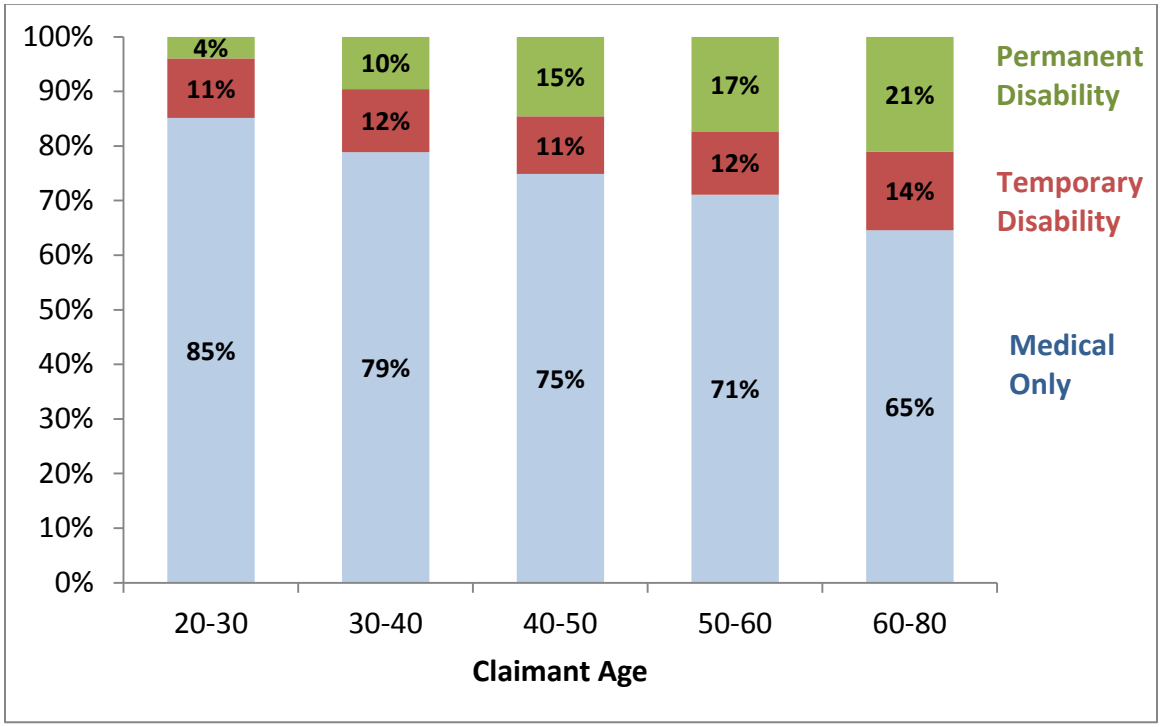
There are two major drivers affecting the results in the preceding chart. First, claims of almost all sizes appear to be influenced by claimant age. When we rank claims by percentile within each age category, we find that at almost all percentiles the claim size increases with age. The following chart shows the relationship between the claim sizes for each age group. This shows that small claims tend to cost more as age increases. Similarly, mid-size and large claims are also increase with the age of the claimant. The fact that claimant age impacts even small claims, which tend to involve only medical costs and not lost wage benefits, shows that differences in wages are not the only factor affecting higher claim sizes for older claimants.

Chart IV-3
Average Incurred Loss and ALAE by Claimant Age Category
(Accident Years 2008/09-2010/11 Valued as of 12/31/13)



The second important factor impacting increase in claim size by age is the percentage of total claims involving permanent disability increases with age. Given that claims involving PD tend to be much expensive than TD and Medical Only claims, this increase has a material impact on average claim sizes. The following chart shows the claims by injury type and age grouping.

Chart IV-4
Distribution of Claim Counts by Type of Claim and Age Group
(Accident Years 2008/09-2010/11 Valued as of 12/31/13)



The prior chart shows that a filed claim is more than five times more likely to involve PD for a worker aged 60-80 than for a worker aged 20-30. This has a profound impact on average claim size by age.

The results in this section relate only to average claim size and not to claim frequency. We do not have exposure information by claimant age, thus were not able to investigate the impact of claimant age on claim frequency. In the NCCI's study of the impact of age on workers' compensation costs they found age had very little impact on workers' compensation claims frequency. "The long-standing tenet that younger workers have much higher injury rates is no longer true. Therefore, differences in loss costs by age in recent years primarily reflect differences in severities since differences in frequency by age have virtually disappeared."[11]

There are likely many factors that impact the average claim size by age. For example, older workers most likely have a higher average weekly wage than younger workers, thus increasing their lost time benefits. In addition, the mix of job type and injury type probably varies by age. We were not able to pursue these questions further given the limited data in our survey, but we feel that this could be a very fruitful area of further research which could help in the areas of safety, claims management, and claim reserving.

[11] NCCI Research Brief, "Workers' Compensation and the Aging Workforce, December 2011, Page 1.

C. Findings

1. **Distribution of Claims by Type**. We found the distribution of TD and PD claims to be similar between the public self-insurers who responded to our survey and the insured experience as reported by the WCIRB. Differences in our results are probably due to the fact that the self-insurance findings are based on a snapshot, whereas WCIRB data is developed to ultimate.

2. **Impact of Claimant Age**. We found claimant age is significantly correlated with claims costs. On average, the cost per claim increases with the age of the injured worker. This is true of small as well as larger claims, and one of the key drivers is that PD is more likely to be involved in injuries involving older claimants.

D. Recommendations

1. **Data Collection.** Claimant age is an example of a key factor impacting claims costs. Examples such as this show that while summarized data such as what is available from OSIP or an actuarial report is useful, those sources are not sufficient if the goal is to understand key cost drivers and facilitate more effective risk control. Sources of detailed claims information, such as claims listings or the WCIS, are necessary to better understand the dynamics affecting injuries and claims costs.

2. **Impact of Claimant Age.** The high correlation between claimant age and claims costs suggests that this could be a fruitful area of further study, particularly if it leads to risk control solutions that are tailored to employee age.

V. Claims Administration: Performance Audit Review

The purpose of this section of the report is to discuss claims administrative performance as measured in the DIR DWC Performance Audit Review (PAR) reports. We evaluated the impact of claims administrator characteristics on overall performance audit scores, as well as on specific performance audit measurements. The three self-insurer characteristics we tested were region, type of claims administrator, and public self-insurer JPA versus individual. The results are based on PAR reports from the years 2010 through 2012.

A. Methodology

We utilized audit results based on the following characteristics: region, type of claims administrator, and JPA versus individual public self-insurer. The following is a brief description of how we identified each of these in the annual audits.

1. **Region**. The "location" (or city) of each entity audited is identified in the audit report. Specifically, we identified each location as either being outside of California, inside the Los Angeles area, or in California but not in the Los Angeles area. The Los Angeles area is defined as Los Angeles, Orange, Riverside, San Bernardino, and Ventura counties. We did not further subdivide the regions outside of Los Angeles due to concerns that there would be insufficient volume of data to draw credible conclusions.

2. **Type of Claims Administrator**. We compared results for each of the types of claims administrators identified in the audit. This includes insurers, third party claims administrators (TPA), insurer/TPAs, public self-insurers that self-administer claims, and private self-insurers that self-administer claims.

3. **JPA Versus Individual Self-Insurers.** The audits further identify whether those public self-insurers that self-administer claims are JPAs or individuals. We compared results on this basis as well.

The following table summarizes the number of entities and files subject to review.

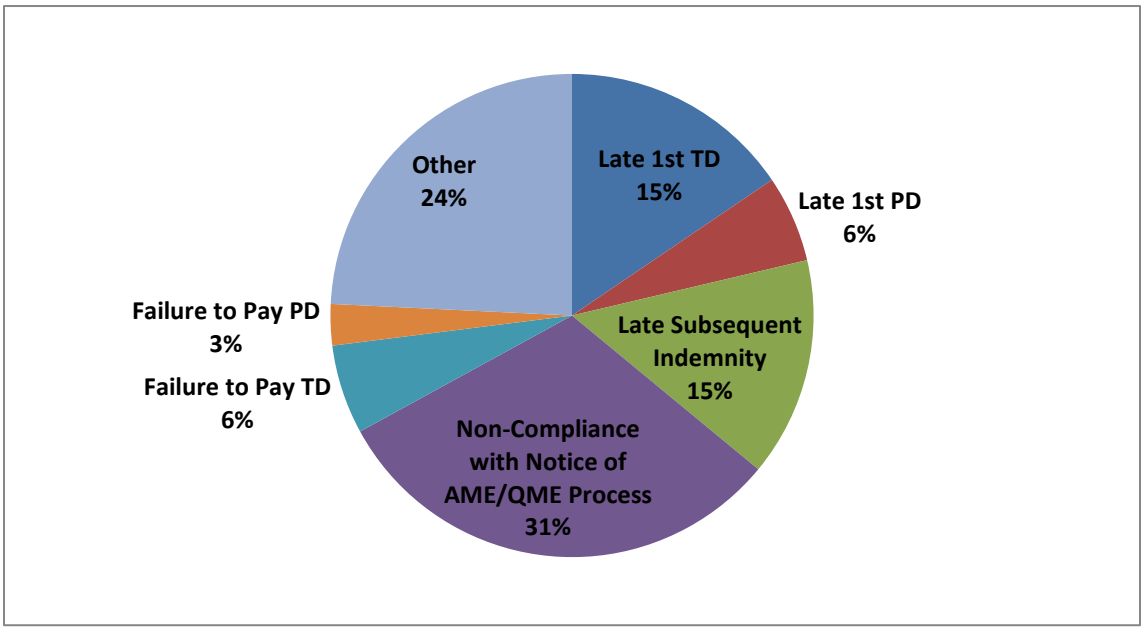
Table V-1
Overview of Entities in DWC PAR Audits 2010-2012

	Number of Entities	Number of Files Audited	Average Number of Files per Entity
Grand Total	176	9,995	57
Region			
California, excluding Los Angeles Area	95	5,122	54
Los Angeles Area	66	3,901	59
Nationwide Excluding California	15	972	65
Type of Administrator			
Insurer	31	1,843	59
Insurer/TPA	12	942	79
TPA	83	4,977	60
Private Self-Insurer	20	780	39
Public Self-Insurer	30	1,453	48
Type of Public Self-Insurer			
JPA	10	467	47
Individual	20	986	49

B. Penalties

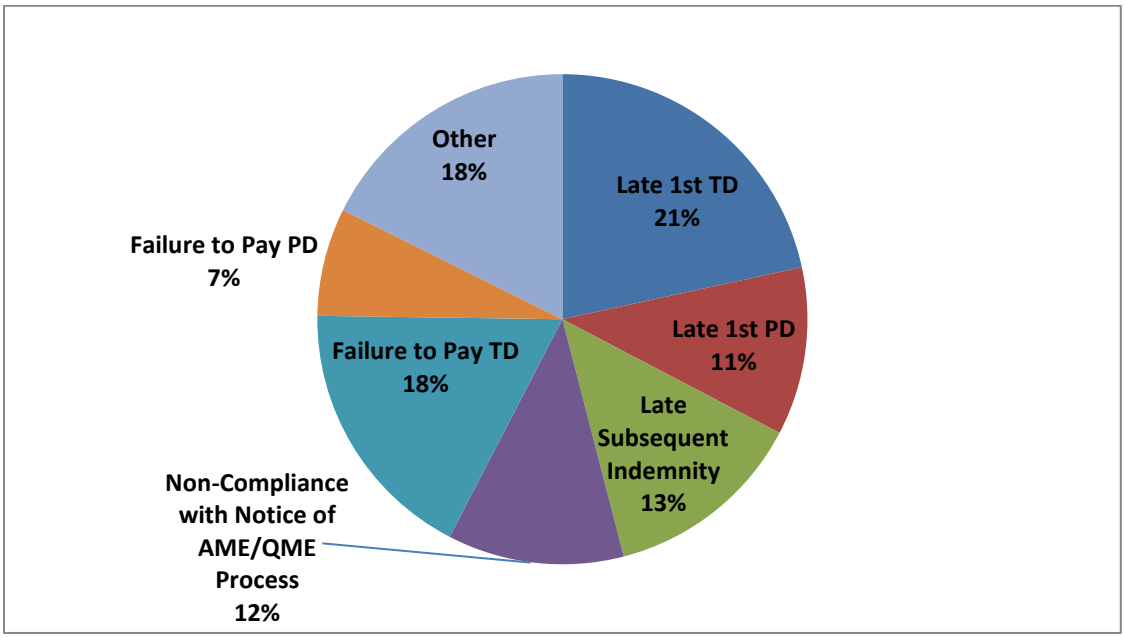
For each entity characteristic we are interested in both the overall PAR score, as well as the specific audit penalties identified in the report. The three years of reports we evaluated included a total of 13,770 audit penalties. The following graph identifies the overall distribution of the number of audit penalties.

Chart V-1
Distribution of Number of Audit Penalties



The reports cited a total of $4.35 million in audit penalties, of which $1.15 million was assessed. The following graph identifies the overall distribution of the cited audit penalty dollars.

Chart V-2
Distribution of Audit Penalty Dollars

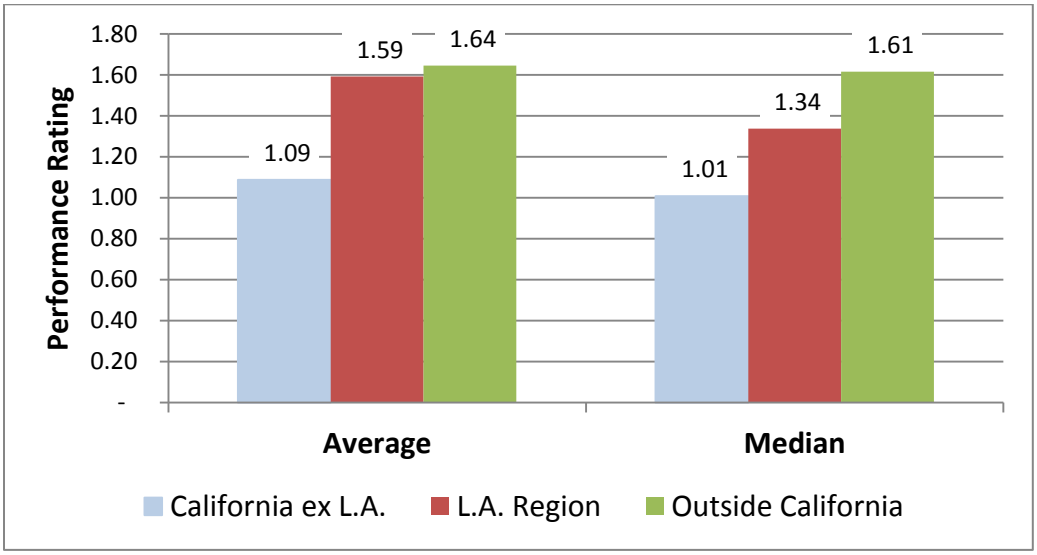


1. By Region

We found the claims administrator's region has a significant impact on PAR audit results. In this analysis the administrators are divided into region based on the location identified in the PAR audit reports. The regions were as follows: Los Angeles Area (defined as Los Angeles, Orange, Riverside, San Bernardino, and Ventura counties), California excluding the Los Angeles area, and nationwide excluding California. The administrators outside California had the highest performance ratings (a low score indicates better results) and the highest number of audit penalties per claim. Next highest in performance ratings was the Los Angeles area, and California excluding Los Angeles had the lowest.

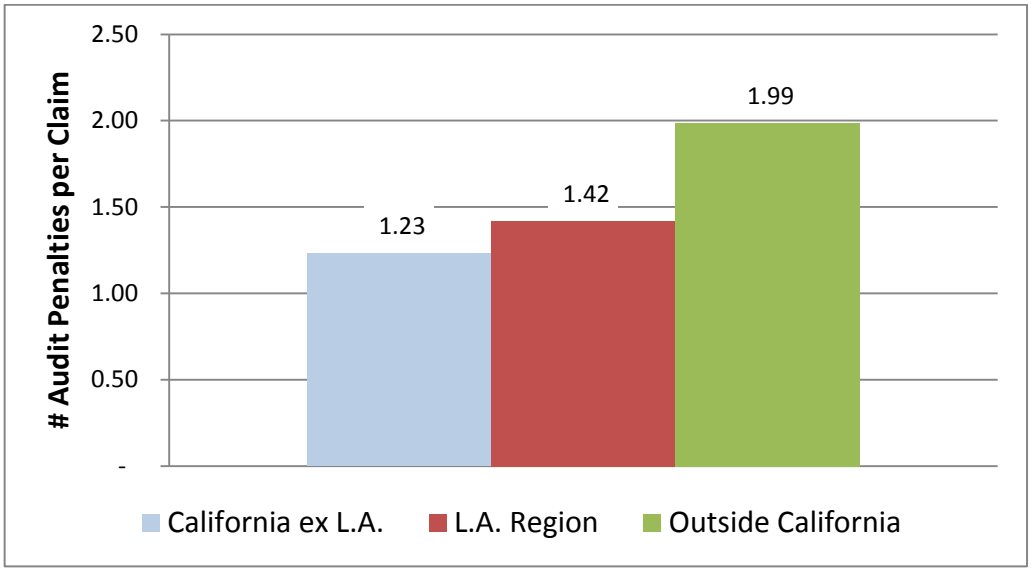
The following chart shows the average and median performance ratings by region for 2010-2012. Again, a low performance rating represents a better result. We are presenting median scores in addition to the averages because the average can be skewed by single large ratings. For example, one administrator in the Los Angeles area had a performance rating of over 14.76. This score has a significant impact on the average score for the Los Angeles area but does not significantly impact the median. The median is simply the middle score, meaning that half of the audit scores are higher than the median and half are lower for that particular region.

Chart V-3
Comparison of Performance Ratings by Region



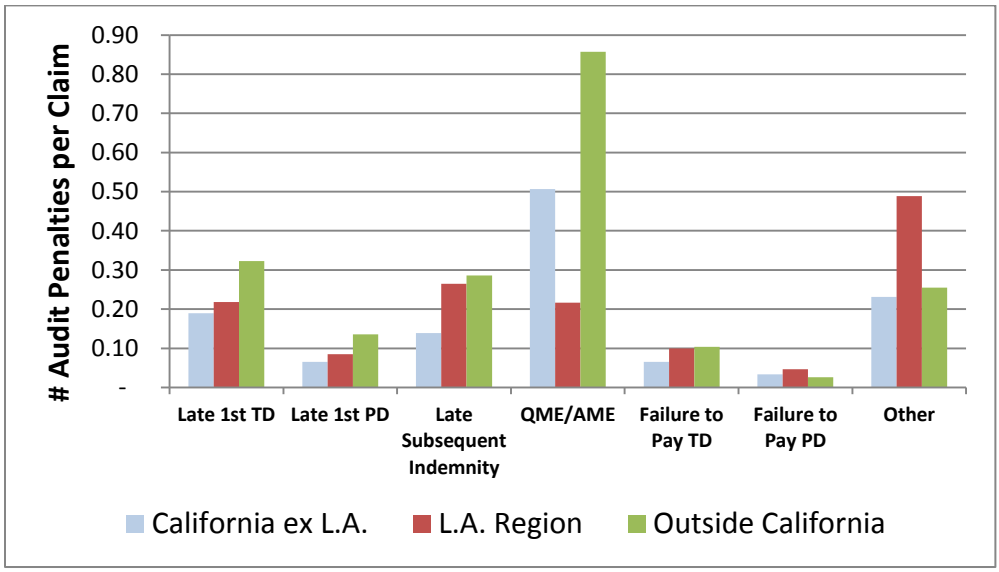
Given that the performance rating is partially based on the frequency of open indemnity claim as well as the average claim size, it is not surprising that the performance rating is higher in the Los Angeles area than in the rest of the State. It is generally recognized that claims in the Los Angeles area are more likely to be litigated, more difficult to close, and generally higher in cost on average. However, the number of audit penalties per audited claim shows a similar pattern to the performance ratings.

Chart V-4
Average Number of Audit Penalties per Audited Claim by Region



In general, the pattern of audit penalties by region is consistent for almost all types of penalties. The California excluding the Los Angeles area has the lowest number of audit penalties per claim, and the areas outside of California have the highest. The biggest exception to this is "failure to comply with requirements to provide notice of the QME/AME process" ("QME/AME"), in which the Los Angeles area has a much lower number of audit penalties per claim than the other two regions. This is depicted in the following graph.

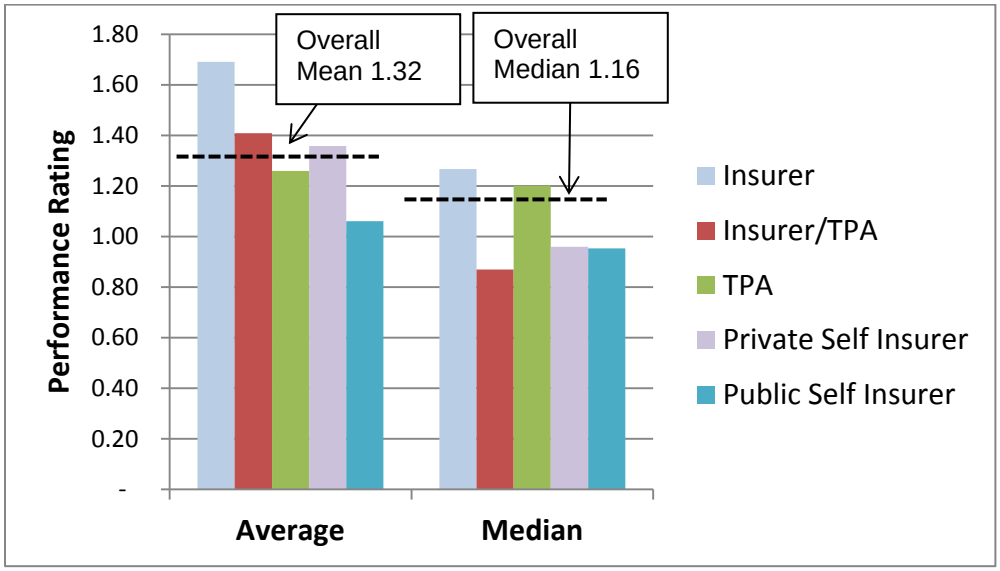
Chart V-5
Average Number of Audit Penalties per Audited Claim by Type of Penalty and Region



2. By Type of Claims Administration

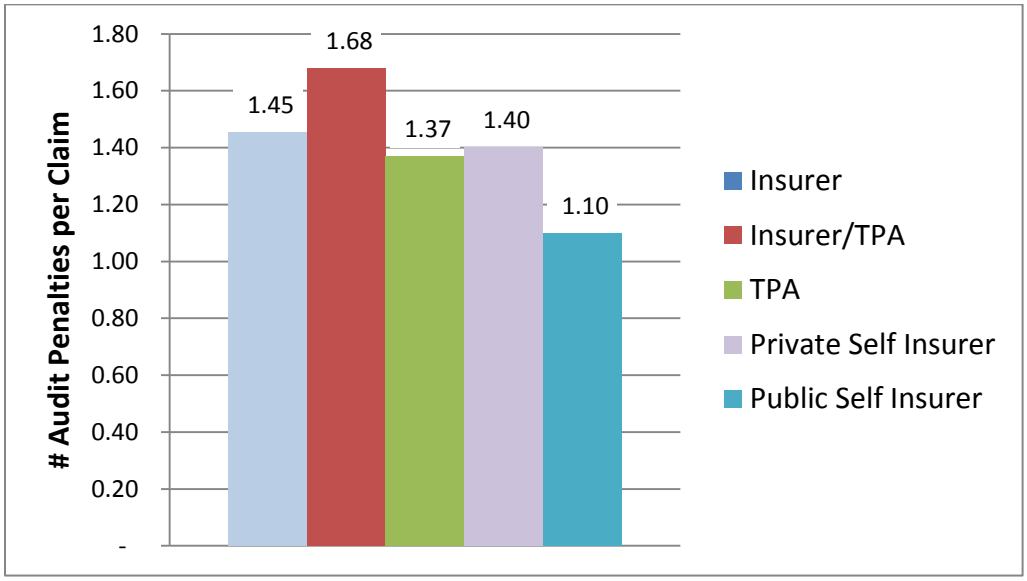
The type of claims administrator also has an impact on the PAR audit results, though it is a smaller impact than region. As with the regions, we have calculated average and median performance ratings by type of claims administrator for 2010-2012. The results are mixed; for most types of claims administrators one measurement (either the mean or median) is lower than average while the other is higher than average. Only the self-insured public agencies (or JPAs) that self-administer their claims have scores that are better than average using both measurements. For insurers, both measurements are higher than average.

Chart V-6
Comparison of Performance Ratings by Type of Claims Administrator



Public self-insurers that self-administer claims also stand out regarding having a low number of audit penalties per audited claim.

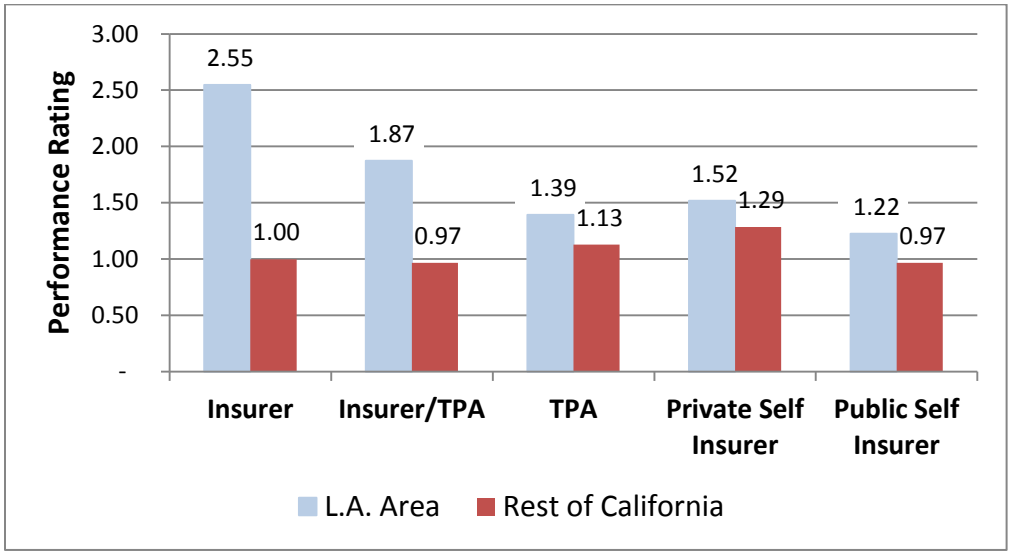
Chart V-7
Average Number of Audit Penalties per Audited Claim by Type of Claims Administrator



One concern is that differences in region by type of claims administrator may distort the results. For example, if one type of claims administrator is primarily outside of California or in the Los Angeles area, then this may cause its average results to look bad. In order to account for this we have calculated the results by type of claims administrator within each region. Due to the low volume of audited claims administrators outside of California we are only showing results within California.

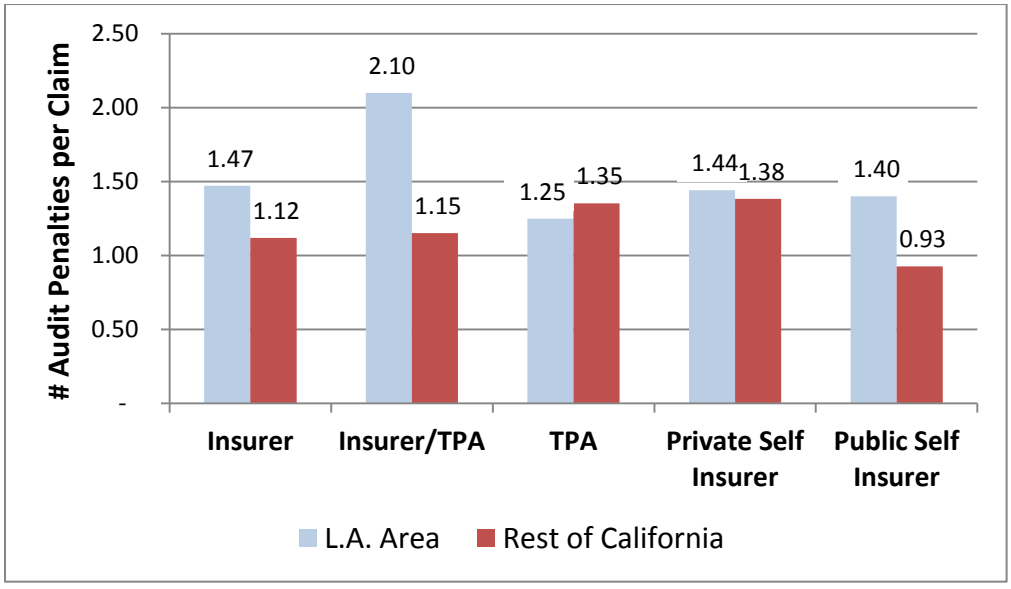
The following graph shows that the impact of region is consistent for all of the types of claims administrators. For each of the types of claims administrators, the PAR scores are higher (meaning worse) in the Los Angeles area than in the rest of the State.

Chart V-8
Comparison of Average Performance Ratings by Type of Claims Administrator and Region



Similar to the performance ratings, the average number of audit penalties per audited claim is consistently higher in the Los Angeles area than in other areas of California for almost all types of claims administrators. Only TPAs have fewer audit penalties per claim in the Los Angeles area in comparison to the rest of the State.

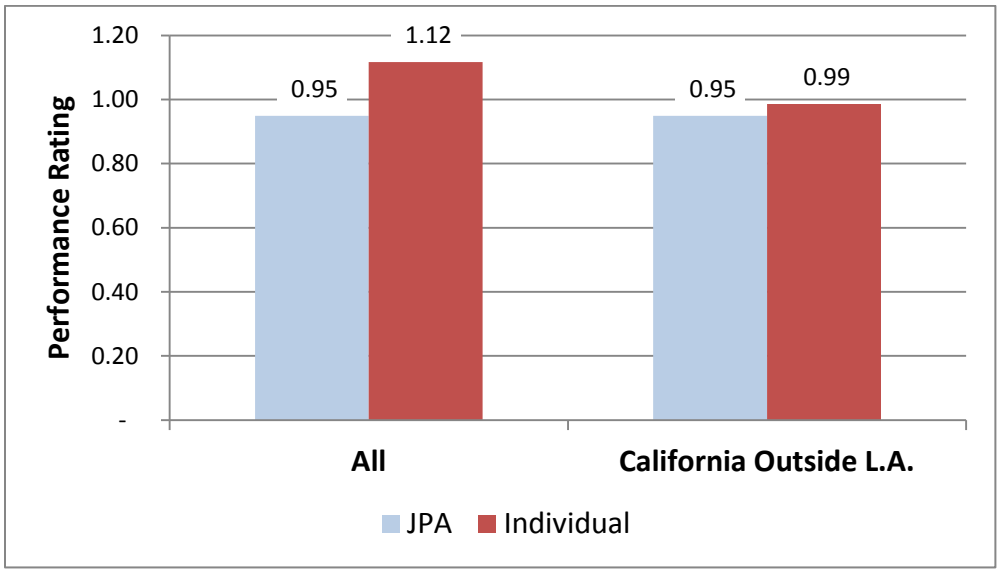
Chart V-9
Average Number of Audit Penalties per Audited Claim by Type of Claims Administrator and Region



3. Type of Public Self-Insurer (Self-Administered for Claims): JPA Versus Individual

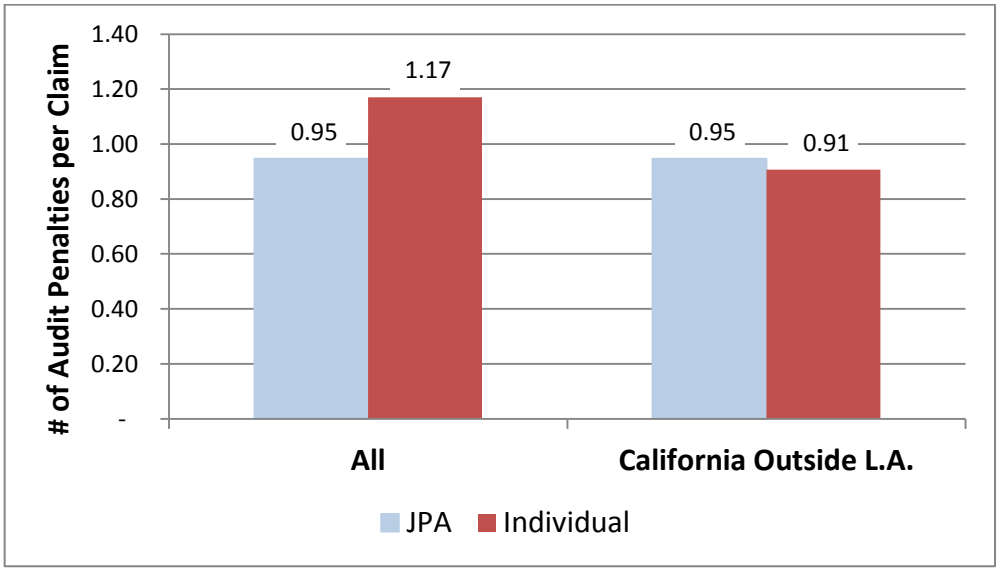
We found that for public self-insurers that self-administer their claims, the PAR results of individuals and JPAs are very similar. At first it may appear the results of individuals are inferior to that of JPAs, because individuals have a higher average performance rating. However, we believe this is primarily due to differences in geography. All of the JPAs in the PAR audit reports are outside of the Los Angeles area, whereas only nine of the 20 individual self-insurers are outside of Los Angeles. When we compare the experience of JPAs and individual self-insurers outside of the Los Angeles area, their results are quite similar.

Chart V-10
Comparison of Average Performance Ratings: JPA Versus Individual Public Self-Insurer



The number of audit penalties per audited claim shows a similar pattern to the performance ratings. What appear to be worse scores for individual self-insurers are driven by the fact that some of those individuals are in the Los Angeles area. When the Los Angeles individual self-insurers are excluded, the JPA and individual experience is quite close.

Chart V-11
Average Number of Audit Penalties per Audited Claim
JPA Versus Individual Public Self-Insurer



C. Findings

As discussed earlier, the three self-insurer characteristics we tested were region, type of claims administrator, and public self-insurer JPA versus individual. The following summarizes our conclusions.

1. **Region**. As with claims costs, we found the region of the claims administrator had a measurable impact on PAR results. Out-of-state administrators tended to have the worst PAR results, followed by the Los Angeles area, and then the rest of the State. This pattern was also consistent regarding the number of penalties per audited claim, in which out-of-state administrators had the most, the Los Angeles area had the second most, and the rest of California had the least.

2. **Type**. The type of adjuster also had a measurable impact on PAR results, but the effect was smaller than that of region. In general, insurers tended to have the worst PAR results, and public agencies that self-administer their claims had the best. Third party claims administrators and private self-insurers that self-administer their claims were in the middle. The same pattern held true for the number of penalties per claim, in which insurers had the highest and public agencies that self-administered had the fewest.

3. **Public Self-Insurer that Self-Administer - JPAs Versus Individuals**. Among public self-insurers that self-administer their claims, we found no significant differences between the PAR results of JPAs versus individuals. On a statewide basis, the JPA results are more

favorable than those of individuals. However, this is likely because none of the JPAs are inside the Los Angeles area, whereas 11 of the 20 individuals are inside the area. Comparing the results of only those entities that are outside of Southern California shows the JPA and individual results to be quite similar.

4. Recommendations

We believe this is one of the first studies to utilize the PAR Audit reports to evaluate systematic differences in claims handling practices.

1. **Investigate Disparities by Region.** We feel the systemic differences in claims handling practices by region warrant further investigation and perhaps changes in claims oversight. In particular, we are concerned about the less favorable scores of out-of-state adjusters.

2. **Items Included in Performance Audits.** The performance audits provide a good check primarily regarding the timeliness and accuracy of indemnity payments. While indemnity benefits are extremely important, they make up only a little over 30% of projected ultimate loss and ALAE costs. We recommend the DWC consider other factors in their audits in order to give a broader sense of an administrator's performance.

3. **Data Format of PAR Reports.** While the PAR reports are publicly available, they are in an electronic file format that makes analysis difficult. For this project our team had to manually type in the data from two years of reports in order to perform this analysis. It would be very helpful if the State maintained the PAR data in a format that facilitates data analysis.

5. Limitations

There are several limitations we have identified that are associated with using the DWC data in our analysis. These include the following.

1. **Sample Size.** This study summarizes the audit results for 176 entities. As we break down these entities into categories (such as region and type of claims administrator) the number of entities in each category can become small. In addition, the number of claim files that are audited typically represents only a fraction of the total claims handled by that entity. These factors mitigate the strength of the conclusions of our analysis of PAR audit reports.

2. **Items That Are Audited**. The PAR audits only evaluate a portion of the activities associated with handling workers' compensation claims. The performance rating reflects closing out indemnity benefits, the speed of indemnity payments, and proper notifications. The performance rating does not reflect other critical elements such as the

handling of medical benefits and case reserve accuracy. Therefore the PAR audit results are not the same as overall claims handling performance.

3. **Reliance on Work of DWC.** We have relied entirely on the DWC PAR Audit reports in our analysis. Our results are only accurate to the extent that the DWC PAR Audit reports are also accurate.

VI. Claims Administration: Cost Containment

This section contains our analysis of medical cost containment (MCC) programs by public self-insurers.

A. Methodology

Our analysis of MCC was based on responses to our survey of 40 randomly selected individual self-insurers and JPAs. There is more information regarding these surveys in Section VIII of this report.

The survey included two sets of MCC information.

1. **Fiscal Year 2012/13 Payments.** The survey included a form regarding both medical bill review (BR) and utilization review (UR) payments during fiscal year 2012/13. The information included a breakdown of the types of medical expenses subject to MCC, as well as who performed UR. The time period 2012/13 was before independent medical review (IMR) became widespread, and so the data can serve as a benchmark against which to compare the post-IMR environment. Five of the eighteen survey participants sent us BR and UR payments data for fiscal year 2012/13.

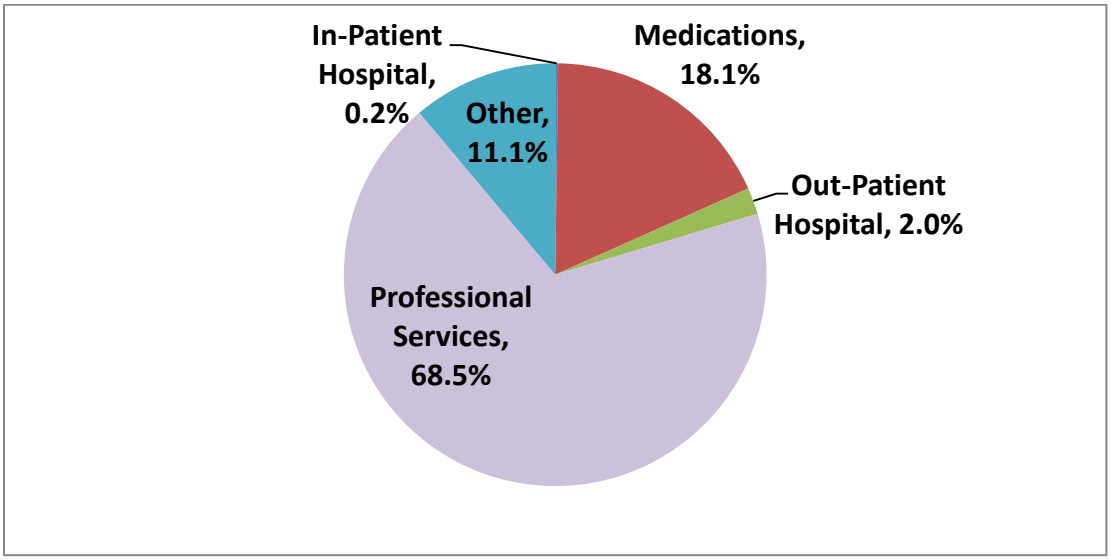
2. **Payments by Claim as of December 31, 2013**. Eight of the eighteen participants provided claims listings that separately identified BR, UR, and Nurse Case Management (NCM) payments by claim. The claims had dates of injury subsequent to June 30, 2007, and were valued as of December 31, 2013.

Our analysis and recommendations are based on these survey responses, as well as our general knowledge of medical cost containment. We feel this section of the report is valuable in showing the types of information and analysis that could be done if the State were to collect MCC data. However, because our analysis is based on very limited data, it is important to recognize it is unlikely that our results are representative of all public self-insurers.

B. Bill Review Services and Costs

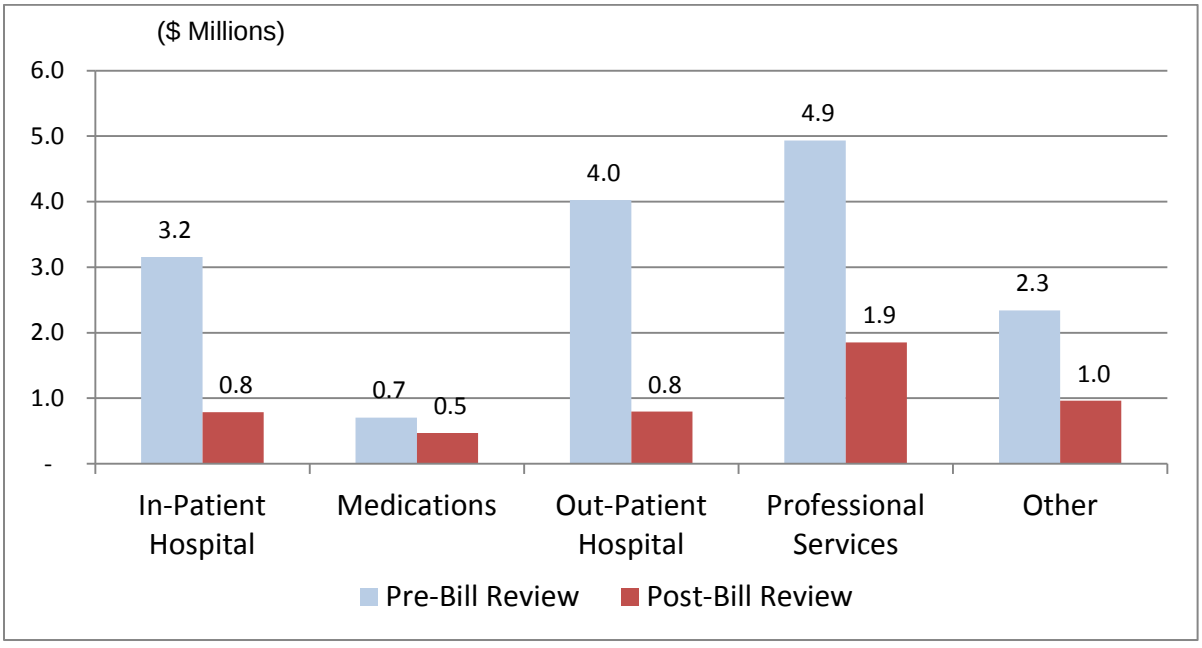
The total medical bills reviewed from our survey participants was a little over $35 million, all based on procedures reviewed during 2012/13. The following chart shows that most of the bills reviewed were related to professional services. The second biggest category of bills reviewed was medications.

Chart VI-1
Distribution of Bills Reviewed



Although in-patient and out-patient medical care make up a small percentage of total bills that are reviewed, the following chart shows that they make up a sizable percentage of initial invoice dollars that are reviewed.

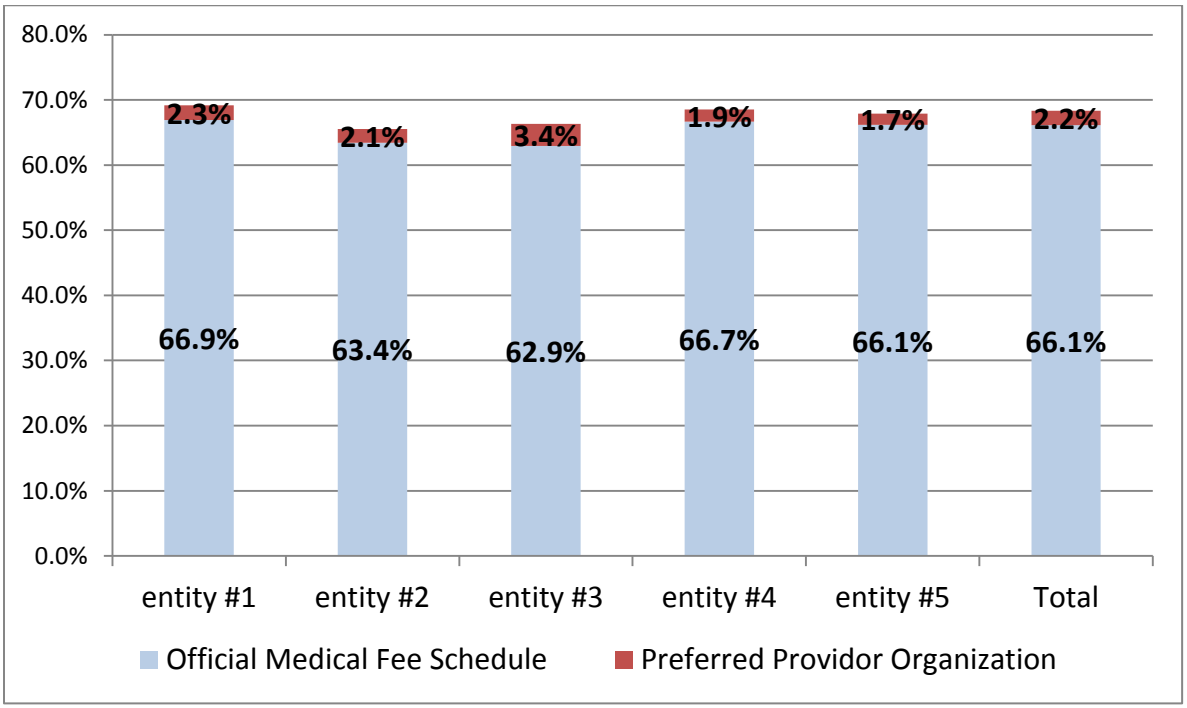
Chart VI-2
Distribution of Dollars Before and After Bill Reviewed



*Excludes two of the five respondents because they mapped their services into different categories than the others.

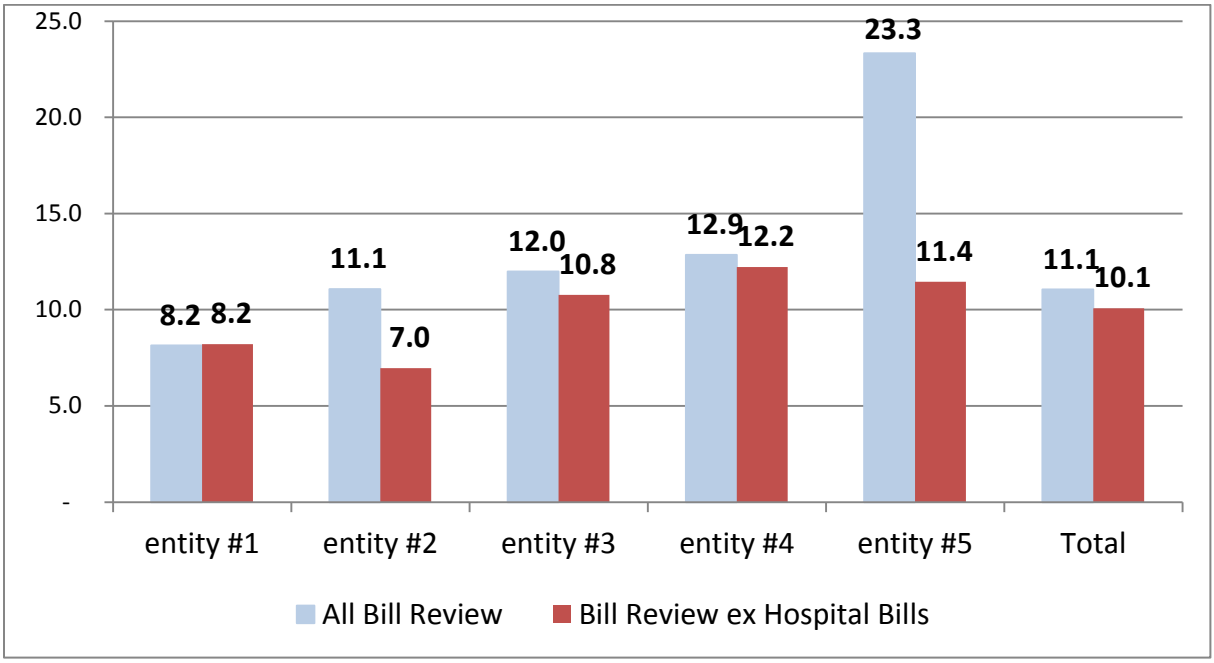
In general, bill review saved the survey respondents about two-thirds of medical expenses. This was primarily due to reductions to the Official Medical Fee Schedule (OMFS); Preferred Provider Organization (PPO) discounts had only a modest effect. The following chart shows that the savings are relatively consistent among the respondents.

Chart VI-3
Bill Review Savings



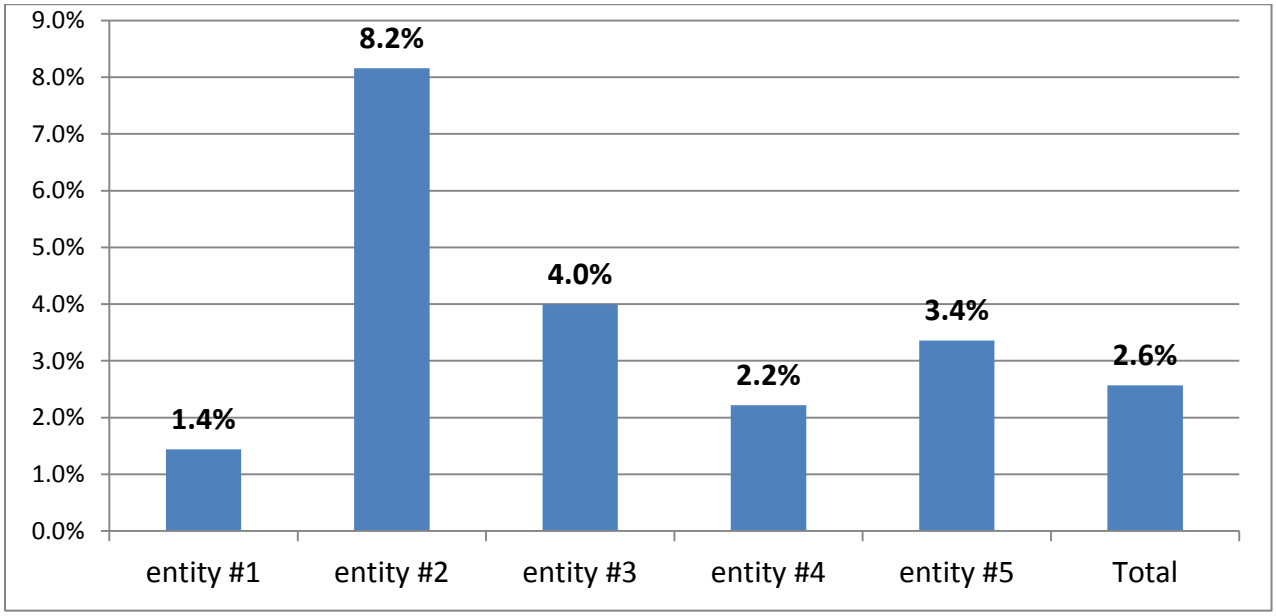
Bill review is often charged on a per-line basis. While we do not have bill review data by line, the following chart shows bill review costs per bill. Inpatient and outpatient hospital bills cost significantly more than the other types of bills to review. Since they were skewing the results by entity, we have shown the average bill review cost per bill both including and excluding in-patient and out-patient hospital bills.

Chart VI-4
Average Cost of Bill Review per Bill



Bill review is relatively inexpensive in relation to the savings it generates. The following chart shows the cost of bill review as a percentage of savings generated by bill review.

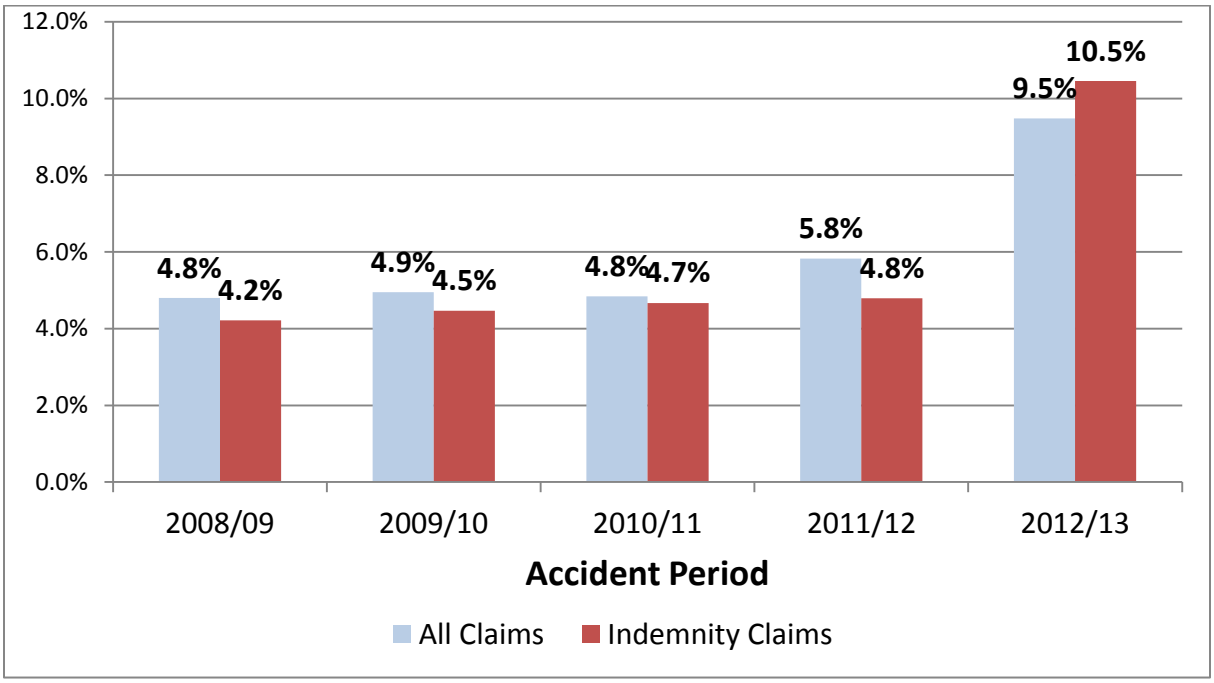
Chart VI-5
Bill Review Cost as a Percentage of Savings



C. Bill Review Cost as a Percentage of Medical Costs

The following chart shows that BR costs have been 4% to 11% of medical costs over the past several years. It is important to note the costs in the following chart are all valued as of December 31, 2013, and so each of the years is at a different stage of maturity. It is likely that the higher percentage of BR in 2012/13 simply reflects that BR costs are higher at early stages of a claim, and the ultimate BR costs as a percentage of medical costs will go down as that year matures. Collecting transactional-level data or claims listing at successive intervals would facilitate comparing BR and medical costs at similar stages of maturity. This would help to answer the question of whether BR costs as a percent of medical have recently gone up or whether the results of more recent years are distorted because they are immature.

Chart VI-6
Bill Review Costs as a Percentage of Medical Payments by Year



Given the cost of BR per bill varied among the survey respondents, it should be no surprise we also found that BR payments as a percentage of medical payments varied by entity.

Based on the limited data available to us, it is clear that bill review is key in reducing medical costs. However, there is little public information available to employers and JPAs to evaluate the effectiveness of the bill review program. The State does not collect bill review savings or the cost of bill review through OSIP.

We found the following:

1. Bill review saved the survey respondents about two-thirds of medical expenses, primarily due to reductions to the OMFS;

2. The percentage reduction due to BR varied by type of service. Inpatient and outpatient hospital services experienced the greatest percentage savings;

3. The average cost of BR per bill was relatively consistent among the survey respondents after hospital bills were excluded; and

4. BR costs as a percentage of medical payments were relatively consistent between 2008/09 and 2011/12. The percentage increased in 2012/13, but this may be because that year is still immature in relation to the prior years.

D. Recommendations

We feel the following industry information would be helpful to employers and JPAs in evaluating their own bill review programs.

1. **Industry Bill Review Savings Information**. Ideally a medical transactional database could show discounts to the OMFS and compare that to bill review discounts. For example, CWCI is able to identify billed versus paid amounts in its database. If configured correctly, a medical transactional database of public self-insurers provides similar information to its data providers. In addition, collecting transactional-level data or claims listing at successive intervals would facilitate comparing BR and medical costs at similar stages of maturity. This is critical in evaluating BR trends over time.

   The variability of BR results by entity and the relatively small sample size in this study means that one needs to be cautious about drawing conclusions from our results. A more robust collection of BR and medical data would greatly enhance our ability to provide benchmarking data as well as determine differences by region or type of entity.

2. **Industry Bill Review Savings by Category**. In the absence of showing OMFS discounts on transactional data, the State could collect and make public bill review savings by categories such as type of medical cost. The savings should be broken down between the OMFS and PPO discounts.

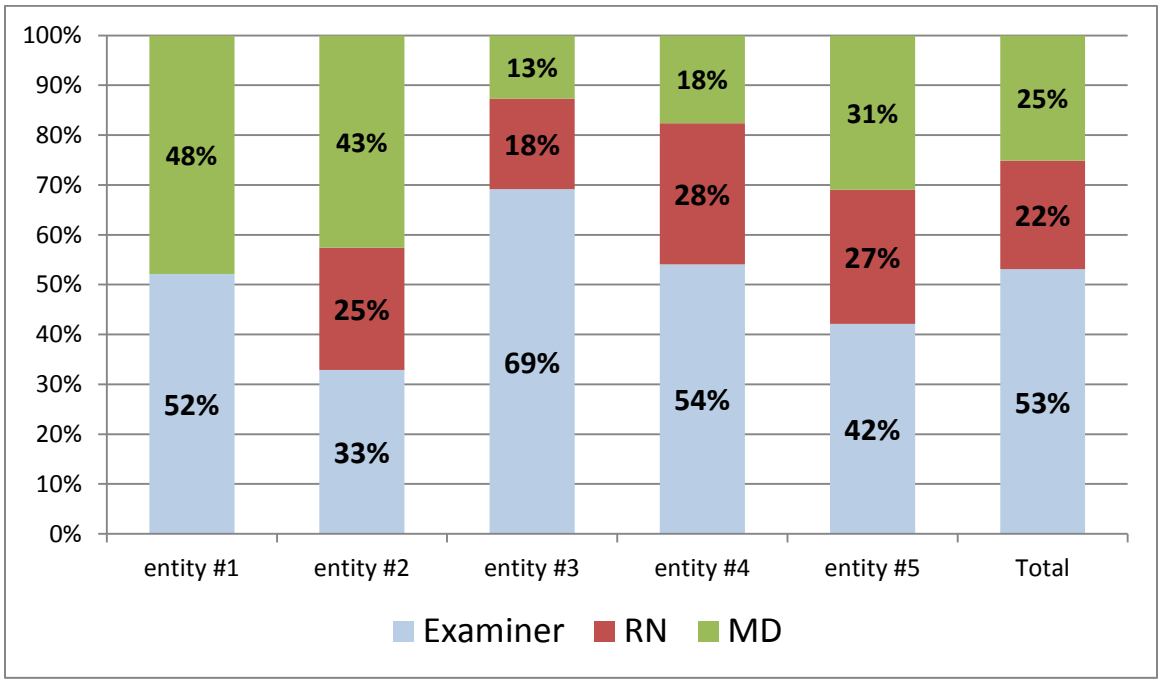
3. **Bill Review Cost.** The cost of bill review could be reported by line or by claim for different types of medical costs. This would allow public employers to compare their cost of bill review to industry averages.

E. Utilization Review (UR)

Utilization Review is the second major component of medical cost containment. The purpose of UR is to ensure the medical treatment is necessary, as defined by the medical treatment guidelines. According to the DIR "the UR process is governed by Labor Code section 4610 and regulations written by the CA Division of Workers' Compensation (DWC), which lay out timeframes and other rules for conducting UR. The rules, contained in Title 8, California Code of Regulations, sections 9792.6 et seq, also require UR plans to be filed with the DWC administrative director."[12]

The following chart shows that among the four survey respondents who provided fiscal year 2012/13 medical cost containment payment data, there is variation regarding who performs UR. UR was referred to registered nurses (RN) and medical doctors (MD) anywhere from 31% to 67% of the time. On average 25% of UR referrals were elevated to MDs. The CWCI also found that 25% of UR referrals were elevated to MDs in their database.[13] It should be noted the CWCI study evaluated significantly more medical transactions, was not restricted to public self-insurers, and looked at the time period January 2011 through June 2012, which is prior to the period evaluated in this analysis.

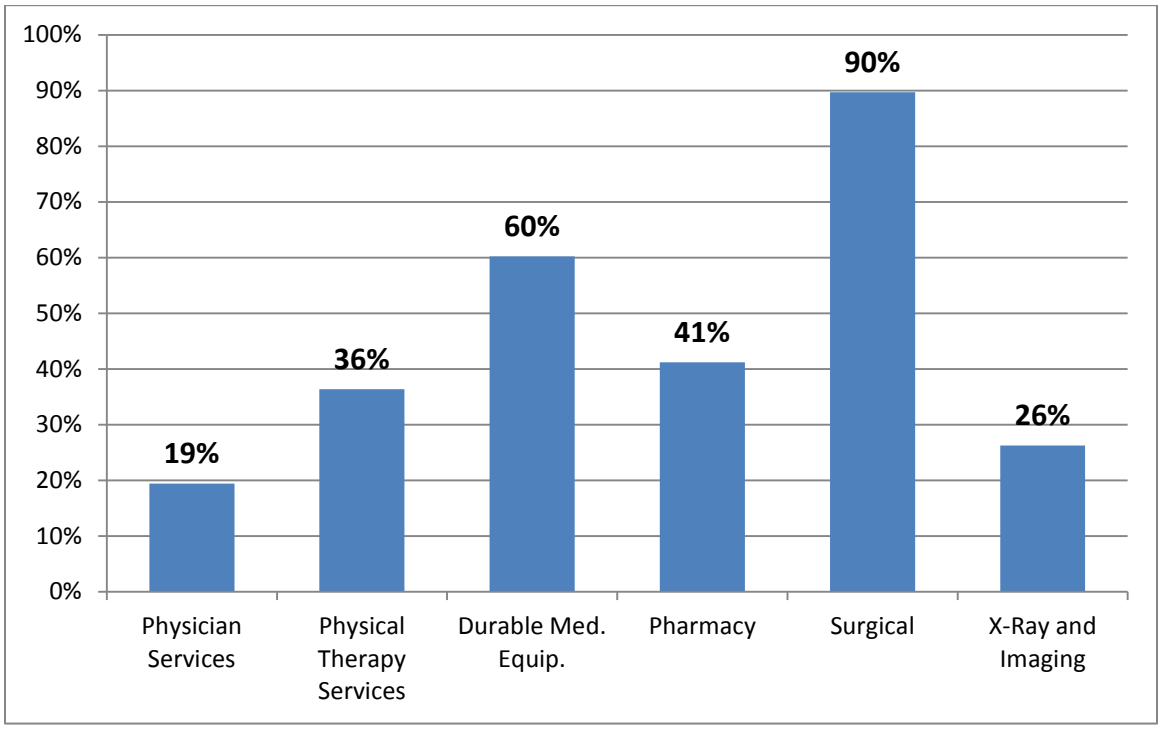
Chart VI-7
Distribution of Reviews: Examiner, Registered Nurses, and Medical Doctors



[12] DIR website, July 15, 2014.
[13] CWCI "Medical Dispute Resolution: Utilization Review and Independent Medical Review In the California Workers' Compensation System," January 2014, page 6.

The percent of 2012/13 reviews referred to RNs and MDs varied significantly depending on the type of medical service being reviewed. The following chart shows that RNs and MDs are heavily used to perform UR on surgical services, but they are used relatively infrequently to review physician services.

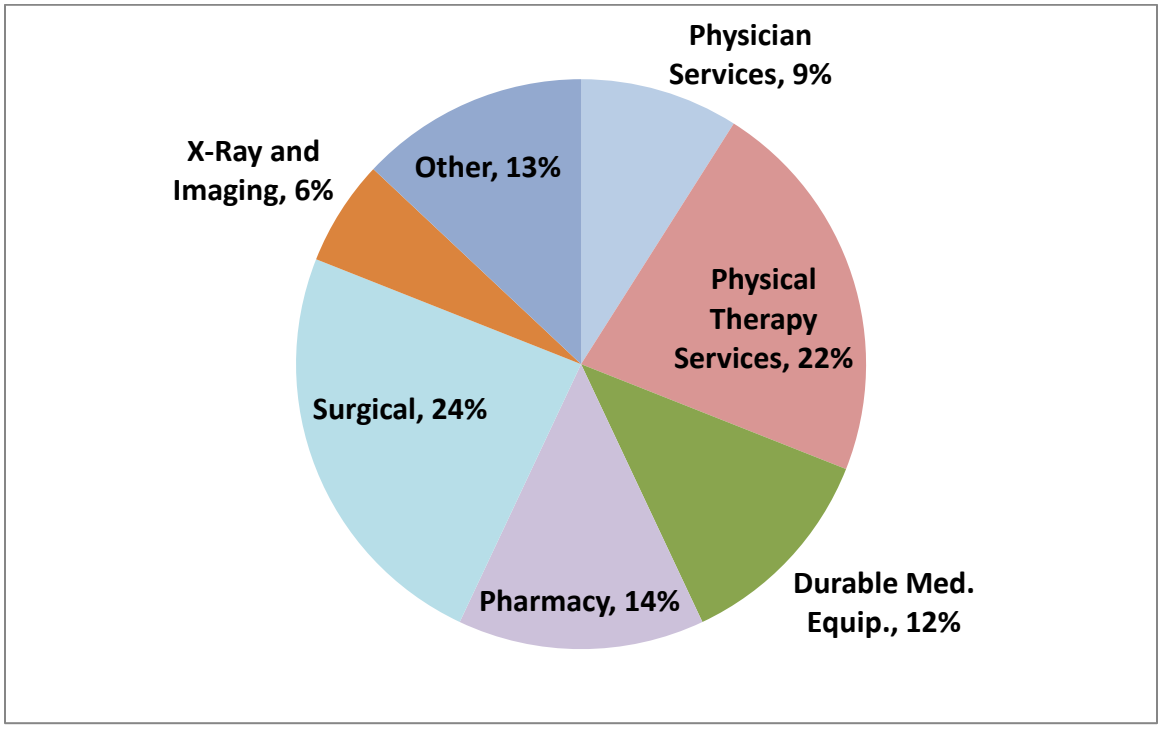
Chart VI-8
Percent of Reviews Elevated to Registered Nurses or Medical Doctors
(by Type of Medical Service)



The following chart shows that physician and physical therapy services were the most common medical services subject to 2012/2013 UR involving RNs or MDs. This represents a significantly different distribution of UR events than what was reported by the California Workers' Compensation Institute (CWCI), which found that about 43% of elevated UR events in their database are related to pharmacy.[14]

[14] CWCI "Medical Dispute Resolution: Utilization Review and Independent Medical Review In the California Workers' Compensation System", January 2014, page 6.

Chart VI-9
Distribution of Medical Services with Registered Nurses or Medical Doctors Utilization Review



We also investigated the number of reviews that result in approvals versus denials. Among the respondents, over 99% of the treatments that were not elevated to an RN or MD were approved by examiners. Examiners cannot deny treatment, so an examiner who thinks treatment should be denied will typically refer the issue to an RN or MD. Similarly, an RN cannot deny treatment, so an RN who thinks treatment should be denied will typically refer the issue to an MD. The following table shows the results of UR decisions that are forwarded to either an RN or MD.

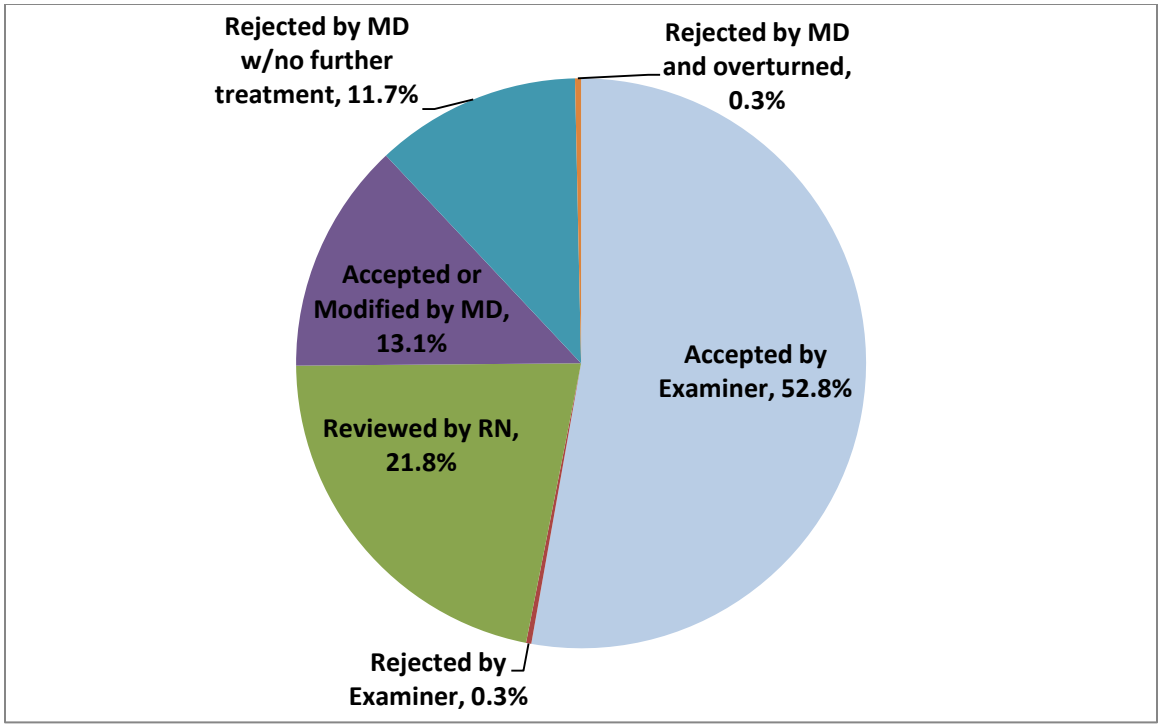
Table VI-1
Elevated UR Outcomes

Outcome	Current Study	CWCI Study*
Approved	65.4%	76.6%
Modified	9.0%	6.6%
Rejected	25.6%	16.9%

*CWCI "Medical Dispute Resolution: Utilization Review and Independent Medical Review in the California Workers' Compensation System," January 2014, page 6.

The following chart shows the distribution of all reviewed results for the agencies that provided UR data.

Chart VI-10
Distribution of UR Results by Type of Reviewer



The preceding chart shows a very small percentage (0.3%) of total UR decisions result in denials that are protested and overturned.

As with BR, eight of the eighteen survey respondents provided us with claims listings that included UR and total medical expense by claim for injuries occurring on or after July 1, 2009. In addition, Nurse Case Management (NCM) costs were separately identified. We found that NCM costs are significant in relation to UR. The following charts show NCM and UR costs as a percentage of total medical costs by year. Chart VI-10 applies to all claims, whereas Chart VI-11 applies only to indemnity claims.

Chart VI-11
Paid Nurse Case Management & UR/Paid Medical Costs by Year (All Claims)

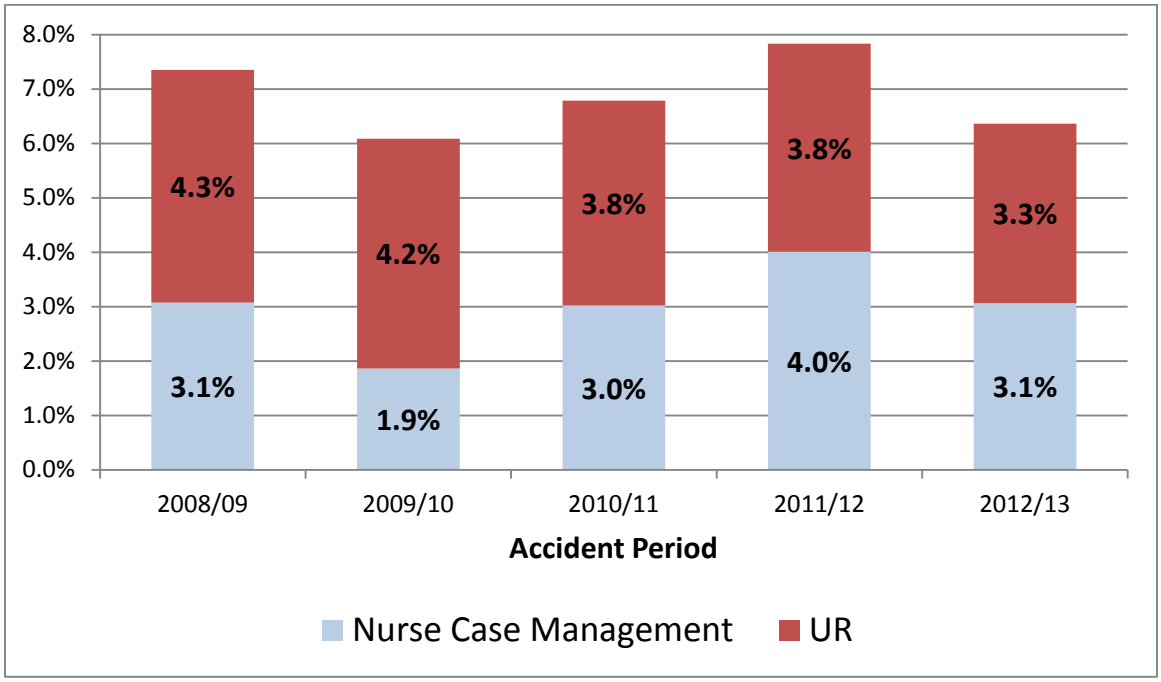
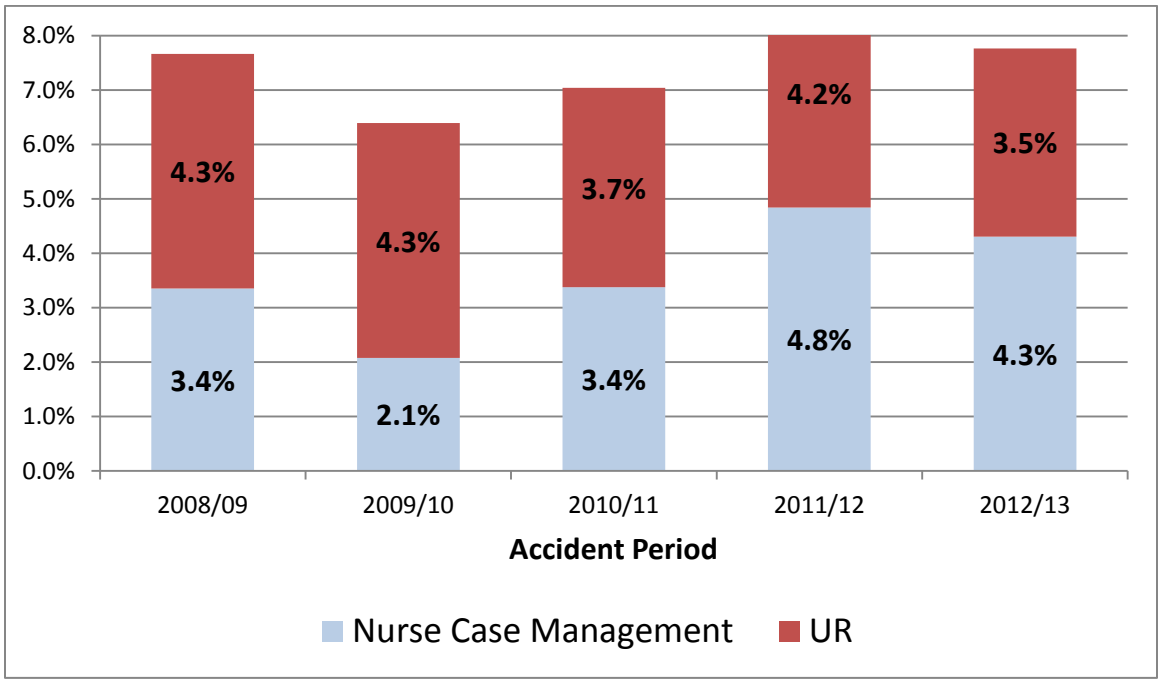


Chart VI-12
Paid Nurse Case Management UR/Paid Medical Costs by Year (Indemnity Claims)



F. Utilization Review Findings

Similar to bill review, there is little public information available to employers and JPAs to evaluate the effectiveness of their UR program. The State does not collect UR savings or the cost of UR through OSIP or through the WCIS. Our findings are based on five self-insured public entities that provided us with UR data.

1. **The Reviewer.** The percentage of reviews forwarded to RNs or MDs varied by entity, anywhere from 31% to 67%. This percentage also varied greatly by type of service. The services most likely to be referred to an RN or MD are DME (60%) and surgical services (90%).

2. **UR Outcomes.** Within our sample we found that of the services referred to an RN or MD, 25.6% were rejected by a medical doctor and 9.0% resulted in modified treatment.

3. **Costs.** We found that between 2008/09 and 2012/13, UR costs have ranged between 6.1% and 7.8% of paid medical costs, with no obvious trend upwards or downwards. If we restrict our analysis to only indemnity claims, then UR costs have ranged between 6.4% and 9.0% of medical costs during the years 2008/09 and 2012/13.

G. Recommendations

We feel the following industry information would be helpful to employers and JPAs in evaluating their own UR programs.

1. **Industry UR Savings by Category**. The State could collect and make public UR savings by categories such as type of medical cost. In addition, breaking down who does the review (examiner, registered nurse, or medical doctor) would be helpful in determining if a UR program is in line with industry norms.

2. **UR Cost.** The cost of UR by review or by claim for different types of medical costs. This would allow public employers to compare their cost of bill review to industry averages.

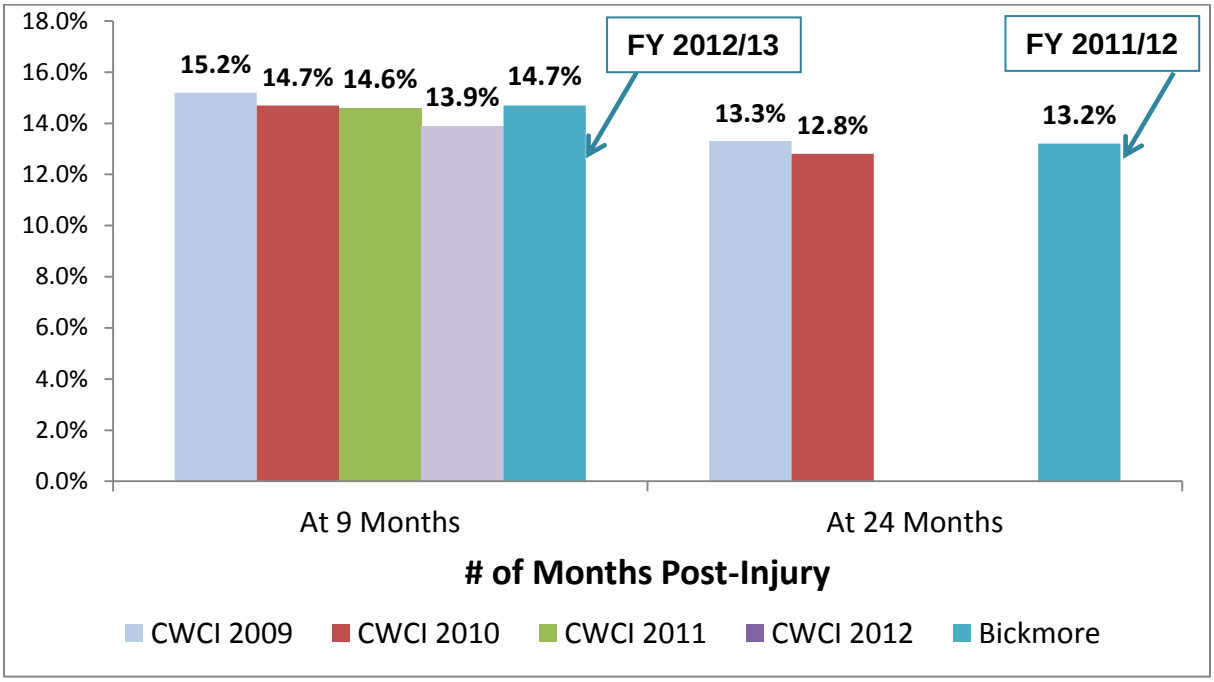
3. **Transactional Data.** Collecting transactional-level data or claims listing at successive intervals would facilitate comparing UR and medical costs at similar stages of maturity. This is critical in evaluating UR trends over time.

   The variability of UR results by entity and the relatively small sample size in this study means that one needs to be cautious about drawing conclusions from our results. A more robust collection of UR and medical data would greatly enhance our ability to provide benchmarking data, as well as determine differences by region or type of entity.

H. Medical Cost Containment Benchmarking

In its work for the WCIRB, the CWCI provides specific information regarding MCC that can be compared to the results in this study. These include MCC costs as a percentage of medical payments and the average MCC cost per claim. The following table compares the MCC/medical costs for all claims. In general, our results are very consistent with those of the CWCI.

Chart VI-13
Benchmarking MCC/Medical Costs (All Claims)

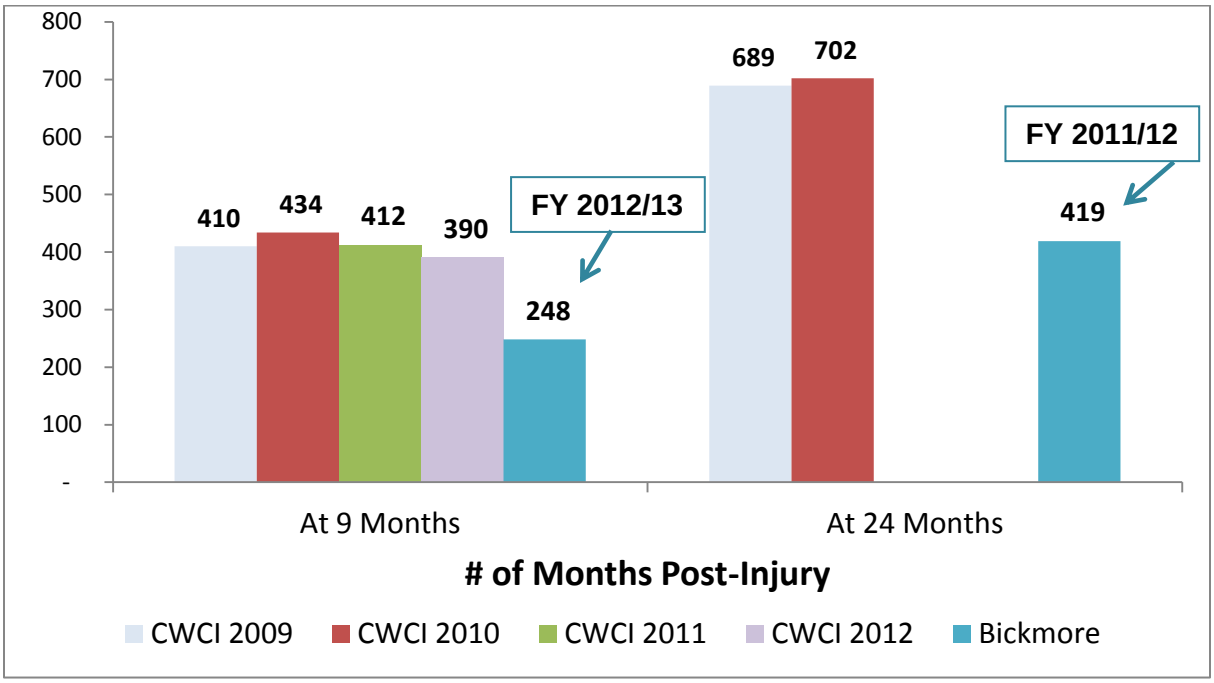


* CWCI Results from "Medical Utilization & Cost Analysis July 2014 Report

It should be noted since this analysis is based on a claims listing valued as of December 31, 2013, rather than a transactional database, we were not able to exactly identify MCC or medical payments at 9 and 24 months. Rather, we identified claims that were between 7.5 and 11.5 months old as of December 31, 2013, and averaged their results in order to approximate results at nine months after the date of injury. Similarly, we utilized claims that were 18-30 months old to estimate results at 24 months.

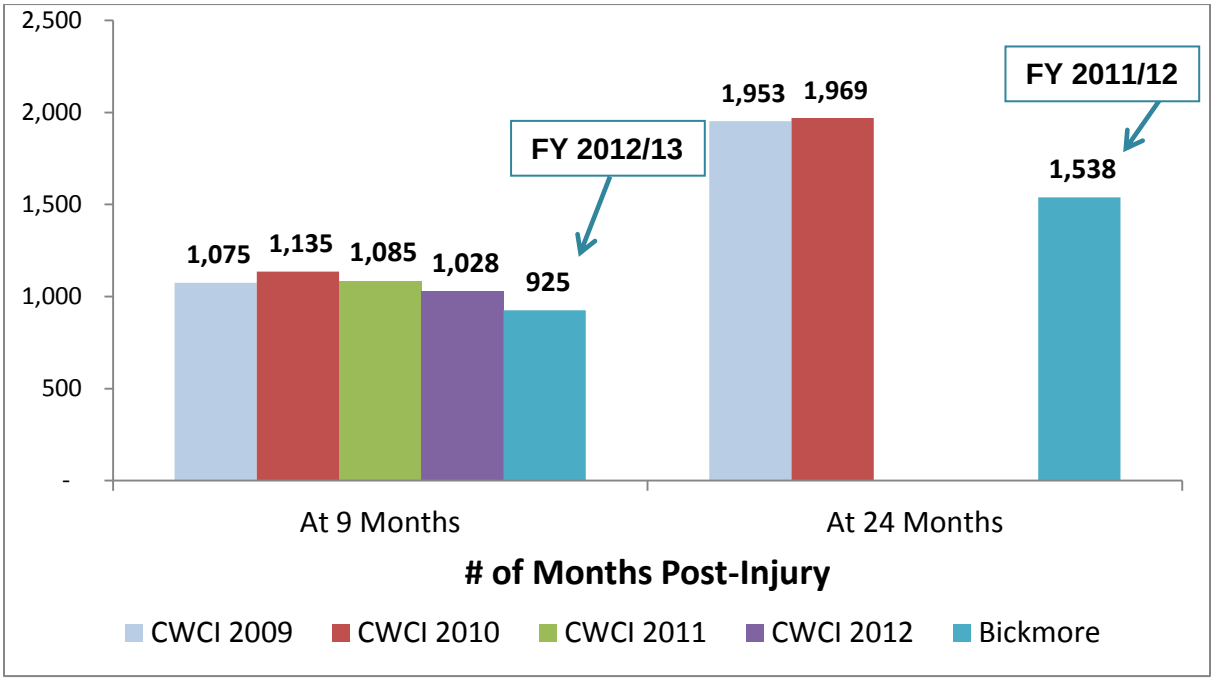
Using a similar method, we also compared the average MCC cost per claim between our study and the CWCI. The first chart (Chart VI-14) shows a wide discrepancy in the average cost per claim for all claims combined. However, this discrepancy appears to be driven partially by medical only claims. When we restrict the comparison to indemnity claims (Chart VI-15), our results are a little closer to those of the CWCI.

Chart VI-14
Benchmarking MCC/Claim (All Claims)



* CWCI Results from "Medical Utilization & Cost Analysis June 2013 Report

Chart VI-15
Benchmarking MCC/Claim (Indemnity Claims)



* CWCI Results from "Medical Utilization & Cost Analysis June 2014 Report.

VII. Solvency

A. History of Public Entity Defaults

Since the beginning of public sector self-insurance, a span of over 50 years, no individual public entity or JPA has defaulted on the payment of workers' compensation benefits. There have been a number of bankruptcy filings (Chapter 9) by individual public entities. However, none of these entities has defaulted on their workers' compensation benefit payments.

No self-insurance JPA has ever filed for bankruptcy protection. JPAs are considered special districts under the Government Code and could file under Chapter 9. However, for the nearly 40 years of their existence, no JPA bankruptcy has occurred. Members of a JPA, like private self-insured group members (SIGs), are liable for each other's obligations within the JPA under the joint and several indemnity agreements specified in the Labor Code and required by the DIR. Consequently, if a member entity of the JPA were to go into bankruptcy, the other members of the JPA would be jointly and severally liable for the continued benefit payments to the bankrupt member's employees. The JPA could then seek recovery against the bankrupt member as an unsecured creditor.

The experience of the past is not necessarily an indication of the future exposure of defaults by public sector self-insurers. The recent recession and continuing financial distress of the public sector has raised concerns about the financial viability of certain public entities, their ability to meet their financial obligations, and the treatment of self-insured obligations in a Chapter 9 bankruptcy proceeding.

Based upon research conducted by Bickmore in 2013, it was concluded the greatest exposure of non-payment of benefits to injured workers is with individually self-insured municipalities and special districts.[15] This was based upon the following assumptions.

- Individual municipalities and special districts can file for bankruptcy under Chapter 9 of U.S. bankruptcy code and may be able to discharge their workers' compensation liabilities or have the payments impaired or delayed in bankruptcy proceedings. Other states have determined that injured workers of private sector self-insureds are unsecured creditors. In addition, municipalities and special districts are generally organized as municipal corporations or special purpose corporations that can be dissolved.

- Under the California Constitution, counties are subdivisions of the State. Consequently, it is highly unlikely the State would allow a county to dissolve or default on it workers' compensation obligations to injured workers. Even in the most recent Chapter 9 bankruptcy proceeding of a county (Orange County in 1993), the County continued

[15] See Appendix C, study of Self-Insurance Solvency .

making payments to its injured workers with the approval of the bankruptcy court. Also, the DIR and OSIP had no reason to revoke the County's certificate of consent to self-insure since benefit payments continued and the County's only resource for coverage would have been through the State Compensation Insurance Fund at a significantly higher cost.

- School districts (K-12) are closely intertwined with the State due to financial support from the State general revenues. Financially troubled districts historically have been placed in semi-receivership with close monitoring and control by the State Department of Education. If an individually self-insured school district were unable to make payments to its injured workers, there is a strong likelihood that the State would step in and provide financial support.

There has been no evidence that any of the 89 public sector JPAs is financially troubled. Most JPAs operate like assessable mutual cooperatives or insurance reciprocals. Assessments are levied and collected from the members when needed. Non-payment of assessments is generally pursued aggressively by the JPAs. No serious non-payment of assessments has threated the solvency of a JPA, and it is highly unlikely that the members of a JPA would let it fall into bankruptcy.

JPAs provide greater security for the employees of their member agencies because: (1) protection through the Labor Code joint and several liability requirement; (2) the more predictable, stable revenue sources available to the public sector entities compared to private companies; (3) the past proven history of assessment collectability; and (4) the greater financial stability of a group of entities as opposed to an individual entity.

B. Oversight and Regulation of Public Self-Insurer Solvency

As discussed earlier in this report, advantages of self-insurance for public entities include maintaining control over the structure and design of a self-insurance program that meets the unique and specific needs of public entities. Self-insurance also allows the public entity to have control over the financing of the self-insurance program and avoid expending funds that are lost to the insurance carriers (e.g. profits, overhead, taxes, and fees). This financial control allows the entity to dedicate the financial resources to activities that protect and benefit the entity and its employees. Along with maintaining financial control over the self-insurance program comes the obligation of the self-insurer to ensure sufficient funding is available to meet the accrued and ongoing self-insurance obligations.

We noted that OSIP collects primarily claims-related data on its Public Entity Self-Insurer's Annual Report, and unlike the reporting requirements of private self-insurers, OSIP does not collect actuarial reports or financial statements.[16] In order to review the solvency of a self-

[16] Private individual self-insured and SIGs are required to submit annual actuarial reports to OSIP (CCR Section 15481).

insurer it would be necessary to gather information on the assets, liabilities, revenues, expenses, and net position of only the entity's workers' compensation program. In addition, basic information on the make-up of the assets, the basis for establishing the liability, and the policies surrounding funding targets would be needed. Any such reporting to OSIP would need to be provided in a consistent and standardized format to allow for ease of examination and comparison across the public entity self-insurance population.

JPAs are required to submit annual reports of financial transactions to the State Controller's Office, Division of Local Government Fiscal Affairs (Government Code Section 53891). These reports are not tailored for self-insured JPAs. Consequently, they have limited use by regulators or the public and are not compiled or disseminated. JPAs must also file financial audits with the county auditor of the county in which their home office is located (Government Code 6505C).

In this section we examine whether variances exist in how individual self-insurers and JPAs measure their workers' compensation obligations, account for their self-insurance activity, and report on those activities. We also gathered information on the net position, (also known as net assets or equity) of the self-insurance programs.

Specifically, we sought to understand the following.

- Is the liability for unpaid losses actuarially determined?
- Is there consistency in the reporting of the liability for unpaid loss and loss adjustment expenses?
- Is the liability for unpaid losses and loss adjustment expenses (loss and LAE) recorded on the entity's financial statements?
- Are the financial activities of an entity's self-insured workers' compensation program reported separately?
- Are assets dedicated to fund the workers' compensation liabilities and are they sufficient to satisfy the ultimate liability for loss and LAE?
- How are deficits in the funding of self-insured programs are handled?

C. Methodology

In order to identify these variances, our survey posed questions on the actuarial and financial activities of both individual and JPA self-insurance programs. We also gathered documents from survey respondents that included audited financial statements, actuarial reports, budgets, and information on any deficits in the entity's workers' compensation program. We received this

information without audit and did not review the methodologies or assumptions used, or the reasonableness of any conclusions. The Data section of this report (Section VIII) contains more details regarding the surveys.

D. Survey Results

Not all of the eighteen survey respondents answered the financial questions in the survey, and three entities did not answer any of the financial questions.

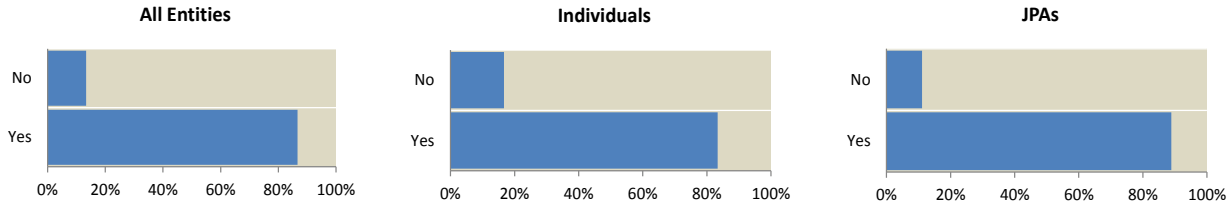
1. Estimating the Liability for Unpaid Loss

Given the long duration of workers' compensation claims, the uncertainty in the ultimate cost of claims, and the fact that claims can be reported long after the initial occurrence, establishing a liability for the unpaid claim obligation is difficult. The expertise of actuaries with experience in property and casualty insurance is generally needed to provide an estimate of the unpaid workers' compensation obligations accrued by an individual self-insured entity or JPA. Actuaries take into consideration the program structure, risk retention levels, membership, and the claims history to produce estimates of the liability for unpaid losses. Actuaries also consider inflation and the impact of relevant laws and regulations when producing their estimates.

In our survey of self-insurers and JPAs we asked about the use of actuaries to estimate the self-insured workers' compensation liabilities, the components of the liability, the use of discounting, and the basis of presentation of the liability in the entity's financial statements.

We obtained actuarial reports from 30% of the survey sample. We make no opinion of the methods or assumptions used or the reasonableness of the actuarial estimates in the reports. We used the reports to compare the estimates of unpaid loss to the financial statements and to supplement the survey responses wherever possible. The following are the results of our survey.

a. Are the unpaid workers' compensation claim liabilities on your Entity's statement of net position actuarially determined? (15 responses)



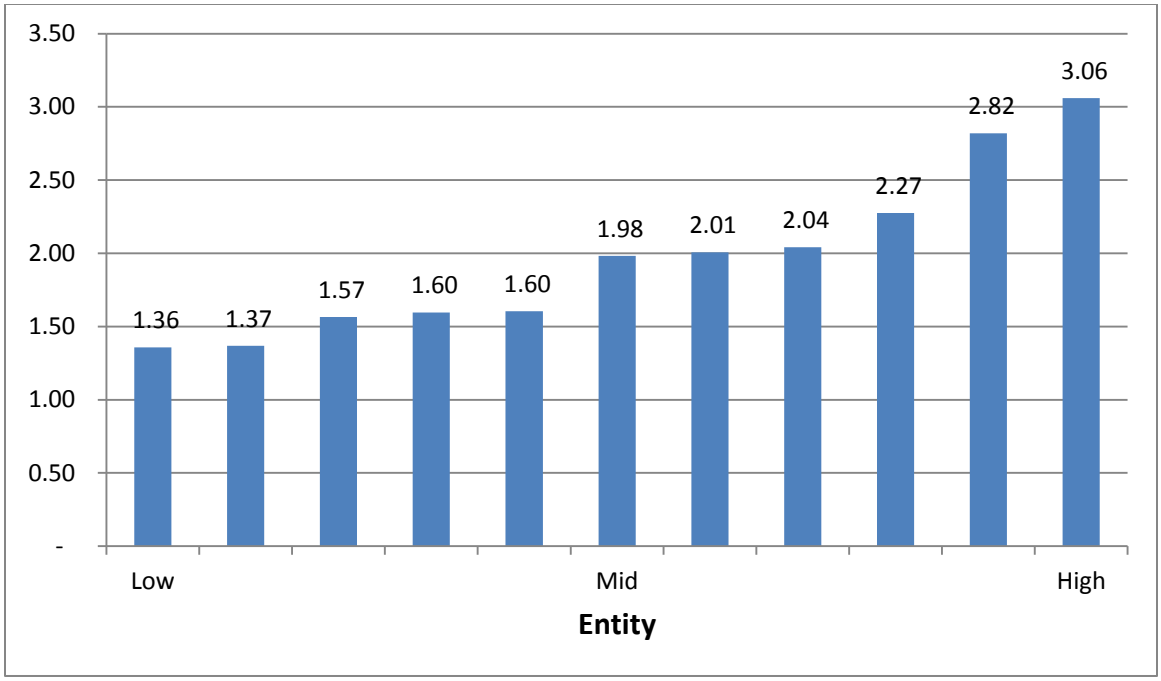
As shown above, nearly all entities who responded to our survey indicated that actuarial analyses are used to determine the liability for unpaid loss and loss adjustment expenses (loss and LAE). There were two entities, and individual self-insurer and a JPA, that did not obtain

actuarial analyses; however, it appears these entities were not actively self-insured for workers' compensation coverage, but they had been self-insured in the past. All but one responder indicated that the actuarial evaluations are performed annually.

In order to investigate the impact of having an actuarial study, we recorded the ratio of total loss and ALAE liabilities to case reserves based on the actuarial studies submitted to us in the survey (see Section VIII for more details regarding the actuarial studies). Total loss and ALAE liabilities are typically estimated by actuaries, whereas case reserves are established by claims administrators. The total loss and ALAE liabilities include IBNR which contains provisions for case reserve inadequacy associated with open claims, liabilities associated with closed claims that may reopen, and future costs associated with injuries that have occurred but have not yet been reported.

We found significant variation between survey respondents regarding the ratio of total loss and ALAE liabilities/case reserves. For example, for one entity the total loss and ALAE liabilities were 136% of the case reserves, whereas for another it was 306%. The following chart shows the ratio of loss and ALAE liabilities to case reserves for the various entities that provided actuarial studies.

Chart VII-1
Incurred by Not Reported (IBNR) as Percent of Case Reserves

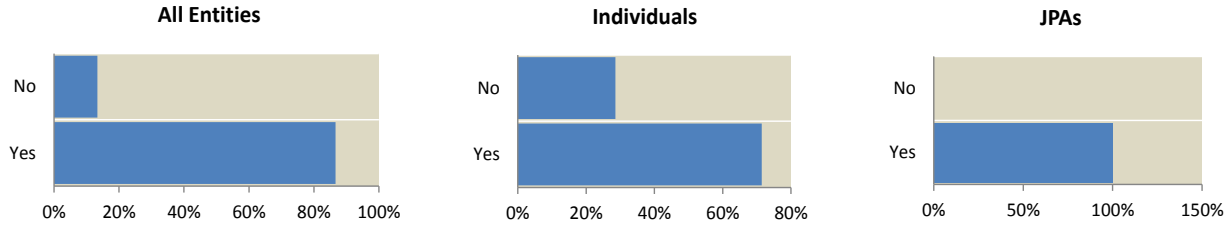


There are many reasons why some entities may need relatively more IBNR than others. For example, an entity with less adequate case reserves will require more IBNR. Also, increasing the

SIR will typically increase IBNR relative to case reserves, since larger claims often take longer to develop. In addition, the experience of more recent fiscal periods typically require more IBNR than older years, so entities that have expanded over the past few years (such as a JPA taking on new members) will usually have a relatively high ratio of IBNR to case reserve.

The ratio of total loss and ALAE liabilities to case reserves is important because in the absence of an actuarial study, case reserves are often used as a proxy for total liabilities. So for example, one might be tempted to think an organization with larger case reserves has greater total liabilities than one with smaller case reserves. However, since we have found significant differences between entities regarding their ratio of total liabilities/to case reserves, we feel that is very misleading to rely solely on case reserves to measure an entity's total liability or even to rank the liability exposures between different entities.

b. Does the unpaid claim liability include unallocated loss adjustment expenses? (15 responses)

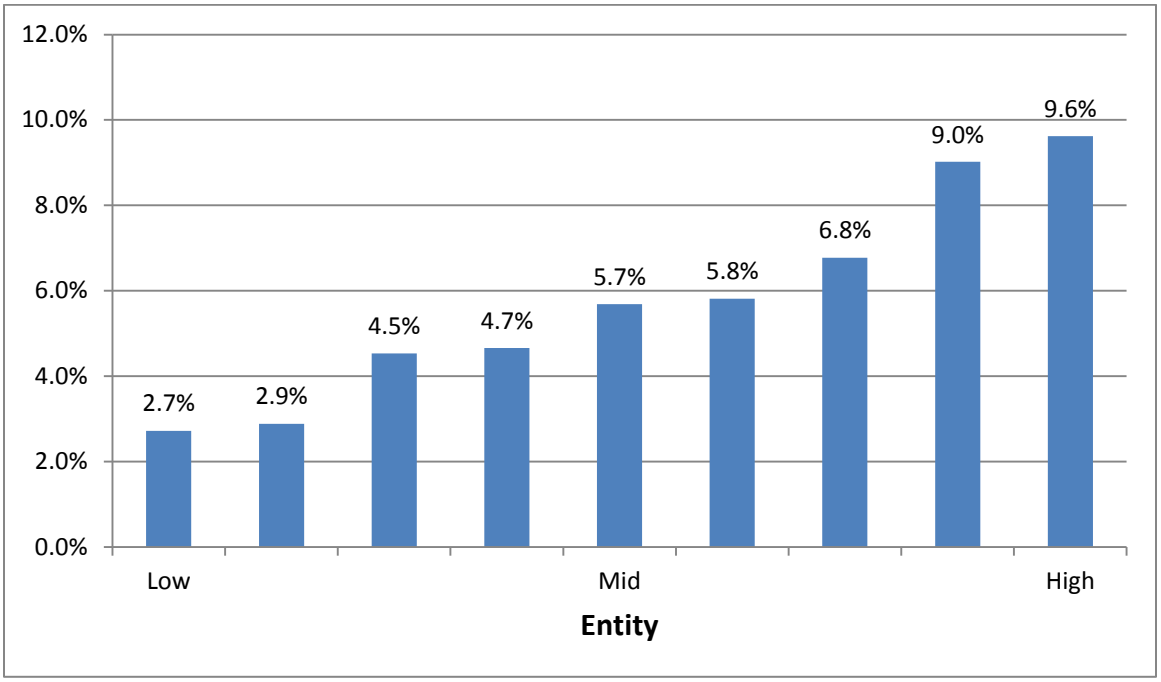


ULAE is a liability that captures the future cost to administer the claims that have been reported to the entity and claims that have not yet been reported to the entity. A liability for ULAE is required to be recorded on the financial statements of both individual self-insurers and JPAs since it represents a future cost to be paid on claims that have already occurred.

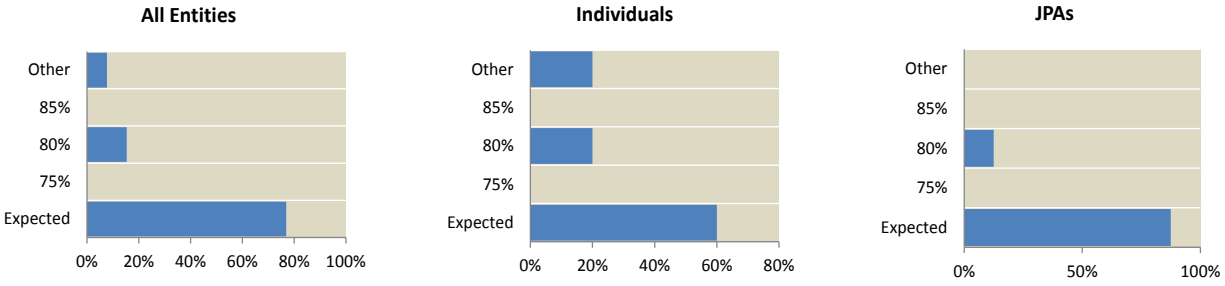
Based upon the responses, there is inconsistency among the individual self-insurer respondents with regard to recording a liability for ULAE. A reason for not recording the ULAE liability could be the arrangement with the entity's third party claims administrator is such that a one-time payment is made to the claims administrator for claims handling over the life of the claim, and therefore no future payments would be made. In this arrangement; however, there could be future costs in the event the TPA fails to perform its claims handling obligations (e.g. failure of the TPA) or in the event the self-insurer wishes to change TPA arrangements.

In order to further investigate the impact of ULAE liabilities, we tabulated the results of the actuarial studies submitted in response to our survey (see Section VIII for more details on the actuarial reports). We found that nine of the eleven submitted actuarial studies did include a liability for claims handling expense. While the average ratio of claims handling expense to loss and ALAE was 5.7%, this ratio varied significantly by entity.

Chart VII-2
Distribution of Claims Handling Expense/Loss and ALAE Liabilities

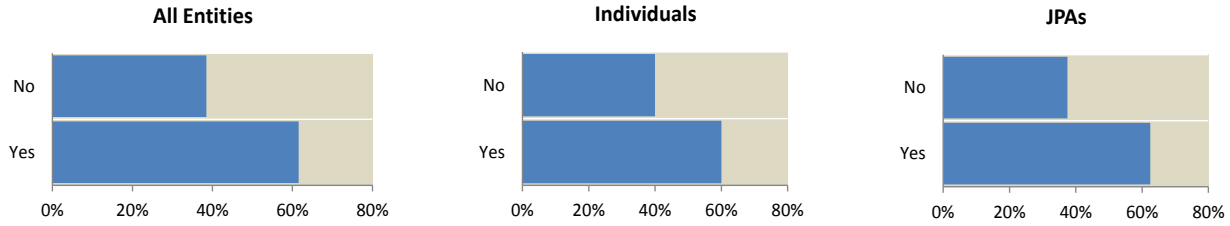


c. What confidence level was used to establish the unpaid liability on your Entity's statement of net position? (13 responses)

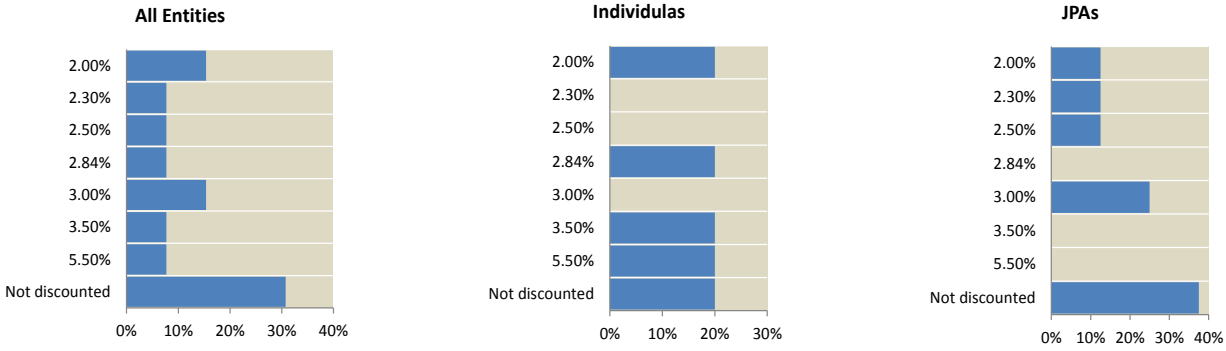


Most of the entities surveyed recorded the claim liability at the expected confidence level, with few stating the liabilities at higher levels. Since actuarial reports were not submitted for the two entities that reported liabilities at the 80% confidence level, we not able to verify their survey responses. The expected confidence level is the valuation required by GASB 10. GASB 10 provides authoritative guidance for accounting and financial reporting pools and entities other that pools that retain risk of loss.

d. Is the unpaid claim liability discounted to net present value> (13 responses)

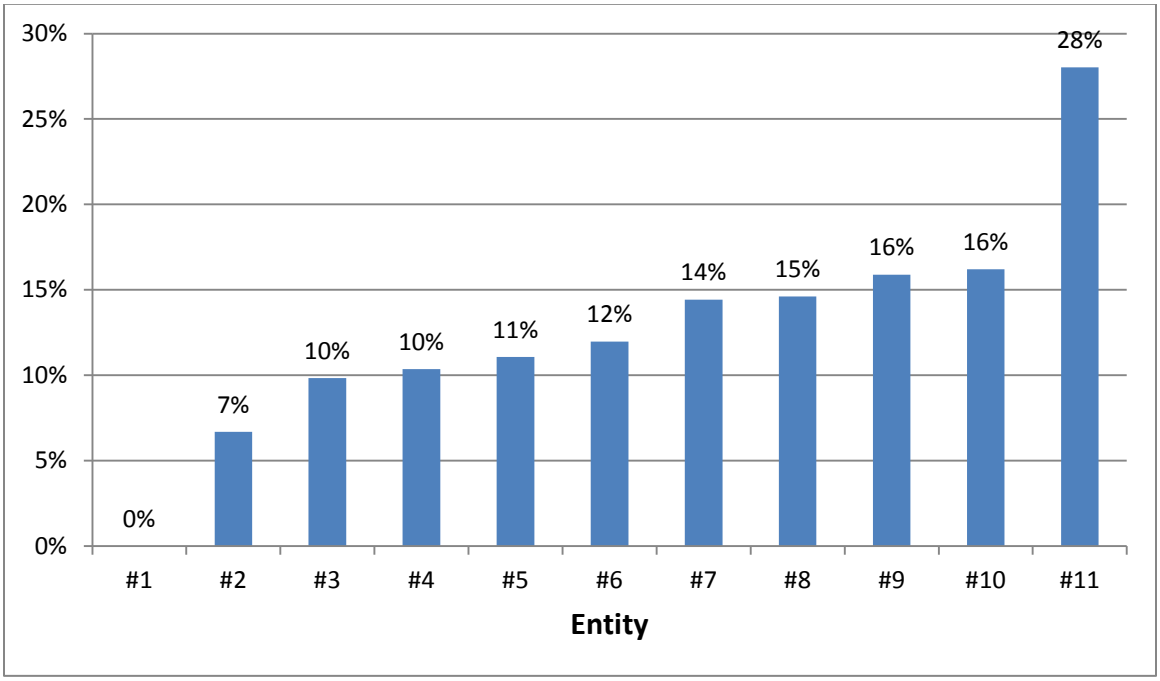


e. What was the assumed interest rate used to discount the liabilities? (13 responses)



Not surprisingly, the differences in annual discount rates used also led to differences in the overall discount of the liabilities to reflect net present value. In order to investigate this we reviewed the actuarial studies submitted in response to our survey. Of the studies provided to us, discounting to reflect net present value lowered the liability estimates by about 16%. In other words, on average the net present value liabilities were 16% lower than the undiscounted liabilities. However, the results varied significantly by entity, with reductions for net present value ranging from 0% (i.e. the entity did not discount at all) to 28%. The following chart shows the percentage reduction in loss and loss adjustment liabilities due to the impact of net present value.

Chart VII-3
Distribution of Discount of Loss &LAE Liabilities for Net Present Value



If the unpaid claim liability is discounted, an adjustment is made to reduce the overall liability to offset for the effect of anticipated future investment income earned on the assets set aside to fund the claim obligations. GASB 10 neither requires nor prohibits discounting of claim liabilities; however, the interest rate selected to calculate the net present value adjustment can have a significant impact on the amount of the offset for discounting. The interest rate should be consistent with how the assets are held (e.g. cash versus investments) and the duration of the outstanding liabilities. In addition, discounting may not be appropriate for a self-insurance program that does not have sufficient assets to cover the ultimate liabilities. In these cases, discounting should be limited to the earning potential of the available assets, or not discounted at all.

Collection of information on discounting from all public entity self-insurers could be used to identify outliers and trigger explanation or additional reporting.

2. Accounting for Self-Insurance Activities

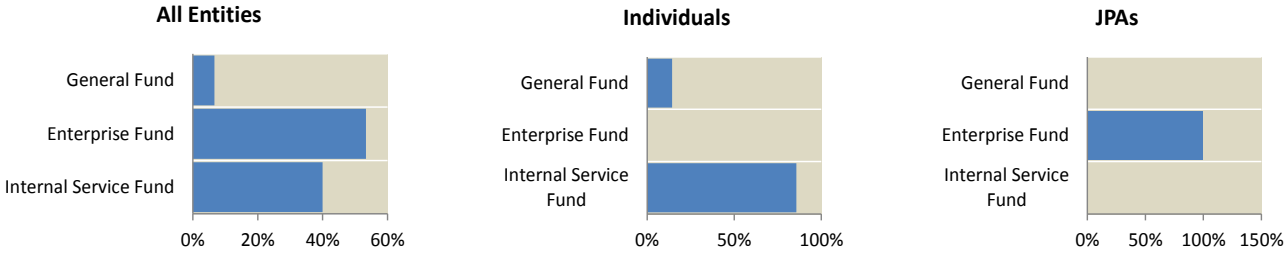
The manner in which a public entity accounts for its self-insured workers' compensation activities determines the ease with which the activities, results, and financial position can be viewed and verified. Governmental entities account for their operations using fund accounting. The accounts of a governmental entity are organized on the basis of funds, each of which is

considered a separate accounting entity. The operations of each fund is accounted for by providing a separate set of self-balancing accounts that comprise its assets, liabilities, net position, revenues, and expenses.

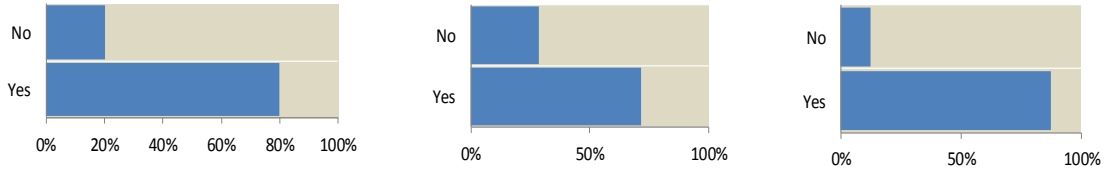
The activities of a JPA are accounted for in enterprise funds. These funds are used to account for operations financed and operated in a manner similar to private business enterprises, where the intent is that the costs of providing services to the members on a continued basis be financed or recovered primarily through fees and premiums.

Public sector individual self-insurers can account for their self-insurance activities in either the general fund or an internal service fund. Internal service funds are generally preferred since it allows for the cost associated with the self-insurance program to be charged to other departments. Using internal service funds is also beneficial in that it allows for separate funds to be established for each program (e.g. separate funds for workers' compensation and general liability). It is difficult to present the accounts of a self-insurance operation using a general fund since the activities are combined with all other general operating activities of the entity. The following charts show that most individual entities surveyed use an internal service fund and maintain a separate fund for their self-insured workers' compensation program. All JPAs use enterprise funds, although one of the respondents combined other lines of coverage offered by the JPA on its financial statements. Results to the question below indicate that 70% of individual self-insureds restrict use of the funds only to workers' compensation-related expenditures. The other 30% allow the funds to be used for other purposes.

f. In which type of fund is the workers' compensation financial activity budgeted and accounted for? (13 responses)

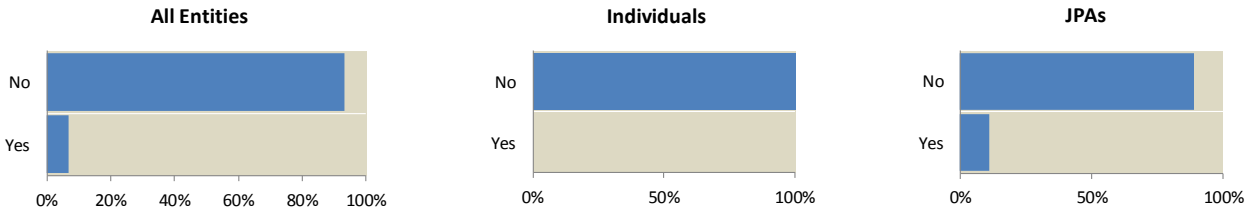


g. Is this fund dedicated to workers' compensation activity only? (13 responses)



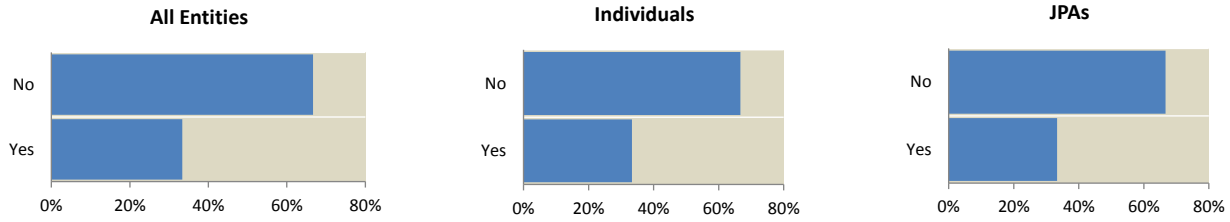
3. Self-Insurance Funds

h. Have monies allocated for workers' compensation been transferred or loaned to other funds or purposes in the last five years?



The one entity that had transferred funds from the workers' compensation program indicated the transfer was temporary and the amount was ultimately repaid.

i. Has the workers' compensation program experienced a deficit in the past ten years?



As shown in the survey responses, both individual self-insurers and JPAs have experienced deficits in their self-insured workers' compensation programs. Respondents indicated various methods have been used to cure deficits; including raising rates charged to departments for individual self-insurers and assessments levied to members of JPAs. In the survey we asked for the net position (also known as net assets or equity) in the entity's self-insured workers' compensation program. Tables VII-1 and VII-2 show these amounts.

Table VII-1
Net Position by Entity – Individual Self-Insured

Entity	Net Position
Individual #1	(77,298,000)
Individual #2	4,333,000
Individual #3	(10,504,000)
Individual #4	1,102,239
Individual #5	39,800,000

Table VII-2
Net Position by Entity – JPA

Entity	Net Position
JPA #1	7,738,033
JPA #2	17,527,465
JPA #3	7,204,039
JPA #4	11,119,019
JPA #5	11,512,922
JPA #6	28,465,821
JPA #7	11,150,600
JPA #8	17,843,447

We feel actuarial studies can play an important role in helping the State understand public agency self-insured liabilities and also in assisting those self-insurers to benchmark key assumptions and findings in their actuarial study.

1. **Understanding the Risk.** If the State is interested in tracking and understanding the statewide exposure of public agency self-insured workers' compensation, then collecting actuarial studies would be very useful. Given the high variability of the loss and ALAE liabilities to case reserves among the agencies that we reviewed, we feel it would be misleading for the State to rely solely on case reserves as a measure of exposure to workers' compensation liabilities.

2. **Benchmarking.** Most public self-insurers, including individuals and JPAs, do not have the information to benchmark how key findings and assumptions in their actuarial studies relate to those of their peers. The measurements in this report can serve as an initial step; however, the results should be interpreted with caution since they are based on only 11 actuarial studies. A more robust collection could provide public self-insurers with excellent guidance regarding how their discounting to reflect net present value, claims handling expense liabilities, and IBNR loads compare others.

C. Findings

The findings indicate: 1) there is inconsistency in the manner in which public sector self-insurance activities are accounted for and reported; 2) it is difficult to compare actuarial information to the entity's financial statements; and 3) very little financial and actuarial information is provided to OSIP on self-insurance activities; and 4) without clearer and standardized financial reporting, the public employees and regulators such as OSIP are unable

to evaluate the solvency of self-insured program. Without this information OSIP cannot monitor the financial condition of the self-insurer, particularly individual public self-insurers that commonly comingle multiple lines of coverage in one fund or account for their activities in the general fund.

Many public entity self-insurers obtain an actuarial estimate of the liability for unpaid losses despite the fact there is no regulatory requirement to do so.[17] It was difficult to compare the independent actuarial estimates to the financial statements in the actuarial reports we reviewed. This is often due to the actuary using claim data that is valued as of a date that does not coincide with the entity's fiscal year end. As a result, the actuary's estimates of unpaid liability will include projections of payments and case reserves for the period from the valuation date to the fiscal year end, but the financial statements will reflect actual activity through that date.

D. Recommendations

OSIP should consider developing rules and regulations to require actuarial reports be obtained by all public entity self-insurers, and that the actuarial reports include specific items and disclosures.

The actuarial requirements could include the following elements.

1. Actuarial reports must separately state the self-insured workers' compensation liabilities for unpaid loss and loss adjustment expenses.

2. Actuarial reports must be performed by an actuary with experience performing actuarial estimates involving California workers' compensation. The actuary must be an Associate or Fellow of the Casualty Actuarial Society or a Member of the American Academy of Actuaries.

3. The actuary's estimate of ultimate loss must reflect potential loss development (IBNR).

4. Estimates of unallocated loss adjustment expenses (ULAE) should include the ultimate estimated cost to adjust claims arising during the program (even if those claims are reported after the end of the program year) and be actuarially determined.

5. Projections at the expected confidence level should be point estimates and not ranges.

[17] The Education Code requires individual self-insured school districts and JPAs with school district members to submit actuarial reports of employee benefit programs (Education Code § 17566E and § 1602E). JPAs which provide employee benefits are required to submit financial audits to the California Department of Managed Health Care.

6. The actuarial report should present unpaid loss and loss adjustment expenses both on an undiscounted and net present value basis and the assumed interest rate should be disclosed in the report.

7. Estimates of the liabilities for unpaid loss and loss adjustment expenses should be presented on a gross, ceded, and net basis.

8. The actuarial report should document significant changes in the exposure or composition of a JPA over time.

9. Actuarial reports must conform to actuarial standards as detailed in the Actuarial Standards of Practice, including but not limited to #9 (Documentation & Disclosure); #13 (Trending in P/C Ratemaking), and #29 (Expenses in P/C Ratemaking).

A standardized prescribed financial report submitted by all individual public entities and JPAs would allow OSIP to monitor the financial condition and activities of self-insurance programs in a consistent manner. Reports to the public on the condition of public entity self-insurance could then be provided. The prescribed reports would collect the following information.

Assets	Detail of all assets in the workers' compensation fund including: cash and investments, receivables, amounts due from other funds, amounts due from excess insurers, assessments receivable, and other assets.
Claim Liability	Detail on the liability for unpaid loss and allocated loss adjustment expenses and unallocated loss adjustment expense liability. Liabilities should be presented gross of ceded losses and on an undiscounted basis, with adjustments for amounts recoverable from excess insurance and net present value.
Other Liabilities	Detail on the liability for unpaid loss and allocated loss adjustment expenses, unallocated loss adjustment expense liability, dividends payable, unearned revenue, amounts due to other funds, assessments payable to other agencies, and other accrued expenses payable.
Net Position	Detail of net position, including unrestricted, designated, and restricted amounts. A statement that indicates the amount of risk margin maintained in net position using a confidence level measure.
Revenues and Expenses	Detail of all revenues, including contributions from members of JPAs or other departments; assessments; investment income, and other income.
Expenses	Detail of all expenses, including claim expense, excess insurance, claims adjusting, cost containment expenses, risk control, broker fees, transfers to other funds, dividends, and all other professional and administrative costs.

Claims Development	Schedule reconciling the claim liability and showing: Beginning liability for unpaid loss and loss adjustment expenses + ultimate loss estimate for claims of the current fiscal year +/- changes in the ultimate loss estimate for claims of all prior years - payments on claims incurred during the current fiscal year - payments on claims incurred during all prior years = Ending liability for unpaid loss and loss adjustment expenses.
Actuarial Schedule	A schedule that reconciles the actuarial estimates of unpaid loss to those reported in the prescribed reports and audited financial statements.
Other Disclosures	A schedule that displays the unpaid loss and loss adjustment expenses, and net position at different discount rates, but at a minimum using 0% and the selected discount rate for financial statement purposes. Such a disclosure would show the risk and variability at various discount factors.

Most of the reporting listed above would be applicable to both individual self-insurers and JPAs. OSIP may consider requiring public entity self-insurers to report their self-insured workers' compensation activities in a separate fund, not comingled with any other activities. JPAs that offer other lines of coverage often prepare combining statements of net position, and statement of changes in net position as supplemental information in the audited financial statements. These supplemental statements show each line of coverage separately.

VIII. Data

The data used to support this analysis are based on a variety of sources, including annual filings to OSIP, DWC Performance Audit Reviews, and surveys developed and distributed by Bickmore. The following are descriptions of these various data sources.

A. Annual Filing to OSIP

Self-insurers are required to file specific information with OSIP on an annual basis. This information includes key information such as payroll and the number of reported and open claims, as well as medical and indemnity costs. Each year OSIP makes publicly available an Excel workbook containing much of the filed information in these annual filings. We compiled nine years of annual filings into one database, utilizing information valued as of June 30, 2005, through June 30, 2013. This allowed us to track the historical payroll, claim development, and loss development of self-insurers over time. Our analysis was based on annual payroll exceeding $100 billion, with annual medical and indemnity costs of almost $2 billion.

B. DWC Performance Audit Reviews

We compiled the results of annual audits conducted in 2010-2012 by the DWC Audit Unit. The results of these audits are described in "A Report to the California Legislature on Claims Handling Practices of Workers' Compensation Administrators," which is publicly available on the DIR website (https://www.dir.ca.gov/dwc/audit.html). We created a database of the results of the audits from each year so that we could analyze claims administration performance results.

The DWC report is pursuant to Labor Code section 129(e), which requires the Administrative Director of the DWC to submit an annual report summarizing the results of audits conducted by the DWC Audit Unit. The focus of the audit is the timeliness and accuracy of indemnity benefits paid to injured workers for an industrial injury, as well as compliance with notice provisions.

Each year the DWC conducts a series of Profile Audit Reviews (PAR audits) of claims administration units. These units may be associated with insurance companies, third party claims administrators, or self-insurers that self-administer their claims. Some of these self-insurers may be public, and some may be private companies. In addition, the public self-insurers may be JPAs or individual self-insurers. Most of the audited agencies are selected routinely, while others are target audits in response to an earlier audit failure.

Once it is determined an entity will be audited, the number of indemnity and denied claims subject to audit is based on the number of reported claims over the prior three years. The particular indemnity and denied claims audited are selected randomly.

Each audited agency receives a "performance rating" from the audit. A low rating indicates good performance, while a high rating indicates poor performance. This rating is based on the following (Pages 2-3 of 2012 PAR report).[18]

- "The percentages of randomly selected claims with unpaid indemnity and the amounts of unpaid indemnity in those claims.

- The percentages of randomly selected claims with late first temporary disability (TD) payments and/or failure to comply with the regulations for the provision of first notices of salary continuation in lieu of TD payment.

- The percentages of claims with late first payments of permanent disability and/or death benefits.

- The percentages of claims with late subsequent indemnity payments.

- The percentages of claims with violations involving failure to comply with the regulations for provision of notices to advise injured workers of: the process for selecting Agreed Medical Examiners and/or Qualified Medical Examiners; and/or the right to supplemental job displacement benefit (SJDB) for claims with dates of injury on or after January 1, 2004. The enforcement for provision of the SJDB notice was suspended as of January 1, 2012, when the statutory basis for the provision of the notice [Labor Code section 4658.5(c)] was repealed."

Each audit subject's performance rating is compared to the PAR performance standard. The PAR performance standard is based on the performance audits from the prior three years such that 80% of performance ratings from those three years are lower than the performance standard, and 20% are above it. A performance rating is considered to meet or exceed the performance standard if it is lower than the standard.

C. Bickmore Survey

Bickmore developed and distributed a survey in order to supplement existing available public data sources and to collect detailed information from a representative group of self-insured public entities and JPAs. Input on the survey design was obtained from public entity representatives experienced in the financial and claim matter pertaining to workers' compensation. Input was also obtained from JPA managers.

Bickmore selected a random sample of 40 entities; 20 JPAs and 20 individual self-insureds to survey. The methodology generated a group of entities whose mix of type, region, size, type of

[18] 2012 Audits - A Report to the California Legislature on Claims Handling Practices of Workers' Compensation Administrations.

claims administrator (TPA vs. self-administered), and type of self-insurance (individual vs. group/JPA) was selected to match that of the State population of self-insurers.

The selection of survey participants considered the following.

1. Characteristics

    a. Type of Entity: Education, City, County, and Other.[19] This was based on the entity names and descriptions in the OSIP data.

    b. Region: Agencies were mapped into northern, central, and southern California.

    c. Size: We developed thresholds based on medical and indemnity payments made during 2012/13 in order to distinguish small, medium, and large self-insurers. These thresholds varied between accredited JPAs, non-accredited JPAs, and individual self-insurers.

    d. Claims Administrator: Separately identified self-administered entities versus those that utilize a third party claims administrator, based on the claims administrator identified in the OSIP data.

    e. JPA vs. Individual: Within the selected JPAs, the accredited JPAs versus those not accredited were identified separately. This determination was based on data from California Association of Joint Powers Authorities.

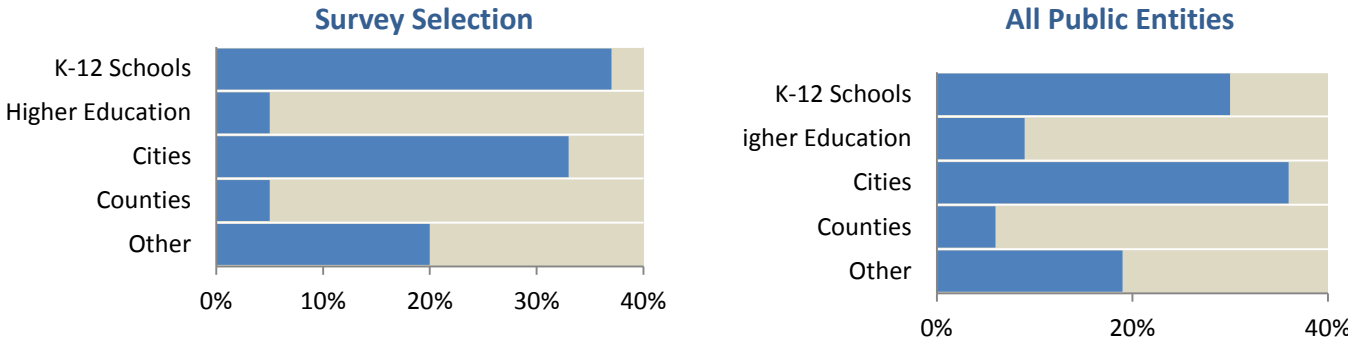
    f. Using OSIP annual reports valued as of June 30, 2013, we calculated the percentage of 2012/13 payments and the number of self-insured entities for each of the aforementioned key characteristics.

Using simulation, we randomly generated a group of 20 JPAs (10 accredited, 10 non-accredited) and 20 individual self-insurers most closely resembling the statewide mix of the previously described key characteristics.

The following charts show the mix of those key characteristics in our survey sample and in the State population of public self-insurers.

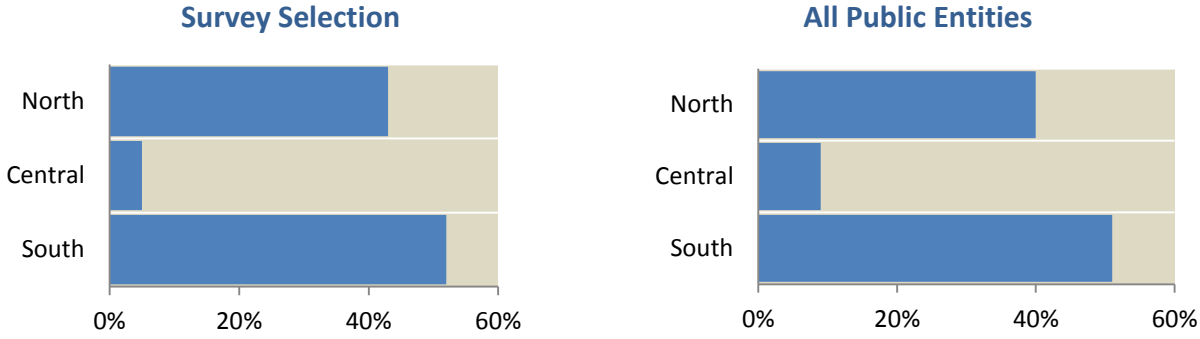
[19] Special Districts, Housing Authorities, etc.

Survey Selection by Entity Type
JPAs and Individual Public Entities



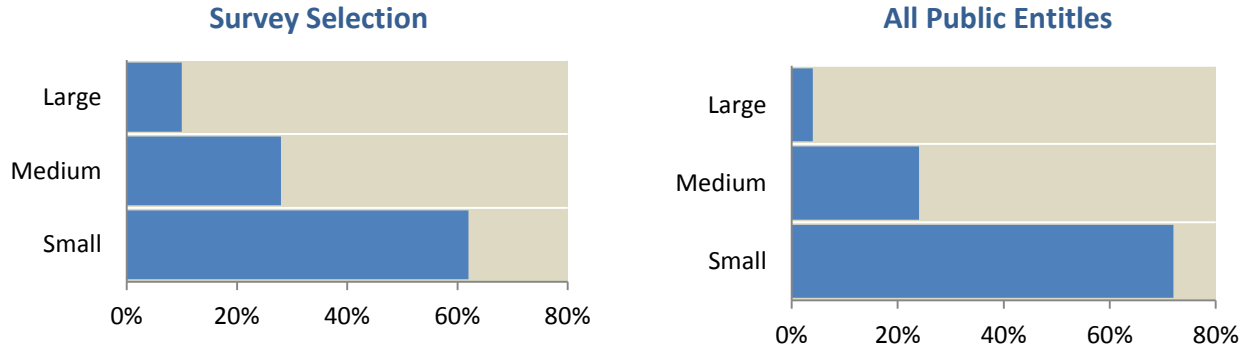
The chart below reflects the region allocation of the survey sample.

Survey Selection by Region
JPAs and Individual Public Entities



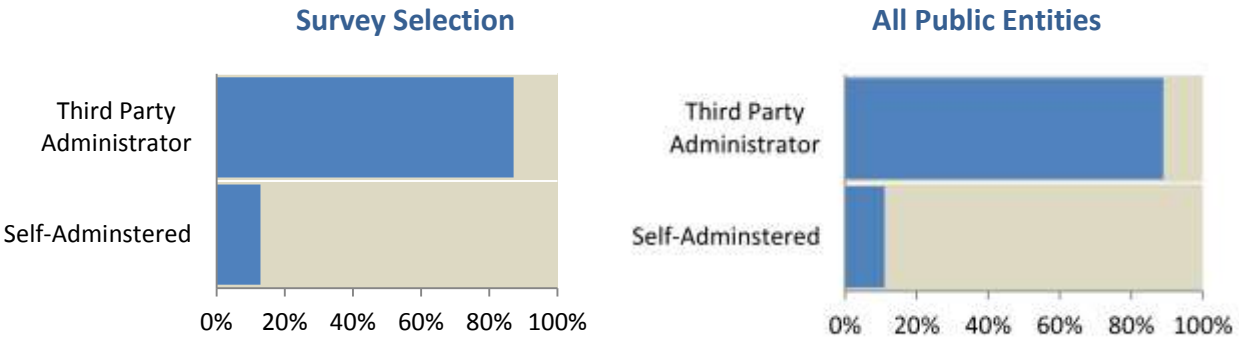
The chart below reflects the size allocation of the survey sample.

Survey Selection by Size
JPAs and Individual Public Entities



Of the 40 entities selected for the survey sample, 13% self-administer their workers' compensation claims and 88% utilize the services of the third party administrator.

Survey Selection Self-Administered Versus Third Party Administrated JPAs and Individual Public Entities



Of the 40 entities receiving the survey request, 18 responded for a 45% response rate. Of those 18 surveys submitted, eight were submitted by individual self-insurers and ten by JPAs. Of the surveys submitted, approximately half were much more comprehensive in their responses.

The survey was distributed to the 40 self-insurers included questions regarding the following: (a) program management; (b) claims administration practices; and (c) funding of claims liabilities. Respondents were also asked to submit additional data to assist Bickmore in understanding how the entity funds their workers' compensation liabilities. Additional data requested included the most recent actuarial report, comprehensive annual financial or audit report, current budget, workers' compensation funding policies, deficit funding policies, funding reports to the governing body, and five years of loss data.

Our survey requested a copy of the most recent actuarial study for each entity. Eleven survey participants provided us with copies of their actuarial studies. These studies were performed by five different actuarial firms, and the total estimated loss and loss adjustment expense liabilities were over $500 million with no risk margin or discount for net present value. The purpose of our review of the actuarial studies was to check for consistency regarding key elements in the actuarial studies, including discounting for net present value, claims administration reserves, and incurred but not reported (IBNR) liabilities. We did not perform a detailed analysis of the methods, other key assumptions, or the reasonability of the actuarial results.

A review of the information submitted by the responding entities determined the following.

D. Survey Results

1. **Members in the JPA's Workers' Compensation Program During the 2012/2013 Program Year -** The range of members for the ten responding JPAs was between 12 and 395. The individual membership for all ten JPAs totaled 924.

2. **Volunteers Covered Under the Workers' Compensation Program -** Of the ten JPAs responding to this question, nine indicated they do cover volunteers pursuant to Labor Code 3363.5.

3. **Labor Code 4850 Coverage -** Only one JPA respondent indicated that coverage for Labor Code 4850 benefits was included in their workers' compensation program.

4. **Self-Insured Retention -** Of the responses received, the entities are retaining the first $500,000 to $1,000,000 of risk.

5. **Excess Providers -** Four responded as being a part of a pool: CSAC Excess Insurance Authority (CSAC- EIA) and the Local Agency Workers' Compensation Excess Joint Powers Authority (LAWCX). The other five purchase coverage from traditional insurance carriers. One did not respond.

6. **Self-Administered Versus Third Party Administration -** Six of the responding JPAs utilize a TPA, while just one administers claims in house. Six of the responding individual entities utilize a third party claims administrator, while two administer claims in house.

7. **Cost of TPA Contract -** We received responses from seven JPAs on the question of what was paid for TPA services in 2012/2013. The total cost for all seven was $4,409,521, or $629,932 on average. When we divided the cost of the TPA contract by the claims payment amount for each entity, the results ranged from 8.41% to 17.41%.

   Four individual public entities responded to this question with a total cost of $4,076,970 or $1,019,242 on average. The results of dividing the cost of the TPA contract by the claims payment for each entity ranged from 5.75% to 12.67%.

8. **Cost of Claims Audit -** Four JPAs responded with the cost of their most recent claims audit for a total of $33,300, or an average of $8,325 per audit. Three individual entities responded with a total cost of $57,868, or an average of $19,289.

9. **Cost of Actuarial Study -** Eight JPAs responded with a total cost for their most recent actuarial study of $51,702, or an average of $6,463 per study. Four individual entities responded with a total cost of $25,000, or an average of $6,250 for their actuarial studies.

10. **Indemnity Claim Caseloads –** Seven JPAs provider the claim count for their indemnity claims for a total of 2,936, or an average of 98 per adjuster. Three individual entities provided a claim count for a total of 432 indemnity claims, or an average of 108 per adjuster.

11. **Cost Containment –** Respondents provided a detailed breakdown of their methods for handling various (16) cost containment functions. Chart VIII-1 shows the results broken down between in-house staff and outside vendors/TPAs.

Chart VIII-1
In-House Versus Vendor Cost Containment

	In-House Staff	TPA Staff	Vendor Selected by TPA	Vendor Selected by Entity	Not Applicable	Other
Medical or Nurse Care Management		23%	8%	62%		8%
Bill Review		38%	15%	38%		8%
Utilization Review		31%	15%	46%		8%
PPO Management		33%	17%	42%		8%
MPN Management		18%	9%	18%	45%	9%
Return to Work Coordination	36%	18%		18%	18%	9%
Fit-for-Duty Exams	9%			36%	36%	18%
Telephonic Reporting of Incidents/Injuries	8%	8%		25%	42%	17%
Telephonic Nurse Triage at Receipt of Incident/Injury Reporting				27%	64%	9%
Durable Medical Equipment			69%	23%		8%
Pharmacy Benefit Management			69%	15%	8%	8%
Legal	8%		31%	54%		8%
SCHIP/MMSEA Reporting	15%	23%	23%	31%		8%
SCHIP/MMSEA MSA Set-Aside Determinations		8%	46%	31%		15%
Lien Resolutions	15%	38%	23%	15%		8%
Independent Permanent Disability Rating	8%	15%	46%	15%		15%

12. **Settlement Authority –** The responses received all closely followed the settlement authority as outlined below.

TPA Claims Examiner	Up to $25,000
Risk Manager	Up to $50,000
In-House Claims Manager	Up to $100,000
TPA Claims Manager	Up to $100,000
Board or Council	Over $100,000

E. Survey Respondents

We would like to thank the following for participating in the survey process.

County of Orange
City of Beverly Hills
County of Contra Costa
Central San Joaquin Valley Risk Management Authority
Fire Agencies Self Insurance System
California Housing Workers' Compensation Authority
San Joaquin County Schools Workers' Compensation Insurance Group
City of Huntington Beach
Upland Unified School District
Redwood Empire Schools Insurance Group
California Fair Services Authority
Special District Risk Management Authority
Santa Barbara County Schools' Self-Insurance Program for Employees
San Mateo County Schools Insurance Group
Central Region School Insurance Group
Simi Valley Unified School District
City of San Diego
County of El Dorado

List of Abbreviations

ALAE - Allocated Loss Adjustment Expense
ASP - California Self-Insurers' Security Fund Alternative Security Program
CAJPA - California Association of Joint Powers Authorities
CHSWC - California Commission of Health and Safety and Workers' Compensation
CSAC-EIA - California State Association of Counties Excess Insurance Authority
CSU - California State University
CWCI - California Workers' Compensation Institute
DWC - Division of Workers' Compensation
DIR - California Department of Industrial Relations
DIR OSIP - Department of Industrial Relations, Office of Self Insurance Plans
IBNR - Incurred But Not Reported
JPA - Joint Powers Authority
LAE - Loss Adjustment Expense
MCC - Medical Cost Containment
NCM - Nurse Case Management
OSIP - Office of Self Insurance Plans
PAR - Performance Audit Review
PD - Permanent Disability
PIPS - Protected Insurance Program for Schools and Community Colleges
QME - Qualified Medical Examiners/Agreed Medical Examiner
SB 863 - California Senate Bill 863
SCIF - State Compensation Insurance Fund
SIR - Self Insured Retentions
SISF - California's Self-Insurers' Security Fund
SJDB - Supplemental Job Displacement Benefit
TD - Temporary Disability
TPA - Third Party Administrator
UC - University of California
ULAE - Unallocated Loss Adjustment Expense
WCIRB - California Workers' Compensation Insurance Rating Bureau

Appendix A

Office of Self Insurance Plans Annual Report

State Of California

OSIP

Office of Self Insurance Plans

Public Self Insurers ER Annual Report

For Year 2012/2013

September 27,2013

1750 Creekside Oaks Drive, Ste 200
Sacramento CA 95833

State of California
Employer

General Information :

Certification Number
(Period) From-

Period Of Report Full Year
(Period) To 06/30/2013

Master Certificate Holder :

Name
City- Sacramento
Type of Public Agency JPA

FTIN
Address1 1750 Creekside Oaks Drive, Ste 200
State CA **Zip** 95833

Subsidiaries :

1) **Full Legal Name** **State** CA
Subsidiaries Affiliate Certificate Number

During the reporting period of this report, has there been any of the following with respect to the Master Certificate Holder or any subsidiary?

A merger or unification?
Changes in name or identity? Identity
Any addition to Self Insurance Program Insurance Program

If Yes, Explain :

Employment and wages paid in current calendar year :

Number Of Employees

Total Wages And Salaries Paid

Addressed Correspondence For Security Deposit and Financial Matters :

Name -
Position/Title -
Company Name -
Email Address -
Phone Number -
Fax Number -
Address-
City -
State-
Zip -
Corporate Web Address -

State of California

Record Storage :

Are Claim records stored at any location other then with the current administrator? (Yes)

Insurance Coverage :

Are any of your workers' compensation liabilities in California during the reporting period covered by a standard workers' compensation Insurance policy?

Are any of your workers' compensation liabilities in California during the reporting period covered by a specific excess workers' compensation Insurance policy?

Do you carry an aggregate (stop loss) workers' compensation insurance policy?

Name Of Company Officer-
Street Address-
Name Of Company-
City- State - Zip -
Phone Number -
Name Of Person Legally Responsible For This Electronic Signature :

(Date/Time Of Signature) -

State of California

Files Uploaded:

State of California

TPA:-

Liabilities By Reporting Location

Report Location Number: Identification of Location: Certificate Holder:

CASES AND BENEFITS (to the nearest dollar)				From Date- 07/01/2012		To Date- 06/30/2013	
Date	#	Incurred Liability		Paid To Date		Future Liability	
		Indemnity	Medical	Indemnity	Medical	Indemnity	Medical
1) Cases open as of 06/30/2013 reported prior to 2008/2009							
2) Open and Closed Cases							
A) All Cases reported in 2008/2009							
2008/2009 Cases open							
B) All Cases reported in 2009/2010							
2009/2010 Cases open							
C) All Cases reported in 2010/2011							
2010/2011 Cases open							
D) All Cases reported in 2011/2012							
2011/2012 Cases open							
E) All Cases reported in 2012/2013							
2012/2013 Cases open							

	$ Indemnity	$ Medical
SUBTOTAL		
TOTAL		

3) Estimate Future Liability (Indemnity Plus Medical) →

$ Indemnity	$ Medical

4) Total Benefits Paid During 2012/2013 (Including all case expenditures) →

5) Number of MEDICAL-ONLY Cases Reported in 2012/2013 →

6) Number of INDEMNITY Cases Reported in 2012/2013 →

7) Total of 5 and 6 (Also entered in 2E above) →

8) Total Number of open Indemnity Cases (All Years) →

9) Number of Fatality Cases Reported In 2012/2013 →

10) (a) Number of FY 2013 claims for which the employer or administrator was notified of representation by an attorney or legal representative in 2013 →

10) (b) Number of non-FY 2013 claims for which the employer or administrator was notified of representation by an attorney or legal representative in 2013 →

11) Attach a List of ALL Open Indemnity Claims (by reporting location and by year) reported and with claims (in alphabetical order) →

State of California
Certification

First Name | Middle Name | Last Name | Agency Name

Address 1 | City | State | Zip Code

Administrating Agency's Certificate Number

☐ Or Self Administered

CERTIFICATION

I declare under penalty of perjury that I have prepared or caused this report to be prepared and I have examined this liabilities report of this self insurer's worker's compensation liabilities. To the best of my knowledge and belief this report is true, correct and complete with respect to the worker's compensation liabilities incurred and paid. I further declare under the penalty of perjury that the estimates of future liability of worker's compensation claims made in this report reflect the administrator's best judgment as to the future liability of claims, using prevailing industry standards, and the signatory intends Self Insurance Plans to rely upon the representation.

First Name | M.I. | Last | Agency Name

Address 1

City | State | Zip Code | E-mail Address

Phone Number | FAX Number | Date | Signature (Type your Full Name)

Person legally responsible for this Electronic Signature

Reporting Location No.:

Certificate Number:

NAME OF MASTER CERTIFICATE HOLDER:

All Cases on this Page are
For the Year _____
Or Earlier

v3.3\SelectBy-K\Extract-K

Name of Injured or Deceased (Last) (First Initial)	Date of Injury		Description of Injury	Paid to Date		Estimated Future Liability	
				Indemnity	Medical	Indemnity	Medical

Totals for Report Year

Claims:

APPENDIX B

List of Public Individual and Joint Powers Authority Self-Insurers

7527-062-01 KEENAN & ASSOCIATES, TORRANCE

Toan Nguyen
Chief Financial Officer
ABC UNIFIED SCHOOL DISTRICT
16700 Norwalk Blvd.
Cerritos,CA 90703
Phone: (562) 926-5566 ext 21212 Fax: (562) 802-3846

7804-011-46 SEDGWICK CLAIMS MANAGEMENT SERVICES, INC., WALNUT CREEK

Ms. Janet M. Jackson
Human Resources Manager
ALAMEDA CONTRA COSTA TRANSIT DISTRICT
1600 Franklin Street
Oakland,CA 94612
Phone: (510) 891-7204 Fax: (510) 891-7229

7862-048-01 ATHENS ADMINISTRATORS, CONCORD

Greg Stephens
ALAMEDA COUNTY MEDICAL CENTER (ACMC)
15400 Foothill Blvd.
San Leandro,CA 94578
Phone: (510) 346-7537 Fax: (510) 346-7575

7536-197-04 JT2 INTEGRATED RESOURCES, MANTECA

Ms. Denise R. Jaramillo
Asst. Supt./Financial Services
ALHAMBRA UNIFIED SCHOOL DISTRICT
1515 West Mission Rd
Alhambra,CA 91803
Phone: (626) 943-6550 Fax: (626) 943-8040

7647-062-06 KEENAN & ASSOCIATES, SAN JOSE

Mr. James R. Koenig Jr.
Asst. Supt. of Business & Fiscal
ALISAL UNION SCHOOL DISTRICT
1205 E. Market St.
Salinas,CA 93905
Phone: (831) 753-5700 ext 2033 Fax: (831) 753-5552

7552-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Ms. Tracy Horton
ALVORD UNIFIED SCHOOL DISTRICT
10365 Keller Ave
Riverside,CA 92505
Phone: (951) 509-5083 Fax: (951) 509-6028

7509-062-01 KEENAN & ASSOCIATES, TORRANCE

Ms. Dianne Poore
Assitant Superintendent of Business

ANAHEIM UNION HIGH SCHOOL DISTRICT
501 CRESCENT WAY
ANAHEIM,CA 92803-3520
Phone: (714) 999-3556 Fax: (715) 520-5741

7643-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Diana Keelen
ANTELOPE VALLEY COMMUNITY COLLEGE DISTRICT
3041W. Ave K
Lancaster,CA 93536
Phone: (661) 722-6319 Fax: (661) 722-6320

7848-169-11 ALPHA FUND, ROSEVILLE

Ms. Wanda Franks
Benefits Manager
ANTELOPE VALLEY HEALTHCARE DISTRICT
1216 West Ave J, Ste 500
Lancaster,CA 93534
Phone: (661) 949-5171 Fax: (661) 951-4234

7572-155-05 SELF INSURED SCHOOLS OF CALIFORNIA (SISC), BAKERSFIELD

Mr. Gabriel C. Rodriguez
BAKERSFIELD CITY SCHOOL DISTRICT
P.O. Box 1847
Bakersfield,CA 93303
Phone: (661) 636-4710 Fax: (661) 636-4721

7876-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Ms. Christine M. Holmes
Human Resources Analyst
BAY AREA AIR QUALITY MANAGEMENT DISTRICT
939 Ellis St.
San Francisco,CA 94109
Phone: (415) 749-4938

7504-197-05 JT2 INTEGRATED RESOURCES, OAKLAND

Ms. Pamela Goo
Risk Manager
BERKELEY UNIFIED SCHOOL DISTRICT
2020 Bonar Street
Berkeley,CA 94702
Phone: (510) 644-6049 Fax: (510) 644-8881

7910-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Scott A. Buxbaum
CAJON VALLEY UNION SCHOOL DISTRICT
P.O. Box 1007
El Cajon,CA 92022
Phone: (619) 588-3061 Fax: (619) 401-5954

7603-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Nikki N. Washington
CALEXICO UNIFIED SCHOOL DISTRICT
901 Andrade Ave
Calexico,CA 92231
Phone: (768) 388-8304 Fax: (760) 357-1918

7573-195-05 TRISTAR RISK MANAGEMENT, RANCHO CORDOVA

Patrick K. Gaffney
CAMPBELL UNION HIGH SCHOOL DISTRICT
3235 Union Ave
San Jose,CA 95124
Phone: (408) 371-0960 Fax: (408) 558-3037

7906-195-07 TRISTAR RISK MANAGEMENT, CONCORD

Mr. James Crawford
Deputy Superintendent
CAMPBELL UNION SCHOOL DISTRICT
155 N Third Street
Campbell,CA 95124
Phone: (408) 341-7214

7525-316-03 CORVEL ENTERPRISE COMP, INC., SAN DIEGO

Katie Nunan
Director III Pers/Ins/Risk Mgmt
CAPISTRANO UNIFIED SCHOOL DISTRICT
33122 Valle Rd
San Juan Capistrano,CA 92675
Phone: (949) 234-9389 Fax: (949) 487-0671

7895-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Mr. Mark Evans
Director of Fiscal Services
CASTAIC UNION SCHOOL DISTRICT
28131 Livingston Ave
Valencia,CA 91355
Phone: (661) 257-4500 ext 1502

7865-316-05 CORVEL ENTERPRISE COMP, INC., FOLSOM

Ms. Katherine J. Casenave
CENTRAL CONTRA COSTA TRANSIT AUTHORITY
2477 Arnold Industrial Way
Concord,CA 94520
Phone: (925) 680-2051 Fax: (925) 687-7306

7900-048-01 ATHENS ADMINISTRATORS, CONCORD

Ms. Jan Cooke
Finance Director
CENTRAL COUNTY FIRE DEPARTMENT
1399 Rollins Rd
Burlingame,CA 94010
Phone: (650) 375-7408

7625-062-01 KEENAN & ASSOCIATES, TORRANCE

Mr. David El Fattal
Vice President of Business Services
CERRITOS COMMUNITY COLLEGE DISTRICT
11110 Alondra Blvd
Norwalk,CA 90650
Phone: (562) 860-2451 ext 2242 Fax: (562) 653-7818

7644-062-06 KEENAN & ASSOCIATES, SAN JOSE

Mr. Lorenzo Legaspi
Vice Chancellor of Business Services
CHABOT-LAS POSITAS COMMUNITY COLLEGE DISTRICT
7600 Dublin Blvd, 3rd Floor
Dublin,CA 94568
Phone: (925) 485-5203

7505-316-02 CORVEL ENTERPRISE COMP, INC., RANCHO CUCAMONGA

Ms. Lisa A. White
Benefits Director
CHAFFEY JOINT UNION HIGH SCHOOL DISTRICT
211 W Fifth Street
Ontario,CA 91762
Phone: (909) 988-8511 ext 2665 Fax: (909) 467-5229

7564-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Mr. Oscar Esquivel
Assistant Superintendent
CHULA VISTA ELEMENTARY SCHOOL DISTRICT
84 East J St
Chula Vista,CA 91910
Phone: (619) 425-9600

7626-062-01 KEENAN & ASSOCIATES, TORRANCE

Ms. Carol R. Horton
VP - Fin & Adm
CITRUS COMMUNITY COLLEGE DISTRICT
1000 W Foothill Blvd
Glendora,CA 91741
Phone: (626) 914-8889 Fax: (626) 914-8823

7100-239-01 INTERCARE HOLDINGS INSURANCE SERVICES, INC., ROCKLIN

7100-99-01 Self Administered

Peggy Sugarman
CITY AND COUNTY OF SAN FRANCISCO
One South Van Ness Ave, 4th Floor
San Francisco,CA 94103
Phone: (415) 701-5848 Fax: (415) 701-5884

7205-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Ms. Janet Kern
City Attorney
CITY OF ALAMEDA
2263 Santa Clara Ave, Room 280
Alameda,CA 94501
Phone: (510) 747-4750 Fax: (510) 265-4028

7143-99-01 Self Administered

Diana J. Rich
CITY OF ANAHEIM
201 S. Anaheim Blvd., Ste 503
Anaheim,CA 92805
Phone: (714) 765-5113 Fax: (714) 765-5245

7187-092-60 ADMINSURE, INC., DIAMOND BAR

Hue C. Quach
Director of Admin. Services
CITY OF ARCADIA
240 W Huntington Drive
Arcadia,CA 91007
Phone: (626) 574-5425 Fax: (626) 445-4918

7222-146-02 ACCLAMATION INSURANCE MANAGEMENT SERVICES, FRESNO

Jena Covey
CITY OF BAKERSFIELD
1600 Truxtun Ave
Bakersfield,Ca 93301
Phone: (661) 326-3090 Fax: (661) 852-2030

7257-092-60 ADMINSURE, INC., DIAMOND BAR

Mr. Curtis K. Stephan
Risk Manager
CITY OF BELL
6330 Pine Ave
Bell,CA 90201
Phone: (323) 588-6239 Fax: (323) 771-9473

7272-269-02 INNOVATIVE CLAIM SOLUTIONS, SAN RAMON

Kim Imboden
CITY OF BENICIA
250 East L Street
Benicia,CA 94510
Phone: (707) 746-4205 Fax: (707) 747-8111

7149-269-02 INNOVATIVE CLAIM SOLUTIONS, SAN RAMON

Ms. Marge Ann C. Vrooman
Workers' Compensation Analyst
CITY OF BERKELEY
2180 Milvia Street, 1st Floor, Human Resources Department
Berkeley,CA 94703
Phone: (510) 981-6816 Fax: (510) 981-6860

7191-048-01 ATHENS ADMINISTRATORS, CONCORD

Mr. Karl Kirkman
CITY OF BEVERLY HILLS
455 N. Rexford Drive
Beverly Hills,CA 90210
Phone: (310) 285-1073

7131-062-03 KEENAN & ASSOCIATES, RIVERSIDE

TERRIE STEVENS
CITY OF BREA
1 Civic Center Circle
Brea,CA 92821
Phone: (714) 990-7600 Fax: (714) 671-3663

7167-092-60 ADMINSURE, INC., DIAMOND BAR

Ms. Eddie Fenton
Director of Human Resources
CITY OF BUENA PARK
6650 Beach Boulevard
Buena Park,CA 90622
Phone: (714) 562-3515 Fax: (714) 739-5012

7108-99-01 Self Administered

Ms. Tracy Y. Pierce
Administrator
CITY OF BURBANK
P.O. Box 6459
Burbank,CA 91510
Phone: (818) 238-5012 Fax: (818) 238-5019

7184-048-01 ATHENS ADMINISTRATORS, CONCORD

Ms. Deirdre Dolan
Human Resources Director
CITY OF BURLINGAME
501 Primrose Rd
Burlingame,CA 94010
Phone: (650) 558-7209 Fax: (650) 556-9297

7221-195-07 TRISTAR RISK MANAGEMENT, CONCORD

Ms. Jill Lopez
CITY OF CAMPBELL
70 North First St
Campbell,CA 95008
Phone: (408) 866-2123

7240-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Debbie Porter
CITY OF CARLSBAD
1635 Faraday Ave
Carlsbad,CA 92008
Phone: (760) 602-2441 Fax: (760) 602-8554

7273-195-01 TRISTAR RISK MANAGEMENT, SIGNAL HILL

Jackie Acosta
CITY OF CARSON
701 E. Carson Street
Carson,CA 90745
Phone: (310) 952-1755 Fax: (310) 518-2874

7232-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Bryna Q. Smith
CITY OF CHICO
PO Box 3420
Chico,CA 95927
Phone: (530) 879-7908 Fax: (530) 895-4733

7173-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Ms. Geriann Kingslan
CITY OF CHINO
13220 Central Ave
Chino,CA 91710
Phone: (909) 334-3345 Fax: (909) 334-3726

7121-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Ms. Teri A. Enos-Guerrero
CITY OF CHULA VISTA
276 Fourth Ave
Chula Vista,CA 91910
Phone: (619) 691-5284 Fax: (619) 691-5199

7239-146-02 ACCLAMATION INSURANCE MANAGEMENT SERVICES, FRESNO

Jamie Hughson
Finance Director
CITY OF CLOVIS
1033 5th Street
Clovis,CA 93612
Phone: (559) 324-2106

7152-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Yvonne Guzman
CITY OF COLTON
650 N. La Cadenea Dr.
Colton,CA 92324
Phone: (909) 370-5064 Fax: (909) 783-2656

7153-99-01 Self Administered

Monica Turner
CITY OF COMPTON
205 S Willowbrook
Compton,CA 90220
Phone: (310) 605-5647

7120-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Patricia Kreymborg
CITY OF CONCORD
1950 Parkside Drive, MS/30
Concord,CA 94519
Phone: (925) 671-3412 Fax: (925) 671-3496

7156-011-22 SEDGWICK CLAIMS MANAGEMENT SERVICES, INC., ENCINO

Ms. Edelia Eveland
Human Resources Manager
CITY OF CORONA
400 S. Vicentia Ave
Corona,CA 92882
Phone: (951) 279-3501 Fax: (951) 817-5894

7197-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Ms. AMY REEVE
Human Resources Manager
CITY OF CORONADO
1825 STRAND WAY
CORONADO,CA 92118
Phone: (619) 522-7304 Fax: (619) 522-7369

7124-092-60 ADMINSURE, INC., DIAMOND BAR

Ms. Colleen O'Donoghue
Assistant Finance Director
CITY OF COSTA MESA
77 Fair Drive
Costa Mesa,CA 92626
Phone: (714) 754-5219 Fax: (714) 754-5040

7179-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Ms. Marie Klymkiw
Risk Manager
CITY OF COVINA
125 East College Street
Covina,CA 91723
Phone: (626) 384-5553 Fax: (626) 384-5591

7207-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Ms. Laura Miyakawa
Human Resources Analyst
CITY OF CUPERTINO
10300 Torre Ave
Cupertino,CA 95014
Phone: (408) 777-3295 Fax: (408) 777-3109

7267-092-60 ADMINSURE, INC., DIAMOND BAR

Ms. Cathy R. Thompson
Human Resources
CITY OF CYPRESS
5275 Orange Ave
Cypress,CA 90630
Phone: (714) 229-6687 Fax: (714) 229-6755

7243-269-02 INNOVATIVE CLAIM SOLUTIONS, SAN RAMON

Mr. Michael Wilson
CITY OF DALY CITY
333 90th Street
Daly City,CA 94015
Phone: (650) 991-8166

7300-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Ms. Teresa McBroome
CITY OF DEL MAR
1050 Camino Del Mar
Del Mar,CA 92014
Phone: (858) 755-9354 Fax: (858) 755-5335

7125-092-60 ADMINSURE, INC., DIAMOND BAR

Ms. Maurina Lee
Finance Manager
CITY OF DOWNEY
11111 Brookshire Ave
Downey,CA 90241
Phone: (562) 904-7262 Fax: (562) 622-4648

7293-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

James Fructuoso
CITY OF EL MONTE
11333 Valley Boulevard
El Monte,CA 91731
Phone: (626) 580-2023 Fax: (626) 443-2043

7292-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Mr. Jace C. Schwarm
CITY OF ENCINITAS
505 S. Vulcan Ave
Encinitas,CA 92024
Phone: (760) 633-2636 Fax: (760) 633-1228

7208-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Ms. Cheryl Lowry
Risk & Safety Coordinator
CITY OF ESCONDIDO
201 North Broadway
Escondido,CA 92025
Phone: (760) 839-4064 Fax: (760) 739-7052

7217-269-02 INNOVATIVE CLAIM SOLUTIONS, SAN RAMON

Ms. Laura Marquez
CITY OF FAIRFIELD
1000 Webster Street
Fairfield,CA 94533
Phone: (707) 428-7397 Fax: (707) 428-7512

7175-197-04 JT2 INTEGRATED RESOURCES, MANTECA

Ms. Annette Henckel
Director of Human Resources
CITY OF FONTANA
8353 Sierra Ave
Fontana,CA 92335
Phone: (909) 350-7648

7145-092-60 ADMINSURE, INC., DIAMOND BAR

Ms. Jean Hirai
Personnel Manager
CITY OF FOUNTAIN VALLEY
10200 Slater Ave
Fountain Valley,CA 92708
Phone: (714) 593-4462 Fax: (714) 593-4546

7141-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Steven Schwarz
CITY OF FREMONT
3300 Capitol Ave
Fremont,CA 94537
Phone: (510) 284-4052

7116-298-01 AMERICAN ALL-RISK LOSS ADMINISTRATORS, INC. (AARLA), FRESNO

Mr. Clark R. Connelly
Senior Risk Analyst
CITY OF FRESNO
2600 Fresno Street
Fresno,CA 93721
Phone: (559) 621-6903 Fax: (559) 264-4215

7270-092-60 ADMINSURE, INC., DIAMOND BAR

Ms. Pamela J. Mackie
CITY OF FULLERTON
303 West Commonwealth Ave
Fullerton,CA 92832
Phone: (714) 738-5373 Fax: (714) 738-3113

7223-092-60 ADMINSURE, INC., DIAMOND BAR

Mr. John Clark
CITY OF GARDEN GROVE
11222 Acacia Pkwy
Garden Grove,CA 92840
Phone: (714) 741-5011 Fax: (714) 741-5030

7198-092-60 ADMINSURE, INC., DIAMOND BAR

Mr. Terrence Beaman
Chief Fiscal Officer
CITY OF GARDENA
1700 West 162nd Street
Gardena,CA 90247
Phone: (310) 217-9517 Fax: (310) 217-9694

7193-269-02 INNOVATIVE CLAIM SOLUTIONS, SAN RAMON

Ms. LeeAnn McPhillips
CITY OF GILROY
7351 Rosanna Street
Gilroy,CA 95020
Phone: (408) 846-0205 Fax: (408) 846-0200

7104-99-01 Self Administered

Ms. Cheryl Scott
Workers' Compensation Administrator
CITY OF GLENDALE
613 E. Broadway, Room 100
Glendale,CA 91206
Phone: (818) 550-4404 Fax: (818) 243-8428

7915-146-02 ACCLAMATION INSURANCE MANAGEMENT SERVICES, FRESNO

Ms. Marissa Gonzales
Human Resources
CITY OF HANFORD
319 N. Douty Street
Hanford,CA 93230
Phone: (559) 585-2521

7213-092-60 ADMINSURE, INC., DIAMOND BAR

Mr. Dennis Hernandez
CITY OF HAWTHORNE
4455 W. 126th Street
Hawthorne,Ca 90250
Phone: (310) 349-2966 Fax: (310) 978-9861

7170-197-01 JT2 INTEGRATED RESOURCES, PLEASANTON

Nina Collins
CITY OF HAYWARD
777 B Street Third Floor
Hayward,CA 94543
Phone: (510) 583-4500 Fax: (510) 583-3655

7182-146-08 ACCLAMATION INSURANCE MANAGEMENT SERVICES, VALENCIA

Mr. Patricia Williams
CITY OF HUNTINGTON BEACH
PO Box 906
Huntington Beach,CA 92648
Phone: (714) 536-5290 Fax: (714) 374-1597

7136-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Suzanne Wellcome
Interim Admin. Services Director
CITY OF IMPERIAL BEACH
825 Imperial Beach Blvd.
Imperial Beach,CA 91932
Phone: (619) 628-1361 Fax: (619) 628-1395

7214-092-60 ADMINSURE, INC., DIAMOND BAR

Ms. Lori Thompson
Risk Management Administrator
CITY OF IRVINE
One Civic Center Plaza
Irvine,CA 92606
Phone: (949) 724-6079 Fax: (949) 724-6075

7137-316-02 CORVEL ENTERPRISE COMP, INC., RANCHO CUCAMONGA

Mr. Larry Costello
Risk Manager
CITY OF LA MESA
8130 Allison Ave
La Mesa,CA 91942
Phone: (619) 667-1178 Fax: (619) 667-1163

7194-092-60 ADMINSURE, INC., DIAMOND BAR

Ms. Barbara Salvini
Personnel Services Manager
CITY OF LAGUNA BEACH
505 Forest Ave
Laguna Beach,CA 92651
Phone: (949) 497-0311 Fax: (949) 497-0739

7302-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Corinne A. Russell
CITY OF LEMON GROVE
3232 Main St
Lemon Grove,CA 91945
Phone: (619) 825-3848 Fax: (619) 825-3804

7185-269-02 INNOVATIVE CLAIM SOLUTIONS, SAN RAMON

Mr. BILL HENDERSON
Risk Manager
CITY OF LIVERMORE
1052 South Livermore Ave
Livermore,CA 94550
Phone: (925) 960-4172 Fax: (925) 960-4180

7203-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Ms. Janet L. Hamilton
CITY OF LODI
221 W. Pine St.
Lodi,CA 95240
Phone: (209) 333-6800 Fax: (209) 333-6807

7216-161-01 WORKERS' COMPENSATION ADMINISTRATORS, LLC, SANTA MARIA

Ms. Beth Flamm-Overby
Human Resources Manager
CITY OF LOMPOC
100 Civic Center Plaza
Lompoc,CA 93436
Phone: (805) 875-8209 Fax: (805) 875-8309

7106-99-01 Self Administered

Ms. Jamelle W. Peck
Workers' Compensation Claim Manager
CITY OF LONG BEACH
333 W. Ocean Blvd., 11th Floor
Long Beach,CA 90802
Phone: (562) 570-2280 Fax: (562) 570-2220

7241-195-07 TRISTAR RISK MANAGEMENT, CONCORD

Michael M. Horta
CITY OF LOS ALTOS
1 N. San Antonio Rd
Los Altos,CA 94022
Phone: (650) 947-2607 Fax: (650) 947-2731

7103-146-08 ACCLAMATION INSURANCE MANAGEMENT SERVICES, VALENCIA

7103-195-11 TRISTAR RISK MANAGEMENT, ALHAMBRA

7103-305-01 ACME ADMINISTRATORS, INC., TEMECULA

7103-99-01 Self Administered

Mr. David Noltemeyer
CITY OF LOS ANGELES
700 East Temple Street, Room 210
Los Angeles,CA 90012
Phone: (213) 473-3374 Fax: (213) 473-3333

7215-195-09 TRISTAR RISK MANAGEMENT, FRESNO

Ms. Deneen L. Proctor
Director of Support Services
CITY OF MERCED
678 W. 18th Street
Merced,CA 95340
Phone: (209) 385-4780 Fax: (209) 388-7109

7218-269-02 INNOVATIVE CLAIM SOLUTIONS, SAN RAMON

Ms. Genevieve Frederick
Finance Director
CITY OF MILLBRAE
621 Magnolia Ave
Millbrae,CA 94030
Phone: (650) 259-2433 Fax: (650) 697-8459

7204-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Ms. Carmen Valdez
HR Director
CITY OF MILPITAS
455 E. Calaveras Blvd
Milpitas,CA 95035
Phone: (408) 586-3086 Fax: (408) 586-3092

7195-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Ms. Beverly Jensen
Risk & Loss Control Coordinator
CITY OF MODESTO
1010 Tenth Street
Modesto,CA 95354
Phone: (209) 577-5446 Fax: (209) 576-7069

7135-092-60 ADMINSURE, INC., DIAMOND BAR

Mr. Donald Parker
Financial Director
CITY OF MONTCLAIR
5111 Benito Street
Montclair,CA 91763
Phone: (909) 625-9418 Fax: (909) 621-1584

7142-316-02 CORVEL ENTERPRISE COMP, INC., RANCHO CUCAMONGA

Francesca Tucker-Schuyler
CITY OF MONTEBELLO
1600 W. Beverly Blvd.
Montebello,CA 90640
Phone: (323) 887-1200

7162-218-04 PEGASUS RISK MANAGEMENT, INC., MODESTO

Michele P. Maloney
CITY OF MONTEREY
735 Pacific Street, Ste B
Monterey,CA 93940
Phone: (831) 646-3767 Fax: (831) 646-3920

7294-092-60 ADMINSURE, INC., DIAMOND BAR

Ms. Kim Schmitz
Human Resources Analyst
CITY OF MORENO VALLEY
14177 Frederick Street
Moreno Valley,CA 92552
Phone: (951) 413-3048 Fax: (951) 413-3041

7261-269-02 INNOVATIVE CLAIM SOLUTIONS, SAN RAMON

Joni Evans
CITY OF MORGAN HILL
17575 Peak Ave
Morgan Hill,CA 95037
Phone: (408) 607-1329 Fax: (408) 779-1592

7177-048-01 ATHENS ADMINISTRATORS, CONCORD

Ms. Claudia Koob
CITY OF MOUNTAIN VIEW
500 Castro Street
Mountain View,CA 94039
Phone: (650) 903-6060 Fax: (650) 963-3087

7283-223-20 NORTHERN CLAIMS MANAGEMENT, LLC, SANTA ROSA

LeAnna Massey
CITY OF NAPA
1541 Second Street
Napa,CA 94559
Phone: (707) 257-9505 Fax: (707) 258-7827

7138-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Mr. Mark Roberts
Director of Finance
CITY OF NATIONAL CITY
1243 National City Blvd.
National City,CA 91950
Phone: (619) 336-4265 Fax: (619) 336-4349

7201-197-04 JT2 INTEGRATED RESOURCES, MANTECA

Sandy Abe
CITY OF NEWARK
37101 Newark Blvd, 4th Floor - HR Department
Newark,CA 94560
Phone: (510) 578-4347 Fax: (510) 578-4259

7114-316-02 CORVEL ENTERPRISE COMP, INC., RANCHO CUCAMONGA

Ms. Cheryl Anderson
Human Resources Supervisor
CITY OF NEWPORT BEACH
100 Civic Center Drive
Newport Beach,CA 92660
Phone: (949) 644-3307

7101-197-05 JT2 INTEGRATED RESOURCES, OAKLAND

Gaynell Chase
CITY OF OAKLAND
150 Frank H. Ogawa Plaza, # 2352
Oakland,CA 94612
Phone: (510) 238-2270 Fax: (510) 238-4749

7139-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Ms. Sharon M. Lheureux
Risk Manager
CITY OF OCEANSIDE
300 North Coast Highway
Oceanside,CA 92054
Phone: (760) 435-3504

7148-195-06 TRISTAR RISK MANAGEMENT, SANTA ANA

Ms. Ann Richey
Risk Mgmt Director
CITY OF ONTARIO
303 East B Street
Ontario,CA 91764
Phone: (909) 395-2440

7146-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Mr. Glenn Newson
Risk Manager
CITY OF ORANGE
300 E. Chapman Ave
Orange,CA 92866
Phone: (714) 532-6420 Fax: (714) 532-6408

7119-146-08 ACCLAMATION INSURANCE MANAGEMENT SERVICES, VALENCIA

Ms. Michelle H. Tellez
Director of Human Resources
CITY OF OXNARD
300 West Third Street
Oxnard,Ca 93030
Phone: (805) 385-7596 Fax: (805) 385-7455

7231-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Ms. Catherine E. Krysyna
CITY OF PACIFIC GROVE
300 Forest Ave
Pacific Grove,CA 93950
Phone: (831) 648-3102 Fax: (831) 375-9863

7176-092-60 ADMINSURE, INC., DIAMOND BAR

Mr. Perry Madison
Director of Human Resources
CITY OF PALM SPRINGS
3200 E Tahquitz Canyon Way
Palm Springs,CA 92262
Phone: (760) 323-8215 Fax: (760) 323-8287

7102-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Sandra T. Blanch
CITY OF PALO ALTO
250 Hamilton Ave
Palo Alto,CA 94303
Phone: (650) 329-2294 Fax: (650) 329-2696

7107-062-03 KEENAN & ASSOCIATES, RIVERSIDE

7107-99-01 Self Administered

Ms. Antoinette Lee-Joseph
Workers' Comp & Safety Supervisor
CITY OF PASADENA
100 Garfield Ave, Rm N306
Pasadena,CA 91109
Phone: (626) 744-3989 Fax: (626) 396-8005

7289-078-03 REDWOOD EMPIRE MUNICIPAL INSURANCE FUND (REMIF)**, SONOMA

Ms. Pamala Stephens
HR Manager
CITY OF PETALUMA
11 English Street
Petaluma,CA 94952
Phone: (707) 778-4343 Fax: (707) 778-4539

7168-092-60 ADMINSURE, INC., DIAMOND BAR

Mr. Stephen D. Pischel
Director of Administrative Services
CITY OF PLACENTIA
401 E. Chapman Ave
Placentia,CA 92870
Phone: (714) 993-8141 Fax: (714) 961-0283

7903-269-02 INNOVATIVE CLAIM SOLUTIONS, SAN RAMON

Debra Gill
CITY OF PLEASANTON
PO Box 520
Pleasanton,CA 94566
Phone: (925) 931-5054 Fax: (925) 931-5488

7199-062-03 KEENAN & ASSOCIATES, RIVERSIDE

7199-99-01 Self Administered

Mr. Christopher A. Millard
Risk Manager
CITY OF POMONA
505 S. Garey Ave
Pomona,CA 91766
Phone: (909) 620-2280 Fax: (909) 620-2295

7275-99-01 Self Administered

Ms. Gail M. Crowley
Sr. Personnel Analyst
CITY OF REDDING
777 Cypress Ave
Redding,CA 96001
Phone: (530) 225-4348 Fax: (530) 225-4337

7230-092-60 ADMINSURE, INC., DIAMOND BAR

Kimberlee J. Braun
CITY OF REDLANDS
35 Cajon Street
Redlands,CA 92373
Phone: (909) 798-7679 Fax: (909) 335-4762

7192-048-01 ATHENS ADMINISTRATORS, CONCORD

Laurel Blaemire
CITY OF REDWOOD CITY
1017 Middlefield Rd
Redwood City,CA 94063
Phone: (650) 780-7283 Fax: (650) 556-9235

7224-316-02 CORVEL ENTERPRISE COMP, INC., RANCHO CUCAMONGA

Ms. Paula Mohan
Administrative Assistant
CITY OF RIALTO
150 S Palm Ave
Rialto,CA 92376
Phone: (909) 421-4939 Fax: (909) 820-8028

7154-146-05 ACCLAMATION INSURANCE MANAGEMENT SERVICES, SACRAMENTO

Ms. Kimberly J. Greer
Risk Manager
CITY OF RICHMOND
450 Civic Center Plaza
Richmond,CA 94804
Phone: (510) 620-6605 Fax: (510) 620-6811

7306-132-13 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, RIVERSIDE

Ms. Rachel J. Ford
City Clerk
CITY OF RIDGECREST
100 W California Ave
Ridgecrest,CA 93555
Phone: (760) 499-5002 Fax: (760) 499-1500

7118-99-01 Self Administered

Ms. JoAnn Combs
Workers' Compensation Supervisor
CITY OF RIVERSIDE
3900 Main St.
Riverside,CA 92522
Phone: (951) 826-5918 Fax: (951) 826-2529

7229-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Mr. Monty Hanks
Asst. Finance Director
CITY OF ROSEVILLE
311 Vernon Street
Roseville,CA 95678
Phone: (916) 774-5313 Fax: (916) 746-1220

7109-99-01 Self Administered

Ms. Edna A. Young
HR Manager Workers' Compensation
CITY OF SACRAMENTO
915 - I St., Floor 4
Sacramento,CA 95814
Phone: (916) 808-5741 Fax: (916) 808-8216

7117-197-04 JT2 INTEGRATED RESOURCES, MANTECA

Ms. Marina H. Gallegos
Sr. Human Resources Analyst
CITY OF SALINAS
200 Lincoln Ave
Salinas,CA 93901
Phone: (831) 758-7254 ext 7417 Fax: (831) 758-7941

7111-132-17 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, SAN BERNARDINO

Helen Tran
CITY OF SAN BERNARDINO
300 North D Street, 2nd Floor
San Bernardino,CA 92418
Phone: (909) 384-5261

7188-197-04 JT2 INTEGRATED RESOURCES, MANTECA

Ms. Tami Yuki
Human Resources Director
CITY OF SAN BRUNO
567 El Camino Real
San Bruno,CA 94066
Phone: (650) 616-7072 Fax: (650) 742-6515

7165-239-06 INTERCARE HOLDINGS INSURANCE SERVICES, INC., PASADENA

Mr. Ellis L. Green
Risk Manager
CITY OF SAN BUENA VENTURA
P.O. Box 99
Ventura,CA 93002
Phone: (805) 654-7760 Fax: (805) 648-4467

7200-092-60 ADMINSURE, INC., DIAMOND BAR

Mr. Sam Penrod
CITY OF SAN CLEMENTE
100 Avenida Presidio
San Clemente,CA 92672
Phone: (949) 361-8353 Fax: (949) 361-8300

7105-99-01 Self Administered

Mr. Greg Bych
Risk Manager
CITY OF SAN DIEGO
1200 Third Ave, Ste 1000
San Diego,CA 92101
Phone: (619) 236-6651 Fax: (619) 236-6106

7123-048-01 ATHENS ADMINISTRATORS, CONCORD

7123-99-01 Self Administered

Dave Wong
CITY OF SAN JOSE
200 East Santa Clara Street
San Jose,CA 95113
Phone: (408) 975-1418 Fax: (408) 993-0139

7115-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Ms. Emily Hung
Sr. Human Resources Analyst
CITY OF SAN LEANDRO
835 East 14th Street
San Leandro,CA 94577
Phone: (510) 577-6076

7210-092-60 ADMINSURE, INC., DIAMOND BAR

Lisa Bailey
CITY OF SAN MARINO
2200 Huntington Drive
San Marino,CA 91108
Phone: (626) 300-0704 Fax: (626) 300-0709

7164-316-05 CORVEL ENTERPRISE COMP, INC., FOLSOM

Ms. Jennifer D. Crims
Senior Risk Management Analyst
CITY OF SAN MATEO
330 W 20th Ave
San Mateo,CA 94403
Phone: (650) 522-7263 Fax: (650) 522-7261

7202-078-03 REDWOOD EMPIRE MUNICIPAL INSURANCE FUND (REMIF)**, SONOMA

Anil Comelo
CITY OF SAN RAFAEL
P.O. Box 151560
San Rafael,CA 94915
Phone: (415) 485-3069 Fax: (415) 485-3191

7158-99-01 Self Administered

Ms. Samantha M. Lambert
WC Supervisor
CITY OF SANTA ANA
PO Box 1988 M-41
Santa Ana,CA 92701
Phone: (714) 647-6959 Fax: (714) 647-6994

7144-197-04 JT2 INTEGRATED RESOURCES, MANTECA

Mr. Nathan E. Barnette
Risk Analyst
CITY OF SANTA BARBARA
735 Anacapa St
Santa Barbara,CA 93102
Phone: (805) 564-5347 Fax: (805) 897-2642

7126-011-46 SEDGWICK CLAIMS MANAGEMENT SERVICES, INC., WALNUT CREEK

Mr. Greg Harris
HR Division
CITY OF SANTA CLARA
1500 Warburton Ave
Santa Clara,CA 95050
Phone: (408) 615-2080 Fax: (408) 985-0667

7113-011-20 SEDGWICK CLAIMS MANAGEMENT SERVICES, INC., OAKLAND-WEBSTER

Ms. Dilia Schulz
CITY OF SANTA CRUZ
809 Center Street Room 7
Santa Cruz,CA 95060
Phone: (831) 420-5043 Fax: (831) 420-5004

7304-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Mr. Clark E. Cashmore
Risk Manager
CITY OF SANTA MARIA
110 E Cook Street
Santa Maria,CA 93454
Phone: (805) 925-0951 Fax: (805) 349-0657

7183-099-01 Self Administered

Deb Hossli
CITY OF SANTA MONICA
1717 Fourth St. #270
Santa Monica,CA 90401
Phone: (310) 458-4907 Fax: (310) 576-1523

7189-078-03 REDWOOD EMPIRE MUNICIPAL INSURANCE FUND (REMIF)**, SONOMA

Ms. Lynne Margolies
Risk Manager
CITY OF SANTA ROSA
100 Santa Rosa Ave
Santa Rosa,CA 95404
Phone: (707) 543-3029 Fax: (707) 543-3035

7227-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Mr. Tim McDermott
Finance Director
CITY OF SANTEE
10601 Magnolia Ave
Santee,CA 92071
Phone: (619) 258-4100 ext 131

7286-99-01 Self Administered

Mr. James Bartholomew
CITY OF SIMI VALLEY
2929 Tapo Canyon Rd
Simi Valley,CA 93063
Phone: (805) 583-6739 Fax: (805) 583-6302

7301-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Marie M. Berkuti
CITY OF SOLANA BEACH
635 South Highway 101
Solana Beach,CA 92075
Phone: (858) 720-2463 Fax: (858) 720-2466

7161-092-60 ADMINSURE, INC., DIAMOND BAR

Nellie Cobos
CITY OF SOUTH GATE
8650 California Ave
South Gate,CA 90280
Phone: (323) 563-9508 Fax: (323) 569-2678

7266-011-46 SEDGWICK CLAIMS MANAGEMENT SERVICES, INC., WALNUT CREEK

Ms. Janet M. Emmett
Human Resources Manager
CITY OF SOUTH LAKE TAHOE
1901 Airport Rd, Ste 205
South Lake Tahoe,CA 96150
Phone: (530) 542-6052 Fax: (530) 544-8657

7206-195-07 TRISTAR RISK MANAGEMENT, CONCORD

Ms. Kathy Mount
Director of Human Resources
CITY OF SOUTH SAN FRANCISCO
400 Grand Ave
South San Francisco,CA 94080
Phone: (650) 877-8522 Fax: (650) 829-6698

7147-316-08 CORVEL ENTERPRISE COMP, INC., STOCKTON

Craig Castro
CITY OF STOCKTON
22 E. Weber Ave Ste 150
Stockton,CA 95202
Phone: (209) 937-8629 Fax: (209) 937-8558

7290-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Scott T. Corey
CITY OF SUISUN
701 Civic Center Blvd.
Suisun City,CA 94585
Phone: (707) 421-7333 Fax: (707) 421-7366

7264-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Mr. Anthony Giles
Risk Manager
CITY OF SUNNYVALE
505 W. Olive Ave #200
Sunnyvale,CA 94086
Phone: (408) 730-7503 Fax: (408) 720-1497

7260-197-04 JT2 INTEGRATED RESOURCES, MANTECA

Gary Rogers
CITY OF THOUSAND OAKS
2100 Thousand Oaks Blvd.
Thousand Oaks,CA 91362
Phone: (805) 449-2140 Fax: (805) 449-2149

7110-99-01 Self Administered

Terri Connaughton
CITY OF TORRANCE
3031 Torrance Blvd
Torrance,CA 90503
Phone: (310) 618-2950 Fax: (310) 618-2927

7271-062-13 KEENAN & ASSOCIATES, RANCHO CORDOVA

Ms. Diana L. Lewis
CITY OF TURLOCK
156 S Broadway Ste 230
Turlock,CA 95380
Phone: (209) 668-5542 Fax: (209) 668-5668

7171-092-60 ADMINSURE, INC., DIAMOND BAR

Derick Yasuda
CITY OF TUSTIN
300 Centennial Way
Tustin,CA 92780
Phone: (714) 573-3044 Fax: (714) 832-6382

7913-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Stephanie Mendenhall
Administrative Services Director
CITY OF UPLAND
P.O. Box 460
Upland,CA 91785
Phone: (909) 931-4376

7237-269-01 INNOVATIVE CLAIM SOLUTIONS, RANCHO CORDOVA

Ms. Celeste T. Garrett
Risk Manager
CITY OF VACAVILLE
650 Merchant St.
Vacaville,CA 95688
Phone: (707) 449-5356 Fax: (707) 449-5306

7163-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Vicky J. Scopesi
CITY OF VALLEJO
555 Santa Clara St.
Vallejo,CA 94590
Phone: (707) 648-4355 Fax: (707) 649-5443

7186-048-02 ATHENS ADMINISTRATORS, IRVINE

Ms. Karina Rueda
Secretary
CITY OF VERNON
4305 Santa Fe Ave
Vernon,CA 90058
Phone: (323) 583-8811 ext 325 Fax: (323) 826-1439

7157-062-13 KEENAN & ASSOCIATES, RANCHO CORDOVA

Ms. Charlotte Dunn
Insurance & Benefits Manager
CITY OF VISALIA
707 W. Acequia
Visalia,CA 93291
Phone: (559) 713-4335 Fax: (559) 713-4803

7269-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Ms. Dolores Gascon
Risk Manager
CITY OF VISTA
200 Civic Center Drive
Vista,CA 92084
Phone: (760) 726-1340 Fax: (760) 639-6132

7172-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Ms. Marie Anderson
CITY OF WALNUT CREEK
1666 N. Main Street
Walnut Creek,CA 94596
Phone: (925) 256-3515 Fax: (925) 943-5726

7234-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Ms. Nathalie K. Manning
HR Manager
CITY OF WATSONVILLE
275 Main Street, Ste 400
Watsonville,CA 95076
Phone: (831) 768-3020 Fax: (831) 761-0736

7238-316-02 CORVEL ENTERPRISE COMP, INC., RANCHO CUCAMONGA

Ms. Debbie D. Dominguez
Safety & Claims Manager
CITY OF WEST COVINA
1444 West Garvey Ave
West Covina,CA 91739
Phone: (626) 939-8436 Fax: (909) 939-8606

7169-347-01 HAZELRIGG CLAIMS MANAGEMENT SERVICES, CHINO HILLS

Ms. Cyndie Marshal
Benefits Officer
CITY OF WESTMINSTER
8200 Westminster Blvd
Westminster,CA 92683
Phone: (714) 548-3450 Fax: (714) 903-5932

7112-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Yolanda Martinez
CITY OF WHITTIER
13230 Penn Street
Whittier,CA 90602
Phone: (562) 567-9818 Fax: (562) 567-2873

7291-092-60 ADMINSURE, INC., DIAMOND BAR

Mark K. Aalders
CITY OF YORBA LINDA
4845 Casa Loma Ave, PO Box 87014
Yorba Linda,CA 92886
Phone: (714) 961-7106 Fax: (714) 993-7530

7542-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Ms. Shareen Crosby
CLOVIS UNIFIED SCHOOL DISTRICT
1450 Herndon Ave
Clovis,Ca 93611
Phone: (559) 327-9124 Fax: (559) 327-9123

7853-316-02 CORVEL ENTERPRISE COMP, INC., RANCHO CUCAMONGA

Ms. Elizabeth Tan
COACHELLA VALLEY WATER DISTRICT
P.O. Box 1058
Coachella,CA 92236
Phone: (760) 398-2651 Fax: (760) 398-3711

7570-062-01 KEENAN & ASSOCIATES, TORRANCE

Russell R. Patricia
COAST COMMUNITY COLLEGE DISTRICT
1370 Adams Ave
Costa Mesa,CA 92626
Phone: (714) 438-4864 Fax: (714) 428-4689

7516-132-17 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, SAN BERNARDINO

Mr. Rick Feinstein
Director Risk Mgmt & Health Benefits
COLTON JOINT UNIFIED SCHOOL DISTRICT
1212 Valencia Drive
Colton,CA 92324
Phone: (909) 580-5000 Fax: (909) 433-9469

7843-316-02 CORVEL ENTERPRISE COMP, INC., RANCHO CUCAMONGA

Kasaundra Hassan
COMMUNITY DEVELOPMENT COMMISSION OF THE COUNTY OF LOS ANGELES
700 W. Main Street
Alhambra,CA 91801
Phone: (626) 586-1694 Fax: (626) 943-3809

7574-062-01 KEENAN & ASSOCIATES, TORRANCE

Ms. Rachelle Sasser
Dean of Human Resources
COMPTON COMMUNITY COLLEGE DISTRICT
1111 E. Artesia Blvd.
Compton,CA 90221
Phone: (310) 900-1600 Fax: (310) 605-1461

7513-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Aubrey Craig
COMPTON UNIFIED SCHOOL DISTRICT
501 S. Santa Fe Ave
Compton,CA 90221
Phone: (310) 649-4321 Fax: (310) 885-3525

7829-345-01 CARL WARREN & COMPANY, TUSTIN

Mr. James T. Friedl
General Manager
CONEJO RECREATION & PARK DISTRICT
403 W Hillcrest Drive
Thousand Oaks,CA 91360
Phone: (805) 495-6741 Fax: (805) 497-3199

7534-132-12 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, OXNARD

Lee Marseglia
Risk Manager
CONEJO VALLEY UNIFIED SCHOOL DISTRICT
1400 E Janss Rd
Thousand Oaks,CA 91362
Phone: (805) 497-9511 ext 261 Fax: (805) 497-2581

7400-99-01 Self Administered

Ms. Denise C. Rojas
Asst Risk Manager Workers' Comp.
CONTRA COSTA COUNTY FIRE PROTECTION DISTRICT
2530 Arnold Drive, Ste 140
Martinez,CA 94553
Phone: (925) 335-1408 Fax: (925) 335-1420

7510-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Ms. Sherry L. Kaib
CORONA-NORCO UNIFIED SCHOOL DISTRICT
2820 Clark Ave
Norco,CA 92860
Phone: (951) 736-5027 Fax: (951) 736-8290

7010-011-20 SEDGWICK CLAIMS MANAGEMENT SERVICES, INC., OAKLAND-WEBSTER

7010-195-05 TRISTAR RISK MANAGEMENT, RANCHO CORDOVA

Barbara M. Lubben
COUNTY OF ALAMEDA
125 12th Street, Ste 300
Oakland,CA 94607
Phone: (510) 272-6920 Fax: (510) 272-6815

7035-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Mr. Stephen Weston
Safety and Risk Manager
COUNTY OF BUTTE
25 County Center Drive, Ste 213
Oroville,CA 95965
Phone: (530) 538-7090 Fax: (530) 538-3831

7027-223-20 NORTHERN CLAIMS MANAGEMENT, LLC, SANTA ROSA

7027-99-01 Self Administered

Ms. Denise C. Rojas
Asst Risk Manager Workers' Comp.
COUNTY OF CONTRA COSTA
2530 Arnold Drive, Ste 140
Martinez,CA 94553
Phone: (925) 335-1408 Fax: (925) 335-1420

7000-298-01 AMERICAN ALL-RISK LOSS ADMINISTRATORS, INC. (AARLA), FRESNO

Amy Verzosa
COUNTY OF FRESNO
2220 Tulare Street, 16th Floor
Fresno,CA 93721
Phone: (559) 600-1850 Fax: (559) 455-4792

7033-132-13 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, RIVERSIDE

Brenda Olivas
COUNTY OF IMPERIAL
940 W. Main St., Ste 101
El Centro,CA 92243
Phone: (760) 482-4490 Fax: (760) 352-2652

7020-99-01 Self Administered

Colleen Boren
COUNTY OF KERN
1115 Truxttun Ave, 4th Floor
Bakersfield,CA 93301
Phone: (661) 868-3858 Fax: (661) 868-3875

7013-269-01 INNOVATIVE CLAIM SOLUTIONS, RANCHO CORDOVA

Sande Hudleston
COUNTY OF KINGS
1400 W. Lacey Blvd.
Hanford,CA 93230
Phone: (559) 852-2374 Fax: (559) 585-8047

7002-146-08 ACCLAMATION INSURANCE MANAGEMENT SERVICES, VALENCIA

7002-195-06 TRISTAR RISK MANAGEMENT, SANTA ANA

7002-239-05 INTERCARE HOLDINGS INSURANCE SERVICES, INC., ORANGE

Alex Rossi
COUNTY OF LOS ANGELES
3333 Wilshire Blvd.
Los Angeles,CA 90010
Phone: (213) 738-2154

7039-146-02 ACCLAMATION INSURANCE MANAGEMENT SERVICES, FRESNO

Mr. Darin McCandless
Deputy C.A.O
COUNTY OF MADERA
200 W. 4th Streeet
Madera,CA 93637
Phone: (559) 675-7703

7017-195-07 TRISTAR RISK MANAGEMENT, CONCORD

Ms. Karol Hosking
Risk Manager
COUNTY OF MARIN
3501 Civic Center Drive, Rm. 421
San Rafael,CA 94903
Phone: (415) 473-6445 Fax: (415) 499-3729

7019-269-02 INNOVATIVE CLAIM SOLUTIONS, SAN RAMON

Mr. Brad Smith
Risk Management Director
COUNTY OF MERCED
2222 M Street
Merced,CA 95340
Phone: (209) 385-7356 Fax: (209) 725-3556

7011-239-01 INTERCARE HOLDINGS INSURANCE SERVICES, INC., ROCKLIN

Steve Mauck
COUNTY OF MONTEREY
168 West Alisal Street, 3rd Floor
Salinas,CA 93901
Phone: (831) 796-3006 Fax: (831) 796-8546

7031-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Mr. Kerry J. Whitney
COUNTY OF NAPA
1195 Third Street, Ste 310
Napa,CA 94559
Phone: (707) 253-4421 Fax: (707) 259-8681

7003-132-11 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ORANGE

Laurie D. Browning
COUNTY OF ORANGE
P.O. Box 327
Santa Ana,CA 92702
Phone: (714) 285-5511 Fax: (714) 285-5598

7034-239-01 INTERCARE HOLDINGS INSURANCE SERVICES, INC., ROCKLIN

Ms. Cindy F. Martin
Risk Management Administrator
COUNTY OF PLACER
145 Fulweiler Ave, Ste 100
Auburn,CA 95603
Phone: (530) 886-2606 Fax: (530) 886-2609

7006-99-01 Self Administered

Ms. Sylvia I. Radatz
Workers' Compensation Division Manager
COUNTY OF RIVERSIDE
P.O. Box 1120
Riverside,CA 92502
Phone: (909) 519-5508 Fax: (951) 955-3544

7004-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

7004-99-01 Self Administered

Ms. Denise Currie
Workers' Compensation Manager
COUNTY OF SACRAMENTO
9616 Micron Ave, Ste 600
Sacramento,CA 95827
Phone: (916) 876-5005 Fax: (916) 854-9738

7008-99-01 Self Administered

Ms. Nancy Rice
Supervisor
COUNTY OF SAN BERNARDINO
222 W. Hospitality Lane, Third Floor
San Bernardino,CA 92415
Phone: (909) 386-9025 Fax: (909) 386-8711

7001-281-03 ALTERNATIVE SERVICE CONCEPTS, L.L.C., CITRUS HEIGHTS

7001-99-01 Self Administered

Christine U. Grove
COUNTY OF SAN DIEGO
5530 Overland Ave, Ste 210
San Diego,CA 92123
Phone: (858) 694-3753 Fax: (619) 236-8485

7009-011-22 SEDGWICK CLAIMS MANAGEMENT SERVICES, INC., ENCINO

Ms. Melissa Boardman
Workers' Compensation Analyst
COUNTY OF SAN LUIS OBISPO
1055 Monterey St., Ste D-250
San Luis Obispo,CA 93408
Phone: (805) 781-5966 Fax: (805) 781-4880

7016-223-20 NORTHERN CLAIMS MANAGEMENT, LLC, SANTA ROSA

Mr. James S. Johnson
Risk Manager
COUNTY OF SAN MATEO
455 County Center Drive
Redwood City,CA 94063
Phone: (650) 363-4387

7005-99-01 Self Administered

Mr. Thelma Raby
Director of Workers' Compensation
COUNTY OF SANTA CLARA
2310 N. First Street, Ste 205
San Jose,CA 95131
Phone: (408) 441-4237

7014-011-20 SEDGWICK CLAIMS MANAGEMENT SERVICES, INC., OAKLAND-WEBSTER

Ms. Janet McKinley
Risk Manager
COUNTY OF SANTA CRUZ
701 Ocean Street Room 510
Santa Cruz,CA 95060
Phone: (831) 454-2246 Fax: (831) 454-2245

7029-99-01 Self Administered

Ms. Angela Davis
Director of Support Services
COUNTY OF SHASTA
1450 Court Street, Room 348
Redding,CA 96001
Phone: (530) 225-5515 Fax: (530) 225-5251

7023-239-01 INTERCARE HOLDINGS INSURANCE SERVICES, INC., ROCKLIN

Bonnie Kolesar
COUNTY OF SOLANO
675 Texas St., Ste 1800
Fairfield,CA 94533
Phone: (707) 784-2962 Fax: (707) 784-1988

7018-223-20 NORTHERN CLAIMS MANAGEMENT, LLC, SANTA ROSA

Ms. Marcia Chadbourne
Risk Manager
COUNTY OF SONOMA
575 Administration Drive Ste 116C
Santa Rosa,CA 95403
Phone: (707) 565-2473

7025-146-05 ACCLAMATION INSURANCE MANAGEMENT SERVICES, SACRAMENTO

Ms. Jody L. Hayes
Deputy Executive Officer
COUNTY OF STANISLAUS
1010 10th Street Ste 5900
Modesto,CA 95354
Phone: (209) 525-5714 Fax: (209) 525-5779

7012-316-05 CORVEL ENTERPRISE COMP, INC., FOLSOM

Robyn A. Henry
COUNTY OF TULARE
3530 W. Mineral King, Ste E
Visalia,CA 93277
Phone: (559) 623-0290 Fax: (559) 733-6320

7037-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Ms. Ann T. Fremd
HR/Risk Manager
COUNTY OF TUOLUMNE
2 South Green Street
Sonora,CA 95370
Phone: (209) 533-6632 Fax: (209) 533-5901

7015-316-04 CORVEL ENTERPRISE COMP, INC., CAMARILLO

Mr. Charles S. Pode
Risk Manager
COUNTY OF VENTURA
800 S. Victoria Ave - L#1970
Ventura,CA 93009
Phone: (805) 662-6784 Fax: (805) 648-9238

7562-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

David Rivera
COVINA VALLEY UNIFIED SCHOOL DISTRICT
519 E. Badillo
Covina,CA 91723
Phone: (626) 974-7000 Fax: (626) 974-7039

7801-092-60 ADMINSURE, INC., DIAMOND BAR

7801-99-01 Self Administered

Clarissa Reid
DEPARTMENT OF WATER AND POWER OF THE CITY OF LOS ANGELES
111 N. Hope Street #553
Los Angeles,CA 90012
Phone: (213) 367-4039 Fax: (213) 367-3951

7634-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Mr. Wade W. Ellis
Director Fiscal Services
DESERT COMMUNITY COLLEGE DISTRICT
43-500 Monterey Ave
Palm Desert,CA 92260
Phone: (760) 773-2513 Fax: (760) 341-8678

7599-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Ms. Barbara Sasser
Risk Manager
DESERT SANDS UNIFIED SCHOOL DISTRICT
47950 Dune Palms Rd
La Quinta,CA 92253
Phone: (760) 771-8512 Fax: (760) 771-8547

7538-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Ms. Nancy C. Nien
Assistant Superintendent
DOWNEY UNIFIED SCHOOL DISTRICT
11627 Brookshire Ave
Downey,CA 90241
Phone: (562) 469-6520 Fax: (562) 469-6519

7809-048-01 ATHENS ADMINISTRATORS, CONCORD

Mr. Vladimir Bessarabov
Workers' Compensation Manager
EAST BAY MUNICIPAL UTILITY DISTRICT
375 11th St, #409
Oakland,CA 94607
Phone: (510) 287-0802 Fax: (510) 287-0179

7555-048-01 ATHENS ADMINISTRATORS, CONCORD

Mr. Lawrence Moss
Risk Manager
EAST BAY REGIONAL DISTRICT
2950 Peralta Oaks Court
Oakland,CA 94605
Phone: (510) 544-2157 Fax: (510) 639-4754

7835-316-03 CORVEL ENTERPRISE COMP, INC., SAN DIEGO

Mr. Douglas L. Hefley
Safety and Risk Manager
EASTERN MUNICIPAL WATER DISTRICT
2270 Trumble Rd/P.O. Box 8300
Perris,CA 92572
Phone: (951) 928-3777 ext 4218 Fax: (951) 928-6183

7890-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Maria Palmer
EASTSIDE UNION SCHOOL DISTRICT
45006 N. 30th Street East
Lancaster,CA 93535
Phone: (661) 952-1200 Fax: (661) 952-1220

7631-062-01 KEENAN & ASSOCIATES, TORRANCE

Rocky Bonura
EL CAMINO COMMUNITY COLLEGE DISTRICT
16007 Crenshaw Blvd.
Torrance,CA 90506
Phone: (310) 660-3375 Fax: (310) 660-3378

7265-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Alex Wells
Chief Financial Officer
EL CENTRO REGIONAL MEDICAL CENTER
1250 Main Street
El Centro,CA 92243
Phone: (760) 339-7200 Fax: (760) 312-9577

7602-195-05 TRISTAR RISK MANAGEMENT, RANCHO CORDOVA

Mr. Marlon E. Robbins
ELK GROVE UNIFIED SCHOOL DISTRICT
9510 Elk Grove-Florin Rd
Elk Grove,CA 95624
Phone: (916) 686-7797 Fax: (916) 685-2606

7522-99-01 Self Administered

Larry Wilkie
FONTANA UNIFIED SCHOOL DISTRICT
PO Box 5090
Fontana,CA 92334
Phone: (909) 357-7600 Fax: (909) 357-7640

7549-011-20 SEDGWICK CLAIMS MANAGEMENT SERVICES, INC., OAKLAND-WEBSTER

Ms. Christine P. Vo
Benefits Manager
FOOTHILL-DE ANZA COMMUNITY COLLEGE DISTRICT
12345 El Monte Rd
Los Altos Hills,CA 94022
Phone: (650) 949-6226 Fax: (650) 949-2831

7618-062-13 KEENAN & ASSOCIATES, RANCHO CORDOVA

Ms. Cori Shields
Business Manager
FORT SAGE UNIFIED SCHOOL DISTRICT
PO Box 35
Herlong,CA 96113
Phone: (530) 827-2129 Fax: (530) 827-3239

7532-062-01 KEENAN & ASSOCIATES, TORRANCE

Stephen McMahon
FOUNTAIN VALLEY SCHOOL DISTRICT
10055 Slater Ave
Fountain Valley,CA 92708
Phone: (714) 843-3251 Fax: (714) 843-3252

7503-99-01 Self Administered

Andrew R. DeLaTorre
FRESNO UNIFIED SCHOOL DISTRICT
2309 Tulare Street
Fresno,CA 93721
Phone: (559) 457-3596 Fax: (559) 457-3797

7540-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Laurie Bruneau
FULLERTON SCHOOL DISTRICT
1401 W. Valencia
Fullerton,CA 92831
Phone: (714) 466-1066

7546-092-60 ADMINSURE, INC., DIAMOND BAR

Ms. Barbara L. Middleton
Senior Account Clerk
FULLERTON UNION HIGH SCHOOL DISTRICT
1051 W Bastanchury Rd
Fullerton,CA 92833
Phone: (714) 870-2885 Fax: (714) 870-2892

7500-99-01 Self Administered

DIANNE L. HANSON
GARDEN GROVE UNIFIED SCHOOL DISTRICT
10331 Stanford Ave
Garden Grove,CA 92840
Phone: (714) 663-6323 Fax: (714) 663-6500

7847-298-01 AMERICAN ALL-RISK LOSS ADMINISTRATORS, INC. (AARLA), FRESNO

Ms. Jeanie Hill
Human Resources Manager
GOLDEN EMPIRE TRANSIT DISTRICT
1830 Golden State Ave
Bakersfield,CA 93301
Phone: (661) 869-6301 Fax: (661) 869-6381

7825-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Mr. Joseph M. Wire
Auditor-Controller
GOLDEN GATE BRIDGE HIGHWAY AND TRANSPORTATION DISTRICT
P.O. Box 9000, Presidio Station
San Francisco,CA 94129
Phone: (415) 923-2289 Fax: (415) 923-2282

7541-239-06 INTERCARE HOLDINGS INSURANCE SERVICES, INC., PASADENA

Annie Bui
HACIENDA LA PUENTE UNIFIED SCHOOL DISTRICT
15959 E. Gale Ave
City of Industry,CA 91716
Phone: (626) 933-3883 Fax: (626) 933-3863

7600-062-06 KEENAN & ASSOCIATES, SAN JOSE

Alfred Munoz
HARTNELL COMMUNITY COLLEGE DISTRICT
411 Central Ave
Salinas,CA 93901
Phone: (831) 755-6995 Fax: (831) 755-6937

7646-092-60 ADMINSURE, INC., DIAMOND BAR

Ms. LUCY M. REBUCK
Director
HEMET UNIFIED SCHOOL DISTRICT
1791 W ACACIA AVE
HEMET,CA 92545
Phone: (951) 765-5100 Fax: (951) 765-5121

7907-062-01 KEENAN & ASSOCIATES, TORRANCE

Jon Archibald
Assistant Superintendent
HUNTINGTON BEACH CITY SCHOOL DISTRICT
20451 Craimer Lane
Huntington Beach,CA 92646
Phone: (714) 378-2050

7590-132-13 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, RIVERSIDE

Ms. Denise J. Smith
IMPERIAL COUNTY OFFICE OF EDUCATION
1398 Sperber Rd
El Centro,CA 92243
Phone: (760) 312-6133 Fax: (760) 312-6137

7810-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Dan DeVoy
IMPERIAL IRRIGATION DISTRICT
333 E. Barioni Blvd
Imperial,CA 92251
Phone: (760) 339-9781 Fax: (760) 339-9786

7912-062-01 KEENAN & ASSOCIATES, TORRANCE

Ms. La Tanya Kirk-Carter
Interim State Administrator, Asst.Super.Business
INGLEWOOD UNIFIED SCHOOL DISTRICT
401 S. Inglewood Ave
Inglewood,CA 90301

7855-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Ms. Christina Valencia
CFO
INLAND EMPIRE UTILITIES AGENCY
P.O. Box 9020
Chino Hills,CA 91709 Phone: (909) 993-1600 ext 1673

7871-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Paul Cook
IRVINE RANCH WATER DISTRICT
15600 Sand Canyon Ave
Irvine,CA 92618 Phone: (949) 453-5590 Fax: (949) 453-0428

7531-062-01 KEENAN & ASSOCIATES, TORRANCE

Rena L. Thompson
IRVINE UNIFIED SCHOOL DISTRICT
5050 Barranca Parkway
Irvine,CA 92604 Phone: (949) 936-5136 Fax: (949) 936-5139

7619-062-13 KEENAN & ASSOCIATES, RANCHO CORDOVA

Ms. Susan B. Junette
Business Manager
JANESVILLE UNION SCHOOL DISTRICT
P.O. Box 280
Janesville,CA 96114 Phone: (530) 253-3660 Fax: (530) 253-3891

7620-062-13 KEENAN & ASSOCIATES, RANCHO CORDOVA

Andrea Kellogg
JOHNSTONVILLE ELEMENTARY SCHOOL DISTRICT
704-795 Bangham Lane
Susanville,CA 96130 Phone: (530) 257-2119 Fax: (530) 251-5557

7813-062-01 KEENAN & ASSOCIATES, TORRANCE

Jennifer Stockton
KAWEAH DELTA HEALTH CARE DISTRICT
400 W. Mineral King Ave
Visalia,CA 93291 Phone: (559) 624-5536

7605-195-06 TRISTAR RISK MANAGEMENT, SANTA ANA

Mr. George Landon
Deputy Superintendent
LAKE ELSINORE UNIFIED SCHOOL DISTRICT
545 Chaney St.
Lake Elsinore,CA 92530
Phone: (951) 253-7181 Fax: (951) 245-6609

7612-062-13 KEENAN & ASSOCIATES, RANCHO CORDOVA

Jeff DeFranco
LAKE TAHOE COMMUNITY COLLEGE DISTRICT
One College Drive
South Lake Tahoe,CA 96150
Phone: (530) 541-4660 Fax: (530) 541-8611

7637-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Ms. Lydia A. Johns
Director Risk Mgmt & Payroll
LANCASTER SCHOOL DISTRICT
44711 N. Cedar Ave
Lancaster,CA 93534
Phone: (661) 948-4661 ext 126 Fax: (661) 948-4297

7621-062-13 KEENAN & ASSOCIATES, RANCHO CORDOVA

Ms. Denise A. Lee
LASSEN COUNTY OFFICE OF EDUCATION
472-013 Johnstonville Rd
Susanville,CA 96130
Phone: (530) 257-2544 Fax: (530) 257-3147

7586-062-06 KEENAN & ASSOCIATES, SAN JOSE

Ms. Tim Hern
Chief Business Officer
LODI UNIFIED SCHOOL DISTRICT
1305 East Vine Street
Lodi,CA 95240
Phone: (209) 331-7121 Fax: (209) 331-7142

7822-161-01 WORKERS' COMPENSATION ADMINISTRATORS, LLC, SANTA MARIA

James Raggio
LOMPOC VALLEY MEDICAL CENTER
1515 E. Ocean Ave
Lompoc,CA 93436
Phone: (805) 737-3301 Fax: (805) 737-3326

7596-062-01 KEENAN & ASSOCIATES, TORRANCE

7596-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Cynthia Smith
LONG BEACH COMMUNITY COLLEGE DISTRICT
4901 EAST CARSON STREET
LONG BEACH,CA 90808
Phone: (562) 938-4038 Fax: (562) 938-4063

7833-048-02 ATHENS ADMINISTRATORS, IRVINE

Kenneth McDonald
LONG BEACH PUBLIC TRANSPORTATION COMPANY
1963 E. Anaheim Street
Long Beach,CA 90813
Phone: (562) 591-8753 Fax: (562) 218-1994

7597-195-01 TRISTAR RISK MANAGEMENT, SIGNAL HILL

Mr. John Aube
LONG BEACH UNIFIED SCHOOL DISTRICT
1515 Hughes Way
Long Beach,CA 90810
Phone: (562) 997-8234

7537-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Ms. Leila Menzies
Admin. Vice President
LOS ANGELES COMMUNITY COLLEGE DISTRICT
770 Wilshire
Los Angeles,CA 90017
Phone: (213) 891-2036 Fax: (213) 891-2293

7533-132-13 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, RIVERSIDE

Lucretia Bridges
LOS ANGELES COUNTY OFFICE OF EDUCATION
9300 Imperial Highway
Downey,CA 90242
Phone: (563) 803-8353 Fax: (562) 469-4317

7512-011-08 SEDGWICK CLAIMS MANAGEMENT SERVICES, INC., PASADENA

Dawn C. Watkins
LOS ANGELES UNIFIED SCHOOL DISTRICT
333 S. Beaudry Ave, 28th Floor
Los Angeles,CA 90017
Phone: (213) 241-3974 Fax: (213) 241-8993

7517-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

O. D. Burr
Director-General Services
LOS RIOS COMMUNITY COLLEGE DISTRICT
1919 Spanos Court
Sacramento,CA 95825
Phone: (916) 568-3048 Fax: (916) 286-3636

7593-316-02 CORVEL ENTERPRISE COMP, INC., RANCHO CUCAMONGA

Peter Wong
LYNWOOD UNIFIED SCHOOL DISTRICT
11321 Bullis Rd
Lynwood,CA 90262
Phone: (310) 886-1403

7875-048-01 ATHENS ADMINISTRATORS, CONCORD

Ms. Mary R. Casey
General Councel
MARIN MUNICIPAL WATER DISTRICT
220 Nellen Ave
Corte Madera,CA 94925
Phone: (415) 945-1440 Fax: (415) 945-1474

7426-269-02 INNOVATIVE CLAIM SOLUTIONS, SAN RAMON

Mr. Gene Boucher
Human Resources Technician
MENLO PARK FIRE PROTECTION DISTRICT
170 Middlefield Rd
Menlo Park,CA 94025
Phone: (650) 329-9264 Fax: (650) 323-9129

7823-197-04 JT2 INTEGRATED RESOURCES, MANTECA

Ms. Nancie E. Rogers
METROPOLITAN WATER DISTRICT OF SOUTHERN CALIFORNIA
P.O. Box 54153 Terminal Annex
Los Angeles,CA 90054
Phone: (213) 217-7714 Fax: (213) 217-6299

7889-062-06 KEENAN & ASSOCIATES, SAN JOSE

Ms. Wendy Zhang
Interim Assistant Superintendent, Business Services
MILPITAS UNIFIED SCHOOL DISTRICT
1331 E. Calaveras Blvd.
Milpitas,CA 95035
Phone: (408) 635-2600 Fax: (408) 635-2620

7851-195-07 TRISTAR RISK MANAGEMENT, CONCORD

Jeffrey E. Fairbanks
MODESTO IRRIGATION DISTRICT
1231 11th Street
Modesto,CA 95354
Phone: (209) 526-7432 Fax: (209) 526-7527

7520-132-13 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, RIVERSIDE

Maria G. Valdez
MONTEBELLO UNIFIED SCHOOL DISTRICT
123 South Montebello Blvd., Rm. 14
Montebello,CA 90640
Phone: (323) 887-7900 Fax: (323) 887-5887

7554-062-06 KEENAN & ASSOCIATES, SAN JOSE

Ms. Judy M. Durand
Executive Director HR/Risk Manager
MONTEREY PENINSULA UNIFIED SCHOOL DISTRICT
700 Pacific St.
Monterey,CA 93940
Phone: (831) 645-1272 Fax: (831) 645-1287

7839-343-02 PACIFIC CLAIMS MANAGEMENT, FRESNO

Ms. Kelly M. Halcon
Director of Human Resources/Risk
MONTEREY-SALINAS TRANSIT
One Ryan Ranch Rd
Monterey,Ca 93940
Phone: (831) 393-8114 Fax: (831) 583-9048

7595-062-03 KEENAN & ASSOCIATES, RIVERSIDE

7595-316-02 CORVEL ENTERPRISE COMP, INC., RANCHO CUCAMONGA

Terry Chapman
Risk Management Specialist
MORENO VALLEY UNIFIED SCHOOL DISTRICT
25634 Alessandro Blvd.
Moreno Valley,CA 92553
Phone: (951) 571-7522 Fax: (951) 571-7543

7627-062-01 KEENAN & ASSOCIATES, TORRANCE

Ms. Karen Saldana
Director Risk Management
MT. SAN ANTONIO COMMUNITY COLLEGE DISTRICT
1100 N. Grand Ave
Walnut,CA 91789
Phone: (909) 274-4230 ext 5508 Fax: (909) 274-2994

7616-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Mr. Wade W. Ellis
Dean of Business Services
MT. SAN JACINTO COMMUNITY COLLEGE DISTRICT
1499 N. State Street
San Jacinto,CA 92583
Phone: (951) 487-3040 Fax: (951) 654-6236

7521-062-01 KEENAN & ASSOCIATES, TORRANCE

Jeff Trader
NEWPORT MESA UNIFIED SCHOOL DISTRICT
2985 Bear Street
Costa Mesa,CA 92626
Phone: (714) 424-5003

7894-062-06 KEENAN & ASSOCIATES, SAN JOSE

Ms. Christine Castle
Accounting Technician
NORTH COUNTY REGIONAL OCCUPATIONAL PROGRAM JOINT POWERS AUTHORITY
589 W. Fremont Ave
Sunnyvale,CA 94087
Phone: (408) 522-2259 Fax: (408) 749-8022

7815-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Mr. Byll Shelton
Insurance & Risk Mgmt Specialist
NORTH COUNTY TRANSIT DISTRICT
810 Mission Ave
Oceanside,CA 92054
Phone: (760) 967-2847 Fax: (760) 967-0941

7905-048-01 ATHENS ADMINISTRATORS, CONCORD

Mr. David Bentley
Auditor-Controller
NORTH MARIN WATER DISTRICT
PO Box 146
Novato,CA 94945
Phone: (415) 897-4133

7561-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Tami Oh
NORTH ORANGE COUNTY COMMUNITY COLLEGE DISTRICT
1830 W. Romneya Drive
Anaheim,CA 92801
Phone: (714) 808-4779 Fax: (714) 808-4744

7556-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Mr. Anthony Nahale
Director of Risk Management
NORWALK-LA MIRADA UNIFIED SCHOOL DISTRICT
12820 Pioneer Blvd.
Norwalk,CA 90650
Phone: (562) 868-0431 ext 2113 Fax: (562) 868-0692

7428-048-01 ATHENS ADMINISTRATORS, CONCORD

Mr. Dan Hom
Financial Director
NOVATO FIRE PROTECTION DISTRICT
95 Rowland Way
Novato,CA 94945
Phone: (415) 878-2618

7508-197-05 JT2 INTEGRATED RESOURCES, OAKLAND

Mr. Jerry Johnson
Risk Manager
OAKLAND UNIFIED SCHOOL DISTRICT
1000 Broadway St.
Oakland,CA 94607
Phone: (510) 999-5818

7887-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Mr. Luis A. Ibarra
Assoc Supt Business Services
OCEANSIDE UNIFIED SCHOOL DISTRICT
2111 Mission Ave
Oceanside,CA 92058
Phone: (760) 966-4047 Fax: (760) 433-3191

7635-062-06 KEENAN & ASSOCIATES, SAN JOSE

Ms. Shairon Zingsheim
AVP of HR and Training
OHLONE COMMUNITY COLLEGE DISTRICT
43600 Mission Blvd
Fremont,CA 94539
Phone: (510) 659-6201 Fax: (510) 659-6025

7834-343-02 PACIFIC CLAIMS MANAGEMENT, FRESNO

Ms. Marjorie Ewing
Director of Human Resources
OMNITRANS
1700 W. 5th St
San Bernardino,CA 92411
Phone: (909) 379-7261 Fax: (909) 379-7108

7431-132-13 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, RIVERSIDE

Tricia Jakubiak
ORANGE COUNTY FIRE AUTHORITY
1 Fire Authority Rd ,Bldg .A
Irvine,CA 92602
Phone: (714) 573-6301 Fax: (714) 368-8834

7827-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Mr. Mike White
Controller
ORANGE COUNTY SANITATION DISTRICT
10844 Ellis Ave
Fountain Valley,CA 92708
Phone: (714) 593-7570 ext 7570

7821-239-05 INTERCARE HOLDINGS INSURANCE SERVICES, INC., ORANGE

Al Gorski
ORANGE COUNTY TRANSIT DISTRICT
550 S. Main Street
Orange,CA 92868
Phone: (714) 560-5817

7888-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Ms. Cheryl Paine-Peterson
Administrative Director Business Services
ORANGE UNIFIED SCHOOL DISTRICT
1401 N. Handy St.
Orange,CA 92867
Phone: (714) 628-4479

7589-062-06 KEENAN & ASSOCIATES, SAN JOSE

Ms. Nita R. Black
Supervisor Payroll and Benefits
PAJARO VALLEY UNIFIED SCHOOL DISTRICT
294 Green Valley Rd
Watsonville,CA 95076
Phone: (831) 786-2350 Fax: (831) 728-6996

7598-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Ms. Renee Brunelle
Risk Mangement
PALM SPRINGS UNIFIED SCHOOL DISTRICT
980 E. Tahquitz Canyon Way
Palm Springs,Ca 92262
Phone: (760) 416-6191

7545-062-06 KEENAN & ASSOCIATES, SAN JOSE

Ms. Victoria Geen-Lew
Supervisor Risk Managment
PALO ALTO UNIFIED SCHOOL DISTRICT
25 Churchill Ave
Palo Alto,CA 94306
Phone: (650) 329-3735 Fax: (650) 329-3803

7639-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Mr. John S. Tortarolo
VP Human Resource Services
PALOMAR COMMUNITY COLLEGE DISTRICT
1140 West Mission Rd
San Marcos,CA 92069
Phone: (760) 744-1150 Fax: (760) 761-3530

7563-062-01 KEENAN & ASSOCIATES, TORRANCE

Cha Mancini
PASADENA AREA COMMUNITY COLLEGE DISTRICT
1570 E. Colorado Blvd
Pasadena,CA 91106
Phone: (626) 585-7507 Fax: (626) 585-7924

7511-347-01 HAZELRIGG CLAIMS MANAGEMENT SERVICES, CHINO HILLS

Elizabeth A. Walker
PASADENA UNIFIED SCHOOL DISTRICT
351 S. Hudson Ave Room 112
Pasadena,CA 91109
Phone: (626) 396-3600 Fax: (696) 796-8613

7642-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Gregory Valentine
PERALTA COMMUNITY COLLEGE DISTRICT
333 E. 8th Street
oakland,CA 94606
Phone: (510) 466-7247

7539-048-02 ATHENS ADMINISTRATORS, IRVINE

Ms. Elaine Marshall
Risk Management Supervisor
PLACENTIA-YORBA LINDA UNIFIED SCHOOL DISTRICT
1301 E. Orangethorpe Ave
Placentia,CA 92870
Phone: (714) 985-8776 Fax: (714) 986-7001

7622-062-13 KEENAN & ASSOCIATES, RANCHO CORDOVA

Yvonne M. Bales
PLUMAS COUNTY OFFICE OF EDUCATION
50 Church St
Quincy,CA 95971
Phone: (530) 283-6500 Fax: (530) 283-6530

7588-316-02 CORVEL ENTERPRISE COMP, INC., RANCHO CUCAMONGA

Ms. Amy McElwain
Director Risk Management
POMONA UNIFIED SCHOOL DISTRICT
800 South Garey Ave
Pomona,CA 91766
Phone: (909) 397-4800 Fax: (909) 622-9972

7806-99-01 Self Administered

Mr. Joe Singh
WC Analyst
PORT OF OAKLAND
530 Water Street
Oakland,CA 94607
Phone: (510) 627-1533 Fax: (510) 268-8141

7584-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Mr. Steven S. Salvati
Director of Risk Management
POWAY UNIFIED SCHOOL DISTRICT
15250 Ave of Science
San Diego,CA 92128
Phone: (858) 521-2786 Fax: (858) 485-1355

7623-062-13 KEENAN & ASSOCIATES, RANCHO CORDOVA

Michelle Brown
RAVENDALE-TERMO ELEMENTARY SCHOOL DISTRICT
109 S. Gilman St.
Susanville,CA 96130
Phone: (530) 257-8200 Fax: (530) 257-8246

7551-062-06 KEENAN & ASSOCIATES, SAN JOSE

Mr. James Lovelace
RAVENSWOOD CITY SCHOOL DISTRICT
2120 Euclid Ave
East Palo Alto,CA 94303
Phone: (650) 329-2800 Fax: (650) 325-3015

7617-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Ms. Sylvia Morrison
Risk Manager
REDLANDS UNIFIED SCHOOL DISTRICT
20 W. Lugonia Ave
Redlands,CA 92374
Phone: (909) 307-5300 Fax: (909) 307-5344

7608-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Mr. Derek K. Harris
Director of Risk Mgmt
RIALTO UNIFIED SCHOOL DISTRICT
182 E. Walnut Ave
Rialto,CA 92376
Phone: (909) 820-7700 Fax: (909) 879-8611

7628-062-01 KEENAN & ASSOCIATES, TORRANCE

Mr. Philip W. Luebben
Interim V.P. Finance & Business
RIO HONDO COMMUNITY COLLEGE DISTRICT
3600 Workman Mill Rd
Whittier,CA 90601
Phone: (562) 463-7099 Fax: (562) 908-3462

7582-132-13 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, RIVERSIDE

Michael W. Simmons
RIVERSIDE COMMUNITY COLLEGE DISTRICT
4800 Magnolia Ave
Riverside,CA 92506
Phone: (951) 222-8128

7849-239-06 INTERCARE HOLDINGS INSURANCE SERVICES, INC., PASADENA

Ms. Cecilia Perez
Interim Risk Manager
RIVERSIDE TRANSIT AGENCY
1825 Third Street
Riverside,CA 92507
Phone: (951) 565-5042

7519-132-13 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, RIVERSIDE

Mr. Michael H. Fine
Deputy Superintendent
RIVERSIDE UNIFIED SCHOOL DISTRICT
3380 14th St.
Riverside,CA 92501
Phone: (951) 788-7135

7425-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Ms. Melisa Maddux
HR Manager
SACRAMENTO METROPOLITAN FIRE DISTRICT
10545 Armstrong Ave
Mather,CA 95655
Phone: (916) 859-4533

7800-239-01 INTERCARE HOLDINGS INSURANCE SERVICES, INC., ROCKLIN

Angelique C. Robinson
SACRAMENTO MUNICIPAL UTILITY DISTRICT
6201 S Street, M.S. B203
Sacramento,CA 95852
Phone: (916) 732-6940 Fax: (916) 732-7626

7808-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Ms. Darla Modjeski
Risk Administrator
SACRAMENTO REGIONAL TRANSIT DISTRICT
PO Box 2110
Sacramento,CA 95812
Phone: (916) 556-0288 Fax: (916) 457-7425

7535-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Ms. DIANA GAETA
SADDLEBACK VALLEY UNIFIED SCHOOL DISTRICT
25631 Peter A. Hartman Way
Mission Viejo,CA 92691
Phone: (949) 580-3424 Fax: (949) 454-0384

7816-146-02 ACCLAMATION INSURANCE MANAGEMENT SERVICES, FRESNO

Ms. Jill Peralta-Cuellar
RN/Manager of Employee Health
SALINAS VALLEY MEMORIAL HOSPITAL
450 East Romie Lane
Salinas,CA 93901
Phone: (831) 759-1985

7501-99-01 Self Administered

Janet King
SAN BERNARDINO CITY UNIFIED SCHOOL DISTRICT
777 North F Street
San Bernardino,Ca 92410
Phone: (909) 381-1154 Fax: (909) 383-1375

7548-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Mr. BRUCE BARON
Chancellor
SAN BERNARDINO COMMUNITY COLLEGE DISTRICT
114 S. DEL ROSA DRIVE
SAN BERNARDINO,CA 92408
Phone: (909) 382-4091 Fax: (909) 382-0115

7558-316-03 CORVEL ENTERPRISE COMP, INC., SAN DIEGO

Ms. Kandra D. Olsen
Risk Manager
SAN DIEGO COMMUNITY COLLEGE DISTRICT
3375 Camino Del Rio South, Ste 385
San Diego,CA 92108
Phone: (619) 388-6948 Fax: (619) 388-6898

7803-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Susan V. Lockwood
SAN DIEGO METROPOLITAN TRANSIT SYSTEM
1255 Imperial Ave Ste 1000
San Diego,CA 92101
Phone: (619) 557-4502 Fax: (619) 696-1079

7518-132-11 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ORANGE

Ms. Ashley K. Fenton
Manager Insurance & Risk Services
SAN DIEGO UNIFIED SCHOOL DISTRICT
4100 Normal Street, Revere Center, Room 7
San Diego,CA 92103
Phone: (858) 627-7354 Fax: (858) 627-7353

7805-048-01 ATHENS ADMINISTRATORS, CONCORD

Jesse T. Alcantara
Senior Personnel Analyst
SAN FRANCISCO BAY AREA RAPID TRANSIT DISTRICT
300 Lakeside Drive, 20th Floor
Oakland,CA 94612
Phone: (510) 464-6250 Fax: (510) 464-7511

7578-99-01 Self Administered

Mr. Peter A. Goldstein
Vice Chancellor
SAN FRANCISCO COMMUNITY COLLEGE DISTRICT
33 GOUGH STREET
SAN FRANCISCO,CA 94103
Phone: (415) 241-2229 Fax: (415) 241-2344

7863-239-01 INTERCARE HOLDINGS INSURANCE SERVICES, INC., ROCKLIN

Dan Roach
SAN FRANCISCO MUNICIPAL TRANSPORTATION AGENCY
One South Van Ness Ave, sixth floor
San Francisco,CA 94103
Phone: (415) 701-4351 Fax: (415) 701-5001

7641-195-07 TRISTAR RISK MANAGEMENT, CONCORD

David George
SAN FRANCISCO UNIFIED SCHOOL DISTRICT
555 Franklin St., Second Floor
San Francisco,CA 94102
Phone: (415) 241-6307

7022-195-05 TRISTAR RISK MANAGEMENT, RANCHO CORDOVA

Tanya Moreno
SAN JOAQUIN COUNTY
44 N. San Joaquin St., Ste 330, 3rd Floor
Stockton,CA 95202
Phone: (209) 468-3274 Fax: (209) 953-7330

7585-062-06 KEENAN & ASSOCIATES, SAN JOSE

Ms. Dianna R. Gonzales
Director of Human Resources
SAN JOAQUIN DELTA COMMUNITY COLLEGE DISTRICT
5151 Pacific Ave Box 114
Stockton,CA 95207
Phone: (209) 954-5059 Fax: (209) 954-5712

7838-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Ms. Gloria Salazar
AGM/CFO
SAN JOAQUIN REGIONAL TRANSIT DISTRICT
PO 201010
Stockton,CA 95201
Phone: (209) 948-5566 Fax: (209) 948-8516

7565-048-01 ATHENS ADMINISTRATORS, CONCORD

Ms. Veronica N. Lanto
Director of Auxiliary Services
SAN JOSE UNIFIED SCHOOL DISTRICT
855 Lenzen Ave
San Jose,CA 95126
Phone: (408) 535-6572 Fax: (408) 297-9849

7550-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

7550-156-01 SCHOOLS INSURANCE AUTHORITY, SACRAMENTO

Ms. DEBBIE FLEMING
SAN JUAN UNIFIED SCHOOL DISTRICT
3738 WALNUT AVE
CARMICHAEL,CA 95608
Phone: (916) 971-7062 Fax: (946) 971-7984

7601-011-20 SEDGWICK CLAIMS MANAGEMENT SERVICES, INC., OAKLAND-WEBSTER

7601-062-06 KEENAN & ASSOCIATES, SAN JOSE

Harry W. Joel
SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT
3401 CSM Drive
San Mateo,CA 94402
Phone: (650) 358-6767 Fax: (650) 574-6574

7830-147-05 THE CITIES GROUP, BURLINGAME

Ms. Monica Colondres
SAN MATEO COUNTY TRANSIT DISTRICT
1250 San Carlos Ave
San Carlos,CA 94070
Phone: (650) 508-6233 Fax: (650) 508-6458

7414-269-02 INNOVATIVE CLAIM SOLUTIONS, SAN RAMON

Mr. Robert Leete
Administrative Services Director
SAN RAMON VALLEY FIRE PROTECTION DISTRICT
1500 Bollinger Canyon Rd
San Ramon,CA 94583
Phone: (925) 838-6677 Fax: (925) 886-4689

7523-99-01 Self Administered

Ms. Camille Boden
SANTA ANA UNIFIED SCHOOL DISTRICT
1601 E. Chestnut Ave
Santa Ana,CA 92701
Phone: (714) 558-5856 Fax: (714) 480-5320

7629-062-01 KEENAN & ASSOCIATES, TORRANCE

Ms. Adrienne Betty
Administrative Services Coordinator
SANTA BARBARA COMMUNITY COLLEGE DISTRICT
721 Cliff Drive
Santa Barbara,CA 93109
Phone: (805) 730-5126

7844-161-01 WORKERS' COMPENSATION ADMINISTRATORS, LLC, SANTA MARIA

Ms. Sherrie Fisher
General Manager
SANTA BARBARA METROPOLITAN TRANSIT DISTRICT
550 Olive Street
Santa Barbara,CA 93101
Phone: (805) 963-3364 Fax: (805) 962-4794

7412-099-01 Self Administered

Thelma Raby
SANTA CLARA COUNTY CENTRAL FIRE DISTRICT
2310 N. First Street, Ste 205
San Jose,CA 95131
Phone: (408) 441-4237 Fax: (408) 938-4524

7591-195-07 TRISTAR RISK MANAGEMENT, CONCORD

Ms. Barbara Coats
SANTA CLARA COUNTY OFFICE OF EDUCATION
1290 Ridder Park Drive
San Jose,CA 95131
Phone: (408) 453-6925 Fax: (408) 453-4339

7579-062-06 KEENAN & ASSOCIATES, SAN JOSE

Mr. Stan Rose
Superintendent
SANTA CLARA UNIFIED SCHOOL DISTRICT
1889 LAWRENCE RD
SANTA CLARA,CA 95051
Phone: (408) 423-2005

7826-195-07 TRISTAR RISK MANAGEMENT, CONCORD

Mr. Steven P. Keller
Risk Manager
SANTA CLARA VALLEY TRANSPORTATION AUTHORITY
3331 N 1st Street, B-1
San Jose,CA 95134
Phone: (408) 321-7091 Fax: (408) 955-9767

7854-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Mr. Hernan C. Rivero
Sr. Management Analyst
SANTA CLARA VALLEY WATER DISTRICT
5750 Almaden Expressway
San Jose,CA 95118
Phone: (408) 630-2868 Fax: (408) 979-5601

7633-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Ms. Sharlene Coleal
SANTA CLARITA COMMUNITY COLLEGE DISTRICT
26455 Rockwell Canyon Rd
Santa Clarita,CA 91355
Phone: (661) 362-3405 Fax: (661) 362-5405

7841-048-01 ATHENS ADMINISTRATORS, CONCORD

Robyn D. Slater
SANTA CRUZ METROPOLITAN TRANSIT DISTRICT
110 Vernon St
Santa Cruz,CA 95060
Phone: (831) 426-6080

7630-062-01 KEENAN & ASSOCIATES, TORRANCE

Robert G. Isomoto
SANTA MONICA COMMUNITY COLLEGE DISTRICT
1900 Pico Blvd.
Santa Monica,CA 90405
Phone: (310) 434-4201

7632-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Keith A. Karzin
SAUGUS UNION SCHOOL DISTRICT
24930 Ave Stanford
Santa Clarita,CA 91354
Phone: (661) 294-5000 Fax: (661) 294-3585

7845-305-01 ACME ADMINISTRATORS, INC., TEMECULA

Ms. Brenda Weyhrauch
Director Risk Managment
SIERRA VIEW LOCAL HEALTH CARE DISTRICT DBA SIERRA VIEW DISTRICT HOSPITAL
465 West Putnam Ave
Porterville,CA 93257
Phone: (559) 788-6173 Fax: (559) 791-3819

7544-132-14 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, VALENCIA

Ms. Karen Longobart
Director of Risk Management
SIMI VALLEY UNIFIED SCHOOL DISTRICT
875 E. Cochran Street
Simi Valley,CA 93065
Phone: (805) 306-4500 Fax: (805) 520-6144

7636-062-13 KEENAN & ASSOCIATES, RANCHO CORDOVA

Mr. Douglas Roberts
VP Business Services
SONOMA COUNTY JUNIOR COLLEGE DISTRICT
1501 Mendocino Ave
Santa Rosa,CA 95401
Phone: (707) 527-4421 Fax: (707) 524-1533

7869-195-05 TRISTAR RISK MANAGEMENT, RANCHO CORDOVA

Ms. Paula Davis
Chief Human Resources Officer
SONOMA VALLEY HEALTH CARE DISTRICT
347 Andrieux St.
Sonoma,CA 95476
Phone: (707) 935-5175 Fax: (707) 935-5179

7884-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Mr. Abdollah Saadat
Assistant Superintendent
SOUTH BAY UNION SCHOOL DISTRICT
601 Elm Ave
Imperial Beach,CA 91932
Phone: (619) 628-1679 Fax: (619) 628-1678

7842-305-01 ACME ADMINISTRATORS, INC., TEMECULA

William J. Johnson
SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT
21865 Copley Drive
Diamond Bar,CA 91765
Phone: (909) 396-3018 Fax: (909) 396-3325

7571-062-01 KEENAN & ASSOCIATES, TORRANCE

Fitzsimons Debra
SOUTH ORANGE COUNTY COMMUNITY COLLEGE DISTRICT
28000 Marguerite Parkway
Mission Viejo,CA 92692
Phone: (949) 582-4664 Fax: (949) 347-0390

7873-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Mr. Priya Jerome
SOUTHWESTERN COMMUNITY COLLEGE DISTRICT
900 Otay Lakes Rd
Chula Vista,CA 91910
Phone: (619) 482-6481 Fax: (619) 482-6323

7811-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Katie Miller
STOCKTON PORT DISTRICT
PO Box 2089
Stockton,CA 95201
Phone: (209) 946-0246

7594-197-01 JT2 INTEGRATED RESOURCES, PLEASANTON

Ms. Karen L. Cravens
Disability Management Coordinator
STOCKTON UNIFIED SCHOOL DISTRICT
55 S. Madison St.
Stockton,CA 95203
Phone: (209) 933-7110 Fax: (209) 465-5764

7891-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Carol A. Campbell
SULPHUR SPRINGS UNION SCHOOL DISTRICT
27000 Weyerhaeuser Way
Santa Clarita,CA 91351
Phone: (661) 252-5131 Fax: (661) 252-8814

7877-062-01 KEENAN & ASSOCIATES, TORRANCE

Ms. Crystal Betts
CFO
TAHOE FOREST HOSPITAL DISTRICT
P.O. Box 759
Truckee,CA 96160
Phone: (530) 582-6656 Fax: (530) 582-3567

7909-048-01 ATHENS ADMINISTRATORS, CONCORD

Ms. Debbie Jones
Director of Risk Management
TEMECULA VALLEY UNIFIED SCHOOL DISTRICT
31350 Rancho Vista Rd
Temecula,CA 92592
Phone: (951) 506-7907 Fax: (951) 695-7341

7846-132-14 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, VALENCIA

Douglas Guthrie
President and CEO
THE HOUSING AUTHORITY OF THE CITY OF LOS ANGELES
2600 Wilshire Blvd, 3rd floor- HR
Los Angeles,CA 90057
Phone: (213) 252-5400 Fax: (213) 252-0829

7559-011-10 SEDGWICK CLAIMS MANAGEMENT SERVICES, INC., ROSEVILLE

7559-011-20 SEDGWICK CLAIMS MANAGEMENT SERVICES, INC., OAKLAND-WEBSTER

7559-011-24 SEDGWICK CLAIMS MANAGEMENT SERVICES, INC., CULVER CITY

7559-011-26 SEDGWICK CLAIMS MANAGEMENT SERVICES, INC., SAN DIEGO

7559-108-04 AIG CLAIMS, INC., SAN RAMON

Mr. Kevin J. Confetti
Director
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA
1111 Franklin Street, 10th Floor
Oakland,CA 94607
Phone: (510) 987-9868 Fax: (510) 987-9833

7502-062-01 KEENAN & ASSOCIATES, TORRANCE

Donald A. Stabler
TORRANCE UNIFIED SCHOOL DISTRICT
2335 Plaza Del Amo
Torrance,CA 90501
Phone: (310) 972-6061 Fax: (310) 972-6065

7296-048-01 ATHENS ADMINISTRATORS, CONCORD

DARRELL HEPPNER
TOWN OF CORTE MADERA
P.O. Box 958
San Leandro,CA 94577
Phone: (510) 912-1437

7219-269-02 INNOVATIVE CLAIM SOLUTIONS, SAN RAMON

Mr. Rumi Portillo
Human Resources Director
TOWN OF LOS GATOS
110 E. MAIN STREET
LOS GATOS,CA 95030
Phone: (408) 354-6829

7812-169-11 ALPHA FUND, ROSEVILLE

7812-195-04 TRISTAR RISK MANAGEMENT, SAN DIEGO (CONVOY)

Rudy Gastelum
TRI-CITY HEALTHCARE DISTRICT
4002 Vista Way
Oceanside,CA 92056
Phone: (760) 940-7281 Fax: (760) 940-4005

7850-218-04 PEGASUS RISK MANAGEMENT, INC., MODESTO

Charlotte A. Dutra
TURLOCK IRRIGATION DISTRICT
PO Box 949
Turlock,CA 95381
Phone: (209) 883-8511 Fax: (209) 656-2144

7524-062-01 KEENAN & ASSOCIATES, TORRANCE

Mr. Anthony Soria
Chief Financial Officer
TUSTIN UNIFIED SCHOOL DISTRICT
300 South C Street
Tustin,CA 92780
Phone: (714) 730-7301

7640-195-07 TRISTAR RISK MANAGEMENT, CONCORD

Marie Hairston
UNIVERSITY OF CALIFORNIA, HASTINGS COLLEGE OF THE LAW
200 McAllister St.
San Francisco,Ca 94102
Phone: (415) 581-8868

7638-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Ms. Jammee Digon
Administrative Assistant
UPLAND UNIFIED SCHOOL DISTRICT
390 North Euclid Ave
Upland,CA 91786
Phone: (909) 851-8642 Fax: (909) 985-8013

7607-062-01 KEENAN & ASSOCIATES, TORRANCE

Mr. Ron Owen
Benefits Analyst
VENTURA COUNTY COMMUNITY COLLEGE DISTRICT
255 W. Stanley Ave, Ste 150
Ventura,CA 93001
Phone: (805) 652-5533 Fax: (805) 652-7705

7609-062-03 KEENAN & ASSOCIATES, RIVERSIDE

GH Javaheripour
VP of Administrative Services
VICTOR VALLEY COMMUNITY COLLEGE DISTRICT
18422 Bear Valley Rd
Victorville,CA 92395
Phone: (760) 245-4271 Fax: (760) 243-2781

7649-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Ms. Monika Knight
Director Fiscal Services
VICTOR VALLEY UNION HIGH SCHOOL DISTRICT
16350 Mojave Drive
Victorville,CA 92395
Phone: (760) 955-3201 Fax: (760) 245-3128

7902-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Ms. Donna M. Caperton
VISTA UNIFIED SCHOOL DISTRICT
1234 Arcadia Ave
Vista,CA 92084
Phone: (760) 726-2170 Fax: (760) 941-9675

7814-195-05 TRISTAR RISK MANAGEMENT, RANCHO CORDOVA

Ms. Kimberly Hartz
Senior Associate Administrator
WASHINGTON TOWNSHIP HOSPITAL
2000 Mowry Ave
Fremont,CA 94538
Phone: (510) 791-9048 Fax: (510) 745-6464

7901-152-10 LWP CLAIMS SOLUTIONS, INC., SACRAMENTO

Ms. Amy Mendoza
WEST CONTRA COSTA HEALTHCARE DISTRICT DBA DOCTORS MEDICAL CENTER
2000 Vale Rd
San Pablo,CA 94806
Phone: (510) 970-5218 Fax: (510) 970-5741

7897-062-13 KEENAN & ASSOCIATES, RANCHO CORDOVA

Mr. Ken Stoppenbrink
Deputy Chancellor
WEST HILLS COMMUNITY COLLEGE DISTRICT
9800 Cody St
Coalinga,CA 93210
Phone: (559) 934-2160 Fax: (559) 934-2816

7624-062-13 KEENAN & ASSOCIATES, RANCHO CORDOVA

Ms. Janet Garcia
Assistant Business Manager
WESTWOOD UNIFIED SCHOOL DISTRICT
PO Box 1225
Westwood,CA 96137

Phone: (530) 256-2311 Fax: (530) 256-3539

7515-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Ms. Marilyn Mosley
Benefits Technician
WHITTIER UNION HIGH SCHOOL DISTRICT
9401 S. Painter Ave
Whittier,CA 90605

Phone: (562) 698-8121 ext 1039 Fax: (562) 907-6975

7604-062-01 KEENAN & ASSOCIATES, TORRANCE

Mr. Dave Wilson
Director Budget and Accounting
WISEBURN SCHOOL DISTRICT
13530 Aviation Blvd
Hawthorne,CA 90250

Phone: (310) 643-3025

5511-062-14 KEENAN & ASSOCIATES, PLEASANTON

Ms. Kimberly L. Dennis
ALAMEDA COUNTY SCHOOLS INSURANCE GROUP
PO Box 2487
Dublin,CA 94568
Phone: (925) 225-1030 Fax: (925) 225-0653

5553-048-01 ATHENS ADMINISTRATORS, CONCORD

5553-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Coni G. Hernandez
ALLIANCE OF SCHOOLS FOR COOPERATIVE INSURANCE PROGRAMS (ASCIP)
16550 Bloomfield Ave
Cerritos,CA 90703
Phone: (562) 404-8029 Fax: (562) 404-8038

5809-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

Mr. Herb Pike
Director of Finance
ASSOCIATION OF BAY AREA GOVERNMENTS (ABAG)
P.O. Box 2050
Oakland,Ca 94604
Phone: (510) 464-7902 Fax: (510) 433-5502

5803-169-11 ALPHA FUND, ROSEVILLE

David McGhee
ASSOCIATION OF CALIFORNIA HEALTHCARE DISTRICTS, INC.
4178 Douglas Blvd.
Granite Bay,CA 95746
Phone: (916) 266-5226 Fax: (916) 266-0314

5807-99-01 Self Administered

Mr. Walter A. Sells
CEO
ASSOCIATION OF CALIFORNIA WATER AGENCIES JOINT POWERS INSURANCE AUTHORITY (ACWA)
P.O. Box 619082
Roseville,CA 95661
Phone: (916) 786-5742 ext 3161 Fax: (916) 774-7040

5808-048-01 ATHENS ADMINISTRATORS, CONCORD

Ms. Janet Rice
Treasurer
BAY AREA HOUSING AUTHORITY RISK MANAGEMENT AGENCY
1619 Harrison Street
Oakland,CA 94612
Phone: (510) 874-1513 Fax: (510) 874-1522

5022-048-01 ATHENS ADMINISTRATORS, CONCORD

5022-269-02 INNOVATIVE CLAIM SOLUTIONS, SAN RAMON

Rob Kramer
BAY CITIES JOINT POWERS INSURANCE AUTHORITY
1750 Creekside Oaks Dr., Ste 200
Sacramento,CA 95833
Phone: (800) 541-4591 Fax: (916) 244-1199

5519-062-01 KEENAN & ASSOCIATES, TORRANCE

5519-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Ms. Marcy Delgado
Assosicate Superintendent
BENEFIT & LIABILITY PROGRAMS OF CALIFORNIA
c/o Bellflower USD 16703 S. Clark Ave
Bellflower,CA 90706
Phone: (562) 866-9011 Fax: (562) 866-5032

5816-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Mr. Patrick T. Cabulagan
Administrator
CALIFORNIA ASSOCIATION FOR PARK AND RECREATION INDEMNITY (CAPRI)
6341 Auburn Blvd, Ste A
Citrus Heights,CA 95765
Phone: (916) 722-5550 Fax: (916) 722-5715

5557-025-11 GALLAGHER BASSETT SERVICES INC., SACRAMENTO-REGIONAL

Ms. Jennifer Rubin
Managing Director, School Insurance
CALIFORNIA CHARTER SCHOOLS JOINT POWERS AUTHORITY DBA CHARTERSAFE
PO Box 969
Weimar,CA 95736
Phone: (888) 901-0004 Fax: (530) 236-9569

5810-142-05 CALIFORNIA FAIR SERVICES AUTHORITY, SACRAMENTO

Charlie Mitchell
CALIFORNIA FAIR SERVICES AUTHORITY
P.O. Box 15518
Sacramento,CA 95852
Phone: (916) 263-6150 Fax: (916) 263-6159

5812-269-02 INNOVATIVE CLAIM SOLUTIONS, SAN RAMON

Adrienne Beatty
CALIFORNIA HOUSING WORKERS' COMPENSATION AUTHORITY
1750 Creekside Oaks Dr., Ste 200
Sacramento,CA 95833
Phone: (800) 541-4591 Fax: (916) 244-1199

5009-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Mr. Alexander Smith
Finance Director
CALIFORNIA JOINT POWERS INSURANCE AUTHORITY
8081 Moody Street
La Palma,CA 90623
Phone: (562) 467-8727 Fax: (562) 467-8798

5554-239-07 INTERCARE HOLDINGS INSURANCE SERVICES, INC., FRESNO

Mr. Alan Caeton
Administrator
CALIFORNIA RISK MANAGEMENT AUTHORITY
9493 N. Ft Washington Rd, Ste 101
Fresno,CA 93730
Phone: (559) 476-2999 Fax: (559) 476-2933

5811-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Mr. Dennis F. Mulqueeney
CALIFORNIA SANITATION RISK MANGEMENT AUTHORITY
100 Pine Street, 11th Floor
San Francisco,CA 94111
Phone: (415) 403-1421 Fax: (415) 874-4813

5558-011-23 SEDGWICK CLAIMS MANAGEMENT SERVICES, INC., RANCHO CORDOVA

Ms. Mimi Long
JPA Program Administrator
CALIFORNIA STATE UNIVERSITY RISK MANAGEMENT AUTHORITY
100 Pine Street, 11th Floor
San Francisco,CA 94111
Phone: (415) 403-1423

5541-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Ms. Becky Slaughter
CENTRAL REGION SCHOOL INSURANCE GROUP
4101 Tully Rd, Ste 501
Modesto,CA 95356
Phone: (209) 579-7535 Fax: (209) 579-7530

5010-146-02 ACCLAMATION INSURANCE MANAGEMENT SERVICES, FRESNO

Ms. Jeanette Workman
CENTRAL SAN JOAQUIN VALLEY RISK MANAGEMENT AUTHORITY
1750 Creekside Oaks Drive, Ste 200
Sacramento,CA 95833
Phone: (916) 244-1110 Fax: (916) 244-1199

5508-99-01 Self Administered

Ms. Heidi B. Flanagan
Executive Assistant
CONTRA COSTA COUNTY SCHOOLS INSURANCE GROUP
550 Ellinwood Way
Pleasant Hill,CA 94523
Phone: (866) 922-2744 Fax: (925) 692-1176

5801-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Kathe A. Vasquez
COUNTY SANITATION DISTRICT OF LOS ANGELES COUNTY
1955 Workman Mill Rd
Whittier,CA 90601
Phone: (562) 699-7411 Fax: (562) 692-3056

5021-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE
5021-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND
5021-132-12 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, OXNARD
5021-132-14 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, VALENCIA
5021-132-17 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, SAN BERNARDINO
5021-152-10 LWP CLAIMS SOLUTIONS, INC., SACRAMENTO
5021-197-01 JT2 INTEGRATED RESOURCES, PLEASANTON
5021-239-07 INTERCARE HOLDINGS INSURANCE SERVICES, INC., FRESNO
5021-316-02 CORVEL ENTERPRISE COMP, INC., RANCHO CUCAMONGA
5021-316-04 CORVEL ENTERPRISE COMP, INC., CAMARILLO
5021-316-05 CORVEL ENTERPRISE COMP, INC., FOLSOM

Michael Fleming
CSAC EXCESS INSURANCE AUTHORITY
75 Iron Point Circle, #200
Folsom,CA 95630
Phone: (916) 850-7300 Fax: (916) 850-7800

5015-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Ms. Kimberly Kerr
Assistant CAO
EL DORADO COUNTY RISK MANAGEMENT AUTHORITY
330 Fair Lane
Placerville,CA 95667
Phone: (530) 621-7695 ext 7695

5404-048-01 ATHENS ADMINISTRATORS, CONCORD

Mr. Brian Kelley
Administrator
FIRE AGENCIES SELF INSURANCE SYSTEM
1750 Creekside Oaks Dr., Ste 200
Sacramento,CA 95833
Phone: (800) 541-4591 Fax: (916) 244-1199

5546-195-09 TRISTAR RISK MANAGEMENT, FRESNO

Mr. William L. Tucker
JPA Administrator
FRESNO COUNTY SELF INSURANCE GROUP
2133 High St., Ste E
Selma,CA 93662
Phone: (559) 819-1025 Fax: (559) 896-3846

5804-99-01 Self Administered

Mr. Scott E. Schimke
Risk Manager
GOLDEN STATE RISK MANAGEMENT AUTHORITY
247 W Sycamore St, P O Box 706
Willows,CA 95988
Phone: (530) 934-5633 Fax: (530) 934-8133

5817-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Ms. Vanessa Pena
Account Manager
HIGH DESERT SCHOOLS' JOINT POWERS AUTHORITY
c/o Keenan and Associates
4204 Riverwalk Parkway Ste 400
Riverside,CA 92505
Phone: (951) 788-0330 Fax: (951) 715-0166

5023-048-01 ATHENS ADMINISTRATORS, CONCORD

5023-062-03 KEENAN & ASSOCIATES, RIVERSIDE

5023-092-60 ADMINSURE, INC., DIAMOND BAR

5023-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

5023-316-02 CORVEL ENTERPRISE COMP, INC., RANCHO CUCAMONGA

5023-335-01 CALIFORNIA CLAIMS MANAGEMENT SERVICES, INC., TORRANCE

David Luke
INDEPENDENT CITIES RISK MANAGEMENT AUTHORITY (ICRMA)
1100 Town & Country Rd, Ste 1550
Orange,CA 92868
Phone: (714) 426-8505 Fax: (916) 244-1149

5535-197-04 JT2 INTEGRATED RESOURCES, MANTECA

5535-99-01 Self Administered

Ms. Angela I. Sorrentino
Executive Director
KINGS COUNTY SELF-INSURED SCHOOLS
876 East D Street
Lemoore,CA 93245
Phone: (559) 589-7059 Fax: (559) 589-7063

5505-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Mr. Rick Brush
Administrator
MARIN SCHOOL INSURANCE AUTHORITY
1750 Creekside Oaks Drive Ste 200
Sacramento,CA 95833
Phone: (916) 244-1154 Fax: (916) 244-1199

5016-195-09 TRISTAR RISK MANAGEMENT, FRESNO

Mr. William E. Davis
MARIPOSA JOINT POWERS AUTHORITY
PO Box 729
Mariposa,CA 95338
Phone: (209) 966-7606 Fax: (209) 966-7810

5534-239-01 INTERCARE HOLDINGS INSURANCE SERVICES, INC., ROCKLIN

Ms. Ann Peters
Director
MERCED COUNTY SCHOOLS INSURANCE GROUP
632 W 13th Street
Merced,CA 95341
Phone: (209) 381-6726

5552-347-01 HAZELRIGG CLAIMS MANAGEMENT SERVICES, CHINO HILLS

Ms. Kristinn Olafsson
MERGE RISK MANAGEMENT JOINT POWERS AUTHORITY
3540 N. Lexington Ave
El Monte,CA 91731
Phone: (626) 453-3790 Fax: (626) 575-6160

5540-218-01 PEGASUS RISK MANAGEMENT, INC., MODESTO

Mr. George H. Linn
MODESTO CITY SCHOOLS
426 Locust Street
Modesto,CA 95351
Phone: (209) 550-3301 Fax: (209) 550-3485

5012-197-01 JT2 INTEGRATED RESOURCES, PLEASANTON

Conor L. Boughey
MONTEREY BAY AREA WORKERS' COMPENSATION FUND
100 Pine Street, 11th Floor
San Francisco,CA 94111
Phone: (415) 403-1400 Fax: (415) 874-4811

5403-146-02 ACCLAMATION INSURANCE MANAGEMENT SERVICES, FRESNO

Mr. Steven E. Negro
MONTEREY COUNTY LOCAL AGENCIES INSURANCE AUTHORITY
19900 Portola Drive
Salinas,CA 93908
Phone: (831) 455-1828

5551-99-01 Self Administered

Matthew Gowan
MONTEREY EDUCATIONAL RISK MANAGEMENT AUTHORITY
76 Stephanie Drive
Salinas,CA 93901
Phone: (831) 783-3300 Fax: (831) 783-3309

5002-145-33 MUNICIPAL POOLING AUTHORITY, WALNUT CREEK

Ms. Janet Selby
MUNICIPAL POOLING AUTHORITY
1911 San Miguel Drive #200
Walnut Creek,CA 94596
Phone: (925) 482-0010

5819-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Mr. Richard Averett
Executive Director
MUNICIPAL SERVICES AUTHORITY
P.O. Box 1350
Carmel Valley,CA 93924
Phone: (831) 308-1508 Fax: (831) 308-1509

5537-171-17 NORTH BAY SCHOOLS INSURANCE AUTHORITY, FAIRFIELD

5537-223-20 NORTHERN CLAIMS MANAGEMENT, LLC, SANTA ROSA

Ms. Janet DeGracia
Executive Director
NORTH BAY SCHOOLS INSURANCE AUTHORITY
380A Chadbourne Rd
Faifield,CA 94534
Phone: (707) 428-1830 Fax: (707) 428-1848

5510-062-11 KEENAN & ASSOCIATES, EUREKA

Mr. Stacy D. Lane
NORTH COAST SCHOOLS INSURANCE GROUP
901 Myrtle Ave
Eureka,CA 95501
Phone: (707) 445-7055 Fax: (707) 445-7084

5533-062-13 KEENAN & ASSOCIATES, RANCHO CORDOVA

Karen Waterhouse
NORTH VALLEY SCHOOLS INSURANCE GROUP
2868 Prospect Park Drive, Ste 600
Rancho Cordova,CA 95671
Phone: (916) 859-7160 Fax: (916) 859-7167

5548-062-13 KEENAN & ASSOCIATES, RANCHO CORDOVA

Ms. Beth Suter
Treasurer
NORTHEASTERN JOINT POWERS AUTHORITY
609 South Gold Street
Yreka,CA 96097
Phone: (530) 842-8406 Fax: (530) 842-8436

5006-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Ms. Liz M. Ehrenstrom
NCCSIF President
NORTHERN CALIFORNIA CITIES SELF INSURANCE FUND
1792 Tribute Rd Ste 450
Sacramento,CA 95815
Phone: (530) 538-2407 Fax: (530) 538-2513

5545-062-06 KEENAN & ASSOCIATES, SAN JOSE

Ms. Jennifer Lampley
JPA Manager
NORTHERN CALIFORNIA COMMUNITY COLLEGE POOL
1740 Technology Drive Ste 300
San Jose,ca 95110
Phone: (408) 441-0876 ext 6163 Fax: (408) 436-9308

5550-062-13 KEENAN & ASSOCIATES, RANCHO CORDOVA

Karen Waterhouse
NORTHERN CALIFORNIA COMMUNITY COLLEGES SELF-INSURANCE AUTHORITY
2868 Prospect Park Drive, Ste 600
Rancho Cordova,CA 95670
Phone: (916) 859-7160 Fax: (916) 859-7167

5406-99-01 Self Administered

Ms. Debbie M. Dragonetti
Claims Manager
NORTHERN CALIFORNIA SPECIAL DISTRICTS INSURANCE AUTHORITY
9280 W. Stockton Blvd. Ste 102
Elk Grove,CA 95758
Phone: (916) 691-1957 Fax: (916) 691-1927

5501-062-01 KEENAN & ASSOCIATES, TORRANCE

Tim McLellan
NORTHERN ORANGE COUNTY SELF-FUNDING WORKERS' COMPENSATION AGENCY
9470 Moody Street
Cypress,CA 90630
Phone: (714) 220-6941

5813-099-01 Self Administered

Cathy Yates
PTSC-MTA RISK MANAGEMENT AUTHORITY (PRMA)
One Gateway Plaza, Mail Stop 99-10-2
Los Angeles,CA 90012
Phone: (213) 922-4297 Fax: (213) 922-4351

5402-048-01 ATHENS ADMINISTRATORS, CONCORD

5402-239-05 INTERCARE HOLDINGS INSURANCE SERVICES, INC., ORANGE

Ms. Janet D. Kiser
PUBLIC AGENCIES SELF-INSURANCE SYSTEM (PASIS)
366 San Miguel Drive, Ste 312
Newport Beach,CA 92660
Phone: (949) 729-1633

5017-048-01 ATHENS ADMINISTRATORS, CONCORD

Mr. Kin Ong
Risk Manager
PUBLIC AGENCY RISK SHARING AUTHORITY OF CALIFORNIA
1525 Response Rd, Ste 1
Sacramento,CA 95815 Phone: (916) 927-7727

5004-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Mr. Mark D. Reynolds
Finance Director
PUBLIC AGENCY SELF-INSURED SYSTEM (PASIS)
22400 Headquarters Drive
Apple Valley,CA 92307 Phone: (760) 247-7618 Fax: (760) 247-3895

5014-092-60 ADMINSURE, INC., DIAMOND BAR

5014-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

5014-316-02 CORVEL ENTERPRISE COMP, INC., RANCHO CUCAMONGA

Mr. Scott B. Ellerbrock
General Manager
PUBLIC ENTITY RISK MANAGEMENT AUTHORITY "PERMA"
36-951 Cook Street, Ste 101
Palm Desert,CA 92211 Phone: (760) 360-4966 Fax: (760) 360-3264

5013-99-01 Self Administered

Elena Piazzisi
REDWOOD EMPIRE MUNICIPAL INSURANCE FUND
P.O. Box 885
Sonoma,CA 95476 Phone: (707) 938-2388

5536-157-05 REDWOOD EMPIRE SCHOOLS INSURANCE GROUP, SANTA ROSA

Ms. Melody Tucker
Claims Manager
REDWOOD EMPIRE SCHOOLS INSURANCE GROUP
5760 Skylane Blvd, Ste 100
Windsor,CA 95492 Phone: (707) 836-0779 Fax: (707) 836-9479

5555-062-03 KEENAN & ASSOCIATES, RIVERSIDE

Ms. Suzanne Trowbridge
RSRMA JPA Manager
RIVERSIDE SCHOOLS RISK MANAGEMENT AUTHORITY
PO Box 79991
Riverside,CA 92513 Phone: (951) 175-0190 ext 1184 Fax: (951) 715-0166

5405-99-01 Self Administered

Ms. Nancy Rice
Supervisor
SAN BERNARDINO RISK MANAGEMENT
222 W. Hospitality Lane, Third Floor
San Bernardino,CA 92415
Phone: (909) 386-9025 Fax: (909) 386-8711

5503-316-03 CORVEL ENTERPRISE COMP, INC., SAN DIEGO

Felicia Amenta
SAN DIEGO COUNTY SCHOOLS RISK MANAGEMENT JOINT POWERS AUTHORITY
6401 Linda Vista Rd, Room 505
San Diego,Ca 92111
Phone: (858) 571-7221 Fax: (858) 279-6236

5514-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Mr. Marc Chaldu
Assistant Superintendent
SAN GABRIEL VALLEY SCHOOL DISTRICTS' SELF-INSURANCE AUTHORITY
500 N Loraine Ave
Glendora,CA 91741
Phone: (626) 963-1611

5512-062-06 KEENAN & ASSOCIATES, SAN JOSE

James C. Thomas
SAN JOAQUIN COUNTY SCHOOLS WORKERS' COMPENSATION INSURANCE GROUP
2901 Arch-Airport Rd
Stockton,CA 95206
Phone: (209) 468-4800 Fax: (209) 468-9244

5506-062-12 KEENAN & ASSOCIATES, REDWOOD CITY

Ms. Cathy Reineke
Executive Director
SAN MATEO COUNTY SCHOOLS INSURANCE GROUP
1791 Broadway Street
Redwood City,CA 94063
Phone: (650) 365-9180 Fax: (650) 365-9263

5524-062-06 KEENAN & ASSOCIATES, SAN JOSE

Ms. Debra Fisher
Controller
SANTA CLARA COUNTY SCHOOLS INSURANCE GROUP
645 Wool Creek Drive, Ste 62
San Jose,CA 95112
Phone: (408) 283-6234

5507-062-03 KEENAN & ASSOCIATES, RIVERSIDE

5507-062-06 KEENAN & ASSOCIATES, SAN JOSE

Mr. Steve Bour
Senior Account Manager
SANTA CRUZ/SAN BENITO COUNTY SCHOOL INSURANCE GROUP
1740 Technology Drive, #300
San Jose,CA 95110
Phone: (408) 441-0876 ext 6152 Fax: (408) 436-9036

5504-156-01 SCHOOLS INSURANCE AUTHORITY, SACRAMENTO

Ms. Debra A. Russell
Director Workers' Compensation Prog
SCHOOLS INSURANCE AUTHORITY
PO Box 276710
Sacramento,CA 95827
Phone: (916) 364-1281 Fax: (916) 362-2824

5525-146-05 ACCLAMATION INSURANCE MANAGEMENT SERVICES, SACRAMENTO

Ms. Beverly C. Wilkinson
CFO
SCHOOLS INSURANCE GROUP
550 High Street, Ste 201
Auburn,CA 95603
Phone: (530) 823-9582 ext 203 Fax: (530) 823-3101

5538-062-06 KEENAN & ASSOCIATES, SAN JOSE

Ms. Barbara S. Rhodes
Accountant
SCHOOLS INSURANCE GROUP, NORTHERN ALLIANCE
2240 Old River Rd
Ukiah,CA 95482
Phone: (707) 467-5050 Fax: (707) 462-0379

5527-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Ms. Karen Paparella
Director of External Services
SCHOOLS INSURANCE PROGRAM FOR EMPLOYEES
3350 Education Drive
San Luis Obispo,CA 93405
Phone: (805) 782-7212

5530-062-01 KEENAN & ASSOCIATES, TORRANCE

Christine Gerbasi
SCHOOLS LINKED FOR INSURANCE MANAGEMENT
2355 Crenshaw Blvd., #200
Torrance,CA 90501
Phone: (310) 212-0363 Fax: (310) 212-0300

5518-155-05 SELF INSURED SCHOOLS OF CALIFORNIA (SISC), BAKERSFIELD

Mr. Gabriel C. Rodriguez
SELF-INSURED SCHOOLS OF CALIFORNIA (SISC)
P.O. Box 1847
Bakersfield,CA 93303
Phone: (661) 636-4710 Fax: (661) 636-4721

5543-152-10 LWP CLAIMS SOLUTIONS, INC., SACRAMENTO

Brooks j. Rice
SHASTA-TRINITY SCHOOLS INSURANCE GROUP
350 Hartnell Ste D
Redding,CA 96002
Phone: (530) 221-6444 Fax: (530) 221-6225

5020-132-01 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, ROSEVILLE

Ms. Susan Adams
SMALL CITIES ORGANIZED RISK EFFORT
1792 Tribute Rd, Ste 450
Sacramento,CA 95815
Phone: (916) 643-2704 Fax: (916) 643-2750

5806-132-06 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, STOCKTON

5806-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Mr. Cornelius P. Frydendal
Chief Financial Officer
SPECIAL DISTRICT RISK MANAGEMENT AUTHORITY
1112 I Street, Ste 300
Sacramento,CA 95814
Phone: (916) 231-4141 ext 139 Fax: (916) 231-4111

5003-147-05 THE CITIES GROUP, BURLINGAME

Mr. Paul H. Chrisman
THE CITIES GROUP
500 Airport Boulevard, Ste 420
Burlingame,CA 94010
Phone: (650) 343-1428 Fax: (650) 343-2177

5818-346-01 TRINDEL INSURANCE FUND, WEAVERVILLE

Ms. Lisa J. Mitchell
Director Workers' Compensation Program
TRINDEL INSURANCE FUND
P.O. Box 2069
Weaverville,CA 96093
Phone: (530) 623-2322 Fax: (530) 623-5019

5542-062-13 KEENAN & ASSOCIATES, RANCHO CORDOVA

Ken Hochnadel
TULARE COUNTY SCHOOLS INSURANCE GROUP WORKERS' COMPENSATION JPA
P.O.Box 5091
Visalia,CA 93278
Phone: (559) 733-6304 Fax: (559) 737-4378

5547-062-13 KEENAN & ASSOCIATES, RANCHO CORDOVA

5547-152-10 LWP CLAIMS SOLUTIONS, INC., SACRAMENTO

Ms. Diana Rappaport
Executive Director
TUOLUMNE JOINT POWERS AUTHORITY
175 S Fairview Lane
Sonora,CA 95370
Phone: (209) 536-2035 Fax: (209) 533-9513

5528-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Ms. Bina Hari
Executive Director
VALLEY INSURANCE PROGRAM (VIP)
170 W. San Jose Ave
Claremont,CA 91711
Phone: (909) 398-0636

5805-146-05 ACCLAMATION INSURANCE MANAGEMENT SERVICES, SACRAMENTO

Mr. Brian Kelley
Administrator
VECTOR CONTROL JOINT POWERS AGENCY (VCJPA)
1750 Creekside Oaks Drive Ste 200
Sacramento,CA 95833
Phone: (916) 244-1127 Fax: (916) 244-1199

5517-132-12 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, OXNARD

Ms. Elizabeth Atilano
Executive Director
VENTURA COUNTY SCHOOLS SELF-FUNDING AUTHORITY
5189A Verdugo Way
Camarillo,CA 93012
Phone: (805) 383-1969 Fax: (805) 383-1971

5532-132-10 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, UPLAND

Ann Kantor
WESTERN ORANGE COUNTY SELF-FUNDED WORKERS' COMPENSATION AGENCY
200 Kalmus Drive
Costa Mesa,CA 92626
Phone: (714) 966-4059

5523-132-13 YORK INSURANCE SERVICES GROUP, INC.-CALIFORNIA, RIVERSIDE

Jon E. McNeil
WHITTIER AREA SCHOOLS INSURANCE AUTHORITY
7211 S. Whittier Ave
Whittier,CA 90602
Phone: (562) 789-3045 Fax: (562) 907-9425

5007-152-10 LWP CLAIMS SOLUTIONS, INC., SACRAMENTO

Mr. Jeffrey Tonks
CEO Risk Manager
YOLO COUNTY PUBLIC AGENCY RISK MANAGEMENT INSURANCE AUTHORITY
77 W. Lincoln Ave
Woodland,CA 95695
Phone: (530) 666-4456 Fax: (530) 666-4491

APPENDIX C

Self-Insurers and Solvency in California

Bickmore

March 4, 2013

Mr. Martin Brady
Executive Director
Schools Insurance Authority
9800 Old Placerville Road
Sacramento, CA 95827

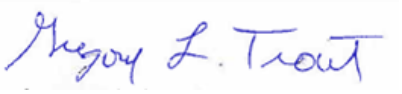
RE: Self-Insurers and Solvency in California

Dear Martin:

Attached is a report on self-insurance and solvency risks of private and public sector employers in California. The purpose of this report is to provide information to the stakeholders and regulators so informed decisions can be made on how best to insure the continuation of workers' compensation benefits to injured workers. The Commission on Health, Safety, and Workers' Compensation (CHSWC) has been directed by the California Legislature to conduct and issue a report on the topic of "solvency and performance of public self-insured workers' compensation programs" by October 2013 (Labor Code 3702.4).

This report was prepared by Bickmore on behalf of its clients and organizations that represent both private and public employers. The data contained in this report was obtained from public information sources, primarily the California Self-Insurers' Security Fund and the Department of Industrial Relations, Office of Self-Insurance Plans. We appreciate their continued cooperation and support of the self-insurance sector in California.

Sincerely,



Gregory L. Trout
Chief Executive Officer

History of Self-Insurance

California has long maintained a system whereby private companies and public entities can self-insure their workers' compensation exposures. Legislation and regulations governing self-insurance first appeared in the 1950s. More stringent requirements were developed and have continued for private self-insurers versus public self-insureds. Private self-insureds are required to post financial security deposits with the state. The purpose of the security deposits is to provide financial resources for the continued payment of workers' compensation benefits to injured workers in the event the private employer becomes insolvent. Public entity self-insureds have never been required to post security deposits.

The first California public entities to become self-insured for workers' compensation were the County of Los Angeles, the City and County of San Francisco, and the City of San Diego. In the 1970s many more cities, counties, educational institutions, and special districts moved from the California State Compensation Insurance Fund (State Fund) to self-insurance. The State of California has also long been permissibly uninsured, although its claims are handled by the State Fund.

The public sector JPA movement began in the mid-1970s: first with the Schools Insurance Authority and the Self-Insured Schools of Kern County in 1974, closely followed by many municipal, county, and special district JPAs in the late 1970s.

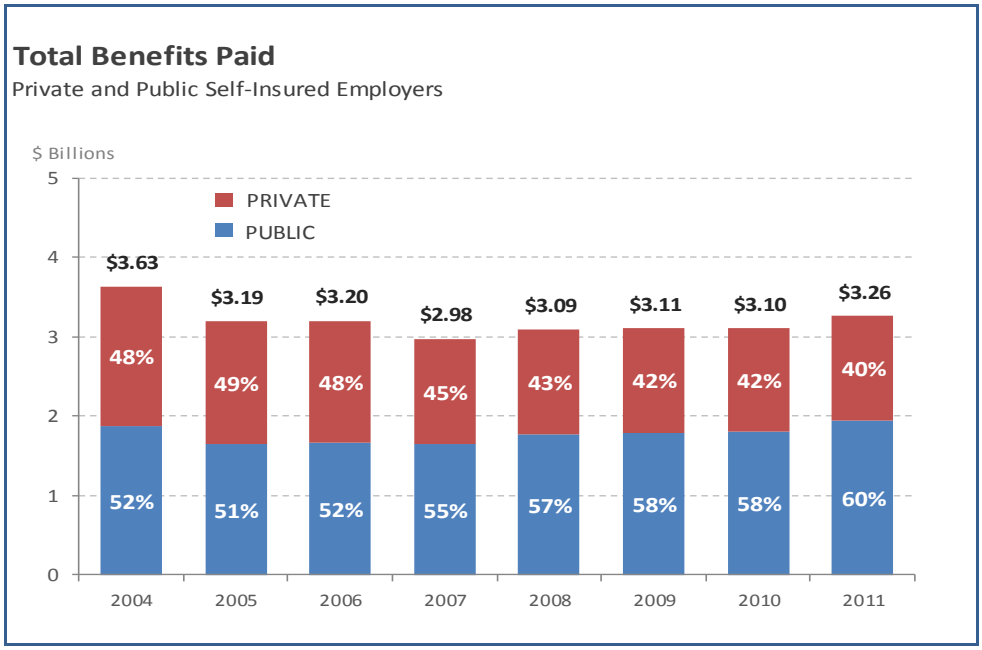
Demographics of Self-Insurance in California (2012)

California has a very significant self-insurance sector, the largest in the United States in terms of number of employers and payroll covered.

- Private Self-Insureds (active)
  - Individual self-insurers 447
  - Self-Insured Groups 22
- Public Self-insureds (active)
  - Individual self-insureds 365
  - JPAs 89
- State of California (permissibly uninsured)

Self-insureds now represent nearly 30% of the overall payroll of all employers in California. Of all self-insureds, the public sector represents 60% of all benefit payments (indemnity and medical) compared to 40% for the private sector (refer to Figure 1). In fiscal year 2010/11, public sector self-insureds paid $1.95 billion in benefits. Private self-insureds paid $1.31 billion.

Figure 1
Benefit Payments by Year
2004 - 2011



A more detailed breakdown between indemnity and medical benefit payments is shown in Appendices A and B.

Insolvencies and Defaults

Public Entity Employers

Since the beginning of public sector self-insurance, a span of over 50 years, no individual public entity or JPA has defaulted on the payment of workers' compensation benefits. There have been a number of bankruptcy filings (Chapter 9) by individual public entities -- Orange County the most notable in the 1990s, and more recently the municipalities of Vallejo, Stockton, San Bernardino, and the Town of Mammoth Lakes. None of these entities has defaulted on their workers' compensation benefit payments.

No self-insurance JPA has ever filed for bankruptcy protection. JPAs are considered special districts under the Government Code and could file under Chapter 9. However, for the nearly 40 years of their existence, no JPA bankruptcy has occurred. Members of a JPA, like private self-insured group members (SIGs), are liable for each other's obligations within the JPA under the joint and several indemnity agreements specified in the Labor Code and required by the Department of Industrial Relations (DIR). Consequently, if a member entity of the JPA were to go into bankruptcy, the other members of the JPA would be jointly and severally liable for the continued benefit payments to the bankrupt member's employees. The JPA could then seek recovery against the bankrupt member as an unsecured creditor.

Private Sector Employers

The experience of private sector self-insurers and self-insured groups (SIGs) is vastly different from that of the public sector, which has experienced no defaults. The first individual self-insurer to default was Signal Trucking in 1968, and since then there have been 75 defaults (see **Appendix C**). In 1984, California Canners and Growers Cooperative (Cal Canners) defaulted. This was the first time the security deposit posted by the self-insurer was insufficient to cover the defaulted employer's workers' compensation obligations. This default led to the formation of the California Self-Insurers Security Fund (SISF) as the guaranty fund for defaulted private individual and group self-insurers.

Although SIGs were allowed by legislation and regulation in 1993, the first private SIG did not form until 2002. There are currently 22 active and nine revoked SIGs. There has been one default (the Contractors Access Program in 2010). There is concern that others will follow.

Guaranty Funds Protecting Injured Workers

Workers' compensation benefits for employees of *insured* employers are protected by the California Insurance Guarantee Association **(CIGA)** which was created in 1973 as a private non-profit entity. Employees of private self-insurers and self-insured groups are protected by the California Self-Insurers' Security Fund **(SISF).** After the default of Cal Canners, legislation was passed in 1984 (the Young-LaFollette Act) creating SISF as a non-profit mutual benefit corporation which then assumed the payment of workers' compensation benefits to injured workers of all private self-insurers that have defaulted since that date. SISF has continued to serve as the safety net for injured workers, as the security deposits required by DIR have generally been insufficient to pay all the necessary benefits and claims adjusting costs. On average, security deposits have been only about 55% of the ultimate projected costs.

A flow chart (**Appendix D**) shows the sources of recovery from the various types of employer workers' compensation coverage arrangements (insured, individual self-insured, JPA, and SIG). There is no "guaranty fund" or financial backstop for employees of public sector individual self-insurers or JPA member entities. However, to-date there has been no occasion for a public sector security fund to be seriously considered in light of past experience. Formation of an entity similar to SISF was considered by CAJPA in the 1990s, but no action was taken.

SB 863, the workers' compensation reform bill passed in 2012, requires the Commission on Health Safety and Workers' Compensation (CHSWC) conduct a study of "*the costs of administration, workers' compensation benefit expenditures, and solvency and performance of public self-insured workers' compensation programs, as well as provisions in the event of insolvencies*" (Labor Code Section 3702.4). The report is due by October 1, 2013.

Risk Exposure to Employees of Public Sector Employers

The experience of the past is not necessarily an indication of the future exposure of defaults by public sector self-insurers. The recent recession and continuing financial distress of the public sector has raised concerns about the financial viability of certain public entities, their ability to meet their financial obligations, and the treatment of self-insured obligations in a Chapter 9 bankruptcy proceeding.

The financial risk appears to be highest with cities and school districts. Counties may pose less risk since they are subdivisions of the State, and as such, the State may be the financial guarantor in the event of bankruptcy and default. A similar relationship to the State may also exist with K-12 school districts.

The greatest exposure to injured workers may be with municipalities and special districts that are self-insured outside of JPAs. There has been no evidence that any of the 89 public sector JPAs is financially troubled. Most JPAs operate like assessable mutual cooperatives or insurance reciprocals. Assessments are levied and collected from the members when needed. Non-payment of assessments is generally pursued aggressively by the JPAs. No serious non-payment of assessments has threated the solvency of a JPA, and it is highly unlikely that the members of a JPA would let it fall into bankruptcy.

JPAs provide greater security for the employees of their member agencies because: (1) protection through the Labor Code joint and several liability requirement; (2) the more predictable, stable revenue sources available to the public sector entities compared to private companies; (3) the past proven history of assessment collectability; and (4) the greater financial stability of a group of entities as opposed to an individual entity.

Funding a Public Entity Security Fund

However, if the DIR and public sector self-insureds determine that a public entity security fund is necessary as a safety net for injured workers of public employers, one model to follow would be SISF. The public sector guaranty fund could be funded by assessments as needed following, or immediately preceding, a default. The statute creating SISF in 1984 stated that "….. *no member shall be assessed at one time in excess of 1.5 percent of the benefits paid by the member for claims incurred during the previous calendar year as a self-insurer, and total annual assessments in any calendar year shall not exceed 2 percent of the benefits paid for claims incurred during the previous calendar year.*" (Labor Code Section 3745). This remains in effect.

If a similar funding mechanism were enacted for the public sector, it would generate revenue for benefit payments in the current year as shown in Figure 2.

Figure 2
Potential Annual Revenue from Assessments on Public Sector Employers

	JPAs	PEs	Total
Benefits Paid (Ind & Med) in 2010-11 for Claims Occurred in 2010-11*	$82,000,391	$260,787,971	$342,788,362
Assessment %	2%	2%	
Total Revenue Generated	$1,640,008	$5,215,759	$6,855,767

* Source: Information published on DIR OSIP's website for the Public Self-Insured Annual Report.

However, analysis by Bickmore indicates this total assessment amount would be inadequate to cover the potential cash flow needs from the default of a large municipality, or a number of medium size entities.

Public Sector Defaults -- Options for Consideration

We have identified four basic options for policy makers and stakeholders to consider.

1. **Maintain the status quo.** No public sector defaults have occurred in over half a century, so there does not appear to be a need for any change in the system.

2. **Require security deposits**. This could be a similar system to that imposed on the private sector. The cost to the public sector would be minimal, but a large amount of financial assets would be restricted since most public entities would post cash and securities, not letters of credit or surety bonds. The cost of state regulation would be high, similar to that of the cost of regulating the private sector.

   Many JPAs and individual self-insured entities obtain frequent actuarial estimates of unpaid liabilities and pre-fund those liabilities. The accreditation program of the California Association of Joint Powers Authorities (CAJPA) requires that JPAs receive actuarial estimates and that they be funded with a conservative contingency margin. Many JPAs in California are accredited. Such JPAs and individual self-insureds that identify and fund their liabilities could be exempted from a security deposit requirement, or at a minimum, be allowed to discount their liabilities. Another alternative would be to require security deposits on entities with low credit ratings.

3. **Require that a public entity security fund be created**. Public entities could create a non-profit association similar to SISF and CIGA, or a statewide JPA to insure the payment of benefits to any public entity self-insured or JPA that defaults. The cost of this mechanism could range from minimal to substantial, depending on the mechanism created, the funding requirements, and the number of defaults that might occur in the future.

4. **Require more regulatory oversight**. The DIR, the Department of Finance, and the State Controller's Office of Local Government Fiscal Affairs could assume a more active role in monitoring the financial solvency and default risk posed by public entity self-insureds. This would most likely have a very high regulatory cost and compliance cost. How public entities budget and fund their workers' compensation liabilities varies widely from entity to entity. There is currently no requirement that public entities fund their workers' compensation liabilities or keep reserve funds in separate, discreet internal service or trust funds.

Future Action

If the State of California and other stakeholders are concerned about the exposure of financial failure and default of public sector self-insureds, then the study required by SB 863 should be monitored closely and input provided by public sector organizations such as:

- CAJPA;
- PARMA;
- League of California Cities;
- California State Association of Counties;
- California Association of Schools Boards Association;
- California Association of School Business Officials;
- California Special District Association; and
- Association of California Water Agencies.

The study should include a detailed analysis of the potential risk by types of public entities and their respective legal status under the Federal bankruptcy law. The relationship of public entities to the State of California as a potential financial guarantor should also be closely examined.

Appendix A

Total Benefits Paid - - Indemnity and Medical

Private and Public Self-Insured Employers

YEAR	PRIVATE TOTAL (%)	PUBLIC TOTAL (%)	TOTAL PAID
A	B	C	D=B+C
04 | 03/04	1,743,905,454 (48)	1,883,869,272 (52)	3,627,774,726
05 | 04/05	1,549,850,220 (49)	1,642,577,096 (51)	3,192,427,316
06 | 05/06	1,537,081,925 (48)	1,666,271,661 (52)	3,203,353,586
07 | 06/07	1,327,545,263 (45)	1,647,674,361 (55)	2,975,219,624
08 | 07/08	1,326,292,117 (43)	1,765,756,685 (57)	3,092,048,802
09 | 08/09	1,312,027,763 (42)	1,795,913,616 (58)	3,107,941,379
10 | 09/10	1,290,461,205 (42)	1,812,467,501 (58)	3,102,928,706
11 | 10/11	1,308,905,714 (40)	1,951,024,734 (60)	3,259,930,448
Total	11,396,069,661 (45)	14,165,554,926 (55)	25,561,624,587
Average	1,424,508,708 (45)	1,770,694,366 (55)	3,195,203,073

NOTES

1.) Data from Statewide Totals provided by DIR/OSIP

2.) Total Benefits paid during year (includes all case expenditures)

3.) Private benefits reported on calendar year, public reported on fiscal.

4.) Does not include the State of California.

Appendix B

Public Self-Insured Employers

Total Benefits Paid - - Indemnity and Medical

YEAR	INDEMNITY PAID (%)	MEDICAL PAID (%)	TOTAL PAID
A	B	C	D=B+C
2003 / 04	951,376,796 (51)	932,492,476 (49)	1,883,869,272
2004 / 05	864,997,452 (53)	777,579,644 (47)	1,642,577,096
2005 / 06	897,383,709 (54)	768,887,952 (46)	1,666,271,661
2006 / 07	868,646,105 (53)	779,028,256 (47)	1,647,674,361
2007 / 08	878,439,826 (50)	887,316,859 (50)	1,765,756,685
2008 / 09	846,463,847 (47)	949,449,769 (53)	1,795,913,616
2009 / 10	833,513,351 (46)	978,954,150 (54)	1,812,467,501
2010 / 11	907,485,883 (47)	1,043,538,851 (53)	1,951,024,734
Total	7,048,306,969 (50)	7,117,247,957 (50)	14,165,554,926
Average	881,038,371 (50)	889,655,995 (50)	1,770,694,366

Private Self-Insured Employers

Total Benefits Paid - - Indemnity and Medical

YEAR	INDEMNITY PAID (%)	MEDICAL PAID (%)	TOTAL PAID
A	B	C	D=B+C
2004	941,048,533 (54)	802,856,921 (46)	1,743,905,454
2005	860,931,930 (56)	688,918,290 (44)	1,549,850,220
2006	736,255,915 (48)	800,826,010 (52)	1,537,081,925
2007	651,495,095 (49)	676,050,168 (51)	1,327,545,263
2008	593,142,897 (45)	733,149,220 (55)	1,326,292,117
2009	550,287,340 (42)	761,740,423 (58)	1,312,027,763
2010	529,956,700 (41)	760,504,505 (59)	1,290,461,205
2011	550,233,459 (42)	758,672,255 (58)	1,308,905,714
Total	5,413,351,869 (48)	5,982,717,792 (52)	11,396,069,661
Average	676,668,984 (48)	747,839,724 (52)	1,424,508,708

NOTES

1.) Data from Statewide Totals provided by DIR/OSIP

2.) Total Benefits paid during year (includes all case expenditures)

3.) Private benefits reported on calendar year, public reported on fiscal.

4.) Does not include the State of California.

Appendix C

Private Self-Insured Defaults
As of December 31, 2012

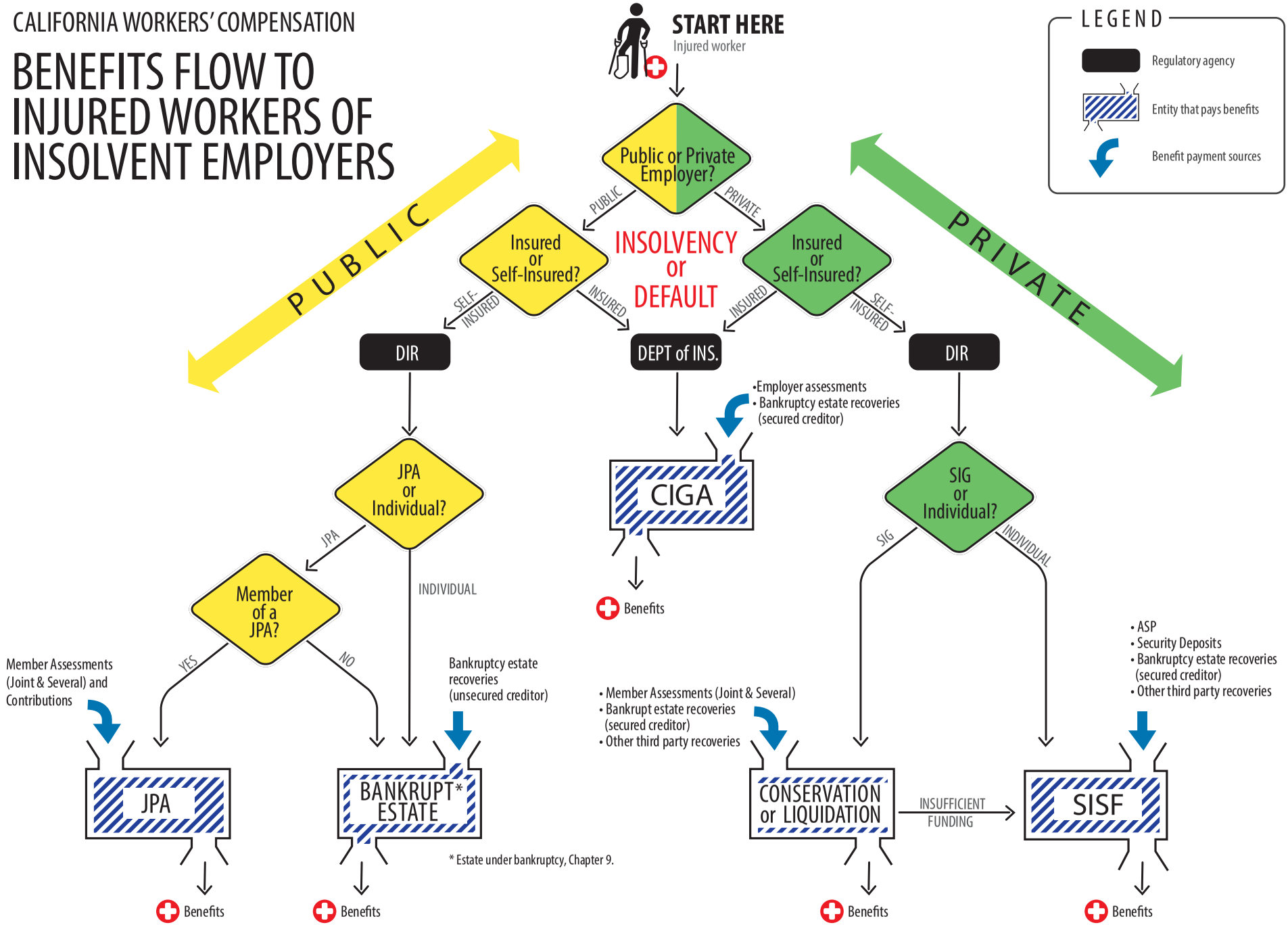
Estate	Year
Signal Trucking	1968
Certified Alloy Products, Inc.	1983
California Canners and Growers	1984
IML Freight Inc.	1985
Leeway Motor Freight, Inc.	1985
Delta Lines	1986
Monolith Portland Cement	1986
Powerine Oil Company	1986
Kaiser Steel Corporation	1987
Knudsen Corporation	1987
United Foam Corporation	1988
Strolee of California	1988
Cook Brothers Equipment Co.	1989
Davis Walker Corporation	1989
Smith Transportation	1989
Foster's West	1989
James Allen & Sons	1990
Pie Nationwide Inc.	1990
Transcon Lines	1990
Wilson Food Corporation	1990
Yellow Cab of Los Angeles	1990
Richards Rack	1990
Lone Star Industries	1991
R.B. Furniture	1991
Stanford Applied Engineering	1991
United Concrete Pipe Company	1991
Interpace Corporation	1992
Thrifty Oil Company	1992
Intermark, Inc.	1992
Anderson School Equipment	1993
Purity Stores	1993
Gust K. Newberg	1994
Ingleside Lodge Hospital	1994
Los Medanos Health Care Corp.	1994
Los Angeles Soap Company	1995

Source: California Self-Insurers Security Fund, 2013

Estate	Year
Bryant Universal Roofing	1996
Standard Brands Paint Co.	1996
The Pullman Company	1996
Montgomery Ward & Co.	1987
Stueve Bros. Farms	1997
California Stevedore and Ballast	1999
Garrett Freightlines/Anr	1999
Western Union/New Valley Corp.	1999
Applied Magnetics Corporation	2000
Rice Growers Association	2000
Western Medical Enterprises	2000
Homebase, Inc.	2001
San Francisco French Bread Co.	2001
Parkview Community Hospital	2002
Santa Clarita Health Care	2002
Eel River Sawmills, Inc.	2002
Bethlehem Steel Corporation	2003
Dillingham Construction	2003
Fleming Companies, Inc.	2003
Waterman Industries, Inc.	2004
Oakwood Homes/Golden West Homes	2004
Moore Dry Dock	2005
Barth & Dreyfuss of California	2005
West Point Stevens	2006
Rexhall Industries	2006
Lorber Industries, Inc.	2006
Amcast Industrial Corporation	2006
National RV	2007
ASARCO	2007
Mervyn's	2008
Circuit City	2009
Fairchild	2009
Fleetwood	2009
Triple A Machine	2010
Contractors Access Program of California	2010
Interlake Material Handling	2011
Mid Valley Plastering	2011
Mainstay Business Solutions	2011
T and R Painting and Drywall	2011
Administrative Concepts Corp.	2012
Grossman's Inc.	2012

CALIFORNIA WORKERS' COMPENSATION

BENEFITS FLOW TO INJURED WORKERS OF INSOLVENT EMPLOYERS



APPENDIX D

CAJPA Accreditation Standards

California Association of Joint Powers Authorities (CAJPA)

ACCREDITATION STANDARDS

As of July 1, 2013

These standards replace all previous versions.

California Association of Joint Powers Authorities (CAJPA)
1215 K Street Suite 940
Sacramento, CA 95814
(916) 231-2139
www.cajpa.org

TABLE OF CONTENTS

ACCREDITATION STANDARDS

The California Association of Joint Powers Authorities (CAJPA) Accreditation Program was developed to establish standards by which risk sharing California JPAs can measure their ability to provide efficient services to their member agencies.

The stated purposes of the CAJPA Accreditation Program are:

- To assist managers of JPAs in achieving standards of quality for essential elements of JPA management.
- To assure public officials, governing board members and the public that JPAs are operating with professionalism and meet industry standards of excellence.
- To address the concerns of state regulators and legislators that JPAs are well managed, financially secure, and effectively self-regulated.

To meet these purposes the CAJPA Board of Directors has adopted standards by which JPAs are evaluated. The standards are reviewed and updated annually.

I. GOVERNING DOCUMENTS & ADMINISTRATIVE CONTRACTS

OBJECTIVE

To determine that the governing documents and contracts with major service providers contain all essential provisions.

STANDARDS

A. The JPA maintains in its records a signed original of the joint exercise of powers agreement or other acceptable documentation from each member agency. (Mandatory)

B. The agreement shall contain all of the provisions required in the enabling legislation in Section 6500 et. seq. of the Government Code.

1. Section 6503 - requires that the purpose or power to be exercised and the method by which the purpose will be accomplished or the manner in which the power is to be exercised is to be stated in the agreement. (Mandatory)

2. In accordance with provisions of §6505.5 or §6505.6 the agreement must designate a treasurer and an auditor. (Mandatory)

3. Section 6511 - requires that the agreement provide for the disposition, division or distribution of any property acquired as the result of the joint exercise of powers. (Mandatory)

4. Section 6512 or 6512.2- requires that the agreement provide that any surplus money on hand after the completion of its purpose shall be returned in proportion to the contributions made or, in the alternative, in proportion to contributions made and claims or losses paid. (Mandatory)

C. The following are described in the appropriate governing document (agreement, bylaws, resolutions, master plan documents, memorandums of coverages, memorandums of understandings, adopted board policies or other similar documents):

1. Eligibility criteria; (Mandatory)
2. Procedure for electing officers; (Mandatory)
3. Terms of office; (Mandatory)
4. Record retention policy; (Excellence only)
5. Power and duties of Board; (Mandatory)
6. Indemnification for liability; (Excellence only)
7. Provisions for dissolution of pool; (Mandatory)
8. Provisions for financial audit; (Mandatory)

9. Provisions for actuarial study; (Excellence only)
10. Provisions for claims audits; (Excellence only)
11. Provisions for assessments and distributions; (Mandatory)
12. Provision for withdrawal from a program or JPA as a whole; (Mandatory)
13. Provision for termination (such as the right to cancel for non-payment of premiums, underwriting problems, or the failure to adequately control risks); (Mandatory)
14. Provision for an annual meeting of the board; (Mandatory)
15. Provision for the resolution of coverage and claims disputes with its Members; (Excellence only)
16. Provision for obligations of members. (Mandatory)

D. 1. The JPA is in substantial compliance with its governing documents. (Mandatory)
2. The JPA Governing Board has reviewed the prior Accreditation Report for findings and recommendations. (Excellence)

E. The JPA has written contracts with firms or individuals that provide program administration services, insurance brokerage services, claims administration services, or have access to JPA funds. Such contracts shall include: (Mandatory)

1. Scope of services of the contractor;
2. Indemnification and insurance requirements;
3. Compensation;
4. Term of Agreement;
5. Contract cancellation provisions;
6. Ownership of records;
7. Duty to disclose conflicts of interest including but not limited to other sources of income; and
8. Language addressing how and by whom fines and penalties are to be paid. (Applies to workers' compensation third party claims administrators only).

F. The JPA has certificates of insurance on file evidencing coverage required in contracts under E., above. (Mandatory)

G. If the JPA offers employee benefit programs to its member agencies, a written plan description must be provided to the covered employees. (Mandatory)

H. The JPA keeps minutes of all meetings of its governing body and major committees. (Mandatory)

II. GOVERNMENT RULES

OBJECTIVE

To determine that the JPA complies with the various reporting requirements and other mandates imposed by the State of California and its regulatory agencies.

STANDARDS

A. The JPA has filed a notice of its joint exercise of powers agreement and any amendments or membership changes with the Secretary of State identifying (GC 6503.5): (Mandatory)

1. The name of each member;
2. The effective date;
3. The purpose or power to be exercised; and
4. A description of the amendment, if any.

B. The JPA has made the necessary Public Agency Roster filing with the Secretary of State and county clerks in the counties in which the JPA has offices. (GC 53051) (Mandatory)

C. The JPA has adopted a Conflict of Interest Code, and formally reconsiders it prior to October 1st of all even numbered years, and oversees any required filings of the Statements of Economic Interest with the Fair Political Practices Commission or the designated filing agent. (GC 87306.5) (Mandatory)

D. If the JPA is subject to Education Code 17566(e) or 81602(e), it procures triennial actuarial studies on its employee benefit programs. (Mandatory)

E. The JPA's governing body approves its annual budget. (GC 6508) (Mandatory)

F. The JPA has filed the"Special Districts Financial Transactions Report" with the State Controller/Division of Local Government Fiscal Affairs Special District Unit. (GC 53891) (Mandatory)

G. The JPA has filed its Audited Financial Statement with each member and with the county auditor of the county where the home office of the JPA is located within 12 months of the end of each fiscal year. (GC 6505(c)) (Mandatory)

H. JPA and/or member has a valid certificate(s) of consent to self-insure Workers' Compensation (Labor 3700) and files any changes in claims administrators (8 Cal. Code Regulations § 15402) and the necessary annual reports with the Department

of Industrial Relations on or before October 1st of each year. (Labor 3702.2) (Mandatory)

I. The JPA properly posts meeting notices and conducts its meetings in accordance with the Brown Act. (GC 54954.2, GC 54953.2 and 42 U.S.C. Sec. 12132) (Mandatory)

J. JPA's that self-insure medical benefits plans annually file a copy of their audit with a declaration to the Department of Managed HealthCare as required for exemption from Knox-Keene requirements. (Code of Civil Procedure 2015.5) (Excellence only)

K. JPA has implemented a process to ensure those mandated to comply with ethics training (GC 53235.2) have met the requirements.

III. INSURANCE AND COVERAGES

OBJECTIVE

To determine that the JPA properly identifies and handles its own exposures to loss, secures any insurance required by its governing documents and/or any other legal requirement, monitors the adequacy of coverages it provides to its members and maintains permanent policy files.

STANDARDS

A. JPA Internal Operations

1. The JPA maintains an official bond as required by state law (GC 6505.1 and 6505.5). The JPA requires fidelity coverage for person or persons that are entrusted with any property of the JPA. (Mandatory)

2. The JPA insures or self-insures for the following exposures as appropriate: (Mandatory)

    a. Public Officials Errors and Omissions;
    b. Employee Fidelity; (insurance only, self-insurance not allowed)
    c. Commercial General Liability;
    d. Workers' Compensation;
    e. Fiduciary Liability;
    f. Auto Liability; and
    g. Property.

3. For the risk retained by the pool the JPA provides a coverage document that includes or references:
(Mandatory)

    a. Declaration page
    b. Definitions
    c. Insuring agreement
    d. Conditions
    e. Exclusions

B. Programs for Member Agencies

1. The JPA evaluates its insurers, excess insurers, and reinsurers and risk pools for quality, stability, and financial solvency. (Mandatory)

C. The JPA keeps all memoranda of coverages and insurance policies permanently on file. (Mandatory)

D. The JPA maintains and distributes coverage agreements and insurance policies as appropriate. (Mandatory)

IV. ACCOUNTING & FINANCE

OBJECTIVE

To determine that the JPA complies with all applicable accounting standards and has adopted an investment policy.

STANDARDS

A. The JPA materially adheres to all applicable GAAP, GASB, and other accounting standards. (Mandatory)

B. The JPA issues to its members periodic financial reports at least annually or more frequently if required by its governing documents. (Mandatory)

C. Independent Financial Audits

1. The JPA has undergone annual independent financial audits conducted by a Certified Public Accountant in accordance with generally accepted auditing standards, a report of which has been made available to all members as required by its governing documents. (Mandatory)

2. If the JPA has received an opinion other than an unqualified opinion on the audit of its financial statements, the JPA governing board has satisfactorily addressed any such qualifications of opinion, audit exceptions or negative statements. (Mandatory)

3. The independent auditor's report shall include a review of internal controls at least every three years. (Excellence only)

4. If a management letter or report on internal controls has been issued, the JPA governing board has addressed any recommendations. (Mandatory)

D. 1. The JPA has assets sufficient to pay all unpaid claims liabilities and maintains a reasonable contingency margin. The determination of whether there is a reasonable margin for contingencies will include consideration of investment income, excess of loss insurance, aggregate stop loss insurance, assessability, size of program, volatility of risk, tolerance of membership, disclosure to board and any other relevant factors. (Excellence only)

2. If the JPA does not currently have sufficient assets to pay unpaid claims liabilities, it has a reasonable financial plan in effect which will generate sufficient revenues to pay all unpaid claims liabilities and to establish a contingency margin. (Mandatory)

For both D (1) and (2) above, unpaid claims include:

a. Case reserves for reported claims;
b. Incurred but unreported claims;
c. Expected loss development; and
d. Allocated and unallocated loss adjusting expenses.

3. JPAs with a self-funded medical benefits plan must fund at a level sufficient to cover expected claims, including the run-out, plus a reasonable contingency for adverse experience. Absent any acceptable evidence to the contrary, the contingency for adverse experience shall be set at an amount equal to or greater than the expected run-out of claims. (Mandatory)

4. JPAs with self-funded benefit plans other than medical must fund such programs at a level sufficient to cover the expected claims and the projected run-out. (Mandatory)

E. The JPA's current contribution levels for each self-funded program is in concert with Section E above. (Mandatory)

F. The JPA has adopted a targeted equity policy and considers it when evaluating funding and dividends. (Mandatory)

G. Any JPA with a non-risk sharing program(s) must clearly indicate in the governing documents the financial and operational structure of such program(s). (Mandatory)

To be considered as a W.C. non-risk sharing program, it must not be operating under a master workers' compensation certificate filed with Self-Insurance Plans.

In lieu of the funding standards contained in Section E above, a non-risk sharing program must:

1. Calculate and communicate the individual member net assets balances and liabilities to the members annually.

2. Be sufficiently assessable to ensure that the program's cash flow needs are met.

3. Demonstrate that it has adequate cash on hand to meet future claims costs.

H. The JPA maintains a suitable management information system that includes premium computation methods and/or allocation formulas. (Excellence only).

V. INVESTMENT OF FUNDS

OBJECTIVE

To assure that policies and procedures are in effect to protect and preserve the JPA's financial assets.

STANDARDS

A. The JPA has a written investment policy that contains:

1. A statement of objectives as required by Government Code § 53646; (Mandatory)

2. Description of permitted investments, which must be in conformity with California Government Code § 53601 and reasonable under "prudent investment rule"; (Mandatory)

3. The written investment policy is reviewed annually by the governing body or an investment committee pursuant to California Government Code § 53646(a) (Mandatory)

B. The JPA invests its funds in conformity with Government Code § 53601. (GC § 6509.5). (Mandatory)

C. The JPA provides evidence that the governing body or an investment committee periodically considers diversification of risk as to type of investment and individual institution. (Excellence only)

D. The JPA has in place internal controls that include:

1. Separation of functions (buying and selling of securities is separate from accounting and reporting of transactions) if the size of the staff can accommodate this separation. (Mandatory)

2. Separate verification of all transactions; and (Mandatory)

3. Written documentation of procedures. (Mandatory)

E. If the Treasurer has the authority to reinvest, sell and exchange securities:

1. The JPA makes such delegation of authority annually. (Government Code §53607) (Mandatory)

2. The Treasurer renders a monthly report of investment transactions to the governing board. (Government Code §53607) (Mandatory)

The following requirements (F, G, H, & I) only apply to JPAs that manage their own investments, with or without the use of investment consultants.

F. The JPA provides evidence that the Treasurer or Chief Financial Officer has submitted a quarterly report in a timely manner to the governing board containing the investment information required by California Government Code § 53646 (b) (1), a description of compliance with the statement of investment policy (Government Code § 53646 (b) (2)), and a statement of ability to meet expenditure requirements over the next six months (Government Code § 53646 (b) (3)). (Mandatory)

G. The quarterly investment report filed with the governing body shall also contain:

1. Types of investments (Mandatory)
2. Issuing institution (Mandatory)
3. Dates of purchase and maturity (Mandatory)
4. Par and dollar amount invested on all securities (Mandatory)
5. Investments and monies held by the JPA (Mandatory)
6. Current market value, including source (Mandatory)
7. Coupon rate (Excellence only)
8. Effective yield rate (Excellence only)
9. Portfolio total rate of return (Excellence only)
10. Cash and security transactions (Excellence only)
11. Percentage of portfolio by issuer or security type. (Excellence only)

H. JPAs that own investment securities shall have an independent custodian who shall not be from the same department of the financial institution or broker/dealer from whom the JPA buys or sells the security, or the investment advisor. (Mandatory)

1. There shall be a written contract between the JPA and the custodian that includes: (Mandatory)
   a. Scope of services
   b. Compensation
   c. Termination

2. Monthly reports shall be sent directly from the custodian to a specific person at the JPA. (Excellence only)

3. Custodial statements shall be reconciled with an in-house or investment advisor's report. (Mandatory)

4. The third-party custodian shall maintain adequate fidelity coverage. (Excellence only)

I. For JPAs that engage in services of a professional investment advisor, the following safeguards are in place:

1. There is a written contract between the advisor and the JPA that includes: (Mandatory)
   a. Scope of services
   b. Compensation
   c. Duty to disclose conflicts of interest
   d. Termination
   e. Disclosure to the JPA of any investigation by a regulatory body for investment-related regulatory violations.

2. The JPA has a process to ensure the investment advisor has disclosed any conflict of interests. (Mandatory) (This may be satisfied by a provision in the contract as addressed in H(1) above, or FPPC form 700, or review of Form ADV Parts 1 and 2.)

3. All securities are purchased in the name of the JPA. (Mandatory)

4. The advisor sends monthly reports to the JPA containing information described in Section D above; and (Mandatory)

5. The advisor reports at least quarterly an evaluation including the total rate of return and a comparison of the pool's total rate of return to reasonable benchmarks (i.e., U.S. Treasury securities, an index comprised of Treasuries, or LAIF). (Excellence only)

6. The investment advisor carries Investment Advisor Professional Liability Insurance with a per claim/aggregate limit of at least $1,000,000. (Mandatory)

J. JPAs that place their investments in or through County or State investment pools, or in FDIC insured contracts will issue quarterly reports to the governing body, chief financial officer, and auditor in accordance with Government Code § 53646 (e). (Mandatory)

VI. FUNDING AND ACTUARIAL STANDARDS

OBJECTIVE

To determine that the JPA has completed actuarial studies or independent evaluations on each of its self-funded programs. There may be instances in which the provisions of this section may be waived because such studies may not be considered necessary (such as for property or vehicle physical damage programs).

STANDARDS

A. The JPA has had a property or casualty (including W.C.) actuarial study(ies). Such study was conducted by a Member of the American Academy of Actuaries, and addressed all of the relevant items in Sections IV. E and IV. F. Such study(ies) shall be conducted within the last three years (Mandatory) or annually. (Excellence only)

B. If loss reserves requirements were computed on a discounted (present value) basis, the payout pattern and projected rate of return were reasonable. (Mandatory)

C. If the JPA has a self-funded medical benefits plan, it must conduct an independent rate study and fund level evaluation, including consideration of a reasonable contingency margin for adverse experience. Such study shall be conducted annually (Excellence only) or within the last 36 months (Mandatory).

D. If the JPA has other miscellaneous self-funded programs (such as dental, vision, long-term disability or life), it must conduct independent rate studies and fund level evaluations within the last 36 months (Mandatory) or bi-annually (Excellence only).

VII. RISK CONTROL

OBJECTIVE

To determine that the JPA actively promotes risk control principles and practices to its members and that necessary budgetary appropriations for such services are made. An excess JPA may meet this requirement by requiring its member agencies to be responsible for having their own risk control program.

STANDARDS

A. JPAs are active in promoting risk control principles among their member agencies. This shall include the following: (Compliance with two or more is required for Excellence.)

1. Promoting a risk transfer policy that addresses additional insureds, minimum insurance limits, and proof of suitable insurance coverage;

2. Establishing risk control standards for the significant exposures of its member agencies;

3. Prioritizing the use of its risk control resources, based on such factors as:
   a. Loss ratios;
   b. Frequency rates; and
   c. Severity rates.

4. Offering risk control assistance to its member agencies including:
   a. Conducting or facilitating risk control inspections;
   b. Investigating large losses;
   c. Conducting risk control training for its member agencies; and/or
   d. Providing wellness and/or employee assistance program.

5. Providing or facilitating the procurement of appraisal services, in order to maintain accurate records of its members' property components and values.

B. The JPA's budget provides for the above. (Excellence only)

C. The JPA maintains a suitable management information system that includes: (Excellence only).

1. Relevant information about the type and quantity of exposures being assumed.

2. Relevant information about the type, number and cause of accidents result in claims against its member agencies.

VIII. CLAIMS MANAGEMENT

OBJECTIVE

Measure the nature, scope, and quality of the claims management services provided by JPA and its contractors.

STANDARDS

A. The JPA has established a claims management system. Excess JPAs must have a process to monitor primary claims handled by, or for, its member agencies. (Mandatory)

B. The JPA has established a litigation management system. (Excellence only)

C. The JPA has conducted a claims audit on each significant self-funded program, within the last 2 years. Significant self-funded programs shall include W.C., liability, and medical malpractice. (Excellence only)

The audit should be conducted by a qualified claims auditor, independent of the JPA, the claims administrator and the insurers and should determine whether or not:

1. Claims are handled in a timely and organized manner;
2. The claims administrator adequately communicates with the JPA, its members, and the claimants;
3. Case reserving practices are reasonable;
4. Loss experience reports accurately reflect the case reserves and the payments. As an alternative, this determination may be made during the financial audits required in Section IV. C of these Accreditation Standards;
5. The JPA is receiving quality claims services. General evidence of this may be indicated from the following:

    a. Staffing levels are adequate in relation to caseloads;
    b. Adjusters identify claims with subrogation potential;
    c. Excess insurers are notified of claims with excess potential;
    d. Litigated claims are adequately managed;
    e. Coverage is verified; and
    f. Adequate investigations are performed.

D. The JPA has addressed all major recommendations and significant findings included in the audit report. (Excellence only)

E. The JPA maintains a management information system that includes relevant information about the type, number and cost of claims being reported and adjusted. (Excellence only)

F. If the JPA provides employee benefit plans for its members, it must have an appeals process for handling claims and/or coverage related disputes (Mandatory)

G. The JPA has a written policy addressing settlement authority. (Excellence only)

IX. UNDERWRITING

OBJECTIVE

To determine that the JPA has a clear process for developing and monitoring its underwriting policies and processes. This evaluation will be reviewed with all accreditation beginning July 1, 2012 and each JPA will have the opportunity to go through a review of this standard to allow JPA to formalize and adopt relevant policies and practices. Subject to CAJPA Board approval this standard will only be required for all JPA's seeking accreditation beginning July 1, 2015.

A. Underwriting Objectives - This applies to rating individual members and overall program management.

1. The JPA has established a written underwriting policy. This policy should include the following:
    a. Definition of the underwriting function / mission
    b. Address suitability or fit of members
    c. As applicable considers:
        i. Claims
        ii. Exposures
        iii. Actuarial results
    d. Defines relevant period or value of data (ex: last five years; or capped at $150,000).

2. There is an objective contribution allocation formula
    a. It identifies the components in writing as part of the policy
    b. The policy identifies guidelines for credits or debits, if any

3. There is an approval process for new members by the JPA Board or they delegate this approval.

4. The underwriting policy is formally reviewed periodically or at least once every three years. This review should consider:
    a. Is the process adequately measuring the risks?
    b. Is the process adequately allocating costs?

5. Underwriting considers the target net assets (Excellence only)

X. OPERATIONS AND ADMINISTRATIVE MANAGEMENT

OBJECTIVE

To determine that the JPA (A) has a process for developing and implementing a strategic plan setting forth its goals and objectives for the future, (B) regularly and effectively communicates with its members (C) actively involves its governing board members and staff in education and training programs offered by relevant professional associations and (D) maintains procedures and policies relating to information systems.

STANDARDS

A. The JPA conducts an effective strategic planning process and implements and periodically reviews a strategic plan or plans to guide its future efforts. This should include an analysis of the environmental trends and the organizational strengths, weaknesses, opportunities and threats. Such a process may also include the following: (Excellence only)

1. A survey of member expectations and related perceptions;

2. A mission statement, with supporting goals, objectives and tasks.

3. Consideration of the target equity policy.

B. The JPA regularly communicates with its member entities. Such communication may include: (Excellence only)

1. Annual reports, newsletters, or similar media;

2. Notice of major policy issues;

3. Periodic workshops, seminars, or similar educational activities;

4. Surveys of its member agencies, its service providers, and staff.

5. JPA website for communication with members.

C. The JPA governing board and staff are actively involved in education and training programs. Such involvement may be indicated by the following. (Excellence only)

1. Participation in one or more of the following organizations:

a. CAJPA (California Association of Joint Powers Authorities)
b. PARMA (Public Agency Risk Managers Association)
c. PRIMA (Public Risk Management Association)

d. CPCU Society (Chartered Property and Casualty Underwriters)
e. RIMS (Risk and Insurance Management Society)
f. CASBO (California Association of School Business Officials)
g. COSIPA (Council of Self-Insured Public Agencies)
h. CSIA (California Self-Insurers Association)
i. PASMA (Public Agency Safety Management Association)
j. AGRiP (Association of Governmental Risk Insurance Pools)
k. IEA (Insurance Educational Association)
l. ASSE (American Society of Safety Engineers)
m. SCIC (Society of Certified Insurance Counselors)

2. Top management has attended at least two professional conferences or seminars in the preceding 12 months.

3. The governing body members participate in pool management and risk management training.

4. There is formal training of all key personnel (as needed).

5. The JPA's budget provides for the above participation and training.

D. The JPA has developed and implemented processes and procedures relating to protection of electronic data, including:

1. A suitable security and back-up system for all stored data. (Mandatory)

2. A written policy with respect to:
   a. Disaster recovery (Excellence only)
   b. Data backup retention and recovery (Excellence only)
   c. Physical and electronic data security (Excellence only)
   d. Electronic data retention (Excellence only)
   e. Protection of electronic data as required by Health Insurance Portability and Accountability Act of 1996 (HIPAA), as applicable. (Excellence only)

APPENDIX E

Project Team Members

Project Team Members

Bickmore
Gregory L. Trout
Mark Priven
Jim Elledge
Angela Bernard
Michael Kaddatz
Jo Ann Wood
Paul Cross
Sandra Spiess

Municipal Resource Group
Jack Dilles
Tom Sinclair

RMVet, Inc.
T. Sherman Lewis