



## Benefits Administration Committee Agenda

REGULAR MEETING

**TUESDAY, FEBRUARY 22, 2022** 

TIME: 9:00 A.M.

**MEETING LOCATION:** 

In accordance with Government Code Section 54953, subsections (e)(1) and (e)(3), and in light of the State of Emergency proclaimed by the Governor on March 4, 2020 relating to COVID-19 and ongoing concerns that meeting in person would present imminent risks to the health or safety of attendees and/or that the State of Emergency continues to directly impact the ability of members to meet safely in person, the LACERS Benefits Administration February 22, 2022 meeting will be conducted via telephone and/or videoconferencing.

Important Message to the Public Information to call-in to listen and/or participate:

**Dial:** (669) 254-5252 or (669) 216-1590

Meeting ID# 161 024 8910

## Instructions for call-in participants:

- 1- Dial in and enter Meeting ID
- 2- Automatically enter virtual "Waiting Room"
- 3- Automatically enter Meeting
- 4- During Public Comment, press \*9 to raise hand
- 5- Staff will call out the last 3-digits of your phone number to make your comment

Information to listen only: Live Committee Meetings can be heard at: (213) 621-CITY (Metro), (818) 904-9450 (Valley), (310) 471-CITY (Westside), and (310) 547-CITY (San Pedro Area).

Chair: Michael R. Wilkinson

Committee Members: Annie Chao

Sandra Lee

Manager-Secretary: Neil M. Guglielmo

Executive Assistant: Ani Ghoukassian

Legal Counselor: City Attorney's Office

**Public Pensions General** 

Counsel Division

## **Notice to Paid Representatives**

If you are compensated to monitor, attend, or speak at this meeting, City law may require you to register as a lobbyist and report your activity. See Los Angeles Municipal Code §§ 48.01 *et seq.* More information is available at ethics.lacity.org/lobbying. For assistance, please contact the Ethics Commission at (213) 978-1960 or <a href="mailto:ethics.commission@lacity.org">ethics.commission@lacity.org</a>.

#### Request for services

As a covered entity under Title II of the Americans with Disabilities Act, the City of Los Angeles does not discriminate on the basis of disability and, upon request, will provide reasonable accommodation to ensure equal access to its programs, services and activities.

Sign Language Interpreters, Communication Access Real-Time Transcription, Assistive Listening Devices, Telecommunication Relay Services (TRS), or other auxiliary aids and/or services may be provided upon request. To ensure availability, you are advised to make your request at least 72 hours prior to the meeting you wish to attend. Due to difficulties in securing Sign Language Interpreters, <u>five</u> or more business days' notice is strongly recommended. For additional information, please contact: Board of Administration Office at (213) 855-9348 and/or email at <u>ani.ghoukassian@lacers.org</u>.

#### **Disclaimer to participants**

Please be advised that all LACERS Board and Committee Meeting proceedings are audio recorded.

**CLICK HERE TO ACCESS BOARD REPORTS** 

- I. PUBLIC COMMENTS AND GENERAL PUBLIC COMMENTS ON MATTERS WITHIN THE COMMITTEE'S JURISDICTION AND COMMENTS ON ANY SPECIFIC MATTERS ON THE AGENDA THIS WILL BE THE ONLY OPPORTUNITY FOR PUBLIC COMMENT PRESS \*9

  TO RAISE HAND DURING PUBLIC COMMENT PERIOD
- II. <u>APPROVAL OF MINUTES FOR THE MEETING OF OCTOBER 26, 2021 AND POSSIBLE COMMITTEE ACTION</u>
- III. BENEFITS ADMINISTRATION RESOURCE NEEDS FOR FISCAL YEAR 2022-2023
- IV. ANTHEM TRANSITION VERBAL UPDATE
- V. OTHER BUSINESS
- VI. NEXT MEETING: The next Benefits Administration Committee meeting is not scheduled at this time and will be announced upon scheduling. Please continue to view the LACERS website for updated information on public access to Board/Committee meetings while public health concerns relating to the novel coronavirus continue.
- VII. ADJOURNMENT





## **Board of Administration Agenda**

**SPECIAL MEETING** 

TUESDAY, FEBRUARY 22, 2022

TIME: 9:00 A.M.

**MEETING LOCATION:** 

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President: Cynthia M. Ruiz Vice President: Sung Won Sohn

Commissioners: Annie Chao

Elizabeth Lee Sandra Lee Nilza R. Serrano Michael R. Wilkinson

Manager-Secretary: Neil M. Guglielmo

Executive Assistant: Ani Ghoukassian

Legal Counsel: City Attorney's Office

Public Pensions General

**Counsel Division** 

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- VII. ADJOURNMENT

Agenda of: Feb. 22, 2022

Item No:

## MINUTES OF THE REGULAR MEETING BENEFITS ADMINISTRATION COMMITTEE

LOS ANGELES CITY EMPLOYEES' RETIREMENT SYSTEM

In accordance with Government Code Section 54953, subsections (e)(1) and (e)(3), and in light of the State of Emergency proclaimed by the Governor on March, 2020 relating to COVID-19 and ongoing concerns that meeting in person would present imminent risks to the health and safety of attendees and/or that the State of Emergency continues to directly impact the ability of members to meet safely in person, the LACERS Benefits Administration October 26, 2021 meeting will be conducted via telephone and/or videoconferencing.

October 26, 2021

11:50 a.m.

PRESENT via Videoconferencing: Chair: Michael R. Wilkinson

Committee Members: Annie Chao

Sandra Lee

Manager-Secretary: Neil M. Guglielmo

Legal Counselor: Miguel Bahamon

PRESENT at LACERS offices: Executive Assistant: Ani Ghoukassian

The Items in the Minutes are numbered to correspond with the Agenda.

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PUBLIC COMMENTS AND GENERAL PUBLIC COMMENTS ON MATTERS WITHIN THE COMMITTEE'S JURISDICTION AND COMMENTS ON ANY SPECIFIC MATTERS ON THE AGENDA PRESS \*9 TO RAISE HAND DURING PUBLIC COMMENT PERIOD — Chair Wilkinson asked if any persons wished to speak on matters within the Committee's jurisdiction, to which there was no response.

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APPROVAL OF MINUTES FOR THE MEETING OF AUGUST 24, 2021 AND POSSIBLE COMMITTEE ACTION – Committee Member Chao moved approval, adopted by the following vote: Ayes, Committee Members Chao, Sandra Lee, and Chair Wilkinson -3; Nays, None.

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AMENDMENT TO THE BENEFITS ADMINISTRATION COMMITTEE CHARTER AND POSSIBLE COMMITTEE ACTION – Estella Priebe, Senior Benefits Analyst, discussed this item with the Committee for 5 minutes. After discussion, Committee Member Chao moved approval, adopted by the following vote: Ayes, Committee Members Chao, Sandra Lee, and Chair Wilkinson -3; Nays, None.

IV

REVISIONS TO LACERS BOARD RULES AND POSSIBLE COMMITTEE ACTION – Alex Rabrenovich, Chief Benefits Analyst, and Ferralyn Sneed, Chief Benefits Analyst discussed this item with the Committee for 35 minutes. After discussion, Committee Member Chao moved approval, adopted by the following vote: Ayes, Committee Members Chao, Sandra Lee, and Chair Wilkinson -3; Nays, None.

V

OPERATIONAL UPDATE – Dale Wong-Nguyen, Assistant General Manager, provided the following update:

- In preparation for Alex Rabrenovich's retirement in mid December 2021, Karen Freire will transition to oversee the Health Benefits Administration and Wellness Division, formerly Chief Benefits Analyst over Retirement Services Division (RSD); Ferralyn Sneed is appointed on an emergency basis as Chief Benefits Analyst over Retirement Services Division, and Delia Hernandez is named as Acting Senior Benefits Analyst II and Assistant Division Manager of Retirement Services Division
- Separation Incentive Program (SIP) Closeout Initiative RSD will conduct audits of 150 City SIP retirements per quarter for the remaining three quarters in the fiscal year
- Member Experience Initiative Retirement counseling via video conferencing is being piloted for the next quarter
- Retirements are trending at pre-City SIP levels, averaging 88 per month in the first quarter of the fiscal year
- Open Enrollment Chief Benefits Analyst Alex Rabrenvoich and Senior Benefits Analyst II Taneda Larios provided status updates on Open Enrollment which began on October 15<sup>th</sup>

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OTHER BUSINESS -There was no other business.

VII

NEXT MEETING: The next Benefits Administration Committee meeting is not scheduled at this time, and will be announced upon scheduling. Please continue to view the LACERS website for updated information on public access to Board/Committee meetings while responding to public health concerns relating to the novel coronavirus continue.

VIII

ADJOURNMENT – There being no further business before the Committee, Chair Wilkinson adjourned the Meeting at 12:30 p.m.

Michael R. Wilkinson Chair Neil M. Guglielmo Manager-Secretary



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**MEETING: FEBRUARY 22, 2022** 

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ITEM:

## REPORT TO BENEFITS ADMINISTRATION COMMITTEE

From: Neil M. Guglielmo, General Manager

SUBJECT:	BENEFITS ADM	INISTRATION RE	SOURCE NEEDS FOR FISCAL YEAR 2022-2023
ACTION:	CLOSED:	CONSENT:	RECEIVE & FILE:

## **Recommendation**

That the Committee consider and advise.

## **Executive Summary**

This report provides an overview of key workload indicators and staffing capacity in benefit operations in advance of the budget presentation to the Board in March. LACERS is committed to providing prompt and accurate service to our members. In several areas of direct service to members we are lagging in our expectations to meet members current needs, resulting in ongoing overtime, overwork, and inability to address longer term priorities. We are also experiencing a loss of institutional knowledge through retirements and turnover of LACERS staff. To mitigate these impacts, six regular positions and 11 temporary "substitute authority" positions will be proposed in the coming budget for benefits operations. Departmentwide, the preliminary budget will include ten regular positions, increasing the position count from 177 to 187 positions, plus an additional 13 substitute authority positions. We recognize this increase requires substantial justification; therefore we seek feedback on the benefit operations priorities proposed for inclusion in the budget, and support for our proposed request.

### **Discussion**

Staff from the Retirement Services Division and Health, Wellness, and Buyback Division will provide an in-depth presentation of the service challenges and staffing needs for fiscal years 2022-23 and 2023-24 for several units experiencing significant increases workload. The presentations will provide an overview of accomplishments, goals/objectives, and historical context for the resource gap being experienced now. An evaluation of the resources needed to meet the current needs are represented in a 2-year plan as summarized below. The Year 1 resources have been vetted internally and given the highest priority departmentwide for the upcoming year to move forward in the budget request. Year 2 resource requests represent the remainder of the positions requested by the divisions. This is the best estimate at this time from the managers in the respective divisions as to the ideal staffing needs without consideration of budget restraints and other department priorities. Over the next year, this projection will be further refined as we look at how the Year 1 resources and other staffing changes impact

workload, as well as implementing various strategies to gain efficiencies including the return to in-office work at the new headquarters, process reengineering, cross-training, and restructuring.

### **Service Retirement Unit**

- Retirement counseling and processing for Tier 1, Tier 1 Enhanced and Tier 3 members via webinar, phone, email, or individual virtual session.
- Counseling incoming and outgoing elected City Official on the LACERS Plan and the Limited Term Retirement Program
- Pre- and post-termination counseling

Current staffing	Staffing to meet current need – Yr 1	Staffing to meet current need – Yr 2		
11 regular positions	12 regular positions	13 regular positions		
5 subauthorities	5 subauthorities			
Implementation of the Retirement Application Portal has quadrupled the clerical workload	<ul> <li>Increase clerical support staff from 2 to 3</li> <li>Receive 100% of retirement application and complete all frontend processing including differentiating valid/invalid applications</li> <li>Send acknowledgement and retirement packets to members and prepare for retirement webinars</li> <li>Review retirement application portal daily</li> </ul>	Add an analyst position to fulfill the role of expeditor/troubleshooter to assist and resolve complex or problematic cases, identify potential problem cases, monitor aging reports, identify workflow challenges, and assist with supervisory and training duties.		

#### **Survivor Benefits Unit**

- Administer survivor benefits upon the death of a member. These benefits include survivorships, continuances, accrued payments, funeral allowances, and refunds of accumulated and unused contributions.
- Staff must be well versed in Internal Revenue Code provisions, probate code, Los Angeles Administrative Code, Board Rules, and any other applicable laws
- Over 1,000 member and survivor issues per year, translating to 3,000 beneficiary case (the average number of beneficiaries is 3)

Current staffing 6	Staffing to meet current need – Yr 1 7	Staffing to meet current need – Yr 2
<ul> <li>Member deaths are increasing including those with legal complexity which require significant amount of staff time.</li> <li>Daily demands from impatient beneficiaries and individuals who are not entitled to a benefit at all.</li> <li>Tier 1 Enhanced benefits are newer benefits where the functionality in the pension administration systems has not been delivered requiring workarounds to set up benefits.</li> </ul>	<ul> <li>Add a Senior Benefits Analyst I to oversee the unit, provide dedicated guidance to unit staff.</li> <li>Deal with complex cases to yield improved unit processing efficiency, increased case closure performance, and reduced case backlogs.</li> <li>Audit of unit workflow and improved case tracking.</li> <li>Oversight of Tier 1 Enhanced benefits for processing.</li> </ul>	Two additional counseling staff to reduce the per counselor caseload to a more manageable level.

## **Legal Processing Unit**

- Review Dissolution/Court Documents 1,044 documents in FY20/21, projecting 1,291 in FY21/22
- Calculate/Process Community Property Estimates & Claims, Domestic Relations Orders (DRO), and Joinders –
   112 requests in FY20/21, projecting 120 in FY21/22; 3-4 hours per calculation

- Calculate/Process Wage Assignments & Tax Levies 69 wage assignments in FY20/21, projecting 74 in FY21/22
- Legal Authority Documents (Power of Attorney (POA)/Conservatorship) 405 POAs in FY20/21, projecting 364 in FY21/22; 2-3 weeks processing time per case
- Subpoenas, Requests for Information, Court Orders for Appearances/Records 60 requests in FY20/21, projecting 24 requests in FY21/22. Several days to process each request.
- Miscellaneous Requests which include Domestic Partnership filings/terminations 490 documents in FY20/21, projecting 484 requests in FY21/22.

Current staffing 4 regular positions 1 subauthority	Staffing to meet current need – Yr 1 5 regular positions	Staffing to meet current need – Yr 2 5 regular positions
Part-time employees providing administrative support have limited hours and leave for promotion or other reasons, creating a loss of knowledge and requiring ongoing training of new employees.	A regular full-time position is requested for the unit to provide ongoing permanent support for:  Community Property calculations (complex calculations)  Processing Wage Assignments (includes basic calculations)  Reviewing and processing of Legal Authority documents  Generating correspondences  Scanning  Providing clerical support  The addition of the position will allow the Benefits Analysts to concentrate on the more complicated processes of each case, thereby reducing the processing time and backlog.	No additional positions contemplated.
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### **Health Advocacy Unit**

- Counsels members on health plan enrollment at retirement
- Counsels on survivor health plan enrollment upon death of member
- Counsels on Medicare members nearing age 65
- Handles 14,500 member call, emails, and online inquiries

Current staffing	Staffing to meet current need – Yr 1	Staffing to meet current need – Yr 2		
5 regular positions	6 regular positions	8 regular positions		
	1 subauthorities			
<ul> <li>71 cases per month per counselor</li> <li>300 member inquiries per month per counselor</li> <li>Members calling other units to get a response from Health unit</li> </ul>	Add staffing to reduce caseload to 35 cases per month per counselor	Add staffing to reduce caseload to 23 cases per month per counselor		

### **Health Enrollment Unit**

- Inputs and counsels members on health plan enrollments, changes, updates
- Inputs and counsels over 65 members on Medicare plan enrollments, changes, updates
- Time critical must be completed before each monthly payroll closing

Current staffing	Staffing to meet current need – Yr 1	Staffing to meet current need – Yr 2	
6	6 regular positions	9 regular	
	1 subauthority	-	

- 302 cases per month
- High overtime usage
- Issues with staff turnover, retention, attraction
- Delay in Medicare enrollments can cause life penalties for members
- Senior managers are performing staff work due to lack of staffing
- Add staffing to reduced caseload to 111 cases per month per staff
- Reduced wait times for calls, emails, claims responses
- Increased time for supervision, monitoring
- Increase ability for staff training and knowledge transfer
- Add staffing to reduced caseload to 83 cases per month per staff
- Improved input quality
- Improved counseling

## Wellness Program

- Conducts Wellness education, outreach, publications, and events to promote retiree wellness
- Recruits and facilitates Wellness volunteers to act as Champions and lead local events for LACERS retirees
- Manages the Health Carrier Account for the Wellness objective and reports to partners on Wellness performance

Current staffing 1 regular position	Staffing to meet current need – Yr 1 1 regular position	Staffing to meet current need – Yr 2 2 regular positions
2 subauthorities	2 subauthorities	2 subauthorities
Participation Target: 1,000		Participation Target: 3,000
Actual 1,391	Additional position deferred due to	
Online programming  36 Technology, Fitness, Brain Health Classes 26 Informational Webinars 1 In-Person Gathering (Fitness Class Hike/5k) 30 Aging Mastery Classes 2 Newsletters 6 Online Open Enrollment Meetings 7 In-Person & 5 Online Champion Activities	uncertainty of in-person event	<ul> <li>Online &amp; in-person programming (with additional staff)</li> <li>36 Technology, Fitness, Brain Health Classes</li> <li>26 Informational Webinars</li> <li>4 In-Person Gatherings (AMP Reunion, Hike/5k, Gala, Extravaganza)</li> <li>30 Aging Mastery Classes</li> <li>2 Newsletters</li> <li>6 In-Person &amp; 6 Online Open Enrollment Meetings</li> <li>7 In-Person &amp; 5 Online Champion Activities</li> </ul>
0 1 0 1 (000)		

#### **Service Processing Section (SPS)**

- Counsels and processes Members' optional purchase of service with the City and other qualified governmental entities
- Counsels and processes requests for reciprocity with other qualified California pension systems
- Verifies LACERS service for members transferring to the Department of Water and Power

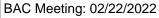
Current staffing 12 regular positions 5 subauthorities	Staffing to meet current need – Yr 1 14 regular positions 2 subauthorities	Staffing to meet current need – Yr 2 16 regular positions
<ul> <li>In FY21-22 SPS received increased resources from 4 teams to 6 teams, increasing capacity from 1,726 cases to 2,592 case per year</li> <li>Projected outstanding case 6/30/22: 97</li> <li>Case count was reduced by 36% from 471 cases to 301 cases (YTD 1/31/22)</li> </ul>	<ul> <li>Staff capacity: 144 cases per month</li> <li>Average incoming cases per month: 103</li> <li>Continue reduction of backlogged outstanding cases</li> </ul>	✓ Members benefit from prompt processing of applications as some service buybacks are calculated based on the Member's salary at the time of purchase.

-	Aging cases decreased by 96%	
	from 188 cases to 8 cases	
	(YTD 1/31/22).	
•	The average wait time was	
	reduced by 50% from 12 months	
	to 6 months (YTD 1/31/22).	

Prepared By: Dale Wong-Nguyen, Assistant General Manager

NMG/DWN:dwn

Attachment 1 - RSD - FY23 Resource Needs Attachment 2 - Health Division Budget Presentation FY 2022-23



Item: III
Attachment: 1



# RETIREMENT SERVICES DIVISION



Benefits Administration Resource Needs for Fiscal Year 2022-2023





## **MEMBER COUNSELING SECTION**

Disability Retirement
Service Retirement
Survivor Benefits

## RETIREMENT SERVICES DIVISION



## **MEMBER SUPPORT SECTION**

**Benefits Determination Legal Processing** 



## **ACCOMPLISHMENTS**

- Since 2009 RSD has had at least two overlapping major projects to work on aside from processing retirements
- These overlapping projects often required the subject matter expertise of multiple units and significant time commitments which often resulted in overtime

2009 -2010	(ERIP)
2010 - 2011	CITYWIDE LAYOFFS IRS VOLUNTARY COMPLIANCE PROGRAM -
2009 - 2015	PLAN DETERMINATION LETTERS
2011 - 2018	PENSION ADMINISTRATIVE SYSTEM
2011, 2016	ALIVE AND WELL (2)
2011 -2013	TIER 2
	GSD OFFICE OF PUBLIC SAFETY TRANSFER TO
2013 -2015	LAPD
2014	END of DWP RECIPROCITY
2015 - 2017	TIER 3
2016 - 2018	AIRPORT PEACE OFFICERS
2016 - 2017	ONTARIO AIRPORT TRANSFER
2018	PERSONNEL FLEX BENEFIT REFUND PROJECT

2020 - 2022 PROGRAM, LOS ANGELES WORLD

CITY INCENTIVE PROGRAM, HARBOR INCENTIVE

\* 3





- Maintain the Division's High Level of Performance Output
- Continue to Provide Exemplary Customer Service
- Deliver Benefits Accurately and Timely
- Train and Prepare the Next Group of Subject Matter Experts, Supervisors and Managers
- Ensure RSD Functions at Optimum Efficiency and Effectiveness





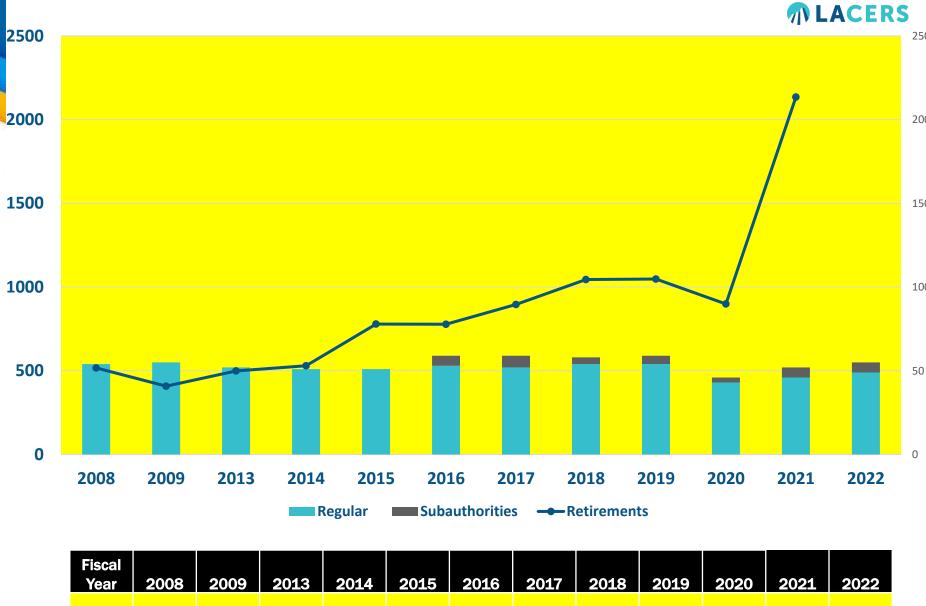
- Multiple Platforms with Limitations which Increase Manual Processing
- Increasing Compliance Complexity
- Key Staff Retiring in 5 Years or Less
- Loss of Institutional Knowledge
- Significant Percentage of Staff with Less Than Five Years Benefits
   Experience
- Training in the COVID Era
- Teaming Building Virtually
- Effectively Executing the Division Succession Plan Over the Next Two Years
- Reliance on Temporary Staff and the Investment in Training
- Staff Burnout/Morale





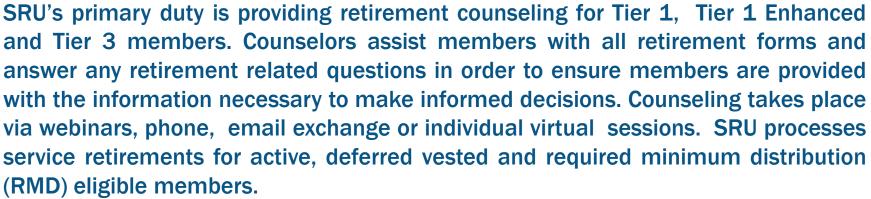
## **STAFFING v** RETIREMENTS

**Graph illustrates staffing** levels pre and post ERIP -2009-2010



Fiscal Year	2008	2009	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Regular	54	55	52	51	51	53	52	54	54	43	46	49
	<b>5</b> +	33	JZ	)T	21	33	JZ	<b>5</b> +	J <del>-</del>	73	70	73
Subs	0	0	0	0	0	6	7	4	5	3	6	6





## **SRU** also:

- Counsels terminally ill members on retirement options
- Processes Required Minimum Distributions (RMD) for inactive non-vested members with funds on deposit
- Provides pre and post-termination counseling
- Limited Term Retirement Program counseling
- Larger Annuity counseling
- Counsels newly elected City officials on the LACERS plan and the Limited Term Retirement Plan
- Counsels outgoing elected officials

Staff 11













Service
Retirement Unit
(SRU)

- Generates estimates, projected estimates and determines retirement eligibility
- Conducts individual or group/webinar retirement counseling sessions
- Refers members requiring in-depth counseling on service credit purchases, health insurance, or legal issues to the appropriate unit
- Conducts individual or group counseling as needed for City lay-offs
- Advises members on the impact of Internal Revenue Code (IRC) rules and regulations as it pertains to their retirement benefit
- Generates benefit estimates and benefit waivers for members requesting a refund of contributions
- Coordinates and counsels members receiving new tier benefits
- Processes retirements for City sponsored incentive programs







Service
Retirement Unit
(SRU)

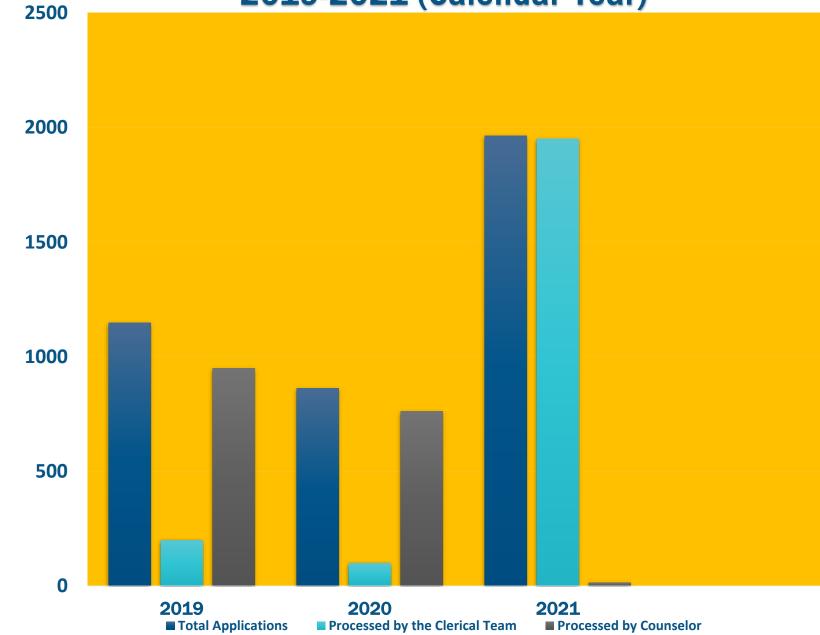






Retirement
Application Portal
has Quadrupled
Clerical workload







## Changes and Challenges in Clerical Support Duties

- Receive 100% of retirement applications
- Responsible for all front-end pre-processing of applications
- Document, verify application validity
- Run initial estimates, which are needed for the PAS to generate initial department notifications
- Respond to members regarding the receipt of their application
- Send all retirement packets individually by email (formerly distributed on-site during group counseling) or mail
- Log and receive incoming completed retirement forms and packets
- Electronic submissions have resulted in increased emails, member contacts, mailings, and duplicate data entry into the PAS and SharePoint

- Track service credit verifications for members applying for retirement with the Service Credit Verification Team
- Set up the counseling webinars, coordinating with Health on the RAP webinars
- Issue the member invitations to the webinars and tracking webinar registration and attendance
- Daily review Retirement Application Portal (RAP)
- Perform the manual task of sorting applications and determining application counts due to report functionality not being in this initial version of the RAP
- Differentiating valid from invalid applications and manually sorting multiple applications submissions, very time consuming task





## SURVIVOR BENEFITS UNIT (SBU)

- Survivor benefits are paid upon the death of active members, vested members, retired members, and beneficiaries
- SBU is responsible for paying lump sum payment(s), monthly allowances, limited term pensions, survivorships and continuances
- SBU staff determines the type of benefit payable based on a combination of eligibility requirements, designations made by the member, and other governing authorities
- Staff knowledge includes: IRC provisions, probate code, Los Angeles Administrative Code, Board Rules, and any other applicable laws
- SBU caseload now reaches over 1,000 cases per year which actually translates into 3,000 cases because the average number of beneficiaries per case is three

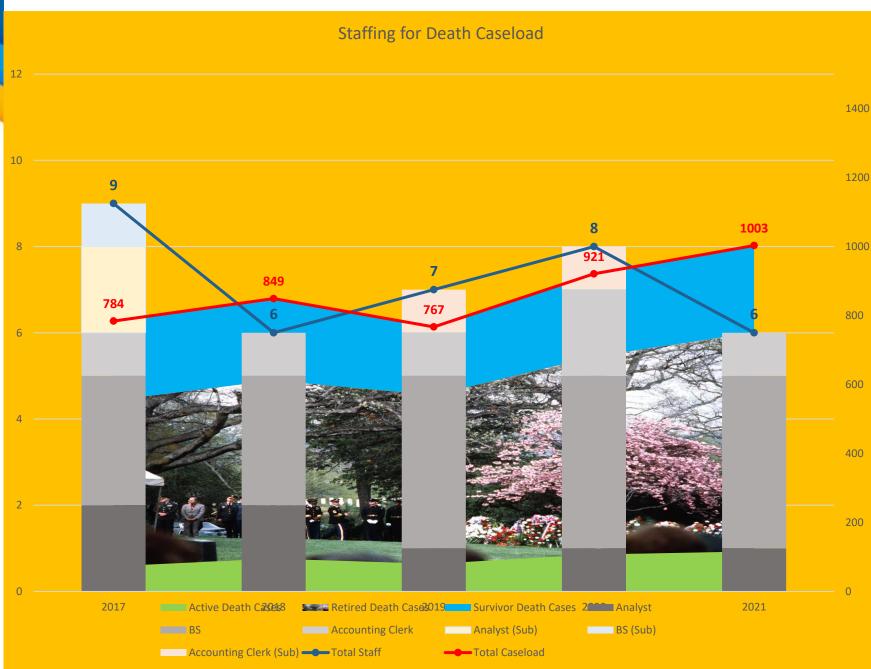
Staff - 6







# SURVIVOR BENEFITS UNIT (SBU)





## **Average Caseload by Calendar Year**

	Total Staff	Active Death Cases	Retired Death Cases	Survivor Death Cases	Total Caseload	% Changes	Average 3 Beneficiaries	Average 2 Benefits Payable
2016	7	88	481	202	771		2313	4626
2017	9	73	481	230	784	2%	2352	4704
2018	6	95	517	237	849	8%	2547	5094
2019	7	80	489	198	767	(-10%)	2301	4602
2020	8	107	574	240	921	20%	2763	5529
2021	6	116	635	252	1003	9%	3009	6018

4626 4704 5094 4602 5529  4626 4704 5094 4602  1274 920 1106 1505  925 672 920 8 6 7 8 6 6 7 8 6 6 7 8 8 6 6 7 8 8 7 8 7	Chart Title								
925 672 7 9 6 7 8 6	4626	4704	5094	4602	5529	6018			
Total Staff Caseload Case Per Counselor	7	2017	6 2018	2019	8 2020	6			





# SURVIVOR BENEFITS UNIT (SBU)



## **CHALLENGES**





# SURVIVOR BENEFITS UNIT (SBU)

- Increased Caseload
- High Call Volume
- Emotionally Taxing Encounters with Grieving and Difficult Beneficiaries
- Locating Beneficiaries
- Staff is Required to be Familiar with Estate Law, Case Law, Beneficiary
  Order of Succession, Community Property Rights, Tax Requirements and
  Exceptions, Administrative Code,
- Dealing with Beneficiaries and Non Beneficiaries with Unrealistic Expectations of the Benefits to be Paid by LACERS
- Constantly Confronted with Demands for Information on Member
   Contribution Account and Beneficiaries Receiving a Payouts







# LEGAL PROCESSING UNIT

- LPU serves as the general clearinghouse for legal documents and City Attorney opinions for LACERS.
- Tracks and maintains record of City Attorney opinions.
- Counsels and provides benefit information to members, beneficiaries, and other parties of interest as it relates to legal issues that may affect a member's LACERS benefits
- Review Dissolution/Court Documents
- Calculate/Process Community Property (CP) Estimates & Claims,
   Domestic Relations Orders (DRO), and Joinders
- Calculate/Process Wage Assignments & Tax Levies
- Processes Legal Authority Documents (Power of Attorney (POA)/Conservatorship) – •
- Processes Subpoenas, Requests for Information, Court Orders for Appearances/Records
- Reviews and processes Domestic Partnership filings/terminations

## Staff 4



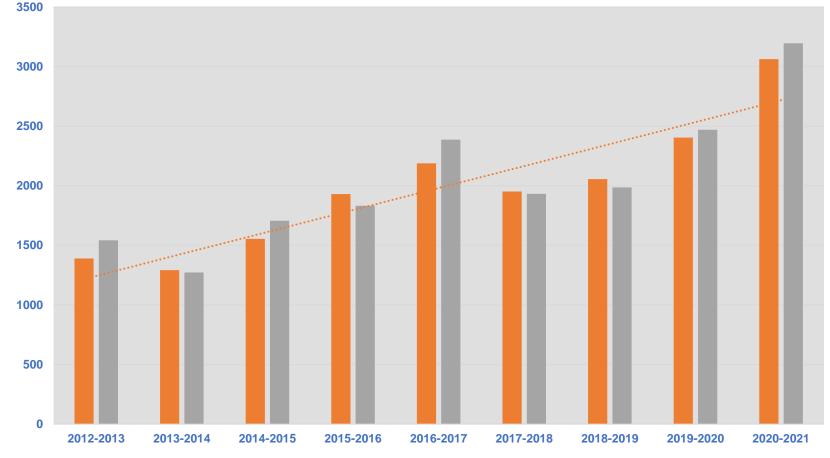
## LPU Workload



Counseling, Dissolution Reviews, SRU Reviews, Estimates, Legal Authority Cases, Community Property Calculations, DRO Benefit Set-ups, Wage Assignments, Legal Authorities, Request for Info & Subpoenas, other Misc. Request



LEGAL PROCESSING UNIT





## **CHALLENGES**





- The unit receives thousands of documents each year. The documents need to be scanned, processed and available for reference and/or review within a short period of being received.
- The lack of trained consistent clerical support affects the amount and the quality of the time analysts have to concentrate on reviewing and analyzing cases, performing Community Property calculations, processing legal documents and counseling members.
- The repeated loss of part-time staff to full time employment opportunities after investing significant time in training and skill development.

# LEGAL PROCESSING UNIT



## TWO YEAR STAFFING PROPOSAL

\*Limited Position funded through December 2021, never filled

\*\*Limited Positions used for processing SIPs and SIP audit (pending)

\*\*\*Workload would determine the need for subauthorities

	Current Unit Staffing Reg   Sub	2022-2023 Reg   Sub	2023-2024*** Reg   Sub	Proposed Staffing
BDU	9   0	9   0	9   0	9
LPU	4   1 *	5   0	5   0	5
SBU	6   0	7   0	9   0	9
SRU	11   5 **	12   3	13   0	13
Other Staff	18   6	18   3	18   0	18
Total	48   6	51   3	54	54

- Proposal restructures units to maximize efficiency for additional layer of audit oversight and senior level analysis
- Implements succession plan objectives to ensure RSD does not experience knowledge or skill deficit that could impact divisional performance objectives and the delivery of benefits
- Maintains RSD's high performance level and meeting the strategic goals of accurate and timely delivery of member benefits and outstanding customer service





## Questions



BAC Meeting: 02/22/2022

Item: III
Attachment: 2



## HEALTH, WELLNESS, AND BUYBACK DIVISION



## HEALTH, WELLNESS, AND BUYBACK UNITS/ SECTIONS

## Health Division is composed of

- Advocacy Unit which provides counseling to retiring members, survivors and retired members. They also provide advocacy support to member claims.
- Enrollment Unit provides enrollment support by processing monthly enrollments for members who are retiring or have qualifying events, coordinating with carriers on enrollment related matters, and administering the Annual Open Enrollment event.
- Accounts Reconciliation is responsible for reconciling monthly premiums, paying monthly invoices, monitoring contacts, administering the Medical Premium Reimbursement Program (MPRP). The unit is also responsible for the annual update of LACERS' premiums and subsidies, as well as report to the BAC or Board. They also support publications, mailings, and the PAS.
- Medicare Compliance administering the Medicare related requirements

**Wellness Program** – administers the Wellness Program by planning and implementing the Wellness Initiative

Service Processing Section (Buybacks) – administers various buybacks and reciprocity programs

## HEALTH, WELLNESS, AND BUYBACK ACCOMPLISHMENTS / SUCCESS

- Processed over 18,000 enrollments in 2021
- Fielded over 29,000 calls, emails and online inquiries in 2021
- Retired and enrolled 2,148 Separation Incentive Program participants for Fiscal Year 2021
- Successfully transitioned over 4,000 members in Anthem Supplement Plan to Anthem Medicare Preferred PPO Advantage Plan with anticipated savings of \$4.5 million in 2022
- In 2019, Health implemented the Self-funding Program for Delta Dental which has realized savings/surplus of \$3 million as of 2021 and Anthem Blue View Vision Plan is anticipated to save \$42,000 in 2022
- In 2019, implemented the 115 Trust that would allow LACERS to save and invest Health funds, which would assist in funding future Health Benefits
- The Service Processing Section reduced their backlog from 471 in 2021-22 to 301 as of January 2022
- Despite the Pandemic, the Wellness Program successfully provided 92 webinars reaching 1,394 member participations



## HEALTH DIVISION CHALLENGES

The number of health staff is not proportionate to tackle the volume of workload and complexity of health administration

## Succession planning

- Not enough managers and staff to train and transfer knowledge
- It takes one to two years to learn the full scope of health administration

## Staffing challenges

- High turn over
- Some units have staff that have less than two years experience
- Hiring process takes time and the certification lists expires every two years, which could take place at the middle of a big project
- Due to volume of work, candidates are not attracted to accept positions



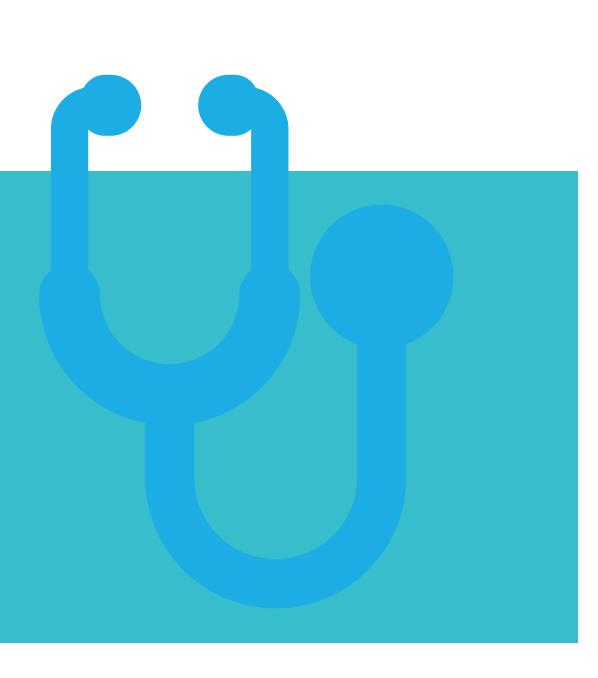
# HEALTH DIVISION CHALLENGES

### Staffing strategies

- Use of part-time during high volume projects short term solution, but knowledge transfer and training is short-lived
- Assessment of classifications based on the complexity and volume of workload
- Cross training within the Division
- Multiple overlapping long-term projects in the last 10 years
- Health administration complexity have compounded the processing and training, as well volume of workload
- Wellness not enough staff to increase outreach to achieve program objective
- SPS backlogs backlogs have been tackled, but will need continuing staff to maintain service level and keep backlog at manageable level



# COMPLEXITY IN HEALTH ADMINSITRATION



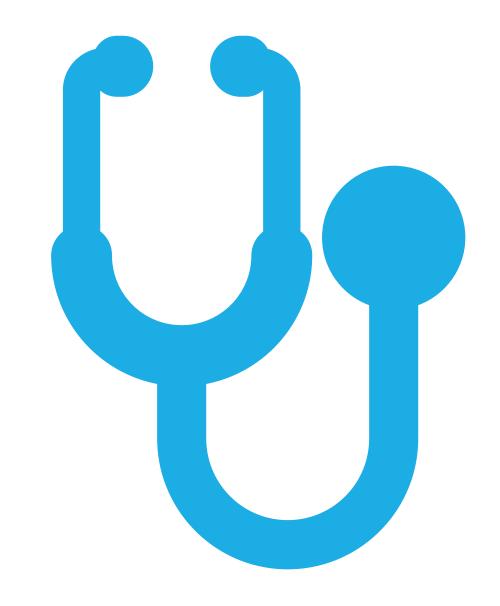
# ADDED COMPLEXITY OF PROJECTS AND PROGRAMS THROUGHOUT THE YEARS

- Medicare Compliance Rules and Changes to the Medicare Benefits Medicare rules and benefits has evolved since it's inception on July 1, 1965. With each change, the Health division is mandated with complying to Medicare Rules.
- Carrier Rules Carriers must comply with California State Department of Health Care Services, as well as the Center for Medicare and Medicaid Services (CMS). Any changes to those rules impact LACERS administration of benefits.
- Tax compliance project starting in 2009
- In 2010 Early Retirement Incentive Program retiring over 3,000 in a six-month period
- In 2011
  - Tier 1 members' Health Subsidy increase vesting rights were changed
  - The Pension Administration Project (PAS) started which took seven years to complete
- In 2013
  - Defense of Marriage Act overturned by Supreme Court. Subsidy dollars covering the cost of same sex marriage may no longer by imputable.
  - Tier 2 was adopted (was later converted to Tier 1)
  - In 2014
    - The suspension of reciprocity with Water and Power Employees Retirement Plan (WPERP) was implemented. It created another layer of information that needed to be provided to members.

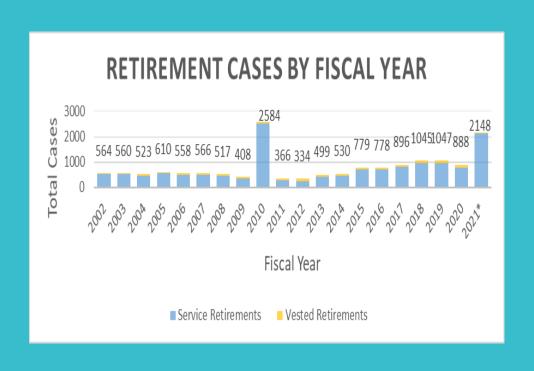
# ADDED COMPLEXITY OF PROJECTS AND PROGRAMS THROUGHOUT THE YEARS

- In 2015
  - Affordable Care Act for children under the age of 26. They became eligible dependents.
- In 2016 Tier 3 February 21, 2016 the subsidy for Tier 3 was added. In addition, Part-time employees became eligible for the minimum subsidy if the member has at least 10 years of Service.
- In 2018
  - After the PAS went live, the input of dependent data and subsidy corrections were transferred to Health
  - On November 9, 2018, the City Council approved the establishment of the Post Employment Health Care Fund, also known as the 115 Trust Fund. The establishment of this new fund created an additional complexity in administering benefits.
- In 2019 Self-funding of Delta Dental HMO/PPO and Blue View Vision transitioned from a Full Insurance Program.
- In 2020 the Worldwide Pandemic impacted the City's economy. The City adopted the Separation Incentive Program with a goal of retiring close to 18,000 members

# HEALTH WORKLOAD



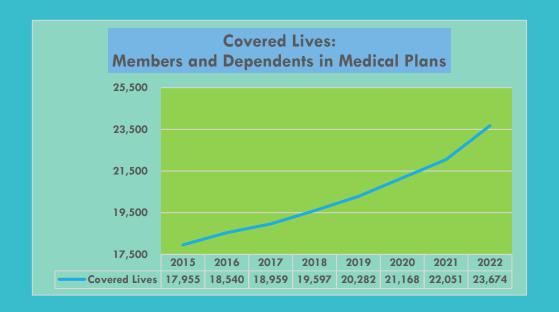
# **HEALTH DIVISION WORKLOAD**

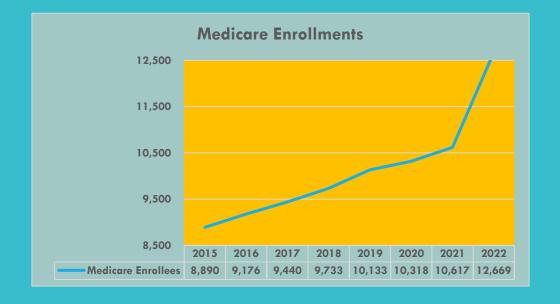


- Retirements have doubled from 500 per year in 2013 to approximately 1,000 starting in 2018.
- In Fiscal Year ending 2021, LACERS
   processed 2,148 retirements which was
   the second highest retirements since the
   Early Retirement Incentive Program

# **HEALTH DIVISION WORKLOAD**

- Covered lives increased by 32% since 2015
- Medicare enrollments increased by 43%, resulting in increased complexity in enrollments and health counseling





# NEW AND CONTINUING PROJECT IN 2022-23

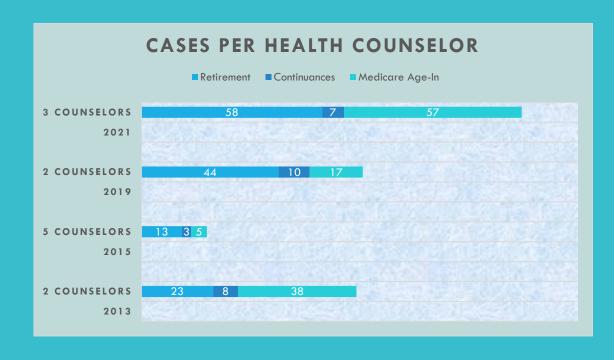
- Box Project for Health Documents
- Request for Proposal (RFP) for Health Consultant
- Health Insurance Portability and Accountability Act (HIPAA) Project
- Request for Proposal for the Carrier Contracts slated in 2023
- Self-funding
  - Delta Dental Self-Funding Program started in 2021. The transition from being fully-insured to self-insured requires staff for transitioning and monitoring to ensure there is management control.
  - Anthem Blue Vision this is a new program starting January 1, 2022 that needs monitoring. In addition, if there are issues in the transition, staff needs to coordinate not just with the carrier, but also with the Health Consultant and inter-divisional personnel.
- Assessment of Self-Funding for Anthem PPO Plan Slated for 2023
- Medicare Part B and Income Related Monthly Adjustment Amount (IRMAA) Member reimbursement LACERS' possible recommendations to increase reimbursement of Medicare Part B and IRMAA would require advocacy work with the CAO, unions and City Council.
- New Medicare rule changes in 2022
- Medicare Beneficiary Identifier (MBI) Second Audit Dependent Health Audit
- Medicare Part A Audit all plans
- Pension Administration System (PAS) Health's processes have not been fully implemented or corrected over the years due to higher PAS priorities.

# HEALTH ADVOCACY AND ENROLLMENT

# HEALTH DIVISION STAFFING HISTORY – FOCUS ON ADVOCACY

Advocacy Unit	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021	2021-2022
Advocacy Unit Staff	3	3	3	6	6	6	6	3	4	5

- Advocacy staffing has not proportionately increased with the increase in counseling related work
- In 2019, Pre-SIP, with only two counselors, each counselor was handling a total of 71 cases per month, which include retirement, survivor, and Medicare aging-in cases (total of 1,674 cases/year or about 140 cases/month).
- Comparable counseling in other Division is at 9 cases per retirement counselor per month and survivor benefits are counseled separately by a separate unit.



# HEALTH CONTACTS IN 2021

In 2021, Health Division experienced over 29,000 contacts via phone, emails, and online inquiries.

More than half of inquiries were experienced by Advocacy Unit, which consisted of four staff members.

Each Counselor in Advocacy was also handling over 300 contacts via email and calls per month.

Note: additional temporary staffing was added during the SIP, but the bulk of the work was conducted by full-time health staff

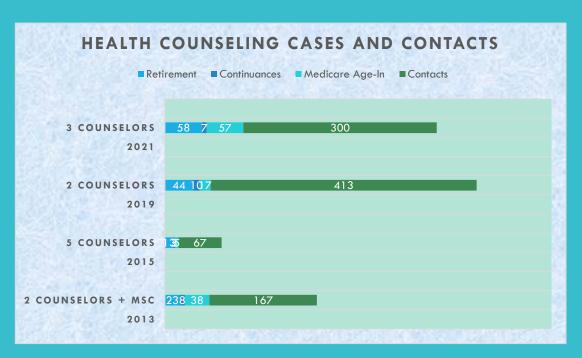






# HEALTH DIVISION STAFFING HISTORY – FOCUS ON ADVOCACY

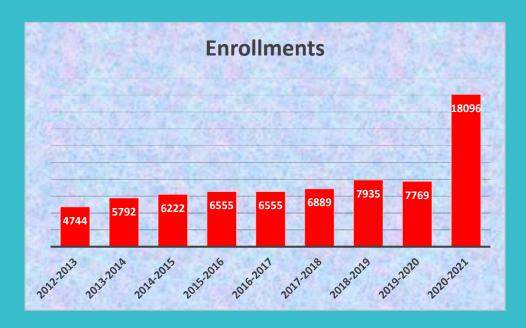
- By 2021, Advocacy staff of three counselors are also responsible for advocacy work on health claims for <u>23,000</u> covered lives
- With <u>71 assigned cases per month in 2019</u>, counselors were also responsible in fielding calls and emails at approximately 400 each per month.
- Before 2021, Advocacy was already experiencing increased Health-related contacts, which was attributable to increase in covered lives, increase Medicare members, and increase in retirements.



# HEALTH DIVISION STAFFING HISTORY – FOCUS ON ENROLLMENT

Enrollment Unit	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021	2021-2022
Enrollment Unit Staff	3	3	4	4	4	4	5	5	6	6

- Enrollments have increased from 4,744 in 2013 to 18,896 in 2021, a 281% increase in enrollment related processing.
- Staffing in Enrollment Unit has not increased comparative to the increase of workload and the complexity of administering the benefits.
- In 2019-20, before the SIP, Enrollment was experiencing about 8,000 Enrollments per month.
- In 2021
  - Each staff was processing 302 cases per month. Although support staff was added to assist with the SIP, the bulk of the work was completed by regular Enrollment staff.
  - Even though the number of staff doubled from three in 2013 to six in 2021, the workload has more than doubled and was compounded by increases in complexity of enrollment processing.
- In 2023, Health will be conducting the carrier RFP, which will increase enrollments if carriers are changed.



# **HEALTH DIVISION TWO YEAR STAFFING PLAN**



# TWO-YEAR STAFF PROPOSAL FOR ENROLLMENT AND ADVOCACY UNITS



2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-2022	2022-23	2023-24
3	3	4	. 4	4	4	5	5	6	6	6	9
3	3	3	6	6	6	6	3	4	5	6	8
	f 3										

### If additional staff is approved:

- In Advocacy, case assignments per staff would be reduced from 71 each counselor with two counselors to 35 with four counselors in 2022-23, and 23 with six counselors in 2023-24.
- Advocacy will have additional advocates to answer member calls and emails, reducing wait time for claims responses.
- In Enrollment, additional enrollment representatives would be added and would reduce case load from 111 cases with six staff (at 8,000 enrollment cases per year) to 83 by 2023-24 with eight staff.
- Quality of inputs and member counseling would improve.

# HEALTH DIVISION STAFFING HISTORY – FOCUS ON ADVOCACY AND ENROLLMENT





- This is an illustration of the number of cases that can be reduced, if additional staff are added. However, yearly assessment is needed to determine if the staffing is appropriate.
- We hope to accomplish:
  - Reduction of cases per staff, reduction in overtime, reduction of staff turn over, ability to monitor issues, ability to implement succession plan by spreading the knowledge to staff
- Timeliness in responding to member contacts would improve
- Increase support in Advocacy would also improve services in Enrollment, Member Service Center, and Retirement Services.

# Current Authorized Positions And Positions Needed to Meet Program Objectives

The bulk of the increase is in Advocacy and Enrollment, which will require additional resources to tackle the uptick of workload.

		2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-2022	2022-23	2023-24
1. Health Administration Support													
	Staff	5	6	5	5	6	6	4	4	4	5		6
												_	
Enrollment Unit	Staff	3	3	4	4	4	4	5	5	6	6		9
	Sidil	J	J		•	_		J	J	J			
Advocacy Unit													
	Staff	3	3	3	6	6	6	6	3	4	5		8
Accounts Reconciliation Unit													
Accounts Reconciliation only	Staff	4	4	3	3	3	3	3	5	5	5		5
Medicare Compliance Unit													
	Staff	0	0	0	0	0	0	0	0	0	2	2	2 2
Wellness Program													
	Staff	o	o	o	o	o	o	2	2	2	3	3	4
1	Total	15	16	15	18	19	19	20	19	21	26	28	34

# IMPACT TO OVERALL HEALTH DIVISION IF POSITIONS ARE FUNDED

- Health enrollment and counseling will not be delayed
  - Member Service Center and Service Retirement Unit will also be supported answering calls and member inquiries
  - Cases per Staff in Advocacy and Enrollment will decrease
- Elimination of unintended cost to the plan and to members delayed enrollment could cost members additional lifetime penalties and cost to the plan
- Institutional knowledge would be spread out to various teams
- Increase morale and decrease turn over
  - In Enrollment, only three out of seven staff members have more than two years of service at LACERS Health
- Projects would be supported and completed timely
- Senior Managers and Supervisors, currently doing staff work, due to lack of staffing such as: inputting enrollment information for member; claims assistance; daily member inquires; Medicare compliance follow-up; monthly eligibility review and reporting; dependent audits, etc., would also be supported, so that they can focus on higher level management administration.



# **WELLNESS PROGRAM**



## **WELLNESS**

- Current staff = 3
- Positions Needed To Meet Program Objectives = 4

### Wellness program participation 3-year metrics:

- 2019 to 2020: Baseline: 4993 , Target: 6000, Actual: 6626
- 2020 to 2021: Baseline: 6626, Target: 1000, Actual: 851
- 2021 to 2022: Baseline: 851. Target: 1000. Actual: 1394
- 2022 to 2023: Baseline: 1394, Target: 1500, Actual: TBD

### **Online programming (Current Staff)**

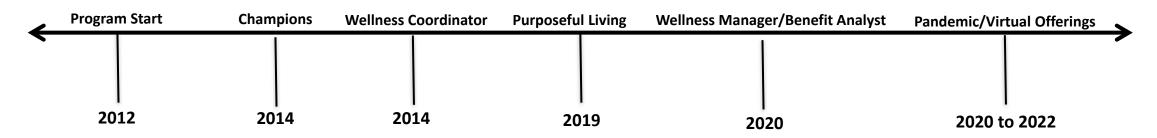
- 36 Technology, Fitness, Brain Health Classes
- 26 Informational Webinars
- 1 In-Person Gathering (Fitness Class Hike/5k)
- 30 Aging Mastery Classes
- 2 Newsletters
- 6 Online Open Enrollment Meetings
- 7 In-Person & 5 Online Champion Activities

#### Online & in-person programming (Additional Staff)

- 36 Technology, Fitness, Brain Health Classes
- 26 Informational Webinars
- 4 In-Person Gatherings (AMP Reunion, Hike/5k, Gala, Extravaganza)
- 30 Aging Mastery Classes
- 2 Newsletters
- 6 In-Person & 6 Online Open Enrollment Meetings
- 7 In-Person & 5 Online Champion Activities

# WELLNESS STAFFING-PROGRAM PARTICIPATION

YEAR	LACERS STAFF	PARTICIPATION	KEENAN CONSULTANTS
2019	5 + MSC	6626	4
2020	2	851	2
2021	3	1394	2





FY21-22 Current

Authorized Positions

■ <u>Twelve (12) Regular Positions</u>

Five (5) Substitute Authorities

Five (5) Part-time Staff

Overtime (\$147,000)

FY22-23 Positions
Needed to Meet

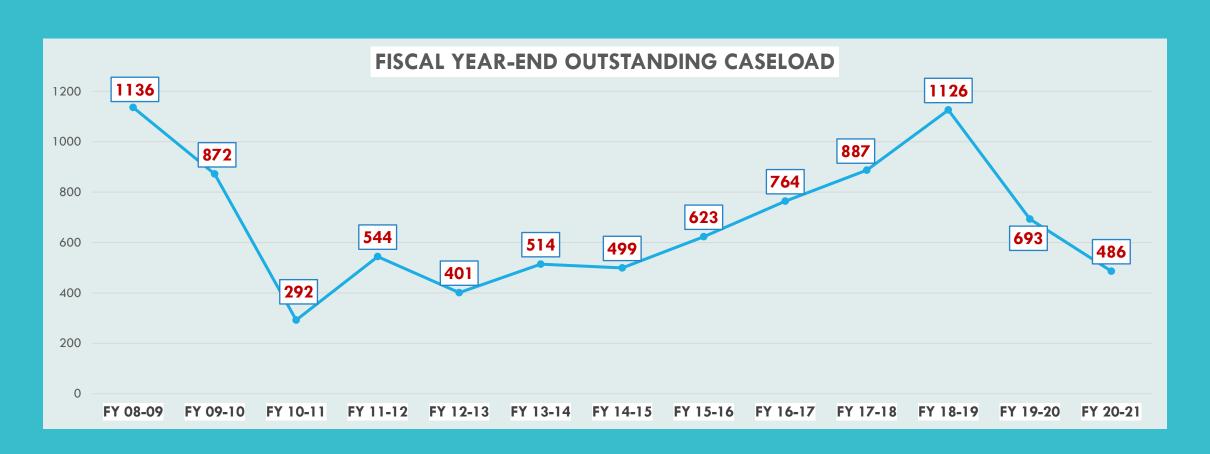
**Program Objectives** 

Twelve (12) Regular Positions

Four (4) Substitute Authorities

Five (5) Part-time Staff

Overtime (\$127,000)



FY21-22 Current
Authorized
Positions

- <u>Twelve (12) Regular Positions</u>
- Five (5) Substitute Authorities
- Five (5) Part-time Staff
- Overtime (\$147,000)

FY22-23 Positions

**Program Objectives** 

Twelve (12) Regular Positions

Needed to Meet

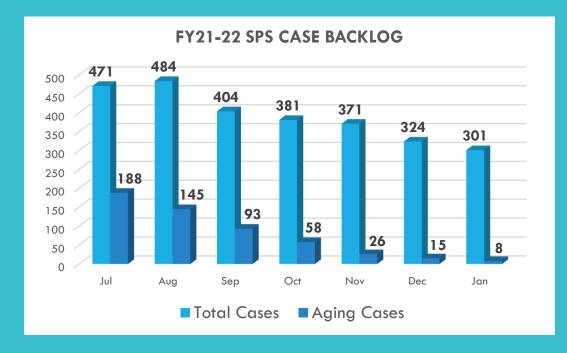
Four (4) Substitute Authorities

■ Five (5) Part-time Staff

Overtime (\$127,000)

#### **CASE BACKLOG** (FY 21-22)

- <u>Case count</u> was reduced by **36%** -- from **471** cases to **301** cases.
- Aging cases decreased by 96% -- from 188 cases to 8 cases.



#### **PROCESSING WAIT TIME (FY 21-22)**

- The average wait time was reduced by 50% from 12 months to 6 months.
- This is <u>cost beneficial to our Members</u> as some service buybacks are calculated based on the Member's salary at the time of purchase.



FY21-22 Current

Authorized Positions

- Twelve (12) Regular Positions
- Five (5) Substitute Authorities
- Five (5) Part-time Staff
- Overtime (\$147,000)

FY22-23 Positions

Needed to Meet

Program Objectives •

Twelve (12) Regular Positions

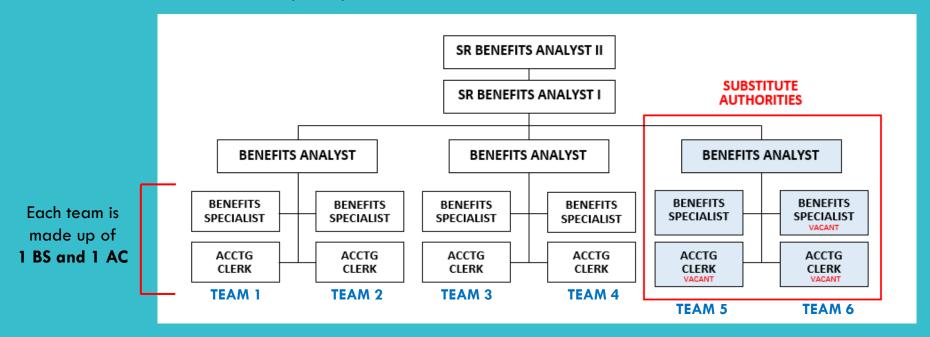
Four (4) Substitute Authorities

■ Five (5) Part-time Staff

Overtime (\$127,000)

#### **SPS ORGANIZATION CHART –** The section is comprised of:

- 12 regular positions, of which 10 are directly involved in the processing of cases: 2 BAs, 4 BSs, and 4 ACs
- 5 substitute authorities: 1 BA, 2 BSs, and 2 ACs



• Counting only <u>regular authorities</u>, there are **4 Teams**. With the <u>substitute authorities</u>, there are **6 Teams** in total.

FY21-22 Current

Authorized Positions

Twelve (12) Regular Positions

Five (5) Substitute Authorities

- Five (5) Part-time Staff
- Overtime (\$147,000)

FY22-23 Positions

Needed to Meet
Program Objectives

Twelve (12) Regular Positions

Four (4) Substitute Authorities

Five (5) Part-time Staff

Overtime (\$127,000)

#### CASE PROCESSING RATE: REGULAR POSITIONS ONLY

With only the regular authorities working on the caseload, SPS is able to process an average of 144 cases per month or 1,728 cases per year.

#### CASE PROCESSING RATE: REGULAR POSITIONS AND SUBSTITUTE AUTHORITIES

With the regular authorities **and** substitute authorities, SPS is able to process an average of 216 cases per month or 2,592 cases per year.

#### **SPS CASE PROCESSING RATES TEAM COUNT** CASES CASES CASES (1 Benefits Specialist + 1 Accounting Clerk) **PER DAY PER MONTH PER YEAR** 1 Team 2 36 432 4 Teams 8 144 1,728 (Regular Positions Only) 6 Teams 12 216 2,592 (Regular Positions + Substitute Authorities)

FY21-22 Current
Authorized
Positions

- Twelve (12) Regular Positions
- Five (5) Substitute Authorities
- Five (5) Part-time Staff
- Overtime (\$147,000)

FY22-23 Positions
Needed to Meet

**Program Objectives** 

Twelve (12) Regular Positions

Four (4) Substitute Authorities

■ Five (5) Part-time Staff

Overtime (\$127,000)

### **NEW / INCOMING CASES**

- Last fiscal year's monthly average number of incoming cases was 88.
- This fiscal year, we are seeing an <u>increase</u> in the number of applications or new cases received.
- To date, the FY 2021-22 monthly average is 103.

		FY :	2021-2	22 TOT	AL NE	W / IN	COMI	NG CA	SES		
JUL	AUG	SEP	ОСТ	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN
94	77	95	142	90	100	121					

#### **TOTAL SECTION CASE COUNT**

The number of outstanding cases is expected to drop to 96 by the end of this fiscal year, based on the incoming case monthly average of 103 and the processing rate monthly average of 144.

		ESTIMATED MONTHLY NUMBERS (BASED ON 4 TEAMS)								
	ACTUAL	<b>NEW</b> Based on Average (+)	SUB TOTAL	PROCESSED  Based on Average (-)	TOTAL					
JUL	471									
AUG	484									
SEP	414									
ОСТ	381									
NOV	371									
DEC	324									
JAN	301									
FEB		103	404	144	260					
MAR		103	363	144	219					
APR		103	322	144	1 <b>7</b> 8					
MAY		103	281	144	137					
JUN		103	240	144	96					

FY21-22 Current Authorized

**Positions** 

- Twelve (12) Regular Positions
- Five (5) Substitute Authorities
- Five (5) Part-time Staff
- Overtime (\$147,000)

FY22-23 Positions Needed to Meet

**Program Objectives** 

- Twelve (12) Regular Positions
- Four (4) Substitute Authorities
- Five (5) Part-time Staff
- Overtime (\$127,000)



### RESULTS:

- ✓ Reduced the section's backlog
- ✓ Reduced the number of aging cases
- ✓ Reduced the average processing wait time

### **RISKS / THREATS:**

- Anticipated <u>vacancies</u> / <u>loss of</u> staff due to attrition (retirement, resignation, promotion, on loan)
- Increase in the number of new cases
- Special projects and competing priorities



#### **MITIGATION:**

- Continue use of substitute authorities
- Continue use of part-time staff
- Continue use of overtime
- Continue training of staff
- Shadow departing employees to capture institutional knowledge

FY21-22 Current

Authorized Positions

Twelve (12) Regular Positions

■ Five (5) Substitute Authorities

■ Five (5) Part-time Staff

Overtime (\$147,000)

FY22-23 Positions

Needed to Meet

**Program Objectives** 

Twelve (12) Regular Positions

Four (4) Substitute Authorities

■ Five (5) Part-time Staff

Overtime (\$127,000)

	2012-13	2013-14	2014-15	2015-16	2016-17	201 <i>7</i> -18	2018-19	2019-20	2020-21	2021-2022	2022-23	2023-24
SERVICE PROCESSING SECTION												
Regular Staff	11	11	11	11	11	11	11	12	12	12	12	14
TOTAL	11	11	11	11	11	11	11	12	12	12	12	14

# SUMMARY — PROPOSED GROWTH FOR SERVICE PROCESSING SECTION

## THANK YOU FOR YOUR CONSIDERATION.

# HEALTH, WELLNESS, AND BUYBACK DIVISION

