



**HEALTH BENEFITS
BOARD OF DIRECTORS MEETING
MARCH 19, 2026
1:00 P.M.**

AGENDA

I. Consent Agenda

- A. Approval of Minutes for February 2026 Board of Directors Meeting Dave Ostash
- B. Report of Activity for the Month of February 2026 and the Ratification of Payment as follows: Dave Ostash

DELTA DENTAL CLAIMS		13,490,802.53	
DELTA DENTAL ASO		787,863.11	
ANTHEM DENTAL CLAIMS		325,975.63	
ANTHEM DENTAL ASO		15,111.60	
		TOTAL DENTAL	14,619,752.87
VSP CLAIMS		1,944,112.86	

EYE MED CLAIMS		126,548.77	
VSP ASO		130,398.08	
EYEMED ASO		11,981.91	
		TOTAL VISION	2,213,041.62
ANTHEM BLUE CROSS HEALTH CLAIMS		107,420,721.49	
BLUE SHIELD HEALTH CLAIMS		23,130,929.68	
ANTHEM BC COMPANION CARE RETIREE CLAIMS		1,146,730.05	
	TOTAL HEALTH CLAIMS	131,698,381.22	
ANTHEM BLUE CROSS ASO		4,476,050.67	
BLUE SHIELD PPO ASO		788,047.51	
PROACTIVE CARE PPO ASO		53,402.80	
ANTHEM BC COMPANION CARE RETIREE ASO		135,499.72	
FOUNDATION CLMS PROCESSING ASO		721,034.99	
	TOTAL HEALTH ASO	6,174,035.69	
		TOTAL HEALTH	137,872,416.91
NAVITUS RX CLAIMS		52,311,038.15	
NAVITUS RX ASO		638,804.55	
		TOTAL RX	52,949,842.70
INSURED PRODUCTS			
ANTHEM BC HMO CLAIMS		6,880,675.19	
ANTHEM BC HMO ADMIN FEE		986,818.52	
ANTHEM BC EAP		378,064.00	
ANTHEM VIVITY		2,776,000.86	
ANTHEM HMO CAPITATION		6,641,987.13	
BLUE SHIELD HMO CLAIMS		3,081,556.83	
BLUE SHIELD HMO ADMIN FEE		5,927,437.32	
KAISER HMO		87,733,983.19	
SIMNSA		760,135.00	
DELTACARE/PMI DENTAL		36,284.15	
EYEMED-FULLY INSURED		79,588.58	
XP HEALTH VISION		37,451.74	

BLUE SHIELD MEDICARE ADVANTAGE		27,944.00	
LINCOLN FINANCIAL LIFE INSURANCE		471,601.76	
		TOTAL INSURED	115,819,528.27
WELLNESS			460,358.25
ALL OTHER			1,862,028.04
		TOTAL III PAYMENTS	325,796,968.66

Moved _____ 2nd _____

Yes _____ No _____ Abstain _____ Roll Call Vote _____

II. Public Comment

III. Action Items

- A. Financial Report – Presentation of Financial Statements for the Month of February 2026 Will Be Submitted for Approval

Kim Sloan

Moved _____ 2nd _____

Yes _____ No _____ Abstain _____ Roll Call Vote _____

IV. Information and Discussion Items

- A. Review Monthly Budget-to-Actual through February 2026

John Stenerson

- B. Health Benefits Operations Update

Nicole Mata

- C. Comments from the Board of Directors Will Be Heard

Dave Ostash

- D. Next Meeting:

Dave Ostash

Thursday, April 16, 2026

1:00 p.m.

SISC Board Room, 4th Floor – Larry E. Reider Education Center

2000 K Street, Bakersfield, CA 93301

- E. Adjournment

Dave Ostash

Moved _____ 2nd _____

Yes _____ No _____ Abstain _____ Roll Call Vote _____

Any materials required by law to be made available to the public prior to a meeting of the Governing Board of the SISC III JPA can be inspected at the following address during normal business hours at:

2000 K Street, Bakersfield, CA. 93301

For more information regarding how, to whom, and when a request for disability-related modification or accommodation, including auxiliary aids or services, may be made by a person with a disability who requires a modification or accommodation to participate in the public meeting, please contact Kristy Comstock at 661-636-4682 or

krcomstock@siscschools.org

*The number of Board Members needed to form a quorum for this meeting is eight

HEALTH BENEFITS TERMINOLOGY

Adjudication: Refers to the process of paying claims submitted or denying them after comparing claims to the benefit or coverage requirements.

Administrative Services Only (ASO): An arrangement under which an insurance carrier or an independent organization will, for a fee, handle the administration of claims, benefits and other administrative functions for a self-insured group but does not assume any financial risk for the payment of benefits.

Balance bill: The amount you could be responsible for (in addition to any co-payments, deductibles or coinsurance) if you use an out-of-network provider and the fee for the particular service exceeds the allowable charge.

Calendar Year Deductible: The dollar amount for covered services that must be paid during the calendar year (January 1 – December 31) by members before any benefits are paid by the Plan.

Centers of Medical Excellence (CME): Health care providers designated as a selected facility for specified medical services. Providers participating in a CME network have an agreement to accept an agreed upon amount as payment in full for covered services.

Coinsurance: An arrangement under which the member pays a fixed percentage of the cost of medical care after the deductible has been paid. For example, an insurance plan might pay 80% of the allowable charge, with the member responsible for the remaining 20%, which is then referred to as the coinsurance amount.

Coordination of Benefits: This is the process by which a health insurance company determines if it should be the primary or secondary payer of medical claims for a patient who has coverage from more than one health insurance policy.

Co-Payment: A specific charge that a health plan may require a member to pay for a specific medical service or supply, after which the insurance company pays the remainder of the charge.

Deductible: An amount the covered person must pay before payments for covered services begin. The deductible is usually a fixed amount. For example, an insurance plan might require the insured to pay the first \$250 of covered expense during a calendar year.

Dependent: Person, (spouse or child), other than the subscriber who is covered under the subscriber's benefit certificate.

Employee Assistance Program (EAP): A program that is designed to provide employees and their dependents with access to resources to support various life situations. It also provides confidential, short-term counseling by qualified practitioners, in person or virtually.

Explanation of Benefits (EOB): A form sent to the covered person after a claim for payment has been processed by the carrier that explains the action taken on that claim. This explanation might include the amount that will be paid, the benefits available, reasons for denying payment, or the claims appeal process.

Flexible Spending Account: Financial account that allows employees to set aside pre-tax money from their paycheck toward premiums or costs not covered by their health plan, such as co-payments. Generally, all the money must be used within the plan year or it is lost.

Health Assessment: A health screening that provides participants with basic health results and actionable steps for improving them.

Health Insurance Portability and Accountability Act (HIPAA): A federal health benefits law passed in 1996, effective July 1, 1997, which among other things, protects the privacy rights of health plan participants.

Health Maintenance Organization (HMO): A plan that offers a wide range of health care services through a network of providers who agree to provide services to members at a pre-negotiated rate. Members of an HMO choose a primary care physician who manages all healthcare and refers to specialists as needed.

Health Savings Account: A tax advantaged savings account to be used in conjunction with certain high-deductible (low premium) health insurance plans to pay for qualifying medical expenses, such as deductibles. Contributions may be made to the account on a tax-free basis. Funds remain in the account from year to year and may be invested at the discretion of the individual owning the account. Interest or investment returns accrue tax-free. Penalties may apply when funds are withdrawn to pay for anything other than qualifying medical expenses. Employers can also fund such plans.

ID Card/Identification Card: A card issued by a carrier to a covered person, which allows the individual to identify himself or his covered dependents to a provider for health care services.

IBNR: An acronym for "incurred but not reported". This is an accounting estimate used by health plans to accrue for care that was provided "incurred" in one accounting period, but not paid or "reported" until another accounting period.

In-Network: Refers to the use of providers who participate in the carrier's provider network. Many benefit plans encourage covered persons to use participating (in-network) providers to reduce the individual's out of pocket expense.

Medical Tourism: To have medical care outside the United States.

Medigap: Refers to various private health insurance plans sold to supplement Medicare.

Negotiated Rate: The amount participating providers agree to accept as payment in full for covered services. It is usually lower than their normal charge. Negotiated rates are determined by Participating Provider Agreements.

Open Enrollment: A time period during which eligible employees can select among the plans offered by their employer as well as make any other dependent changes.

Out-Of-Network: The use of health care providers who have not contracted with the carrier to provide services. Members are generally not reimbursed if they go out-of-network except in emergency situations.

Out-Of-Pocket: The most a member would pay for covered medical expenses in a plan year through copays, deductibles and coinsurance before your insurance plan begins to pay 100 percent of the covered medical expense.

Participating Provider: A physician, hospital, pharmacy, laboratory or other appropriately licensed provider of health care services or supplies, that has entered into an agreement with a managed care entity to provide such services or supplies to a patient enrolled in a health benefit plan.

Pre-Authorization: A procedure used to review and assess the medical necessity and appropriateness of elective hospital admissions and non-emergency outpatient services before the services are provided.

Preferred Provider Organization (PPO): A type of managed care organization that has a panel of preferred providers who are paid according to a discounted fee schedule. The enrollees do have the option to go to out-of-network providers at a higher level of cost sharing.

Reasonable and Customary: This refers to the standard or most common charge for a particular medical service when rendered in a particular geographic area. Also known as Usual, Customary and Reasonable (UCR).

Skilled Nursing Facility: An inpatient healthcare facility with the staff and equipment to provide skilled care, rehabilitation and other related health services to patients who need nursing care, but do not require hospitalization.

Subscriber: The individual in whose name a contract is issued or the employee covered under an employer's group health contract.

Transparency: The ability for patients to have easy access to understandable information about the cost and quality of their health care options. They should be able to obtain this information from their health plan and medical providers prior to the time of treatment.



SISC

Self-Insured Schools
of California

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**HEALTH BENEFITS
BOARD OF DIRECTORS MEETING
FEBRUARY 19, 2026
1:00 P.M.**

MINUTES

The Regular Meeting of the Board of Directors of SISC III Health Benefits Program was called to order by Director Ostash at 1:00 p.m. on Thursday, February 19, 2026 in the SISC Room at the Larry E. Reider Building, 2000 K Street, Bakersfield, CA 93301. The following individuals were in attendance:

MEMBERS PRESENT:

Dave Ostash
Jason Hodgson (left at 2:38)
Ty Bryson
Katie Gonzalez
Ramon Hendrix
Sherry Gladin
Kimberly McAbee
Steve Torres
Helio Brasil
Eduardo Martinez
Robert Hughes

ALTERNATES PRESENT:

Bryan Auld
Aaron Asplund
Fernie Marroquin

OTHERS PRESENT:

Kim Sloan
Megan Hanson
Kristy Comstock
Fred Bayles
John Stenerson
Nicole Mata
Lola Nickell
Alex Fisher
Shawna Smith
Frank Impastato
Armando Cabrera
Maria Stout
Cristina De Guzman
Carmen Gonzales
Roy Marchetti
Bob Hunter
Alex Brum
Kristin Koehler
Connie Cervantes
Katie Russell
Dr. Warren Brown
JoeAnna Todd
Annette Charlton
Debbie Hankins

Brent Boyd
 Sarah Vermillion
 Monica Matallana
 Tara Hernandez
 Darlene Rusitanonta
 Dave Koop
 Jason Scott
 Elizabeth Matheny
 Sarah Campbell
 Charlynn Harless

Consent Agenda

Motion was made by Director Brasil seconded, by Director Bryson and by roll call vote of 12-Yes, 0-No, and 0 Abstentions (12-0-0) to approve the Consent Agenda as follows:

Minutes

Approval of minutes for January 2026 Board of Directors Meeting.

DELTA DENTAL CLAIMS		16,125,313.42	
DELTA DENTAL ASO		941,718.32	
ANTHEM DENTAL CLAIMS		385,079.73	
ANTHEM DENTAL ASO		14,956.20	
		TOTAL DENTAL	17,467,067.67
VSP CLAIMS		2,148,661.74	
EYE MED CLAIMS		148,906.19	
VSP ASO		130,532.08	
EYEMED ASO		12,010.55	
		TOTAL VISION	2,440,110.56
ANTHEM BLUE CROSS HEALTH CLAIMS		130,475,919.20	
BLUE SHIELD HEALTH CLAIMS		24,707,230.11	
ANTHEM BC COMPANION CARE RETIREE CLAIMS		1,058,771.65	
	TOTAL HEALTH CLAIMS	156,241,920.96	
ANTHEM BLUE CROSS ASO		4,776,982.14	
BLUE SHIELD PPO ASO		782,838.16	
PROACTIVE CARE PPO ASO		53,461.10	
ANTHEM BC COMPANION CARE RETIREE ASO		135,760.89	
FOUNDATION CLMS PROCESSING ASO		706,217.28	
	TOTAL HEALTH ASO	6,455,259.57	
		TOTAL HEALTH	162,697,180.53

NAVITUS RX CLAIMS		54,969,415.60	
NAVITUS RX ASO		671,160.22	
		TOTAL RX	55,640,575.82
INSURED PRODUCTS			
ANTHEM BC HMO CLAIMS		8,765,519.05	
ANTHEM BC HMO ADMIN FEE		988,366.53	
ANTHEM BC EAP		378,168.00	
ANTHEM VIVITY		2,777,884.64	
ANTHEM HMO CAPITATION		6,478,532.54	
BLUE SHIELD HMO CLAIMS		3,125,599.06	
BLUE SHIELD HMO ADMIN FEE		5,806,715.93	
KAISER HMO		78,559,305.98	
SIMNSA		770,945.00	
DELTACARE/PMI DENTAL		36,619.69	
EYEMED-FULLY INSURED		79,472.00	
XP HEALTH VISION		35,765.80	
BLUE SHIELD MEDICARE ADVANTAGE		29,146.20	
LINCOLN FINANCIAL LIFE INSURANCE		471,592.02	
		TOTAL INSURED	108,303,632.44
WELLNESS			43,765.55
ALL OTHER			2,408,326.15
		TOTAL III PAYMENTS	349,000,658.72

Public Comment

None

Action Items

Financial Report

Kim Sloan reviewed with the Board the Financial Report for the period ending January 31, 2026. Kim reported the LAIF rate for the month of January 2026 dropped to 3.93% from last month at 4.03%. After discussion, motion was made by Director Gonzalez, seconded by Director Torres and by roll call vote of 12-0-0, approving the Financial Reports as submitted.

Request Approval of the 2026-2027 Vision Renewal

John Stenerson reviewed with the Board the 2026-2027 Vision Renewal. After discussion, motion was made by Director Hughes, seconded by Director Asplund and by roll call vote of 12-0-0, approving the 2026-2027 Vision Renewal as presented.

Request Approval of the 2026-2027 Dental Renewal

John Stenerson reviewed with the Board the 2026-2027 Dental Renewal. After discussion, motion was made by Director Hendrix, seconded by Director Hodgson and by roll call vote of 12-0-0, approving the 2026-2027 Dental Renewal as presented.

Request Approval of the 2026-2027 Pharmacy Renewal

John Stenerson reviewed with the Board the 2026-2027 Pharmacy Renewal. After discussion, motion was made by Director Brasil, seconded by Director Hendrix and by roll call vote of 12-0-0, approving the 2026-2027 Pharmacy Renewal as presented.

Request Approval of the 2026-2027 Medical Renewal

John Stenerson reviewed with the Board the 2026-2027 Medical Renewal. After discussion, motion was made by Director Brasil, seconded by Director Gonzalez and by roll call vote of 12-0-0, approving the 2026-2027 Medical Renewal as presented.

Information and Discussion Items

Review of Background Related to the Renewal

John Stenerson reviewed background related to the renewal with the Board.

Review Monthly Budget-to-Actual through January 2026

John Stenerson reviewed the monthly budget-to-actual and the large claim by month summary with the Board for the month of January 2026.

Executive Committee Report

Dave Ostash presented a report on a newly accepted district to the SISC III JPA.

Comments from the Board

Dave asked the board to review the board dates for the next fiscal year that was emailed out to them prior to the meeting for any discrepancies. Dave also informed the board that the board member election nomination ballots will be sent out on March 2nd and will be sent via email to the member district superintendents only. He also informed the board that Joyce Nunes has retired from Tulare Office of Education and Fernie Marroquin has replaced her as an alternate on the board.

Adjournment

There being no further business to come before the Board, motion was made 2:44 by Director Hughes, seconded by Director Gonzalez, and by roll call vote of 11-0-0, adjourning the meeting at 2 p.m.

Next Meeting

The next meeting of the Board of Directors will be held **Thursday, March 19th at 1:00 p.m.** in the SISC Board Room, 4th Floor – Larry E. Reider Education Center, 2000 K Street, Bakersfield, CA 93301.

Ramon Hendrix, Secretary

**SISC III
INCOME STATEMENT
FEBRUARY 2026**

	BUDGET	YEAR-TO-DATE	CURRENT MONTH
REVENUES			
8660.00 Interest-County Treasurer	\$3,750,000.00	(\$3,031.42)	(\$3,031.42)
8660.03 LAIF	\$11,620.00	\$2,863.09	\$0.00
8660.04 Investments	\$15,092,738.00	\$3,302,461.85	\$0.00
8660.05 Bank	\$4,800,000.00	\$2,037,295.78	\$387,404.27
8674.03 Premiums-PPO Medical	\$1,692,015,606.00	\$709,899,432.64	\$142,856,501.26
8674.04 Dental	\$134,192,807.00	\$56,307,235.10	\$10,690,689.72
8674.08 Pharmacy	\$418,762,561.00	\$173,243,754.94	\$34,990,361.69
8674.25 Vision	\$21,357,661.00	\$9,008,133.32	\$1,712,717.68
8674.05 HMO	\$1,276,233,861.00	\$537,007,030.10	\$108,317,728.43
8674.06 Life	\$5,342,945.00	\$2,289,597.96	\$470,942.86
8674.09 Insured Retiree Programs	\$294,132.00	\$139,471.00	\$28,362.00
8674.10 Insured Vision	\$1,276,626.00	\$576,934.27	\$116,395.98
8674.18 Insured Dental	\$371,153.00	\$188,991.49	\$33,827.40
8699.00 IRC 125 Flex Plan Contributions	\$0.00	\$653,082.82	(\$70,473.70)
8699.07 Administration Fees	\$288,304.00	\$99,312.23	\$20,360.56
8699.08 Penalties/Late Fees	\$350,000.00	\$178,035.42	\$38,066.89
8699.10 SISC Access Fee	\$495,437.00	\$177,344.00	\$42,240.00
TOTAL REVENUES	\$3,574,635,451.00	\$1,495,107,944.59	\$299,632,093.62
EXPENSES			
3900.00 Benefits Paid - IRC 125 Flex Plan	\$0.00	\$0.00	\$0.00
4300.00 Supplies	\$120,000.00	\$120,589.80	\$17,036.22
5200.00 Travel/Conference	\$150,000.00	\$312,829.09	\$16,471.41
5300.00 Dues and Membership	\$46,000.00	\$31,225.90	\$171.98
5450.03 E & O Insurance	\$131,850.00	\$0.00	\$0.00
5450.05 Premiums - HMO	\$1,117,496,109.00	\$482,238,590.90	\$104,031,473.20
5450.08 Insured Dental	\$371,153.00	\$189,738.86	\$36,284.15
5450.09 Insured Retiree Programs	\$294,132.00	\$143,726.80	\$27,944.00
5450.10 Insured Vision	\$1,276,626.00	\$578,874.96	\$117,040.32
5450.21 Life	\$5,262,598.00	\$2,292,581.58	\$471,601.76
5800.00 Miscellaneous	\$25,000.00	\$0.00	\$0.00
5800.01 Professional Services	\$50,000.00	\$1,935.00	\$0.00
5800.02 Audit	\$36,815.00	\$7,250.00	\$7,250.00
5800.10 Consulting	\$749,105.00	\$359,768.02	\$73,614.16
5800.32 Bank Fees	\$0.00	\$0.00	\$0.00
5800.33 Government Fees	\$982,635.00	\$0.00	\$0.00
5800.35 Admin Fees	\$96,635.00	\$39,226.65	\$8,162.55
5800.40 Wellness Program	\$2,000,000.00	\$544,193.80	\$460,358.25
5800.41 Healthcare Specialists	\$7,611,060.00	\$3,179,563.59	\$622,081.11
5800.50 Administration - KCSOS	\$10,105,591.00	\$4,004,245.23	\$623,288.88
5800.60 Claims - PPO Medical	\$1,769,071,216.00	\$753,511,991.09	\$124,304,497.14
5800.61 Claims - Dental	\$126,617,332.00	\$51,305,803.81	\$10,391,466.70
5800.63 Claims - Vision	\$19,806,260.00	\$7,703,558.06	\$1,799,791.07
5800.64 Claims - HMO Flex	\$140,201,068.00	\$47,278,381.31	\$9,371,890.02
5800.68 Claims - Pharmacy	\$409,546,805.00	\$167,457,298.36	\$29,278,792.05
5800.70 Admin - PPO Medical	\$70,138,088.00	\$26,698,146.32	\$5,265,264.76
5800.71 Admin - Claims Processing	\$8,275,800.00	\$2,761,090.66	\$560,461.00
5800.72 Admin - Dental	\$7,394,452.00	\$2,979,507.49	\$602,768.98
5800.73 Admin - Vision	\$1,689,600.00	\$643,570.35	\$125,233.99
5800.75 Admin - Pharmacy	\$7,385,386.00	\$3,191,837.95	\$610,146.48
5800.79 EAP Expense	\$4,113,048.00	\$1,869,498.00	\$377,952.00
5800.94 Other Distributions/Contributions	\$6,889,153.00	\$3,294,250.13	\$658,367.39
5800.95 Unpaid Claims Liability Adjustment	(\$43,061,886.00)	(\$53,934,118.00)	(\$1,531,824.00)
TOTAL EXPENSES	\$3,674,871,631.00	\$1,508,805,155.71	\$288,327,585.57
CHANGE IN NET ASSETS	(\$100,236,180.00)	(\$13,697,211.12)	\$11,304,508.05
NET ASSETS - BEGINNING	\$477,287,079.10	\$477,287,079.10	\$452,285,359.93
NET ASSETS - ENDING	\$377,050,899.10	\$463,589,867.98	\$463,589,867.98

**SISC III
BALANCE SHEET
February 28, 2026**

	October 1, 2025 BALANCE	February 28, 2026 BALANCE
<u>ASSETS</u>		
9110.00 Cash in County Treasury	\$57,001,926.86	\$44,024,288.53
9120.00 Bank Account-Health Claims	\$229,538,272.95	\$212,894,723.97
9150.01 Local Agency Investment Fund	\$267,850.78	\$273,639.82
9150.03 Investments	\$321,541,855.15	\$324,844,317.00
9200.00 Accounts Receivable	\$251,723,520.24	\$183,931,665.57
9330.00 Prepaid Expenditures	\$315,944.96	\$104,379.16
9335.00 Reserve Fund	\$16,062,525.81	\$16,062,525.81
TOTAL ASSETS	\$876,451,896.75	\$782,135,539.86
 <u>LIABILITIES</u>		
9500.00 Current Liabilities	\$107,269,565.08	\$81,157,892.40
9650.00 Deferred Income	\$2,058,946.57	\$1,485,591.48
9668.00 Unpaid Claims Liability	\$289,836,306.00	\$235,902,188.00
TOTAL LIABILITIES	\$399,164,817.65	\$318,545,671.88
 NET ASSETS - Funding Stabilization Reserves	 \$477,287,079.10	 \$463,589,867.98
TOTAL LIABILITIES AND NET ASSETS	\$876,451,896.75	\$782,135,539.86

AUTHORIZED SIGNATURE

PREPARED BY: Nancy Russo

**SISC III
Investments
February 28, 2026**

24-HOUR LIQUID FUNDS

SISC III maintains much of its cash in the Kern County Treasury and Local Agency Investment Fund. Both agencies pool these funds with those of other entities in the state. These pooled funds are carried at cost which approximates market value

AGENCY	BALANCE	RETURN	PERIOD	DATES
COUNTY OF KERN	\$44,024,288.53	3.44%	LAST QUARTER	OCT-DEC 2025
		2.44%	5 YEAR AVERAGE	JAN 2021 - DEC 2025
LOCAL AGENCY INVESTMENT FUND	\$273,639.82	3.87%	CURRENT MONTH	February, 2026
		4.20%	LAST QUARTER	OCT-DEC 2025
		2.74%	5 YEAR AVERAGE	JAN 2021 - DEC 2025

INVESTMENT MANAGEMENT ACCOUNTS

The investment securities portfolio is comprised of securities carried at fair market value.

The fair market value of the investment securities available for sale at December 31, 2025 was:

INVESTMENT FIRM	MARKET VALUE	QUARTERLY RETURN	ANNUALIZED RETURN	PERIOD	DATES
MADISON INVESTMENTS (SISC INVESTMENT POOL)	\$74,356,424.00	1.00%	3.95%	LAST QUARTER	OCT-DEC 2025
			1.96%	5 YEAR AVERAGE	JAN 2021 - DEC 2025
			3.70%	YIELD TO MATURITY	AS OF DEC 31, 2025
MORGAN STANLEY (FRED BAYLES)	\$124,510,488.85	1.07%	4.23%	LAST QUARTER	OCT-DEC 2025
			2.11%	5 YEAR AVERAGE	JAN 2021 - DEC 2025
			3.02%	YIELD TO MATURITY	AS OF DEC 31, 2025
WELLS FARGO ADVISORS (RICH EDWARDS)	\$125,977,404.15	1.01%	3.99%	LAST QUARTER	OCT-DEC 2025
			1.47%	5 YEAR AVERAGE	JAN 2021 - DEC 2025
			3.41%	YIELD TO MATURITY	AS OF DEC 31, 2025
	<u>\$324,844,317.00</u>				

5-YEAR HISTORY OF RETURNS

Quarter Ending:	Co of Kern	LAIF	Investment Pool	Fred Morgan Stanley	Rich Wells Fargo	Combined Weighted Average Return
12/31/2025	3.44%	4.20%	3.95%	4.23%	3.99%	3.99%
9/30/2025	3.75%	4.34%	4.63%	4.29%	4.27%	4.27%
6/30/2025	3.41%	4.40%	5.25%	4.69%	4.55%	4.42%
3/31/2025	3.75%	4.48%	7.48%	6.17%	6.41%	5.73%
12/31/2024	3.56%	4.62%	-0.76%	-0.21%	0.11%	0.82%
9/30/2024	3.53%	4.71%	11.61%	10.53%	9.81%	9.26%
6/30/2024	3.46%	4.55%	3.67%	4.10%	3.96%	3.89%
3/31/2024	3.37%	4.30%	1.19%	2.68%	2.16%	2.45%
12/31/2023	3.15%	4.00%	10.98%	8.18%	10.02%	8.11%
9/30/2023	2.91%	3.53%	2.14%	3.48%	2.33%	2.83%
6/30/2023	2.65%	3.15%	-0.66%	0.45%	-1.03%	0.30%
3/31/2023	2.42%	2.74%	6.06%	5.83%	6.15%	5.43%
12/31/2022	2.16%	2.07%	3.47%	3.55%	3.49%	3.16%
9/30/2022	1.06%	1.35%	-4.79%	-5.11%	-8.00%	-3.40%
6/30/2022	1.00%	0.75%	-2.22%	-2.09%	-3.28%	-1.12%
3/31/2022	0.95%	0.32%	-9.06%	-6.20%	-11.03%	-4.35%
12/31/2021	0.84%	0.23%	-2.39%	-1.48%	-2.67%	-0.65%
9/30/2021	1.24%	0.24%	-0.20%	0.03%	-0.24%	0.50%
6/30/2021	1.00%	0.33%	0.80%	0.31%	-0.04%	0.51%
3/31/2021	1.07%	0.44%	-1.86%	-1.15%	-1.49%	-0.32%
5-Yr Average	2.44%	2.74%	1.96%	2.11%	1.47%	2.29%

SISC DEFINED BENEFIT PLAN and GASB 45 TRUST A
Investment Returns
As of : 12-31-2025

SISC DEFINED BENEFIT PLAN (DBP)

The SISC Defined Benefit Plan was established to provide a retirement benefit for part-time, temporary and seasonal employees. The Defined Benefit Plan portfolio will focus on growth and income through a balanced account of equities and fixed income. Funds may be invested with the County Treasurer and Local Agency Investment Fund (LAIF), however a majority of the assets are in a portfolio managed by Morgan Stanley/Graystone Consulting and held by the trustee, Prudential Retirement.

Investment Consultant: Fredric S. Bayles, III, Executive Director-Institutional Consulting Director, Morgan Stanley
Trustee/Custodian of Assets: Empower

Morgan Stanley Return on Investment (net of all fees & expenses)			Benchmark Comparison Morgan Stanley Moderate Growth & Income		
Current Quarter:	Oct-Dec 2025	1.60%	VS.		2.38%
Calendar Yr-To-Date:	Jan-Dec 2025	14.82%	VS.		16.51%
Rolling 4 Quarters:	Jan-Dec 2025	14.82%			

5-Year History of Returns:	2025	14.82%
	2024	14.83%
	2023	19.05%
	2022	-18.94%
	2021	15.33%

SISC GASB 45 TRUST A

As of : 12-31-2025

The GASB 45 Trust program was established to provide a mechanism for pre-funding Other Post-Employment (OPEB) liabilities. The GASB 45 Trust portfolios will focus on growth and income through a balanced account of equities and fixed income. Funds may be invested with the County Treasurer and Local Agency Investment Fund (LAIF), however a majority of the assets are in a portfolio managed by Morgan Stanley/Graystone Consulting and held at U.S. Bank.

Investment Consultant: Fredric S. Bayles, III, Executive Director-Institutional Consulting Director, Morgan Stanley
Trustee/Custodian of Assets: U.S. Bank

Morgan Stanley Return on Investment (net of all fees & expenses)			Benchmark Comparison Morgan Stanley Moderate Growth & Income		
Current Quarter:	Oct-Dec 2025	2.02%	VS.		2.38%
Calendar Yr-to-Date:	Jan-Dec 2025	12.01%	VS.		16.51%
Fiscal Year-To-Date:	Jul 2025-Dec 2025	7.20%			
Rolling 4 Quarters:	Jan-Dec 2025	12.01%			

5-Year History of Returns:	2024-25	9.03%
	2023-24	10.75%
	2022-23	10.83%
	2021-22	-9.71%
	2020-21	29.13%

12/31/2025 - 03/16/2026 Mid YTW BGN Local CCY Mov Avgs Key Events

1D 3D 1M 6M YTD 1Y 5Y Max Daily Table + Related Data Add Data Edit Chart

Mid Yield To Convention	3.669
High on 03/12/26	3.740
Average	3.532
Low on 02/27/26	3.379



SISC III
Comparison of Budget-to-Actual
2025-26

Revenues		Expenses		Surplus/Deficit		Exp/Rev		Act/Bgt
Monthly	YTD Cumulative	Monthly	YTD Cumulative	Monthly	YTD Cumulative	Monthly	YTD	YTD

Budget

Oct-25	\$294,160,110	\$294,160,110	\$323,512,314	\$323,512,314	(\$29,352,204)	(\$29,352,204)	110.0%	110.0%
Nov-25	\$294,160,110	\$588,320,220	\$279,772,364	\$603,284,679	\$14,387,746	(\$14,964,459)	95.1%	102.5%
Dec-25	\$294,160,110	\$882,480,330	\$288,491,935	\$891,776,614	\$5,668,175	(\$9,296,284)	98.1%	101.1%
Jan-26	\$302,810,211	\$1,185,290,541	\$315,798,223	\$1,207,574,837	(\$12,988,012)	(\$22,284,296)	104.3%	101.9%
Feb-26	\$296,896,622	\$1,482,187,163	\$299,238,984	\$1,506,813,821	(\$2,342,362)	(\$24,626,657)	100.8%	101.7%
Mar-26	\$296,896,622	\$1,779,083,785	\$299,044,857	\$1,805,858,678	(\$2,148,235)	(\$26,774,893)	100.7%	101.5%
Apr-26	\$302,810,211	\$2,081,893,996	\$308,470,636	\$2,114,329,313	(\$5,660,424)	(\$32,435,317)	101.9%	101.6%
May-26	\$296,896,622	\$2,378,790,618	\$319,222,981	\$2,433,552,294	(\$22,326,359)	(\$54,761,676)	107.5%	102.3%
Jun-26	\$296,896,622	\$2,675,687,240	\$295,737,479	\$2,729,289,773	\$1,159,143	(\$53,602,533)	99.6%	102.0%
Jul-26	\$299,491,149	\$2,975,178,390	\$332,161,608	\$3,061,451,381	(\$32,670,458)	(\$86,272,991)	110.9%	102.9%
Aug-26	\$293,577,560	\$3,268,755,950	\$314,137,009	\$3,375,588,390	(\$20,559,449)	(\$106,832,440)	107.0%	103.3%
Sep-26	\$305,879,502	\$3,574,635,452	\$299,283,241	\$3,674,871,631	\$6,596,261	(\$100,236,179)	97.8%	102.8%

Actual

Oct-25	\$297,196,038	\$297,196,038	\$341,585,833	\$341,585,833	(\$44,389,795)	(\$44,389,795)	114.9%	114.9%	104.5%
Nov-25	\$296,372,781	\$593,568,820	\$283,837,089	\$625,422,923	\$12,535,692	(\$31,854,103)	95.8%	105.4%	102.8%
Dec-25	\$296,566,967	\$890,135,786	\$285,723,269	\$911,146,192	\$10,843,698	(\$21,010,405)	96.3%	102.4%	101.3%
Jan-26	\$305,340,065	\$1,195,475,851	\$309,331,378	\$1,220,477,570	(\$3,991,314)	(\$25,001,719)	101.3%	102.1%	100.2%
Feb-26	\$299,632,094	\$1,495,107,945	\$288,327,586	\$1,508,805,156	\$11,304,508	(\$13,697,211)	96.2%	100.9%	99.3%

Year End Scenarios

Scenario #1	Revenue based	\$3,605,796,890	\$3,679,728,171	(\$73,931,281)	102.1%	99.3%
Scenario #2	on recent revenue	\$3,605,796,890	\$3,695,103,623	(\$89,306,733)	102.5%	99.7%
Scenario #3	continuing	\$3,605,796,890	\$3,692,028,532	(\$86,231,642)	102.4%	99.6%

Scenario #1: Expenses based on the pattern of actuals from October through February continuing throughout the year
Scenario #2: Expenses based on the March through September surplus/deficit coming in as originally budgeted
Scenario #3: Expenses based on a mix of Scenario #1 weighted at 20% and Scenario #2 weighted at 80%

Individual Claims > \$250,000 by Month

Mo-Yr	Total		Childbirth		Cancer		Circulatory		Other	
	Paid	#	Paid	#	Paid	#	Paid	#	Paid	#
Difference	(\$2,965,493)		(\$1,102,216)		(\$444,434)		\$190,419		(\$1,609,262)	
Prior 24Mo Avg	\$13,751,185	26	\$2,744,430	4	\$3,102,753	7	\$2,027,534	4	\$5,876,468	12
Feb-26	\$10,785,693	20	\$1,642,214	1	\$2,658,319	5	\$2,217,953	4	\$4,267,207	10
Jan-26	\$15,764,178	40	\$1,343,710	4	\$3,733,860	8	\$3,593,872	9	\$7,092,736	19
Dec-25	\$11,340,037	19	\$1,201,731	2	\$4,892,471	6	\$294,799	1	\$4,951,036	10
Nov-25	\$10,163,223	22	\$843,294	2	\$2,171,502	5	\$1,387,233	3	\$5,761,194	12
Oct-25	\$19,887,850	38	\$2,842,975	7	\$7,338,775	11	\$2,451,963	5	\$7,254,137	15
Sep-25	\$12,790,598	29	\$286,494	1	\$4,572,458	10	\$1,799,691	4	\$6,131,956	14
Aug-25	\$18,373,737	39	\$1,879,896	3	\$3,278,340	7	\$3,003,555	7	\$10,211,946	22
Jul-25	\$10,044,979	15	\$1,775,042	2	\$1,123,893	3	\$1,984,716	3	\$5,161,329	7
Jun-25	\$7,927,394	17	\$1,979,063	3	\$1,346,563	4	\$991,667	3	\$3,610,100	7
May-25	\$14,612,586	28	\$1,048,943	2	\$1,989,596	6	\$2,082,548	5	\$9,491,499	15
Apr-25	\$7,736,673	17	\$2,530,087	5	\$620,380	2	\$1,195,390	3	\$3,390,816	7
Mar-25	\$15,306,429	29	\$2,804,065	5	\$4,439,779	9	\$1,990,579	5	\$6,072,007	10
Feb-25	\$23,408,672	30	\$5,911,655	5	\$3,747,625	7	\$4,479,442	6	\$9,269,950	12
Jan-25	\$16,065,416	33	\$3,148,778	4	\$3,171,532	6	\$3,235,045	6	\$6,510,061	17
Dec-24	\$9,276,829	19	\$337,418	1	\$4,305,235	7	\$1,285,244	3	\$3,348,933	8
Nov-24	\$12,006,617	26	\$3,988,202	5	\$2,275,058	7	\$931,372	2	\$4,811,985	12
Oct-24	\$17,507,016	38	\$2,658,561	5	\$5,380,418	14	\$3,379,801	5	\$6,088,237	14
Sep-24	\$16,879,741	30	\$3,326,125	5	\$2,680,714	6	\$1,456,588	2	\$9,416,315	17
Aug-24	\$16,823,966	33	\$4,394,343	7	\$2,510,970	6	\$3,925,163	8	\$5,993,490	12
Jul-24	\$10,267,979	23	\$1,232,191	1	\$3,108,971	8	\$1,969,517	4	\$3,957,300	10
Jun-24	\$9,648,795	13	\$3,130,370	3	\$1,145,019	3	\$645,626	2	\$4,727,780	5
May-24	\$12,594,113	20	\$6,914,425	6	\$1,343,909	3	\$1,226,126	2	\$3,109,654	9
Apr-24	\$15,311,611	22	\$4,981,696	6	\$2,759,721	4	\$2,252,295	6	\$5,317,900	6
Mar-24	\$11,415,358	26	\$2,424,231	4	\$3,236,280	8	\$1,565,678	4	\$4,189,169	10
Feb-24	\$14,874,651	27	\$4,883,017	4	\$3,293,014	6	\$1,532,914	4	\$5,165,707	13
Jan-24	\$25,661,725	37	\$4,065,236	7	\$3,485,502	6	\$3,075,871	6	\$15,035,116	18
Dec-23	\$23,373,186	46	\$7,466,268	10	\$1,864,919	6	\$2,987,790	7	\$11,054,209	23
Nov-23	\$19,377,051	32	\$2,443,713	4	\$3,361,298	8	\$7,463,414	11	\$6,108,626	9
Oct-23	\$8,434,710	19	\$1,117,939	2	\$1,089,496	3	\$1,609,293	2	\$4,617,983	12
Sep-23	\$5,044,390	14	\$303,576	1	\$681,954	2	\$640,957	2	\$3,417,902	9
Aug-23	\$11,617,846	17	\$2,788,436	3	\$1,158,150	3	\$1,509,549	2	\$6,161,711	9
Jul-23	\$6,420,410	16					\$1,015,283	3	\$5,405,127	13
Jun-23	\$12,717,993	23	\$4,707,863	4	\$705,555	2	\$1,950,660	4	\$5,353,915	13
May-23	\$8,922,983	21	\$2,909,781	5	\$1,304,220	4	\$965,061	3	\$3,743,921	9
Apr-23	\$15,825,196	21	\$1,088,690	2	\$1,184,543	2	\$3,705,072	4	\$9,846,890	13
Mar-23	\$10,325,183	20	\$1,824,886	1	\$759,759	2	\$2,035,940	4	\$5,704,598	13
Mar-25-Feb-26 Avg	\$12,894,448	26	\$1,681,459	3	\$3,180,495	6	\$1,916,164	4	\$6,116,330	12
Mar-24-Feb-25 Avg	\$14,267,176	26	\$3,537,333	4	\$2,972,121	7	\$2,195,991	4	\$5,561,731	11
Mar-23-Feb-24 Avg	\$13,549,610	24	\$3,054,491	4	\$1,717,128	4	\$2,374,317	4	\$6,801,309	13

>=\$16,000

\$11,000-\$15,999

<=\$10,999



SISC Health Benefits Operations Update

Presented by:
Nicole Mata, Executive Director of Health Benefits

March 19, 2026

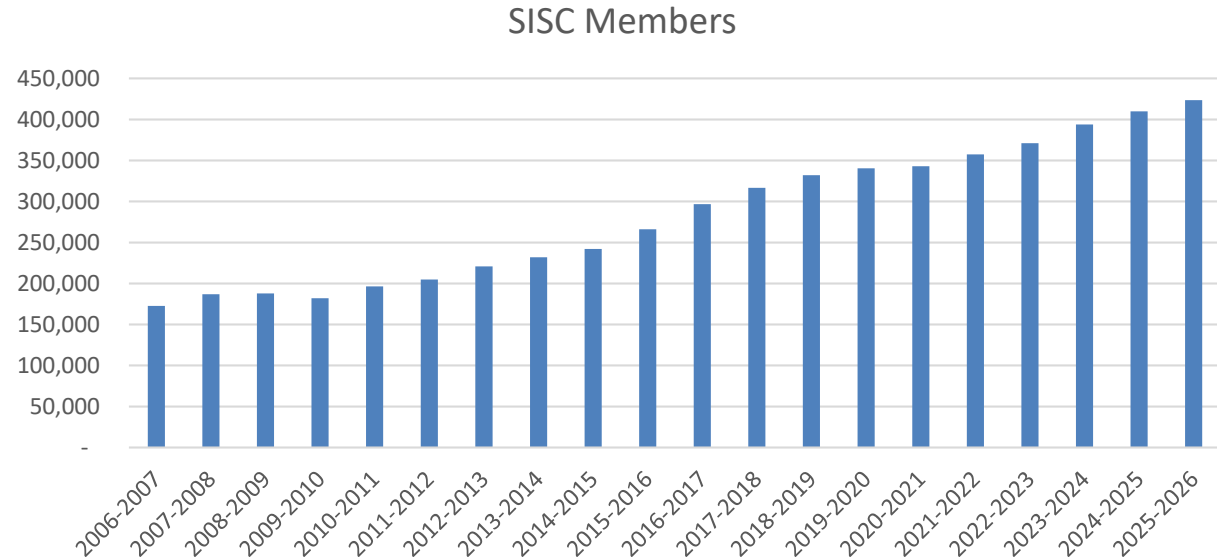
Operations Update

- 📍 Renewal Delivery Begins March 17th in SLO
- 📍 Statewide Renewal Webinar 3/26
- 📍 SISC DVR Update
 - 📍 Webinar 260 attendees
 - 📍 Initial feedback
- 📍 Compliance Updates:
 - 📍 1095Bs issued from SISC in January 2026
 - 📍 Annual District Contribution Survey Sent to Districts (Rx Reporting)
- 📍 Employee Contact Information Requested from Districts
- 📍 Quest Screening Program Underway
- 📍 Life Insurance Webinar held 2/26 – 72 attendees

SISC Membership Growth

SISC Members by Plan Year

Plan Year	Members	Subscribers
2006-2007	172,568	67,932
2007-2008	186,962	73,598
2008-2009	187,780	73,920
2009-2010	181,961	72,449
2010-2011	196,376	77,304
2011-2012	204,891	80,656
2012-2013	220,790	86,095
2013-2014	231,979	92,101
2014-2015	242,112	97,688
2015-2016	266,088	108,488
2016-2017	296,689	123,027
2017-2018	316,655	131,663
2018-2019	331,973	138,446
2019-2020	340,382	141,953
2020-2021	342,895	143,895
2021-2022	357,456	150,289
2022-2023	371,024	157,502
2023-2024	393,841	168,610
2024-2025	409,972	178,134
2025-2026	423,525	184,493



From 2006 to 2026, our membership has grown 145%, averaging roughly 7.25% growth per year. This is a strong indicator of long-term stability and trust in our program.

As we continue to expand, we remain committed to exceptional customer service which is why we will be launching a district feedback survey in January.

SISC Customer Satisfaction Survey Results

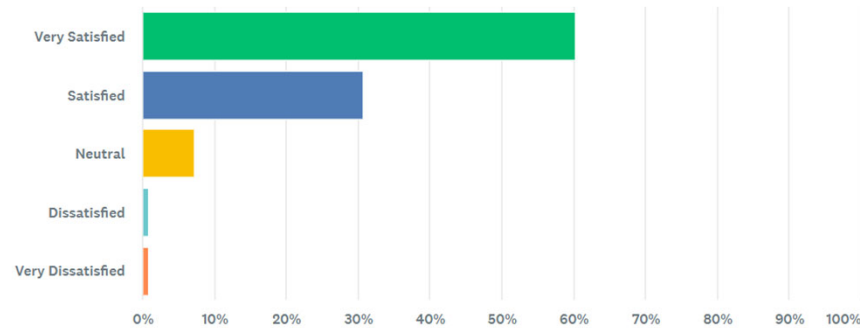
Key Insights

- 📌 **Overall satisfaction is high:** 61.54% of respondents rated the service provided by SISC Account Management and Eligibility Technician as 'Excellent', and 26.92% as 'Good'.
- 📌 **The SISC Account Management Team received strong marks for responsiveness and support, with over 89% of respondents being 'Very Satisfied' or 'Satisfied' in both areas.**
- 📌 For the SISC Eligibility Technician, 82.91% of respondents were 'Very Satisfied' or 'Satisfied' with responsiveness, and 82.48% with overall support.
- 📌 Open-ended feedback about team member recognition is overwhelmingly positive, with **96.23% of comments tagged as positive sentiment.**
- 📌 Suggestions for improvement are more mixed, with 33.33% negative, 48.72% neutral, and 17.95% positive sentiment.

SISC Customer Satisfaction Survey Results

How satisfied are you with the overall support provided by your SISC Account Management Team?

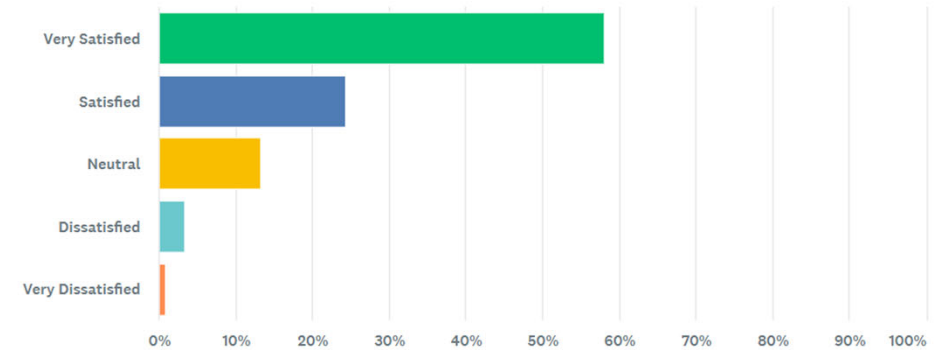
Answered: 234 Skipped: 0



Answer Choices ↓	Percentage ↓	Responses ↓
● Very Satisfied	60.26%	141
● Satisfied	30.77%	72
● Neutral	7.26%	17
● Dissatisfied	0.85%	2
● Very Dissatisfied	0.85%	2
Show comments		
Total		234

How satisfied are you with the overall support provided by your SISC Eligibility Technician?

Answered: 234 Skipped: 0

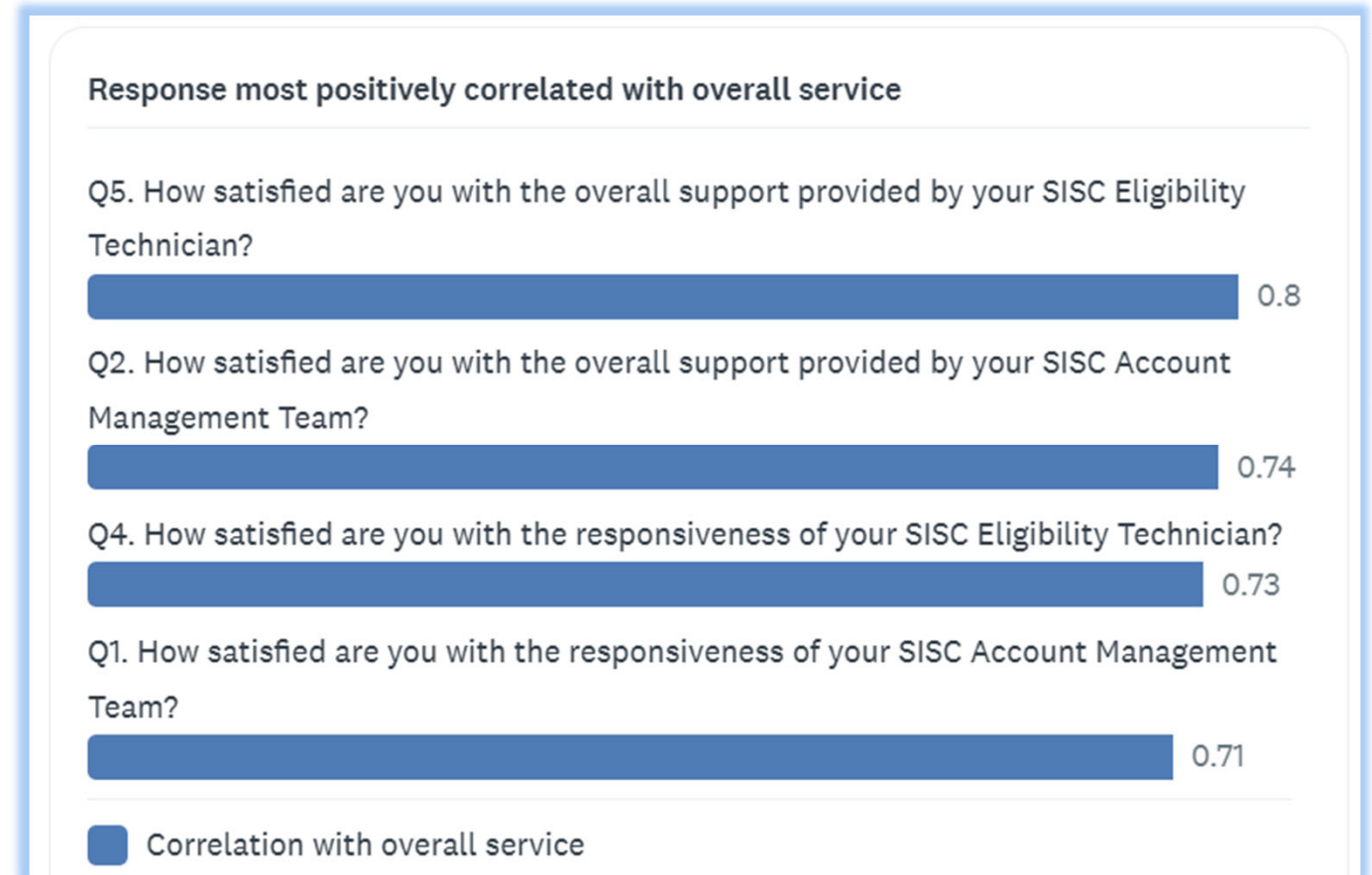


Answer Choices ↓	Percentage ↓	Responses ↓
● Very Satisfied	58.12%	136
● Satisfied	24.36%	57
● Neutral	13.25%	31
● Dissatisfied	3.42%	8
● Very Dissatisfied	0.85%	2
Total		234

SISC Customer Satisfaction Survey Results



Districts' perceptions of our overall service are most strongly correlated with the level of support provided by the SISC Eligibility Technician.



SISC Customer Satisfaction Survey Results



Is there anything we can do to improve our overall service to your district?

Answered: 86 Skipped: 148

RESPONSES (86)

WORD CLOUD

TAGS (0)

THEMATIC ANALYSIS

What responses say

Respondents provided a mix of constructive feedback and positive remarks regarding SISC's service to districts. Many highlighted the need for faster response and resolution times, clearer and more proactive communication, and improved training for both SISC staff and district employees. Some also suggested enhancements to the SISC Connect platform, such as better tracking, historical data access, and streamlined processes. A few noted challenges with process clarity, partnership, and the handling of sensitive issues. While some expressed satisfaction, the majority focused on opportunities for more efficient, transparent, and supportive service interactions.