



Spurgeon/Purnell

RESOLUTION NO. 6707

WHEREAS, the District maintains a Health Plan for its employees, retirees and their dependents, and

WHEREAS, the Board of Directors directed management to provide for self-funding of the District's Health Plan, as well as the use of Administrative Services Only providers, and to authorize such providers to issue payments and adjustments in settlement of such health benefits, and

WHEREAS, such arrangements were completed and the District's self-funded Health Plan is in effect, and

WHEREAS, State statutes require the Board of Directors to review and approve an annual report on the self-funded Health Plan and required reserves, and

WHEREAS, the Health Plan - 2024 Annual Report has been completed and indicates that the Health Plan was operated in accordance with the Board's directive and applicable State statutes.

NOW, THEREFORE, BE IT RESOLVED by the Board of Directors of the Omaha Public Power District that the Health Plan - 2024 Annual Report on the District's self-funded Health Plan, a copy of which is attached hereto, is hereby approved.

**Omaha Public Power District
Health Plan – 2024 Annual Report
May 13, 2025**

As required by the Benefits Act, the following is a report on the District's Health Plan for 2024 and required reserves.

HEALTH PLAN REPORT

	2024	2023
Expenses - Gross		
Medical, dental and prescription claims	\$39,972,000	\$36,237,000
Other post-employment benefits-OPEB	\$23,352,000	\$17,837,000
Fees and reserve adjustments	\$4,555,800	\$4,304,000
Subtotal	<u>\$67,879,800</u>	<u>\$58,378,000</u>
Reduction of Expenses		
Employee and COBRA contributions	\$8,406,300	\$7,403,900
Prescription Rebates ⁽¹⁾	\$3,475,900	\$2,476,600
Stop Loss Reimbursements ⁽²⁾	\$356,700	\$833,900
MISC Refunds ⁽³⁾	\$224,000	\$239,000
Subtotal	<u>\$12,462,900</u>	<u>\$10,953,400</u>
Total	<u><u>\$55,416,900</u></u>	<u><u>\$47,424,600</u></u>

Note ⁽¹⁾ This represents prescription drug rebates issued by the drug manufacturers.

⁽²⁾ This represents reimbursements for claims that exceed the individual stop loss.

⁽³⁾ This represents reimbursements from UMR and other self-insurance refunds.

RESERVES

	2024	2023
Incurred But Not Presented		
Beginning balance	\$3,765,000	\$3,218,000
Activity	\$189,000	\$547,000
Ending balance	<u>\$3,954,000</u>	<u>\$3,765,000</u>
Monthly Claims and Expenses		
Beginning balance	\$3,153,300	\$2,867,200
Activity	\$575,900	\$286,100
Ending balance	<u>\$3,729,200</u>	<u>\$3,153,300</u>

The reserve balances change based on annual projections and actuarial information received.



Board Action

May 13, 2025

ITEM

Health Plan – 2024 Annual Report

PURPOSE

Provide an annual report on the District's Health Plan

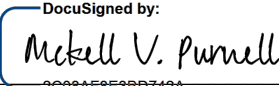
FACTS

- a. In 1991, the Board of Directors authorized the formation of a self-funded Administrative Services Only Health Plan (Health Plan). The Health Plan includes the health insurance programs and dental program offered by the District.
- b. The Health Plan is subject to the Political Subdivision Self-Funding Benefits Act, set forth in §13-1601 to §13-1626, Revised Statutes of Nebraska (Benefits Act). In order to comply with the Benefits Act, the District is required to prepare an annual report on the Health Plan and required reserves.
- c. Two funded reserves are maintained for the Health Plan in accordance with the Benefits Act. One reserve is to account for timing delays in claims filing and processing which is referred to as an Incurred But Not Presented Reserve. A second reserve ensures that funds will be available during each ensuing month and is called the Monthly Claims and Expenses Reserve.

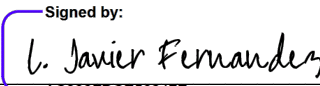
ACTION

Review and approval of the Health Plan – 2024 Annual Report

RECOMMENDED:

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McKell V. Purnell
Vice President – Human Capital

APPROVED FOR BOARD CONSIDERATION:

Signed by:

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L. Javier Fernandez
President and Chief Executive Officer

Attachments: Health Plan – 2024 Annual Report
Resolution