THE JEFFERSON HEALTH PLAN

FINANCIAL STATEMENTS
WITH REQUIRED SUPPLEMENTAL INFORMATION
AND INDEPENDENT AUDITORS' REPORT

JUNE 30, 2019



88 East Broad Street Columbus, Ohio 43215 IPAReport@ohioauditor.gov (800) 282-0370

Board of Directors Jefferson Health Plan 2023 Sunset Blvd Steubenville, Ohio 43952

We have reviewed the *Independent Auditors' Report* of the Jefferson Health Plan, Jefferson County, prepared by Schneider Downs & Co., Inc., for the audit period July 1, 2018 through June 30, 2019. Based upon this review, we have accepted these reports in lieu of the audit required by Section 117.11, Revised Code. The Auditor of State did not audit the accompanying financial statements and, accordingly, we are unable to express, and do not express an opinion on them.

Our review was made in reference to the applicable sections of legislative criteria, as reflected by the Ohio Constitution, and the Revised Code, policies, procedures and guidelines of the Auditor of State, regulations and grant requirements. The Jefferson Health Plan is responsible for compliance with these laws and regulations.

Keith Faber Auditor of State Columbus, Ohio

February 21, 2020



CONTENTS

	PAGE
INDEPENDENT AUDITORS' REPORT	1 - 2
MANAGEMENT'S DISCUSSION AND ANALYSIS	3 - 6
STATEMENT OF NET POSITION	7
STATEMENT OF REVENUES, EXPENSES AND CHANGE IN NET POSITION	8
STATEMENT OF CASH FLOWS	9
NOTES TO THE FINANCIAL STATEMENTS	10 - 36
REQUIRED SUPPLEMENTAL INFORMATION SCHEDULE OF CLAIMS DEVELOPMENT	37-38
SCHEDULE OF THE CONSORTIUM'S PROPORTIONATE SHARE OF THE NET PENSION LIABILITY	39
SCHEDULE OF THE CONSORTIUM'S PENSION CONTRIBUTIONS	40
SCHEDULE OF THE CONSORTIUM'S PROPORTIONATE SHARE OF THE NET OPEB LIABILITY	41
SCHEDULE OF THE CONSORTIUM'S OPEB CONTRIBUTIONS	42
INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS	43 – 44





INDEPENDENT AUDITORS' REPORT

Board of Directors The Jefferson Health Plan Steubenville, Ohio

Report on the Financial Statements

We have audited the accompanying financial statements of The Jefferson Health Plan (the Consortium) as of and for the year ended June 30, 2019, and the related notes to the financial statements, which collectively comprise the Consortium's basic financial statements as listed in the table of contents.

Management's Responsibility for the Financial Statements

Management is responsible for preparing and fairly presenting these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes designing, implementing, and maintaining internal control relevant to preparing and fairly presenting financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to opine on these financial statements based on our audit. We audited in accordance with auditing standards generally accepted in the United States of America and the financial audit standards in the Comptroller General of the United States' *Government Auditing Standards*. Those standards require us to plan and perform the audit to reasonably assure the financial statements are free from material misstatement.

An audit requires obtaining evidence about financial statement amounts and disclosures. The procedures selected depend on our judgment, including assessing the risks of material financial statement misstatement, whether due to fraud or error. In assessing those risks, we consider internal control relevant to the Consortium's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not to the extent needed to opine on the effectiveness of the Consortium's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of management's accounting policies and the reasonableness of their significant accounting estimates, as well as our evaluation of the overall financial statement presentation.

We believe the audit evidence we obtained is sufficient and appropriate to support our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Consortium as of June 30, 2019 and the changes in its net financial position and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matters

Required Supplementary Information

Accounting principles generally accepted in the United States of America require this presentation to include Management's Discussion and Analysis, Ten-Year Claims Development Information, the Schedule of the Consortium's Proportionate Share of the Net Pension Liability – Ohio Public Employees Retirement System – Traditional Plan, the Schedule of the Consortium's Contributions to the Ohio Public Employees Retirement System – Traditional Plan, the Schedule of the Consortium's Proportionate Share of the Net OPEB Liability, and the Schedule of the Consortium's OPEB Contributions, listed in the table of contents, to supplement the basic financial statements. Although this information is not part of the basic financial statements, the Governmental Accounting Standards Board considers it essential for placing the basic financial statements in an appropriate operational, economic, or historical context. We applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, consisting of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries to the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We do not opine or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to opine or provide any other assurance.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated December 30, 2019, on our consideration of the Consortium's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. That report describes the scope of our internal control testing over financial reporting and compliance, and the results of that testing, and does not opine on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Consortium's internal control over financial reporting and compliance.

Schneider Downs & Co., Unc.

Columbus, Ohio December 30, 2019

THE JEFFERSON HEALTH PLAN MANAGEMENT'S DISCUSSION AND ANALYSIS June 30, 2019

Our discussion and analysis of The Jefferson Health Plan (the Consortium) financial performance provides an overview of the Consortium's financial activities for the fiscal year ended June 30, 2019. Management's Discussion and Analysis is intended to provide an overview of the Consortium's financial performance as a whole. The readers should also review the basic financial statements and the notes to the basic financial statements in conjunction to the Management's Discussion and Analysis.

USING THIS ANNUAL REPORT

This annual report consists of a series of financial statements, notes to the financial statements and required supplemental information. The statement of net position and the statement of revenues, expenses, and change in net position provide information about the activities of the Consortium as a whole and present a longer-term view of the Consortium's finances.

- Statement of Net Position statement includes Consortium assets and liabilities as well as deferred inflows and outflows. The statement provides information about the nature and amount of resources (assets) owned by the Consortium, and obligations owed by the Consortium (liabilities) at June 30, 2019. The Consortium's net position is the difference between the assets and liabilities.
- Statement of Revenues, Expenses, and Change in Net Position statement includes information on the Consortium's operating and non-operating revenue and expenses for the fiscal year ended June 30, 2019. Operating revenues consist primarily of contributions from members, and the major sources of operating expenses consist of claims payments and administrative fees. Non-operating revenue consists of investment earnings (losses) and infrastructure loan interest.
- Statement of Cash Flows statement is prepared on the direct method of reporting and provides information about the Consortium's cash receipts and cash disbursements. The statement is summarized with net changes in cash from operating, investing, and financing activities.

Governmental Accounting Standards Board (GASB) standards are national and apply to all government financial reports prepared in accordance with generally accepted accounting principles. As more fully described in Notes 1, 7, and 8 to the financial statements, the Consortium adopted GASB Statement No. 75, Accounting and Financial Reporting for Postemployment Benefits Other Than Pensions. This is similar to GASB Statement No. 68, Accounting and Financial Reporting for Pensions.

When accounting for pension costs, GASB 68 takes an earnings approach to pension accounting; however, the nature of Ohio's statewide pension systems and state law governing those systems requires additional explanation in order to properly understand the information presented in these statements.

Under the standards required by GASB 68, the net pension liability equals the Consortium's proportionate share of the plan's collective:

- 1. Present value of estimated future pension benefits attributable to active and inactive employees' past service
- 2. Minus plan assets available to pay these benefits

THE JEFFERSON HEALTH PLAN MANAGEMENT'S DISCUSSION AND ANALYSIS (CONTINUED) June 30, 2019

GASB notes that pension obligations, whether funded or unfunded, are part of the "employment exchange" - that is, the employee is trading his or her labor in exchange for wages, benefits, and the promise of a future pension. GASB noted that the unfunded portion of this pension promise is a present obligation of the government, part of a bargained-for benefit to the employee, and should accordingly be reported by the government as a liability since they received the benefit of the exchange. However, the Consortium is not responsible for certain key factors affecting the balance of this liability. In Ohio, the employee shares the obligation of funding pension benefits with the employer. Both employer and employee contribution rates are capped by state statute. A change in these caps requires action of both Houses of the General Assembly and approval of the governor of the State of Ohio. Benefit provisions are also determined by state statute. The employee enters the employment exchange with the knowledge that the employer's promise is limited not by contract but by law. The employer enters the exchange also knowing that there is a specific, legal limit to its contribution to the pension system. In Ohio, there is no legal means to enforce the unfunded liability of the pension system as against the public employer. State law operates to mitigate/lessen the moral obligation of the public employer to the employee, because all parties enter the employment exchange with notice as to the law. The pension system is responsible for the administration of the plan.

Most long-term liabilities have set repayment schedules or, in the case of compensated absences (i.e.,sick and vacation leave), are satisfied through paid time-off or termination payments. There is no repayment schedule for the net pension liability. As explained above, changes in pension benefits, contribution rates, and return on investments affect the balance of the net pension liability, but are outside the control of the local government. In the event that contributions, investment returns, and other changes are insufficient to keep up with required pension payments, state statute does not assign/identify the responsible party for the unfunded portion. Due to the unique nature of how the net pension liability is satisfied, this liability is separately identified within the long-term liability section of the statement of net position.

In accordance with GASB 68 and GASB 75, the Consortium's statements prepared on an accrual basis of accounting include an annual pension expense and other post-employment benefits, respectively, for their proportionate share of each plan's change in net pension liability not accounted for as deferred inflows/outflows.

Under GASB 68 and GASB 75, the Consortium is reporting net pension and net post-employment benefits liabilities and deferred inflows/outflows of resources related to pension and other post-employment benefits on the accrual basis of accounting.

FINANCIAL HIGHLIGHTS

- As described in Note 1 to the financial statements the Consortium has prepared its financial statements using the accrual method of accounting in accordance with accounting principles generally accepted in the United States of America (GAAP) to meet the reporting requirements of the Ohio Administrative Code 117-2-03(B).
- As required, the Consortium adopted GASB Statement No. 75 during the fiscal year. As a result, the statement of net position includes a liability for unfunded portion of the retiree's healthcare costs. In order to adopt GASB Statement No. 75, the beginning net position for the fiscal year has been restated by (\$495,182). The net OPEB liability for the Consortium at June 30, 2019 is \$839,885 with deferred outflows of \$274,019 and deferred inflows of \$2,278.

THE JEFFERSON HEALTH PLAN MANAGEMENT'S DISCUSSION AND ANALYSIS (CONTINUED) June 30, 2019

- The Consortium's net position was \$117,927,100 and \$111,163,131 (as restated) at June 30, 2019 and 2018, respectively. This represents an increase to the net position of \$6,763,969 from July 1, 2018 to June 30, 2019 and an increase to the net position of \$10,175,109 from July 1, 2017 to June 30, 2018.
- The Jefferson Health Plan utilizes various third-party administrators (TPA) to adjust and pay medical claims. Reserves are established for claims that have occurred, but are not yet known to the Consortium, as well as for reported claims that are expected to develop. These incurred but not reported (IBNR) claims are reserved for after an independent actuarial analysis. Findley Davies conducted said analysis to determine a funding rate and the adequacy and reasonableness of the reserves. The reserves are \$31,182,310 and \$27,903,372 at June 30, 2019 and 2018, respectively.
- The Consortium made an infrastructure loan to a member dated October 2017 in the amount of \$1,500,000. The infrastructure loan calls for sixty payments of \$26,687, including interest at 2.60%. The Consortium received payments on this infrastructure loan of \$320,244 and \$213,498, which includes \$30,650 and \$24,572 of interest during fiscal years 2019 and 2018, respectively. Infrastructure loans are available only to allocated members of the Consortium who have been a member of the Consortium for at least two years and are in good standing. If a member meets the requirements, they may apply to obtain an infrastructure loan for the construction of new infrastructure or reconstruction, rehabilitation, restoration, or replacement projects.
- For the fiscal year ended June 30, 2019, the Consortium had operating revenues of \$285,015,084 and operating expenses of \$283,690,170 with operating income of \$1,324,914. For the fiscal year ended June 30, 2019, the Consortium had investment gains of \$5,393,029 and had interest income from infrastructure loans of \$46,026. For the fiscal year ended June 30, 2018, the Consortium had operating revenues of \$280,598,720, and operating expenses of \$270,000,439 with operating income of \$10,598,281. For the fiscal year ended June 30, 2018, the Consortium had investment losses of \$(468,663) and had interest income from infrastructure loans of \$45,491. Operating revenues were net of moratoriums of \$8,073,497 and \$7,404,394 for the fiscal years ended June 30, 2019 and 2018, respectively. Operating expenses include \$8,121,954 and \$10,544,107 of reimbursements of member balances during the fiscal years ended June 30, 2019 and 2018, respectively. For the fiscal year ended June 30, 2019 operating revenues increased due to an increase in contributions from members and expenses increased due to an increase in claims.

CAPITAL ASSETS AND DEBT ADMINISTRATION

At June 30, 2019, the Consortium had \$104,694 invested in three vehicles. The Consortium did not finance these vehicles. On January 1, 2018, the Consortium purchased intellectual property for \$2,196,000. Depreciation and amortization are calculated on the straight-line basis over the estimated useful lives of capital assets. Vehicles have useful lives of five years with total depreciation expense of \$18,615 and \$13,012 for the years ended June 30, 2019 and 2018, respectively. Intellectual property has a useful life of seven years with total amortization expense of \$313,714 and \$156,858 for the years ended June 30, 2019 and 2018, respectively. Intellectual property related to proprietary underwriting methodologies and models.

The Consortium has an intellectual property payable of \$1,464,000 and \$1,830,000 as of June 30, 2019 and 2018, respectively. The payable is for consideration of rights and assignment of the intellectual property.

THE JEFFERSON HEALTH PLAN MANAGEMENT'S DISCUSSION AND ANALYSIS (CONTINUED) June 30, 2019

BUDGET HIGHLIGHTS

The Consortium is not required to follow the budgetary provisions set forth in the Ohio Revised Code Chapter 5705.

CONTACTING THE CONSORTIUM'S FINANCIAL MANAGEMENT

This financial report is designated to provide citizens, taxpayers, and investors and creditors with a general overview of the Consortium's finances, and to show the Consortium's accountability for the money it received. If you have any questions about this report, or need additional information, contact the fiscal agent, Jefferson County Educational Service Center; attention: Don Donahue, 2023 Sunset Blvd., Steubenville, Ohio, 43952.

THE JEFFERSON HEALTH PLAN STATEMENT OF NET POSITION June 30, 2019

ASSETS AND DEFERRED OUTFLOWS

Non-capital assets		
Cash and cash equivalents	\$	10,360,134
Investments		143,002,658
Receivables:		
Accounts receivable		1,504,387
Investment income receivable		622,108
Infrastructure loan receivable		1,672,087
Interest income receivable - infrastructure loan		5,910
Prepaid expenses and other current assets		62,007
Deposits		270,400
Total non-capital assets		157,499,691
Capital assets net of accumulated depreciation and amortization		1,782,455
Total assets		159,282,146
Deferred outflows of resources		
Deferred outflows - pension		701,099
Deferred outflows - OPEB		274,019
Total deferred outflows of resources		975,118
		9/3,118
Total assets and deferred outflows of resources	\$	160,257,264
LIABILITIES, DEFERRED INFLOWS, AND NET POSITION		
Liabilities		
Accounts payable and other accrued liabilities	\$	376,066
Accrued payroll and payroll taxes		104,626
Reserve for claims		31,182,310
Intellectual property payable		1,464,000
Net pension liability Net OPEB liability		1,622,797
Unearned revenue		839,885 6,717,035
Total liabilities		42,306,719
Total habilities		42,300,719
Deferred inflows of resources		
Deferred inflows - pension		21,167
Deferred inflows - OPEB		2,278
Total deferred inflows of resources		23,445
Net position		,
Unrestricted		117,608,645
Investment in capital assets, net of related payable		318,455
Total net position	_	117,927,100
Total liabilities, deferred inflows, and net position	\$	160,257,264

THE JEFFERSON HEALTH PLAN STATEMENT OF REVENUES, EXPENSES, AND CHANGE IN NET POSITION For the Year Ended June 30, 2019

Operating revenues		
Contributions from members - net		\$ 281,889,200
Rebates		2,526,620
Other revenues		 599,264
	Total operating revenues	285,015,084
Operating expenses		
Claims expenses		255,368,073
Administrative fees		16,821,928
Depreciation and amortization		332,329
Affordable Care Act fees and taxes		68,713
Purchased services		1,567,923
Stop-loss premiums		888,297
Reimbursement of member balances		8,121,954
Life, vision, and EAP premiums		 520,953
	Total operating expenses	 283,690,170
	Operating income	1,324,914
Non-operating revenue		
Investment gains		5,393,029
Infrastructure loan interest		 46,026
	Total non-operating revenue	5,439,055
Change in net position		\$ 6,763,969
Net position		
Beginning of year - as previously reported		\$ 111,658,313
Restatement of net position at June 30, 2018 for change in		
accounting principle (Note 1)		 (495,182)
Net position at June 30, 2018 - as restated		111,163,131
Total change in net position		 6,763,969
End of year		\$ 117,927,100

THE JEFFERSON HEALTH PLAN STATEMENT OF CASH FLOWS For the Year Ended June 30, 2019

Cash Flows from Operating Activities		
Cash received from members	\$	282,354,531
Cash received from other		354,320
Cash received from rebates		2,526,620
Cash paid to members		(8,121,954)
Cash paid for claims		(252,089,135)
Cash paid for administrative and general expenses		(19,167,579)
Net cash provided by operating activities		5,856,803
Cash Flows from Investing Activities		
Investment income received		3,147,062
Infrastructure loans interest received		47,176
Receipts from repayments on infrastructure loans		381,519
Purchase of capital assets		(39,632)
Purchase of investments		(123,062,799)
Proceeds from sales and maturities of investments		115,685,661
Net cash used in investing activities		(3,841,013)
Cash Flows from Financing Activities		
Payments on intellectual property payable		(366,000)
Net cash used in financing activities		(366,000)
· · · · · · · · · · · · · · · · · · ·		<u> </u>
Net Increase in Cash and Cash Equivalents		1,649,790
Cash and Cash Equivalents - Beginning of year		8,710,344
Cash and Cash Equivalents - End of year	\$	10,360,134
A reconciliation of operating income to net cash provided by operating activities is as follows:		
Reconciliation of Operating Income to Net Cash provided by		
Operating Activities	Φ	1 224 014
Operating income	\$	1,324,914
Adjustments to reconcile operating income to net cash provided by operating activities:		
		222 220
Depreciation and amortization Changes in assets and liabilities:		332,329
Accounts receivable		(371,860)
Prepaid expenses and other current assets		392,923
Deposits		(26,000)
Accounts payable and other accrued liabilities		130,454
Accrued payroll and payroll taxes		
Pension and OPEB liability, deferred outflows, and deferred inflows		(28,127) 245,804
Reserve for claims		
Unearned revenue		3,278,938
Net cash provided by operating activities	•	577,428
rici cash provided by operating activities	\$	5,856,803

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A. Description of the Entity

The Jefferson Health Plan (the Consortium) is a claims servicing pool established pursuant to Ohio Revised Code (ORC) Chapter 167 and Section 9.833. The legislative body of the Consortium is an assembly consisting of a designee from each of its 112 members. The membership of the assembly appoints a nine-member Board of Directors, which acts as the managerial body of the Consortium. The Consortium provides a cooperative program to administer medical, prescription, vision, and dental benefits for employees of participating entities and their eligible dependents. In connection with amendments to Ohio House Bill 64, the Consortium expanded its marketing efforts to other states where permitted by state law. During fiscal year 2018, the Consortium reached an agreement with a member in a state outside of Ohio as permitted by Ohio House Bill 64.

Member contributions are calculated to annually produce a sufficient sum of money within the self-insurance pool adequate to fund administrative expenses of the Consortium and to create adequate reserves for claims and allocated expenses. The Consortium has a stop-loss policy from a third party for claims in excess of \$1,500,000 per participant at June 30, 2019. The Consortium has an aggregate stop-loss policy of \$581,155,200 as of June 30, 2019.

Besides standard monthly contributions, the Consortium may extend an assessment to each member based on the ratio of total expense to total income for each member during the previous three fiscal years ended June 30. Each participant's medical, prescription, vision, and dental balances are separately reviewed for potential assessments. Conversely, a participant may be eligible for a month or two-month waiver of its monthly contributions based on the above calculation.

A participant may withdraw from the Consortium or any particular benefits program. Two participants withdrew from the Consortium, while four additional participants enrolled during the period July 1, 2018 through June 30, 2019.

The Consortium's management believes that these financial statements present all activities for which the Consortium is financially accountable.

The Jefferson County Education Service Center acts as fiscal agent for the Consortium and is a separate reporting entity with separate financial statements. As the Jefferson County Education Service Center is the fiscal agent and a member of the Consortium, the amounts paid to the Jefferson County Education Service Center are considered related party transactions. For the fiscal year ended June 30, 2019, the Consortium had fiscal agent expenses of \$998,643 and \$0 in accounts payable and other accrued liabilities at June 30, 2019.

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

A. Description of the Entity (Continued)

The Board of Directors declared a one-time special dividend for certain eligible participating member organizations during fiscal year 2014. The one-time special dividend was still available for election by qualifying member organizations that have not previously made an election through June 30, 2018. The one-time special dividend was declared to have the effect of transferring the payment of run out claims for a period not longer than six months from the effective date of termination for the member organization to the Consortium.

Member organizations that take part in the one-time special dividend are required to execute a new agreement modifying their original agreement with the Consortium to permanently transfer their payment of run out claims for a period not longer than six months from the effective date of termination to the Consortium from the participating member organization in return for membership in the Consortium for three additional years. The one-time special dividend would transfer a substantial debt from member organizations to the Consortium. Members leaving the Consortium not having given a six month notice of termination are not eligible to participate. At June 30, 2019, thirty-three members retained the one-time special dividend. The two members that terminated from the Consortium during fiscal year 2019 elected the special dividend.

B. Basis of Accounting

These financial statements have been prepared in conformity with accounting principles generally accepted in the United States of America (GAAP).

C. New Accounting Pronouncement

Effective July 1, 2018, the Consortium adopted GASB Statement No. 75, Accounting and Financial Reporting for Postemployment Benefits Other than Pensions, which requires government entities providing OPEB to recognize their unfunded OPEB obligation as a liability for the first time, and to more comprehensively and comparably measure the annual costs of these benefits. In accordance with the statement, the Consortium has reported a change in accounting principle and restated the net position at June 30, 2018 by (\$495,182), which was the net OPEB liability as of June 30, 2018.

D. Cash and Cash Equivalents

The Consortium considers all highly liquid investments with an initial maturity of three months or less when purchased to be cash equivalents. Deposits are either (1) insured by the Federal Depository Insurance Corporation, (2) collateralized by securities specifically pledged by the financial institution to the Consortium, or (3) collateralized by the financial institution's public entity deposit pool.

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

E. Valuation of Investments

The Plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset in an orderly transaction between market participants at the measurement date.

Investment income or loss (including realized/unrealized gains and losses on investments, and interest) is recognized in the statement of revenues, expenses, and change in net position as a component of non-operating revenue.

Investment securities are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the value of investment securities will occur in the near term.

F. Receivables and Contributions

All receivables are shown net of an allowance for uncollectible amounts, if any. Receivables are recorded as an asset in the period that they are earned. Receivables are written off when deemed uncollectible. The Consortium had no uncollectible amounts at June 30, 2019.

All members are required to remit monthly contributions to the Consortium, which are used to pay claims and administrative expenses. The monthly contribution is determined for each member in accordance with the number of covered employees and dependents and the prior loss experience of the respective member group that is set each plan year. Member contributions are recorded in revenue in the period that they are earned. A premium moratoria is used to offset member cash remittals to the consortium and can be granted up to a three-month limit at any one time. A member may request a premium moratoria once they have achieved sufficient reserves in their account. Contributions from members are shown on the statement of revenues, expenses, and change in net position net of approved premium moratorias. For the fiscal year ended June 30, 2019, members were granted moratorias of \$8,073,497.

G. Capital Assets

Capital assets, which consist of vehicles and intellectual property, are carried at cost, less accumulated depreciation and amortization. Depreciation and amortization are calculated on the straight-line basis over the estimated useful lives of depreciable assets. Vehicles have useful lives of five years and the intellectual property has a useful life of seven years. Costs of maintenance and repairs are charged to expense when incurred.

H. Reserve for Claims

Reserves for claims represent the Consortium's reserves for incurred claims, plus an estimate of provisions for loss development and claims incurred but not reported (IBNR) and allocated and unallocated loss adjustment expenses. See Note 6 for additional information related to the Consortium's reserve for claims.

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

I. Unearned Revenue

Unearned revenues represent contributions paid in advance of the coverage date by members at June 30, 2019. The contributions will be recognized as revenue in the month to which they pertain.

J. Pensions and Other Postemployment Benefits (OPEB)

For purposes of measuring the net pension and net OPEB liabilities, deferred outflows of resources and deferred inflows of resources related to pension and OPEB, and pension and OPEB expenses, information about the fiduciary net position of the retirement system and additions to/deductions from their fiduciary net position have been determined on the same basis as they are reported by the retirement system. For this purpose, benefit payments (including refunds of employee contributions) are recognized when due and payable in accordance with the benefit terms. The retirement system reports investments at fair value.

K. Deferred Outflows and Inflows of Resources

In addition to assets, the statement of net position reports a separate section for deferred outflows of resources. Deferred outflows of resources represent a consumption of net position that applies to a future period(s) and will not be recognized as an outflow of resources until then. For the Consortium, deferred outflows of resources are reported for components associated with the net pension and net OPEB liabilities explained in Notes 7 and 8.

In addition to liabilities, the statement of net position reports a separate section for deferred inflows of resources. Deferred inflows of resources represent an acquisition of net position that applies to a future period(s) and will not be recognized as an inflow of resources until then. For the Consortium, deferred inflows of resources are reported for components associated with the net pension and net OPEB liabilities explained in Notes 7 and 8.

L. Net Position

Unrestricted net position consists of net position that does not meet the definition of "restricted" or "invested in capital assets, net of related payable."

At June 30, 2019, the Consortium does not have a "restricted" net position.

M. Other Revenues

Other revenues recorded on the statement of revenues, expenses, and change in net position consist of promotional sponsorships and miscellaneous revenues.

N. Use of Estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

O. Budgetary Process

The budgetary process is not a requirement of the Consortium.

2. RISK MANAGEMENT

Self-Insurance

The Consortium is a claims servicing self-insurance pool organized under ORC Section 9.833 for the purpose of establishing and carrying out a cooperative program to administer medical, prescription, vision and dental benefits for employees of the participating entities and their eligible dependents. The Consortium contracts with third-party administrators to process and pay medical, prescription, vision, and dental claims incurred by its members.

The Consortium also purchases stop-loss coverage for claims in excess of a set amount for individual claims.

Each member of the Consortium is obligated to pay a fee based on an estimate of the member's share of the Consortium costs for the fiscal year. Included in this estimate are claims by eligible employees, which are payable by each member, the member's share of the medical, prescription, vision and dental premiums, and their proportionate share of the administrative costs of the Consortium. The actual balance of each member's account is determined on a monthly basis. Each member is required to meet or exceed the claims that have been incurred but not reported and to maintain adequate reserves or current funding to meet or exceed their claims fluctuation reserve requirements. If a member is in a deficit position, the participating member has two fiscal years to make up a negative reserve amount or an insufficient IBNR and three fiscal years to make up insufficient claims fluctuation reserves.

Members are required to provide a six month notice of withdrawal from the Consortium for their termination allowing the Consortium time to determine any withdrawal balance owed to or by the departing member. Any outstanding reserve balances are held by the Consortium for a maximum period of six months to satisfy the payment of claims incurred before termination. The terminating member has the option to pay all of the claims incurred prior to the termination of membership so that any reserves could be released sooner. Members found to be in a deficit position wishing to leave the Consortium will be required to repay the deficit in full within 90 days of the effective withdrawal date. Additionally, such terminating member will be required to pay any claims incurred prior to termination notification.

3. INFRASTRUCTURE BANK

During 2016, the Consortium established an infrastructure bank for its members. In connection with amendments to Ohio House Bill 64 related to regional council of governments, the Consortium is permitted to facilitate projects with qualifying political subdivisions to address urgent local infrastructure needs through an establishment of an infrastructure bank. As of June 30, 2019, the Consortium had two outstanding infrastructure loans.

One of the outstanding infrastructure loans is to a member dated July 2016 in the amount of \$900,000 with payments of \$72,299 for March and November 2017, and \$36,149 and \$72,299 due each March and November starting March 2018, respectively, which includes interest of 2.275%, with a final payment scheduled for November 2025. The other outstanding infrastructure loan is to a member dated October 2017 in the amount of \$1,500,000 with payments of \$26,687, which includes interest of 2.60%, due each month with a final payment scheduled for October 2022. The infrastructure loans are collateralized by the projects for which the loans were made.

The aggregate annual maturities of the infrastructure loans for the five years and thereafter subsequent to June 30, 2019 are as follows:

2020	\$ 391,004
2021	401,018
2022	411,250
2023	206,619
2024	102,744
Thereafter	159,452
Total	\$ 1,672,087

4. INVESTMENTS AND FAIR VALUE MEASUREMENTS

Concentration of Credit Risk

Concentration of credit risk is the risk of inability to recover the value of deposits, investments, or collateral securities in the possession of an outside party. Investment managers are expected to maintain diversified portfolios by sector and issuer. The Consortium has no more than 5% of the fixed income portfolio invested in the securities of any one issuer.

Investments of the Consortium are comprised of the following at June 30, 2019:

	Cost			Market		
Bonds	\$	142,384,896	\$	143,002,658		

Interest Rate Risk

Interest rate risk is the risk that an interest rate change could adversely affect an investment's fair value. The Consortium does not have a policy to limit interest rate risk. The reporting of effective duration in the table below quantifies, to the fullest extent possible, the interest rate risk of the Consortium's fixed income assets.

At June 30, 2019, the Consortium had the following investment maturities:

	<u> </u>	Investment Maturities						
		6 Months or	7 to 12	13 to 18	19 to 24	Greater than		
Investment Type	Fair Value	Less	Months	Months	Months	24 Months		
Bonds	\$ 143,002,658	\$ 39,918,150	\$ 5,944,627	\$ 12,481,115	\$ 10,050,845	\$ 74,607,921		

Investment income on the Consortium's investments is summarized as follows for the fiscal year ended June 30, 2019:

The investment meome	Ψ	3,373,027
Net investment income	2	5,393,029
Net unrealized and realized gain on investments		2,090,214
Interest income	\$	3,302,815

4. INVESTMENTS AND FAIR VALUE MEASUREMENTS (Continued)

Credit Risk

Credit risk is the risk that an issuer or counterparty to an investment will be unable to fulfill its obligations. The Consortium exposure to credit risk on fixed income securities, based on Standard & Poor's Quality Ratings, is as follows at June 30, 2019:

AA+	\$ 107,785,553
A1+	14,960,100
A1	4,953,350
AAA	15,303,655
Total	\$ 143,002,658

Money-Weighted Rate of Return

The money-weighted rate of return expresses investment performance, net of investment expense, adjusted for the changing amounts actually invested. For the fiscal year ended June 30, 2019, the annual money-weighted rate of return on investments, net of investment expense, was 1.90%.

Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1) and the lowest priority to unobservable inputs (level 3). The three levels are described as follows:

- Level 1. Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Consortium has the ability to access.
- Level 2. Inputs to the valuation methodology include:
 - a. Quoted prices for similar assets or liabilities in active markets;
 - b. Quoted prices for identical or similar assets or liabilities in inactive markets;
 - c. Inputs other than quoted prices that are observable for the asset or liability;
 - d. Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

4. INVESTMENTS AND FAIR VALUE MEASUREMENTS (Continued)

Level 3. Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at June 30, 2019.

Bonds: Valued using pricing models that maximize the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings.

The method described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Consortium believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies and assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table sets forth, by level, within the fair value hierarchy, the Consortium's assets carried at fair value:

Fair Value Measurements at
June 30, 2019

				•	June 50, 2017	
Description	_	Total	Level 1 Level 2		Level 3	
Bonds:						
Bank and Finance	\$	9,942,000	-	\$	9,942,000	-
Government Agency		112,085,953	-		112,085,953	-
Municipal		9,971,450	-		9,971,450	-
Treasury		11,003,255			11,003,255	
Total	\$	143,002,658		\$	143,002,658	

5. CAPITAL ASSETS

Capital assets activity for the fiscal year ended June 30, 2019 was as follows:

	Balance			Balance
Capital Assets	July 1, 2018	Additions	Disposals	June 30, 2019
Vehicles	\$ 65,062	\$ 39,632	-	\$ 104,694
Intellectual property	2,196,000	-	-	2,196,000
Total Gross property	2,261,062	39,632	_	2,300,694
Accumulated				
depreciation/amortization	(185,910)	(332,329)	<u>-</u> _	(518,239)
Net	\$ 2,075,152	\$ (292,697)		\$ 1,782,455

On January 1, 2018, the Consortium purchased intellectual property for \$2,196,000. The Consortium has all rights, title, and interest in the intellectual property. The Consortium has a license to use the intellectual property until December 31, 2024. See Note 10 regarding the consideration for the sale of rights and assignment of the intellectual property.

6. RESERVE FOR CLAIMS

The IBNR claims (actuarial liability) at June 30 are used by the Consortium to help determine the rates to charge members. Additionally, the estimation of IBNR, as of a valuation date, allows the consortium to compare the liability to the funds reserved and to determine whether the amounts reserved meet the requirements of ORC Section 9.833. The Consortium has also established a formal funding policy for claims fluctuation reserves to aid in tempering potential significant fluctuations in premiums and contribution levels that may be required. The IBNR claims liability are based on actuarial assumptions that produce a liability estimate consistent with the plan of benefits in force and with administrative practices and have been calculated on actuarial assumptions that are reasonable and appropriate under the circumstances. Premium charges to members are based on calculations provided by the Consortium's Actuary.

6. RESERVE FOR CLAIMS (Continued)

Descrives for Unneid Claims and Claim

The following table represents changes in the reserve for unpaid claims for the Consortium for the fiscal year ended June 30, 2019.

\$ 27,903,372
260,411,205
 (5,043,132)
255,368,073
(229,228,895)
(22,860,240)
 (252,089,135)
\$ 31,182,310
\$

7. PUBLIC EMPLOYEES RETIREMENT SYSTEM DEFINED BENEFIT PENSION PLAN

The Consortium has personnel who are eligible to participant in the Ohio Public Employees Retirement System (OPERS).

Plan Description – OPERS

Plan Description - Consortium employees participate in OPERS. OPERS administers three separate pension plans. The Traditional Pension Plan is a cost-sharing, multiple-employer defined benefit pension plan. The Member-Directed Plan is a defined contribution plan and the Combined Plan is a cost-sharing, multiple-employer defined benefit pension plan with defined contribution features. While members (e.g. Consortium employees) may elect the Member-Directed Plan and the Combined Plan, substantially all employee members are in OPERS' Traditional Pension Plan.

OPERS provides retirement, disability, survivor and death benefits, and annual cost of living adjustments to members of the Traditional Pension Plan. Authority to establish and amend benefits is provided by Chapter 145 of the ORC. OPERS issues a stand-alone financial report that includes financial statements, required supplementary information and detailed information about OPERS' fiduciary net position that may be obtained by visiting https://www.opers.org/financial/reports.shtml, by writing to the Ohio Public Employees Retirement System, 277 East Town Street, Columbus, Ohio 43215-4642, or by calling 800-222-7377.

7. PUBLIC EMPLOYEES RETIREMENT SYSTEM DEFINED BENEFIT PENSION PLAN (Continued)

Senate Bill (SB) 343 was enacted into law with an effective date of January 7, 2013. In the legislation, members were categorized into three groups with varying provisions of the law applicable to each group. The following table provides age and service requirements for retirement and the retirement formula applied to final average salary (FAS) for the three member groups under the Traditional Pension Plan as per the reduced benefits adopted by SB 343 (see OPERS CAFR referenced above for additional information):

Group A	Gr	0	u	p	A
---------	----	---	---	---	---

Eligible to retire prior to January 7, 2013 or five years after January 7, 2013

State and Local

Age and Service Requirements:

Age 60 with 60 months of service credit or Age 55 with 25 years of service credit

Formula:

2.2% of FAS multiplied by years of service for the first 30 years and 2.5% for service years in excess of 30

Group B

20 years of service credit prior to January 7, 2013 or eligible to retire ten years after January 7, 2013

State and Local

Age and Service Requirements: Age 60 with 60 months of service credit or Age 55 with 25 years of service credit

Formula:

2.2% of FAS multiplied by years of service for the first 30 years and 2.5% for service years in excess of 30

Group C

Members not in other Groups and members hired on or after January 7, 2013

State and Local

Age and Service Requirements: Age 57 with 25 years of service credit or Age 62 with 5 years of service credit

Formula:

2.2% of FAS multiplied by years of service for the first 35 years and 2.5% for service years in excess of 35

FAS represents the average of the three highest years of earnings over a member's career for Groups A and B. Group C is based on the average of the five highest years of earnings over a member's career.

Members who retire before meeting the age and years of service credit requirement for unreduced benefits receive a percentage reduction in the benefit amount.

When a benefit recipient has received benefits for 12 months, an annual cost of living adjustment (COLA) is provided. This COLA is calculated on the base retirement benefit at the date of retirement and is not compounded. For those retiring prior to January 7, 2013, the COLA will continue to be a 3% simple annual COLA. For those retiring subsequent to January 7, 2013, beginning in calendar year 2019, the COLA will be based on the average percentage increase in the Consumer Price Index, capped at 3%.

7. PUBLIC EMPLOYEES RETIREMENT SYSTEM DEFINED BENEFIT PENSION PLAN (Continued)

Funding Policy

The ORC provides statutory authority for member and employer contributions as follows:

	State and
	Local (%)
2018 Statutory Maximum Contribution Rates	
Employer	14.0
Employee	10.0
2018 Actual Contribution Rates	
Employer	14.0
Employee	10.0

Employer contribution rates are actuarially determined and are expressed as a percentage of covered payroll.

The Consortium's contractually required contribution for the Traditional Pension Plan was \$129,725 for the fiscal year June 30, 2019. Of this amount, \$14,097 is reported as accounts payable and accrued liabilities at June 30, 2019.

Net Pension Liability

The net pension liability reported on the statement of net position represents a liability to employees for pensions. Pensions are a component of exchange transactions—between an employer and its employees—of salaries and benefits for employee services. Pensions are provided to an employee—on a deferred-payment basis—as part of the total compensation package offered by an employer for employee services each financial period. The obligation to sacrifice resources for pensions is a present obligation because it was created as a result of employment exchanges that already have occurred.

The net pension liability represents the Consortium's proportionate share of each pension plan's collective actuarial present value of projected benefit payments attributable to past periods of service, net of each pension plan's fiduciary net position. The net pension liability calculation is dependent on critical long-term variables, including estimated average life expectancies, earnings on investments, cost of living adjustments and others. While these estimates use the best information available, unknowable future events require adjusting this estimate annually.

7. PUBLIC EMPLOYEES RETIREMENT SYSTEM DEFINED BENEFIT PENSION PLAN (Continued)

The ORC limits the Consortium's obligation for this liability to annually required payments. The Consortium cannot control benefit terms or the manner in which pensions are financed; however, the Consortium does receive the benefit of employees' services in exchange for compensation including pension.

GASB 68 assumes any net pension liability is solely the obligation of the employer, because (1) they benefit from employee services; and (2) State statute requires all funding to come from these employers. All contributions to date have come solely from these employers (which also includes costs paid in the form of withholdings from employees). State statute requires the pension plans to amortize unfunded liabilities within 30 years. If the amortization period exceeds 30 years, each pension plan's board must propose corrective action to the State legislature. Any resulting legislative change to benefits or funding could significantly affect the net pension liability. Resulting adjustments to the net pension liability would be effective when the changes are legally enforceable.

The proportionate share of each plan's unfunded benefits is presented as a *net pension liability* on the accrual basis of accounting. Any liability for the contractually-required pension contribution outstanding at the end of the year is included in *accounts payable and accrued liabilities* on the accrual basis of accounting.

Pension Liabilities, Pension Expense, and Deferred Outflows of Resources and Deferred Inflows of Resources Related to Pensions

The net pension liability for the OPERS was measured as of December 31, 2018, and the total pension liability used to calculate the net pension liability was determined by an actuarial valuation as of that date. The Consortium's proportion of the net pension liability was based on the Consortium's share of contributions to the pension plan relative to the contributions of all participating entities.

7. PUBLIC EMPLOYEES RETIREMENT SYSTEM DEFINED BENEFIT PENSION PLAN (Continued)

Following is information related to the proportionate share and OPERS pension expense:

Proportionate Share of Net Pension Liability	\$ 1,622,797
Proportion of the Net Pension Liability	0.0058860%
Change in Proportion Share	0.0010053%
Pension Expense	\$ 302,567

At June 30, 2019, the Consortium reported deferred outflows of resources and deferred inflows of resources related to OPERS pension from the following sources:

Deferred outflows of resources	
Differences between expected and actual experience	\$ 74
Net difference between projected and actual	
earnings on pension plan investments	218,802
Change in assumptions	140,334
Change in Consortium proportion share and	
difference in employer contributions	212,164
Consortium contributions subsequent to the	
measurement date	 129,725
Total deferred outflows of resources	\$ 701,099
Deferred inflows of resources	
Differences between expected and actual experience	\$ 21,167
Total deferred inflows of resources	\$ 21,167

7. PUBLIC EMPLOYEES RETIREMENT SYSTEM DEFINED BENEFIT PENSION PLAN (Continued)

Other amounts reported as deferred outflows (inflows) of resources related to pension will be recognized in OPERS pension expense as follows:

Fiscal Year Ended June 30:	
2020	\$ 71,808
2021	285,766
2022	70,576
2023	20,298
2024	101,759
Thereafter	-
Total	\$ 550,207

Actuarial Assumptions – OPERS

Actuarial valuations of an ongoing plan involve estimates of the values of reported amounts and assumptions about the probability of occurrence of events far into the future. Examples include assumptions about future employment, mortality, and cost trends. Actuarially determined amounts are subject to continual review or modification as actual results are compared with past expectations and new estimates are made about the future.

Projections of benefits for financial reporting purposes are based on the substantive plan (the plan as understood by the employers and plan members) and include the types of benefits provided at the time of each valuation. The total pension liability in the December 31, 2018, actuarial valuation was determined using the following actuarial assumptions, applied to all periods included in the measurement:

Dagamban 21 2010

	December 31, 2018
Assumptions	Valuation
Wage inflation	3.25%
Future salary increases,	
Including inflation	3.25% to 10.75%
COLA or Ad Hoc COLA	Pre 1/7/2013 retirees: 3%
	simple;
	Post 1/7/2013 retirees: 3%
	simple through 2018, then
	2.15% simple
Investment rate of return	7.20%
Actuarial cost method	Individual entry age
Mortality tables	RP-2014

7. PUBLIC EMPLOYEES RETIREMENT SYSTEM DEFINED BENEFIT PENSION PLAN (Continued)

Mortality rates are based on the RP-2014 Healthy Annuitant mortality table. For males, Healthy Annuitant Mortality tables were used, adjusted for mortality improvement back to the observation period base of 2006 and then established the base year as 2015. For females, Healthy Annuitant Mortality tables were used, adjusted for mortality improvements back to the observation period base year of 2006 and then established the base year as 2010. The mortality rates used in evaluating disability allowances were based on the RP-2014 Disabled mortality tables, adjusted for mortality improvement back to the observation base year of 2006 and then established the base year as 2015 for males and 2010 for females. Mortality rates for a particular calendar year for both healthy and disabled retiree mortality tables are determined by applying the MP-2015 mortality improvement scale to the above described tables.

The most recent experience study was completed for the five year period ended December 31, 2015.

The long-term rate of return on defined benefit investment assets was determined using a building block method in which best-estimate ranges of expected future real rates of return are developed for each major asset class. These ranges are combined to produce the long-term expected real rate of return by weighting the expected future real rates of return by the target asset allocation percentage, adjusted for inflation.

The allocation of investment assets with the Defined Benefit portfolio is approved by the OPERS Board of Trustees as outlined in the annual investment plan. Plan assets are managed on a total return basis with a long-term objective of achieving and maintaining a fully funded status for the benefits provided through the defined benefit pension plans. The table below displays the Board approved asset allocation policy for 2018 and the long-term expected real rates of return:

Waighted Average

Asset Class	Target Allocation (%)	Long-Term Expected Real Rate of Return (Arithmetic)(%)
Fixed income	23.00	2.79
Domestic equities	19.00	6.21
Real estate	10.00	4.90
Private equity	10.00	10.81
International equities	20.00	7.83
Other investments	18.00	5.50
Total	100.00	5.95

7. PUBLIC EMPLOYEES RETIREMENT SYSTEM DEFINED BENEFIT PENSION PLAN (Continued)

Discount Rate

The discount rate used to measure the total pension liability was 7.2%. The projection of cash flows used to determine the discount rate assumed that contributions from plan members and those of the contributing employers are made at the contractually required rates, as actuarially determined. Based on those assumptions, the pension plan's fiduciary net position was projected to be available to make all projected future benefits payments of current plan members. Therefore, the long-term expected rate of return on pension plan investments was applied to all periods of projected benefit payments to determine the total pension liability.

Sensitivity of the Consortium's Proportionate Share of the Net Pension Liability to Changes in the Discount Rate

The following table presents the Consortium's proportionate share of the net pension liability calculated using the current period discount rate assumption of 7.2%, as well as what the Consortium's proportionate share of the net pension liability would be if it were calculated using a discount rate that is one-percentage-point lower (6.2%) or one percentage - point higher (8.2%) than the current rate:

	1%	Current	1%
	Decrease (6.20%)	Discount Rate (7.20%)	Increase (8.20%)
Consortium's proportionate share			
of the net pension liability	\$ 2,397,641	\$ 1,622,797	\$ 979,141

8. DEFINED BENEFIT OTHER POSTEMPLOYMENT BENEFIT (OPEB) PLAN

Plan Description - OPEB

OPERS maintains a cost-sharing, multiple-employer defined benefit postemployment health care trust, which funds multiple health care plans including medical coverage, prescription drug coverage and deposits to a Health Reimbursement Arrangement to qualifying benefit recipients of both the Traditional Pension and Combined plans. This trust is also used to fund health care for Member-Directed plan participants, in the form of a Retiree Medical Account (RMA). At retirement or refund, Member-Directed plan participants may be eligible for reimbursement of qualified medical expenses from their vested RMA balance.

In order to qualify for postemployment health care coverage, age and service retirees under the Traditional Pension and Combined plans must have twenty or more years of qualifying Ohio service credit. Health care coverage for disability benefit recipients and qualified survivor benefit recipients is available. The health care coverage provided by OPERS meets the definition of an OPEB as described in GASB Statement No. 75. See OPERS' CAFR referenced below for additional information.

The ORC permits, but does not require, OPERS to provide health care to its eligible benefit recipients. Authority to establish and amend health care coverage is provided to the Board in Chapter 145 of the ORC.

Disclosures for the health care plan are presented separately in the OPERS financial report. Interested parties may obtain a copy by visiting https://www.opers.org/financial/reports.shtml, by writing to OPERS, 277 East Town Street, Columbus, Ohio 43215-4642, or by calling (614) 222-5601 or 800-222-7377.

Funding Policy

The ORC provides statutory authority requiring public employers to fund postemployment health care through their contributions to OPERS. When funding is approved by OPERS' Board of Trustees, a portion of each employer's contribution to OPERS is set aside to fund OPERS health care plans. Beginning in 2018, health care is not being funded.

Employer contribution rates are expressed as a percentage of the earnable salary of active members. In 2018, state and local employers contributed at a rate of 14.0% of earnable salary. This is the maximum employer contribution rate permitted by the ORC. Active member contributions do not fund health care.

Each year, the OPERS Board determines the portion of the employer contribution rate that will be set aside to fund health care plans. The portion of employer contributions allocated to health care for members in the Traditional Pension and Combined plans was 1.0% during calendar year 2017. As recommended by OPERS' actuary, the portion of employer contributions allocated to health care beginning January 1, 2018 decreased to 0% for both plans. The OPERS Board is also authorized to establish rules for the retiree or their surviving beneficiaries to pay a portion of the health care provided. Payment amounts vary depending on the number of covered dependents and the coverage selected. The employer contribution as a percentage of covered payroll deposited into the RMA for participants in the Member-Directed Plan for 2018 was 4.0%.

For the year ended December 31, 2018, OPERS did not allocate any employer contributions to postemployment health care.

8. DEFINED BENEFIT OTHER POSTEMEPLOYMENT BENEFIT (OPEB) PLAN (Continued)

Net OPEB Liability

The net OPEB liability reported on the statement of net position as of June 30, 2019 represents a liability to employees for OPEB. OPEB is a component of exchange transactions—between an employer and its employees—of salaries and benefits for employee services. OPEB are provided to an employee—on a deferred-payment basis—as part of the total compensation package offered by an employer for employee services each financial period. The obligation to sacrifice resources for OPEB is a present obligation because it was created as a result of employment exchanges that already have occurred.

The net OPEB liability represents the Consortium's proportionate share of the OPEB plan's collective actuarial present value of projected benefit payments attributable to past periods of service, net of each OPEB plan's fiduciary net position. The net OPEB liability calculation is dependent on critical long-term variables, including estimated average life expectancies, earnings on investments, cost of living adjustments, health care cost trends and others. While these estimates use the best information available, unknowable future events require adjusting these estimates annually.

ORC limits the Consortium's obligation for this liability to annual required payments. The Consortium cannot control benefit terms or the manner in which OPEB are financed; however, the Consortium does receive the benefit of employees' services in exchange for compensation including OPEB.

GASB Statement No. 75 assumes the liability is solely the obligation of the employer, because they benefit from employee services. OPEB contributions come from these employers and health care plan enrollees which pay a portion of the health care costs in the form of a monthly premium. The ORC permits, but does not require the retirement systems to provide health care to eligible benefit recipients. Any change to benefits or funding could significantly affect the net OPEB liability. Resulting adjustments to the net OPEB liability would be effective when the changes are legally enforceable. The retirement systems may allocate a portion of the employer contributions to provide for these OPEB benefits.

The proportionate share of the OPEB plan's unfunded benefits is presented as a long-term net OPEB liability on the accrual basis of accounting. Any liability for contractually-required OPEB contributions outstanding at the end of the year is included in accrued payroll on the accrual basis of accounting.

OPEB Liabilities, OPEB Expense, and Deferred Outflows and Inflows of Resources Related to OPEB The total OPEB liability for OPERS was determined by an actuarial valuation as of December 31, 2017, rolled forward to the measurement date of December 31, 2018, by incorporating the expected value of health care cost accruals, the actual health care payment, and interest accruals during the year. The Consortium's proportion of the net OPEB liability was based on the Consortium's share of contributions to the retirement system relative to the contributions of all participating entities.

8. DEFINED BENEFIT OTHER POSTEMEPLOYMENT BENEFIT (OPEB) PLAN (Continued)

The following is information related to the proportionate share and OPEB expense:

Proportionate Share of Net OPEB Liability	\$ 839,885
Proportion of Net OPEB Liability	0.0064420%
Change in Proportion	0.0018820%
OPEB Expense	\$ 72,962

At December 31, 2018, the Consortium reported deferred outflows of resources and deferred inflows of resources related to OPEB from the following sources:

Deferred outflows of resources	
Difference between expected and actual experience	\$ 285
Net difference between projected and actual	
earnings on pension plan investments	38,504
Change in assumptions	27,078
Change in proportionate share and differences in	
employer contributions	 208,152
Total deferred outflows of resources	\$ 274,019
Deferred inflows of resources	
Difference between expected and actual experience	 2,278
Total deferred Inflows of resouces	\$ 2,278

8. DEFINED BENEFIT OTHER POSTEMEPLOYMENT BENEFIT (OPEB) PLAN (Continued)

These amounts reported as deferred outflows of resources and deferred inflows of resources related to pension will be recognized in OPEB expense as follows:

Fiscal Year Ended June 30:	
2020	\$ -
2021	97,432
2022	148,570
2023	6,342
2024	19,397
Thereafter	-
Total	\$ 271,741

Actuarial Assumptions—OPEB

Actuarial valuations of an ongoing plan involve estimates of the value of reported amounts and assumptions about the probability of occurrence of events far into the future. Examples include assumptions about future employment, mortality, and cost trends. Actuarially determined amounts are subject to continual review or modification as actual results are compared with past expectations and new estimates are made about the future.

Projections of health care costs for financial reporting purposes are based on the substantive plan and include the types of coverages provided at the time of each valuation and the historical pattern of sharing of costs between OPEB and plan members. The total OPEB liability was determined by an actuarial valuation as of December 31, 2017, rolled forward to the measurement date of December 31, 2018.

The actuarial valuation used the following actuarial assumptions applied to all prior periods included in the measurement in accordance with the requirements of GASB Statement No. 75:

	December 31, 2018
Assumptions	Valuation
Wage inflation	3.25%
Projected salary increases,	
Including inflation	3.25% to 10.75%
Single discount rate:	
Current measurement date	3.96%
Prior measurement date	3.85%
Investment rate of return	6.00%
Municipal bond rate	3.71%
Health care cost trend rate	10.00% initial, 3.25% ultimate
	in 2029

8. DEFINED BENEFIT OTHER POSTEMEPLOYMENT BENEFIT (OPEB) PLAN (Continued)

Pre-retirement mortality rates are based on the RP-2014 Employees mortality table for males and females, adjusted for mortality improvement back to the observation period base year of 2006. The base year for males and females was then established to be 2015 and 2010, respectively. Post-retirement mortality rates are based on the RP-2014 Healthy Annuitant mortality table for males and females, adjusted for improvement back to the observation period base year of 2006. The base year for males and females was then established to be 2015 and 2010, respectively. Post-retirement mortality rates for disabled retirees are based on the RP-2014 Disabled mortality table for males and females, adjusted for mortality improvement back to the observation period base year of 2006. The base year for males and females was then established to be 2015 and 2010, respectively. Mortality rates for a particular calendar year are determined by applying the MP-2015 mortality improvement scale to all of the above tables.

The most recent experience study was completed for the five-year period ended December 31, 2015.

The long-term expected rate of return on health care investment assets was determined using a buildingblock method in which best-estimate ranges of expected future real rates of return are developed for each major asset class. These ranges are combined to produce the long-term expected real rate of return by weighting the expected future real rates of return by the target asset allocation percentage, adjusted for inflation.

During 2018, OPERS managed investments in three investment portfolios: the Defined Benefit portfolio, the Health Care portfolio and the Defined Contribution portfolio. The Health Care portfolio includes the assets for health care expenses for the Traditional Pension Plan, Combined Plan and Member-Directed Plan eligible members. Within the Health Care portfolio, contributions into the plans are assumed to be received continuously throughout the year based on the actual payroll payable at the time contributions are made, and health care-related payments are assumed to occur mid-year. Accordingly, the money-weighted rate of return is considered to be the same for all plans within the portfolio. The annual money-weighted rate of return expressing investment performance, net of investment expenses and adjusted for the changing amounts actually invested, for the Health Care portfolio is 5.60% for 2018.

8. DEFINED BENEFIT OTHER POSTEMEPLOYMENT BENEFIT (OPEB) PLAN (Continued)

The allocation of investment assets within the Health Care portfolio is approved by the OPERS Board as outlined in the annual investment plan. Assets are managed on a total return basis with a long-term objective of continuing to offer a sustainable health care program for current and future retirees. OPERS' primary goal is to achieve and maintain a fully funded status for benefits provided through the defined pension plans. Health care is a discretionary benefit. The table below displays the OPERS Board-approved asset allocation policy for 2018 and the long-term expected real rates of return.

Asset Class	Target Allocation (%)	Weighted Average Long-Term Expected Real Rate of Return (Arithmetic)(%)
Fixed income	34.00	2.42
Domestic equities	21.00	6.21
Real estate	6.00	5.98
International equities	22.00	7.83
Other investments	17.00	5.57
Total	100.00	5.16

Discount Rate

A single discount rate of 3.96% was used to measure the OPEB liability on the measurement date of December 31, 2018. Projected benefit payments are required to be discounted to their actuarial present value using a single discount rate that reflects (1) a long-term expected rate of return on OPEB plan investments (to the extent that the health care fiduciary net position is projected to be sufficient to pay benefits), and (2) tax-exempt municipal bond rate based on an index of 20-year general obligation bonds with an average AA credit rating as of the measurement date (to the extent that the contributions for use with the long-term expected rate are not met). This single discount rate was based on an expected rate of return on the health care investment portfolio of 6.00% and a municipal bond rate of 3.71%. The projection of cash flows used to determine this single discount rate assumed that employer contributions will be made at rates equal to the actuarially determined contribution rate. Based on these assumptions, the health care fiduciary net position and future contributions were sufficient to finance health care costs through 2034. As a result, the long-term expected rate of return on health care investments was applied to projected costs through the year 2034, and the municipal bond rate was applied to all health care costs after that date.

8. DEFINED BENEFIT OTHER POSTEMEPLOYMENT BENEFIT (OPEB) PLAN (Continued)

Sensitivity of the Consortium's Proportionate Share of the Net OPEB Liability to Changes in the Discount Rate

The following table presents the Consortium's proportionate share of the net OPEB liability calculated using the single discount rate of 3.96%, as well as what the Consortium's proportionate share of the net OPEB liability if it were calculated using a discount rate that is 1.0% point lower (2.96%) or 1.0% point higher (4.96%) than the current rate:

	1%		Current	1%
	Decrease (2.96%)		count Rate (3.96%)	Increase (4.96%)
Consortium's proportionate share	_		_	
of the net OPEB liability	\$ 929,362	\$	839,885	\$ 513,607

Sensitivity of the Consortium's Proportionate Share of the Net OPEB Liability to Changes in the Health Care Cost Trend Rate

Changes in the health care cost trend rate may also have a significant impact on the net OPEB liability. The following table presents the net OPEB liability calculated using the assumed trend rates, and the expected net OPEB liability if it were calculated using a health care cost trend rate that is 1.0% lower or 1.0% higher than the current rate.

Retiree health care valuations use a health care cost-trend assumption that changes over several years built into the assumption. The near-term rates reflect increases in the current cost of health care; the trend starting in 2019 is 10.00%. If this trend continues for future years, the projection indicates that years from now virtually all expenditures will be for health care. A more reasonable alternative is that in the not-too-distant future, the health plan cost trend will decrease to a level at, or near, wage inflation. On this basis, the actuaries project premium rate increases will continue to exceed wage inflation for approximately the next decade, but by less each year, until leveling off at an ultimate rate, assumed to be 3.25% in the most recent valuation.

				Current				
			Не	ealth Care				
		1%	C	ost Trend		1%		
	Γ	Decrease	Rate	Assumption	Increase			
Consortium's proportionate share								
of the net OPEB liability	\$	669,306	\$	839,885	\$	730,761		

9. COMPENSATED ABSENCES

Consortium employees earn vacation and sick leave at varying rates depending on contractual agreements. Unless otherwise provided in the employee's contract, unused vacation leave in a given contract year shall be lost and cannot be carried-over into a subsequent year of employment.

Sick leave may be accrued up to two hundred (200) days. However, earned but unused sick leave benefits are payable only upon retirement from the Consortium with ten or more years of service with the state, any political subdivision or any combination thereof. The amount of sick leave benefit payable at retirement is one fourth of the value of the accrued but unused sick leave (capped at fifty (50) days).

10. INTELLECTUAL PROPERTY PAYABLE

As of January 1, 2018, the Consortium entered into an Intellectual Property Sale Agreement. According to this agreement, the Consortium acquires the rights, title, and interest in the identified intellectual property and gains exclusive use, except as otherwise provided within the contract. The Consortium shall pay the sum of \$2,196,000 with payments of \$366,000 per year with the final payment scheduled in 2023 for the consideration of the rights and assignments. Intellectual property relates to proprietary underwriting methodologies and models.

At June 30, 2019, the Consortium had \$1,464,000 of intellectual property payable outstanding.

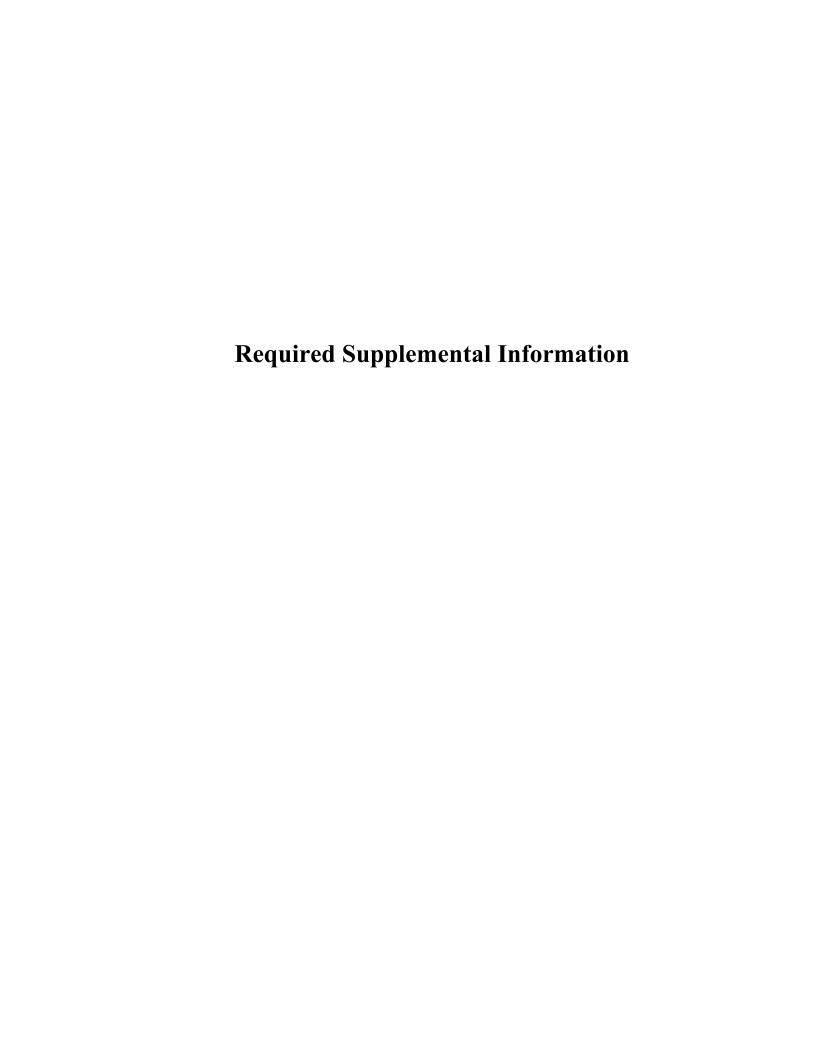
11. CONTINGENCIES

As of December 28, 2017, the Consortium has been involved in a dispute with the Ohio Public Entity Consortium Healthcare Cooperative (OPEC-HC) and certain of its members concerning administration of health care benefits. In June 2014, OPEC-HC joined the Consortium by signing the membership agreement to administrate the OPEC-HC Pool. In June 2017, OPEC-HC's Board of Directors terminated the Consortium as its administrator, effective July 1, 2017. Certain members of OPEC-HC, as Plaintiffs, filed suit to challenge this action and to seek damages against OPEC-HC and its broker agent. The Consortium was later added to the suit whereby the plaintiffs are requesting a complete and detailed accounting of all money received and expended by the Consortium and OPEC-HC as it relates to the plaintiffs, as well as a declaratory judgment that the Consortium may not impose any monetary penalties against the Plaintiffs.

The case is currently in the discovery phase. The Consortium intends to vigorously defend itself, and potentially pursue the recovery of funds, which it believes are owed, by OPEC-HC and the OPEC-HC membership. At this stage of the proceedings, the Consortium cannot conclude with any degree of legal certainty the outcome of the case.

12. SUBSEQUENT EVENTS

The Consortium has evaluated all events or transactions subsequent to the statement of net position date of June 30, 2019 through December 30, 2019, which is the date these financial statements were available to be issued, and determined that there are no subsequent events that require disclosure.



THE JEFFERSON HEALTH PLAN CLAIMS DEVELOPMENT June 30, 2019

Claims Development Information

The following table illustrates how the Consortium's earned revenue and investment income compare to related costs of loss and other expenses assumed by the Consortium as of the end of each of the last 10 years. The columns of the table show data for successive policy years.

The rows of the table are defined as follows:

- 1. This line shows the total of each fiscal year's earned contribution revenue and investment revenue, contribution revenue ceded to excess insurers, and net earned contribution revenue and reported investment revenue.
- 2. This line shows each fiscal year's other operating costs of the Consortium including overhead and claims expense not allocable to individual claims.
- 3. This line shows the Consortium's gross incurred claims and allocated claim adjustment expenses, claims assumed by excess insurers, and net incurred claims and allocated adjustment expenses (both paid and accrued) as originally reported at the end of the first year in which the event that triggered coverage under the contract occurred (called policy year).
- 4. This section of 10 rows shows the cumulative net amounts paid as of the end of successive years for each policy year.
- 5. This line shows the latest re-estimated amount of claims assumed by excess insurers as of the end of the current year for each accident year.
- 6. This section of 10 rows shows how each policy year's net incurred claims increased or decreased as of the end of successive years. This annual re-estimation results from new information received on known claims, re-evaluation of existing information on known claims, as well as emergence of new claims not previously known.
- 7. This line compares the latest re-estimated net incurred claims amount to the amount originally established (line 3) and shows whether this latest estimate of net claims cost is greater or less than originally thought. As data for individual policy years matures, the correlation between original estimates and re-estimated amounts is commonly used to evaluate the accuracy of incurred claims currently recognized in less mature policy years.

THE JEFFERSON HEALTH PLAN SCHEDULE OF CLAIMS DEVELOPMENT

1. Required contributions and investment income: Earned \$ 135,428,856 \$ 168,824,791 \$ 155,562,774 \$ 129,085,873 \$ 180,427,044 \$ 242,496,728 \$ 275,786,307 \$ 275,787,616 \$ 287,282,229 \$ Ceded \$ 4,343,051 \$ 5,936,989 \$ 7,024,558 \$ 3,704,364 \$ 4,365,154 \$ 5,208,571 \$ 3,091,244 \$ 7,404,394 \$ 8,073,497 \$ Net \$ 131,085,805 \$ 162,887,802 \$ 148,538,216 \$ 125,381,509 \$ 176,061,890 \$ 237,288,157 \$ 272,695,063 \$ 268,383,222 \$ 279,208,732 \$ 2. Expenses other than allocated claim adjustment expenses \$ 13,876,444 \$ 13,556,724 \$ 14,226,106 \$ 12,099,161 \$ 17,793,432 \$ 17,678,574 \$ 22,170,930 \$ 20,362,684 \$ 20,200,143 \$ 2. Extinated claims and allocated claim adjustment expenses - End of policy year: Incurred: \$ 118,884,608 \$ 113,056,190 \$ 110,499,438 \$ 116,656,705 \$ 164,313,118 \$ 219,007,551 \$ 264,496,467 \$ 238,759,720 \$ 260,464,507 \$ Ceded \$ 1,357,227 \$ 1,150,157 \$ 814,924 \$ 413,646 \$ 12,259 \$ 279,886 \$ 1,486,412 \$ 65,844 \$ 53,302 \$ 1. And the content of the content	<u></u>	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Ceded 4,343,051 5,936,989 7,024,558 3,704,364 4,365,154 5,208,571 3,091,244 7,404,394 8,073,497 Net 131,085,805 162,887,802 148,538,216 125,381,509 176,061,890 237,288,157 272,695,063 268,383,222 279,208,732 2. Expenses other than allocated claim adjustment expenses 13,876,444 13,556,724 14,226,106 12,099,161 17,793,432 17,678,574 22,170,930 20,362,684 20,200,143 3. Estimated claims and allocated claim adjustment expenses - End of policy year: Incurred: 118,884,608 113,056,190 110,499,438 116,656,705 164,313,118 219,007,551 264,496,467 238,759,720 260,464,507	÷										
Net 131,085,805 162,887,802 148,538,216 125,381,509 176,061,890 237,288,157 272,695,063 268,383,222 279,208,732 2. Expenses other than allocated claim adjustment expenses 13,876,444 13,556,724 14,226,106 12,099,161 17,793,432 17,678,574 22,170,930 20,362,684 20,200,143 3. Estimated claims and allocated claim adjustment expenses - End of policy year: Incurred: 118,884,608 113,056,190 110,499,438 116,656,705 164,313,118 219,007,551 264,496,467 238,759,720 260,464,507	Earned	\$	135,428,856	\$ 168,824,791	\$ 155,562,774	\$ 129,085,873	\$ 180,427,044	\$ 242,496,728	\$ 275,786,307	\$ 275,787,616	\$ 287,282,229
2. Expenses other than allocated claim adjustment expenses 13,876,444 13,556,724 14,226,106 12,099,161 17,793,432 17,678,574 22,170,930 20,362,684 20,200,143 3. Estimated claims and allocated claim adjustment expenses - End of policy year: Incurred: 118,884,608 113,056,190 110,499,438 116,656,705 164,313,118 219,007,551 264,496,467 238,759,720 260,464,507	Ceded		4,343,051	5,936,989	7,024,558	3,704,364	4,365,154	5,208,571	3,091,244	7,404,394	8,073,497
adjustment expenses 13,876,444 13,556,724 14,226,106 12,099,161 17,793,432 17,678,574 22,170,930 20,362,684 20,200,143 3. Estimated claims and allocated claim adjustment expenses - End of policy year: Incurred: 118,884,608 113,056,190 110,499,438 116,656,705 164,313,118 219,007,551 264,496,467 238,759,720 260,464,507	Net		131,085,805	162,887,802	148,538,216	125,381,509	176,061,890	237,288,157	272,695,063	268,383,222	279,208,732
3. Estimated claims and allocated claim adjustment expenses - End of policy year: Incurred: 118,884,608 113,056,190 110,499,438 116,656,705 164,313,118 219,007,551 264,496,467 238,759,720 260,464,507	2. Expenses other than allocated claim										
adjustment expenses - End of policy year: Incurred: 118,884,608 113,056,190 110,499,438 116,656,705 164,313,118 219,007,551 264,496,467 238,759,720 260,464,507	adjustment expenses		13,876,444	13,556,724	14,226,106	12,099,161	17,793,432	17,678,574	22,170,930	20,362,684	20,200,143
year: Incurred: 118,884,608 113,056,190 110,499,438 116,656,705 164,313,118 219,007,551 264,496,467 238,759,720 260,464,507											
Incurred: 118,884,608 113,056,190 110,499,438 116,656,705 164,313,118 219,007,551 264,496,467 238,759,720 260,464,507											
	•		440.004.600	442.076.400	440 400 400		161212110		261.406.46	220 550 520	250 454 505
Ceded $1,35/,22/$ $1,150,15/$ $814,924$ $413,646$ $12,259$ $2/9,886$ $1,486,412$ $65,844$ $53,302$, ,				
	Ceded		1,357,227	1,150,157	814,924	413,646	12,259	2/9,886	1,486,412	65,844	53,302
Net 117,527,381 111,906,033 109,684,514 116,243,059 164,300,859 218,727,665 263,010,055 238,693,876 260,411,205	Net		117,527,381	111,906,033	109,684,514	116,243,059	164,300,859	218,727,665	263,010,055	238,693,876	260,411,205
4. Cumulative paid claims and allocated	*										
claim adjustment expenses	* *										
End of policy year 100,967,271 95,439,280 94,918,262 104,814,284 146,486,040 192,470,710 230,385,509 210,790,504 229,228,895	* **						, ,				229,228,895
One year later 113,447,764 106,924,136 106,912,856 116,640,750 160,932,916 213,272,208 263,429,827 233,650,744 -											-
Two years later 113,466,750 107,118,432 106,944,683 116,691,166 161,058,258 213,272,208 263,429,827	•								263,429,827	-	-
Three years later 113,466,750 107,118,432 106,944,683 116,691,166 161,058,258 213,272,208	•								-	-	-
Four years later 113,466,750 107,118,432 106,944,683 116,691,166 161,058,258	•							-	-	-	-
Five years later 113,466,750 107,118,432 106,944,683 116,691,166	•							-	-	-	-
Six years later 113,466,750 107,118,432 106,944,683	•				106,944,683	-	-	-	-	-	-
Seven years later 113,466,750 107,118,432	•				-	-	-	-	-	-	-
Eight years later 113,466,750					-	-	-	-	-	-	-
Nine years later	Nine years later		-	-	-	-	-	-	-	-	-
5. Re-estimated ceded claims and expenses 1,357,227 1,150,157 814,924 413,646 12,259 279,886 1,486,412 65,844 53,302	5. Re-estimated ceded claims and expenses		1,357,227	1,150,157	814,924	413,646	12,259	279,886	1,486,412	65,844	53,302
6. Re-estimated incurred claims and											
allocated claim adjustment expenses				444.006.000	400 504 544	446040050	454200050	240 828 668	252040055	220 (02 05)	260 444 207
End of policy year 117,527,381 111,906,033 109,684,514 116,243,059 164,300,859 218,727,665 263,010,055 238,693,876 260,411,205	* **										
One year later 113,447,764 106,924,136 106,912,856 116,640,750 160,932,916 213,272,208 263,409,827 233,650,744 -											-
Two years later 113,466,750 107,118,432 106,944,683 116,691,166 161,058,258 213,272,208 263,409,827	•						, ,			-	-
Three years later 113,466,750 107,118,432 106,944,683 116,691,166 161,058,258 213,272,208	•							213,272,208	-	-	-
Four years later 113,466,750 107,118,432 106,944,683 116,691,166 161,058,258	•							-	-	-	-
Five years later 113,466,750 107,118,432 106,944,683 116,691,166	•							-	-	-	-
51K years inter 115, 100,750 107,110, 152 100,711,005					106,944,683	-	-	-	-	-	-
Seven years later 113,466,750 107,118,432 - - - - - - - - Eight years later 113,466,750 - - - - - - - -	•				-	-	-	-	-	-	-
Eight years later 113,466,750 -				-	-	-	-	-	-	-	-
7. (Decrease) increase in estimated incurred	7. (Decrease) increase in estimated incurred										
claims and allocated claim adjustment											
expenses subsequent to initial policy	•										
year end \$ 4,060,631 \$ 4,787,601 \$ 2,739,831 \$ (448,107) \$ 3,242,601 \$ 5,455,456 \$ (399,772) \$ 5,043,132 \$ -		\$	4,060,631	\$ 4,787,601	\$ 2,739,831	\$ (448,107)	\$ 3,242,601	\$ 5,455,456	\$ (399,772)	\$ 5,043,132	\$ -

^{*} The effect and cost to recreate financial information for the first year was not practical.

^{**} Additional years will be displayed as they become available.

THE JEFFERSON HEALTH PLAN SCHEDULE OF THE CONSORTIUM'S PROPORTIONATE SHARE OF THE NET PENSION LIABILITY OHIO PUBLIC EMPLOYEES RETIREMENT SYSTEM - TRADITIONAL PLAN

	*	* / **
	2019	 2018
Traditional pension plan		
Consortium's proportion of the net pension liability	0.005886 %	0.004833 %
Consortium's proportionate share of the net pension liability	\$ 1,622,797	\$ 770,023
Consortium's covered payroll	\$ 926,604	\$ 1,149,621
Consortium's proportionate share of the net pension liability as a percentage of its covered payroll	175.13 %	66.98 %
Plan fiduciary net position as a percentage of the total pension liability	74.70 %	84.66 %

^{*} Amounts presented for each year were determined as of the Consortium's measurement date, which is the prior calendar year-end.

^{**} Information prior to 2018 was not available. The Consortium will continue to present information for years available until a full ten-year trend is compiled.

THE JEFFERSON HEALTH PLAN SCHEDULE OF THE CONSORTIUM'S PENSION CONTRIBUTIONS OHIO PUBLIC EMPLOYEES RETIREMENT SYSTEM - TRADITIONAL PLAN

	2019 2018		* / ** * 2017 2016		·	* 2015			* 2014		* 2013		* 2012		* 2011	* 2010			
Contractually required contributions	\$	129,725	\$ 160,947	-		-		-		-		-		-		-		-	
Contributions in relation to the contractually required contributions		(129,725)	 (160,947)	 				<u>-</u>	. <u>—</u>			-				-		-	
Contribution deficiency (excess)	\$	_	\$ 	\$ 	\$	_	\$		\$		\$	-	\$	_	\$	_	\$	-	:
Consortium covered payroll	\$	926,604	\$ 1,149,621																
Contributions as a percentage of covered payroll		14.00%	14.00%																

^{*} The Consortium did not have employees until March 1, 2017.

^{**} OPERS information unavailable for Fiscal Year 2017.

THE JEFFERSON HEALTH PLAN SCHEDULE OF THE CONSORTIUM'S PROPORTIONATE SHARE OF THE NET OPEB LIABILITY

		*
		2019
Consortium's proportion of the net OPEB liability		0.006442 %
Control of the Colonia Control in the	Ф	020.005
Consortium's proportionate share of the net OPEB liability	\$	839,885
Consortium's covered payroll	\$	926,604
G C C C C C C C C C C C C C C C C C C C		
Consortium's proportionate share of the net OPEB liability		90.64 %
as a percentage of its covered payroll		90.04 70
Plan fiduciary net position as a percentage of the		
total OPEB liability		46.33 %

^{*} Amounts presented for each year were determined as of the Consortium's measurement date, which is the prior calendar year-end.

THE JEFFERSON HEALTH PLAN SCHEDULE OF THE CONSORTIUM'S OPEB CONTRIBUTIONS

				*		*		*	*	*		*		*		*		*	
		2019		2018	2017		2016		2015	2014		2013	2013		2	2011	1	20	10
Contractually required contributions	\$	-		-		-		-	-		-		-		-		-		-
Contributions in relation to the contractually required contributions									_		-		_						
Contribution deficiency (excess)	\$	_	\$	_	\$	-	\$	_	\$ -	\$	-	\$	-	\$	_	\$		\$	
Consortium covered payroll	\$	926,604																	
Contributions as a percentage of covered payroll		0.00%																	

^{*} OPEB information unavailable for Fiscal Years prior to 2019.



INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

To the Board of Directors The Jefferson Health Plan Steubenville, Ohio

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of The Jefferson Health Plan (the Consortium), as of and for the year ended June 30, 2019, and the related notes to the financial statements, which collectively comprise the Consortium's basic financial statements, and have issued our report thereon dated December 30, 2019.

Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the Consortium's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Consortium's internal control. Accordingly, we do not express an opinion on the effectiveness of the Consortium's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected, on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses might exist that have not been identified.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Consortium's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Schneider Downs & Co., Unc.

Columbus, Ohio December 30, 2019



JEFFERSON HEALTH PLAN

JEFFERSON COUNTY

CLERK'S CERTIFICATION

This is a true and correct copy of the report which is required to be filed in the Office of the Auditor of State pursuant to Section 117.26, Revised Code, and which is filed in Columbus, Ohio.

CLERK OF THE BUREAU

Susan Babbitt

CERTIFIED MARCH 19, 2020