

City of Cincinnati Retirement System Board of Trustees Meeting

Agenda

August 4, 2022 / 2:00 P.M. City Hall, Council Chambers and via Zoom

Administration

Mike Barnhill

Ann Schooley

Members

Tom Gamel John Juech
Bill Moller Kathy Rahtz
Don Stiens Jeff Cramerding

Mark Menkhaus Jr.

Call to Order

Approval of Minutes

♣ Meeting Minutes – July 14, 2022

Report from Investment Committee

Informational - Executive Director's Report

- ♣ 2nd Qtr. Budget Update
- ♣ 2nd Qtr. DROP Report
- ♣ 2nd Otr. Demographic Report
- ♣ Active Election Update
- ♣ Horan Consulting Update
- CRS Staffing Update
- Counsel Update
- **Let CVS** Transforming Diabetes Program

Unfinished Business

- ♣ Outstanding Opinions (Board Approved Motion, October 3, 2019)
 - o Item 1. Explain why City's changes to retiree healthcare are permitted under the CSA without Court approval.
 - o Item 2. Explain why the Board cannot retain outside counsel on matters which the Solicitor's Office will not give counsel.
- ♣ Fiduciary Insurance Excess Layer
- ♣ CY2021 Annual Report

New Business

♣ TBD

Adjournment

Next Meeting: Thursday, September 1, 2022, 2:00 P.M. City Hall Council Chambers and via Zoom



City of Cincinnati Retirement System Board of Trustees Meeting Minutes July 14, 2022/ 2:00 P.M. City Hall – Council Chambers and remote

Board Members Present

Bill Moller, Chair Tom Gamel Mark Menkhaus, Jr. Kathy Rahtz Don Stiens John Juech Jeff Cramerding

Administration

Mike Barnhill Ann Schooley Linda Smith

CALL TO ORDER

Chair Moller called the meeting to order at 2:02 p.m. and a roll call of attendance was taken. Trustees Moller, Menkhaus, Gamel, Rahtz, Stiens, and Juech, were present. Trustee Cramerding and Winstead were absent.

APPROVAL OF MINUTES

Approval of the minutes of the Board meeting of June 9, 2022, was moved by Trustee Rahtz and seconded by Trustee Gamel. Trustee Moller requested a formatting change to a footnote. The minutes were approved by unanimous roll call vote.

Report from Benefits Committee

Trustee Gamel provided a summary of the Benefits Committee. The Benefits Committee took under consideration three cases involving the denial of retiree healthcare to disabled adult children of retirees. Director Barnhill presented a summary of the legislative history of the governing code section, CMC 203-48. The Committee then listened to a presentation by attorney Daniel Spraul, attorney for one of retiree parents. The Committee then took a vote to enter into executive session, which passed unanimously. The Committee entered executive session. The Benefits Committee re-convened.. The Committee tasked Director Barnhill with a number of information requests and tasks:

- (1) Was the notice of the enactment of CMC 203-48 provided to both actives and retirees?
- (2) Adopt a practice to send letters to retirees with disabled adult children advising them of the eligibility requirements for retiree healthcare for their children, as well as to provide follow-up letters as needed.
- (3) Establish communication with Risk Management to identify similar situated cases in the active employee population, and provide targeted communication about the eligibility requirements of CMC

- 203-48 in advance of retirement.
- (4) Research the costs of residential facilities for disabled patients, and whether such costs are covered by insurance and Medicare, as well as by the active and retiree healthcare plans.
- (5) Provide a definition of residential facility.
- (6) Research the various ways that permanent and total disability is determined, including how the Social Security Administration makes this determination. Provide clarification on these definitions.
- (7) Provide information on the different standards in place between the retiree and active health care plans.

Committee passed a motion for Law to provide advice on an eligibility appeals process. The Board passed this motion by unanimous roll call vote.

Informational – Executive Director's Report

Mr. Barnhill provided the following report:

- Market Update. May 2022 results from Marquette. YTD returns are -6.3%, and June results will be worse. Longer-term results are over 7.5%. Real estate and infrastructure returns are positive. Chair Moller observed that the results support the need for diversification.
- NCPERS Chief Officer Summit. Director Barnhill summarized the conference presentations.
- Active Election Update. A new notice of nominations has been sent. CRS is on course to swear in a new trustee at the October meeting.
- Horan Consulting Update. First meeting with Horan next week. Director Barnhill intends to use Horan to help respond to the questions and tasks from the Benefits Committee today.
- CRS Staffing Update. The status quo persists. CRS is using temps to fill the gaps created by the vacancies.
- Counsel Update. No update.
- Stabilization Fund Update. We are expecting the City to deposit \$2mm into CRS from the stabilization fund in CY2022.

UNFINISHED BUSINESS

Outstanding Opinions:

Board Approved Motion, October 3, 2019

- Item 1. Explain why City's changes to retiree healthcare are permitted under the CSA without Court approval.
- Item 2. Explain why the Board cannot retain outside counsel on matters which the Solicitor's Office will not give counsel.

A. Schooley reported there is no update.

2021 Actuarial Valuations

Trustee Gamel moved, and Trustee Juech seconded, approval of the 2021 actuarial valuations. Director Barnhill pointed out two correction edits that Cheiron will be making to the versions in the Board packets. Chair Moller observed that the references to the 16.25% employer contribution rate implies that the rate is fixed, and requested that in the future Cheiron amend its language so that this is not implied. Director Barnhill reported that he will ask the actuary to recompute the employer contribution rate for CY2022 after the City deposits the ERIP and stabilization fund payments into the CRS pension fund.

The Board approved the motion with a unanimous roll call vote.

NEW BUSINESS

Fiduciary Insurance Renewal

Director Barnhill reported that CRS has timely renewed the existing levels of fiduciary insurance (\$5mm base, \$2mm excess). Director Barnhill further reported that he requested quotes on additional levels of insurance, as a result of reading the OPERS fiduciary audit, in which the level of fiduciary insurance was called out as an issue for the Board. The broker has provided quotes for (1) an additional \$3mm and (2) an additional \$5mm of excess coverage at a cost of \$18,973 and \$27,125 respectively. Director Barnhill reported that the broker advised that other organizations with assets of similar size to CRS tend to have fiduciary insurance in the range of \$10mm. Director Barnhill observed that his objective was primarily to bring these matters to the Board's attention for discussion.

Trustee Menkhaus requested an explanation of what fiduciary insurance covers. Director Barnhill responded that fiduciary insurance provides coverage for claims of breach of fiduciary duty. For ERISA systems, there have been claims brought against trustees for failure to adequately manage the investment fees of defined contribution investment managers. Fiduciary insurance also covers when claims are made for administrative errors. Fiduciary insurance provides coverage mostly for the costs of legal counsel who provide the defense of trustees in such litigation.

Director Barnhill reported that the Board's budget covered the renewal of existing levels of coverage. Chair Moller requested that at the next meeting, Mr. Barnhill identify a source of funds in the Board's existing budget to pay for any increase in coverage.

CY2021 Annual Report

Chair Moller advised that it was time to start working on the CY2021 report. Director Barnhill referred to the discussion at the previous meeting regarding consolidating the various reporting requirements into one document to the extent possible within the time allotted. Director Barnhill advised that staff believes we can prepare a financial report in the Popular Annual Financial Report format this year. Director Barnhill stated that the timeline to complete the report would be September 30. Chair Moller invited members to consider serving on an ad hoc committee to review and edit the report.

Adjournment

Following a motion to adjourn by Trustee Stiens and seconded by Trustee Gamel, the Board approved the motion by unanimous roll call vote. The meeting adjourned at 2:38 P.M.

Meeting video link: https://archive.org/details/crs-board-7-14-22
Next Meeting: August 4, 2022 at 2:00 p.m.
Secretary

City of Cincinnati Retirement System Cash Flow Budget Analysis - As of June 30, 2022

										Difference
	Bud	lget	Actual			% of Budget		50% of	50	0% of Budget
	20	22	Q2, 2022		Difference	Utilized		Budget		v Actual
50% Expectation										
Office Staff	\$ 1,	806,000 \$	870,860	\$	935,140	48%	\$	903,000	\$	32,140
Office Expenses		131,000	39,643		91,357	30%		65,500		25,857
Training and Travel		61,500	390		61,110	1%		30,750		30,360
Data Processing		428,800	36,468		392,332	9%		214,400		177,932
Professional Fees		430,650	110,574		320,076	26%		215,325		104,751
Other		7,000	980		6,020	14%		3,500		2,520
Fiduciary Insurance		79,000	0		79,000	0%		39,500		39,500
Operating										
Budget Total	\$ <u>2,</u>	943,950 \$	1,058,915	\$_	1,885,035	36%	\$	1,471,975	\$	413,060
Member										
Cost (50% expectation)	\$ <u>230,</u>	944,000 \$	105,880,762	\$_	125,063,238	46%	\$ <u></u> 1	115,472,000	\$	9,591,238
Contributions										
(50% Expectation)	\$ <u>60,</u>	661,000 \$	29,192,772	\$	(31,468,228)	48%	\$	30,330,500	\$	(1,137,728)
Net Investment										
Returns										
(50% Expectation)	\$ <u>184,</u>	288,654 \$	(253,159,501)	\$_	(437,448,155)		\$ <u></u>	92,144,327	\$	345,303,828)

22 CRS CASH FLOW BUDGET							
	2022	% Cost of	2022	Difference	50% of	Difference	
PERATING EXPENSES	BUDGET	Operations	YTD June	Budget v Actual	Budget	50% v Actual	
							
A Office Staff							
1. Salaries & Wages	1,320,000	44.84%	591,637	728,363	660,000	68,363	
2. Fringe (35%)	466,000	15.83%	264,120	201,880	233,000	(31,120)	4th quarter 2021 paid in 2022
3. Temporary Services	20,000	0.68%	15,103	4,897	10,000	(5,103)	
A. Total Office Staff	1,806,000	61.35%	870,860	935,140	903,000	32,140	
B Office Expenses							
1. Office Improvements	28,000	0.95%	0	28,000	14,000	14,000	
2. Equipment / Purchase and Rent	11,000	0.37%	1,639	9,361	5,500	3,861	
3. Supplies	2,300	0.08%	1,092	1,208	1,150	58	
4. Printing and Postage	89,700	3.05%	36,912	52,788	44,850	7,938	
B. Total Office Expenses	131,000	4.45%	39,643	91,357	65,500	25,857	
C Training and Travel							
1. Training/Travel Board	32,500	1.10%	0	32,500	16,250	16,250	
2. Training/Travel Staff	29,000	0.99%	390	28,610	14,500	14,110	
C. Total Training and Travel	61,500	2.09%	390	,	30,750	·	
D Data Processing Expenses							
1. Pension Gold Hosting and Modifications	186,000	6.32%	0	186,000	93,000	93,000	Programing fees paid in block purchas
2. Pension Gold Annual License Fee	140.000	4.76%	0	140,000	70,000	70,000	Paid once per year
3. Regional Computer Center (ETS)	3,000	0.10%	1,265	1,735	1,500	235	r alu once per year
4. Hardware and Software for PCs	40,000	1.36%	12,515	27,485	20,000	7,485	
5. Other	59,800	2.03%	22,688	37,112	29,900	7,403	
D. Total IT Expenses	428,800	14.57%	36,468	392,332	214,400		
2. Total II Ziiponooo	120,000	1110770	50,100	072,002		177752	
E Professional Services							
1. Actuarial Fees	178,000	6.06%	54,474	123,526	89,000	34,526	
2. Consulting Fees	114,650	3.89%	7,048	107,602	57,325	50,277	
3. Legal Services	110,000	3.74%	28,228	81,772	55,000	26,772	
4. Retiree Locator Fees	3,000	0.10%	150	2,850	1,500	1,350	
5. Treasury, Accounts and Audits	25,000	0.86%	20,674	4,326	12,500	(8,174)	FY2022 annual expenses paid in CY20
E. Total Professional Services	430,650	14.65%	110,574	320,076	215,325	104,751	
F Other Expenses							
1. Board Meeting Expenses	2,500	0.08%	0	2,500	1,250	1,250	
2. Membership and Subscriptions	4,500	0.15%	980	3,520	2,250	1,270	
F. Total Other	7,000	0.23%	980		3,500		
	.,	2.0		3,220	5,200	_,	
<u>G. Insurance</u> Fiduciary Insurance	79,000	2.68%	0	79,000	39,500	39,500	Paid once per year
G. Total Insurance	79,000	2.68%	0	,	39,500		raid once per year
u. I that ilisui alice	79,000	4.00%	U	79,000	39,300	35,500	-
Total Operating Costs	2,943,950	100.02%	1,058,915	1,885,035	1,471,975	413,060	

BUDGET Operations YTD June Budget v Actual Budget 50% v Actual	2022 CRS CASH FLOW BUDGET						
II. MEMBER BENEFITS EXPENSES	(Continued)	2022	% Cost of	2022	Difference	50% of	Difference
A. Pensions		BUDGET	Operations	YTD June	Budget v Actual	Budget	50% v Actual
A. Pensions							
B. Return of Contributions C. Death Benefits G. 670,000 D. Medical 31,600,000 13.689% 11,543,195 20,056,805 Total Benefit Costs 200,944,000 100,00% 100,80% 105,880,762 125,063,238 115,472,000 9,591,238 2022 % of BUDGET Contributions YTD lune Budget v Actual III. CONTRIBUTIONS A. City Contributions (916.25% B. Employee Contributions (90%) C. Retiree Medical Premiums 2,351,000 3.87% 1,127,605 1,122,395 1,175,500 1,175,500 1,175,500 1,175,500 1,175,500 1,175,500 1,175,700	II. MEMBER BENEFITS EXPENSES						
B. Return of Contributions C. Death Benefits Gr0,000 Gr0,000 G.29% 255,000 415,000 335,000 80,000 415,6895 Total Benefit Costs 230,944,000 100,00% 105,880,762 125,063,238 115,472,000 9,591,238 2022 9 of BUDGET Contributions YTD lune 2022 PTD lune Budget vActual III. CONTRIBUTIONS A. City Contributions (916.25% B. Employee Contributions (90%) C. Retiree Medical Premiums 2,351,000 B. Transfers In (Out) Reciprocity (250,000) -0.41% (27,630) Total Contributions 193,580,654 249,961,398 101,272 116,000 117,500 1							
C. Death Benefits D. Medical C. Death Benefits D. Medical Contributions		, ,	-			, ,	, ,
D. Medical 31,600,000 13.68% 11,543,195 20,056,805 15,800,000 4,256,805 15,000,000 4,256,805 15,000,000 4,256,805 10,000 100,00% 105,880,762 125,063,238 115,472,000 9,591,238 125,000 125,003,238 115,472,000 9,591,238 125,000 125,003,238 115,472,000 9,591,238 125,000 125,000 125,000 125,0		, ,					
Total Benefit Costs		•	-	,	•	,	,
Contributions							
BUDGET Contributions YTD lune Budget v Actual Budget 50% v Actual	Total Benefit Costs	230,944,000	100.00%	105,880,762	125,063,238	115,472,000	9,591,238
BUDGET Contributions YTD lune Budget v Actual Budget 50% v Actual		2022	0/- of	2022	Difforonco	50% of	Difference
III. CONTRIBUTIONS				-		-	
A. City Contributions @16.25% 38,100,000 62.81% 17,905,344 (20,194,656) 19,050,000 (1,144,656) B. Employee Contributions (9.0%) 20,460,000 33.73% 10,187,453 (10,272,547) 10,230,000 (42,547) C. Retiree Medical Premiums 2,351,000 3.87% 1,127,605 (1,223,395) 1,175,500 (47,895) D. Transfers In (Out) Reciprocity (250,000) -0.41% (27,630) 222,370 (125,000) 97,370 [10,100] [10		DODGET	Contributions	11D june	<u>Duuget v Actual</u>	<u> Duuget</u>	30 /0 v Actual
A. City Contributions @16.25% 38,100,000 62.81% 17,905,344 (20,194,656) 19,050,000 (1,144,656) B. Employee Contributions (9.0%) 20,460,000 33.73% 10,187,453 (10,272,547) 10,230,000 (42,547) C. Retiree Medical Premiums 2,351,000 3.87% 1,127,605 (1,223,395) 1,175,500 (47,895) D. Transfers In (Out) Reciprocity (250,000) -0.41% (27,630) 222,370 (125,000) 97,370 [10,100] [10	III. CONTRIBUTIONS						
C. Retiree Medical Premiums D. Transfers In (Out) Reciprocity (250,000) -0.41% (27,630) 222,370 (125,000) 97,370 Total Contributions 100.00% 29,192,772 (31,468,228) 30,330,500 (1,137,728) IV. NET INVESTMENT RETURNS A. Gross Returns 193,580,654 (249,961,398) (443,542,052) 96,790,327 (346,751,725) B. Investment Expenses 1. Custodial Fees 232,000 101,278 130,722 116,000 14,722 2. Investment Consultant 235,000 117,500 117,500 0 0 3. Investment Management Fees 8,825,000 2,979,325 5,845,675 4,412,500 1,433,175 Total Investment Expenses Net Investment Returns (Budget 7.5%) 184,288,654 (253,159,501) (437,448,155) 92,144,327 (345,303,828) Net Assets Beginning Balance 2,575,518,715 1/1/2022 2,575,518,715		38,100,000	62.81%	17,905,344	(20,194,656)	19,050,000	(1,144,656)
C. Retiree Medical Premiums D. Transfers In (Out) Reciprocity (250,000) -0.41% (27,630) 222,370 (125,000) 97,370 Total Contributions 100.00% 29,192,772 (31,468,228) 30,330,500 (1,137,728) IV. NET INVESTMENT RETURNS A. Gross Returns 193,580,654 (249,961,398) (443,542,052) 96,790,327 (346,751,725) B. Investment Expenses 1. Custodial Fees 232,000 101,278 130,722 116,000 14,722 2. Investment Consultant 235,000 117,500 117,500 0 0 3. Investment Management Fees 8,825,000 2,979,325 5,845,675 4,412,500 1,433,175 Total Investment Expenses Net Investment Returns (Budget 7.5%) 184,288,654 (253,159,501) (437,448,155) 92,144,327 (345,303,828) Net Assets Beginning Balance 2,575,518,715 1/1/2022 2,575,518,715	B. Employee Contributions (9.0%)	20,460,000	33.73%	10,187,453	(10,272,547)	10,230,000	(42,547)
Total Contributions 60,661,000 100.00% 29,192,772 (31,468,228) 30,330,500 (1,137,728)		, ,	-				
IV. NET INVESTMENT RETURNS 193,580,654 (249,961,398) (443,542,052) 96,790,327 (346,751,725)	D. Transfers In (Out) Reciprocity		-0.41%		* 1		
A. Gross Returns 193,580,654 (249,961,398) (443,542,052) 96,790,327 (346,751,725) B. Investment Expenses 1. Custodial Fees 232,000 1101,278 130,722 116,000 147,722 2. Investment Consultant 3. Investment Management Fees 8,825,000 2,979,325 5,845,675 4,412,500 1,433,175 Total Investment Expenses Net Investment Returns (Budget 7.5%) 184,288,654 (253,159,501) (437,448,155) 92,144,327 (345,303,828) NET CHANGE IN FUND BALANCE 11,061,704 (330,906,406) (341,968,110) 5,530,852 (336,437,258) Net Assets Beginning Balance 2,575,518,715 1/1/2022 2,575,518,715	Total Contributions	60,661,000	100.00%	29,192,772	(31,468,228)	30,330,500	(1,137,728)
A. Gross Returns 193,580,654 (249,961,398) (443,542,052) 96,790,327 (346,751,725) B. Investment Expenses 1. Custodial Fees 232,000 1101,278 130,722 116,000 147,722 2. Investment Consultant 3. Investment Management Fees 8,825,000 2,979,325 5,845,675 4,412,500 1,433,175 Total Investment Expenses Net Investment Returns (Budget 7.5%) 184,288,654 (253,159,501) (437,448,155) 92,144,327 (345,303,828) NET CHANGE IN FUND BALANCE 11,061,704 (330,906,406) (341,968,110) 5,530,852 (336,437,258) Net Assets Beginning Balance 2,575,518,715 1/1/2022 2,575,518,715							
A. Gross Returns 193,580,654 (249,961,398) (443,542,052) 96,790,327 (346,751,725) B. Investment Expenses 1. Custodial Fees 232,000 1101,278 130,722 116,000 147,722 2. Investment Consultant 3. Investment Management Fees 8,825,000 2,979,325 5,845,675 4,412,500 1,433,175 Total Investment Expenses Net Investment Returns (Budget 7.5%) 184,288,654 (253,159,501) (437,448,155) 92,144,327 (345,303,828) NET CHANGE IN FUND BALANCE 11,061,704 (330,906,406) (341,968,110) 5,530,852 (336,437,258) Net Assets Beginning Balance 2,575,518,715 1/1/2022 2,575,518,715							
B. Investment Expenses 1. Custodial Fees 2. Investment Consultant 3. Investment Management Fees 4,825,000 3. Investment Expenses 9,292,000 0.36% 101,278 130,722 116,000 117,500 0 117,500 0 117,500 0 1,433,175 1,441,2500 1,433,175 1,447,897 Net Investment Returns (Budget 7.5%) 184,288,654 (253,159,501) (437,448,155) (341,968,110) 1,530,852 (336,437,258) Net Assets Beginning Balance 2,575,518,715 1/1/2022 2,575,518,715	IV. NET INVESTMENT RETURNS						
1. Custodial Fees 232,000 101,278 130,722 116,000 14,722 2. Investment Consultant 235,000 117,500 117,500 117,500 0 3. Investment Management Fees 8,825,000 2,979,325 5,845,675 4,412,500 1,433,175 Total Investment Expenses 9,292,000 0.36% 3,198,103 6,093,897 4,646,000 1,447,897 Net Investment Returns (Budget 7.5%) 184,288,654 (253,159,501) (437,448,155) 92,144,327 (345,303,828) NET CHANGE IN FUND BALANCE 11,061,704 (330,906,406) (341,968,110) 5,530,852 (336,437,258) Net Assets Beginning Balance 2,575,518,715 1/1/2022 2,575,518,715 1/1/2022 2,575,518,715 1/1/2022	A. Gross Returns	193,580,654		(249,961,398)	(443,542,052)	96,790,327	(346,751,725)
1. Custodial Fees 232,000 101,278 130,722 116,000 14,722 2. Investment Consultant 235,000 117,500 117,500 117,500 0 3. Investment Management Fees 8,825,000 2,979,325 5,845,675 4,412,500 1,433,175 Total Investment Expenses 9,292,000 0.36% 3,198,103 6,093,897 4,646,000 1,447,897 Net Investment Returns (Budget 7.5%) 184,288,654 (253,159,501) (437,448,155) 92,144,327 (345,303,828) NET CHANGE IN FUND BALANCE 11,061,704 (330,906,406) (341,968,110) 5,530,852 (336,437,258) Net Assets Beginning Balance 2,575,518,715 1/1/2022 2,575,518,715 1/1/2022 2,575,518,715 1/1/2022							
2. Investment Consultant 3. Investment Management Fees Total Investment Expenses Net Investment Returns (Budget 7.5%) Net Investment Returns (Budget 7.5%) Net Assets Beginning Balance 235,000 8,825,000 9,292,000 0.36% 3,198,103 117,500 117,500 117,500 1,433,175 2,979,325 5,845,675 4,412,500 1,433,175 4,646,000 1,447,897 (345,303,828) (341,968,110) 5,530,852 (336,437,258)							
3. Investment Management Fees		•		•	•	,	,
Total Investment Expenses 9,292,000 0.36% 3,198,103 6,093,897 4,646,000 1,447,897 Net Investment Returns (Budget 7.5%) 184,288,654 (253,159,501) (437,448,155) 92,144,327 (345,303,828) NET CHANGE IN FUND BALANCE 11,061,704 (330,906,406) (341,968,110) 5,530,852 (336,437,258) Net Assets Beginning Balance 2,575,518,715 1/1/2022 2,575,518,715		•		•	•	,	v
Net Investment Returns (Budget 7.5%) 184,288,654 (253,159,501) (437,448,155) 92,144,327 (345,303,828) NET CHANGE IN FUND BALANCE 11,061,704 (330,906,406) (341,968,110) 5,530,852 (336,437,258) Net Assets Beginning Balance 2,575,518,715 1/1/2022 2,575,518,715 1/1/2022 2,575,518,715	1				, ,	, ,	
NET CHANGE IN FUND BALANCE 11,061,704 (330,906,406) (341,968,110) 5,530,852 (336,437,258) Net Assets Beginning Balance 2,575,518,715 1/1/2022 2,575,518,715	Total Investment Expenses	9,292,000	0.36%	3,198,103	6,093,897	4,646,000	1,447,897
NET CHANGE IN FUND BALANCE 11,061,704 (330,906,406) (341,968,110) 5,530,852 (336,437,258) Net Assets Beginning Balance 2,575,518,715 1/1/2022 2,575,518,715	Not Investment Determine (Deduct F 50/)	104 200 654		(252 450 524)	(425 440 455)	02 144 225	(245 202 020)
Net Assets Beginning Balance 2,575,518,715 1/1/2022 2,575,518,715	Net investment keturns (Budget 7.5%)	184,288,654		(453,159,501)	(437,448,155)	92,144,327	(345,303,828)
Net Assets Beginning Balance 2,575,518,715 1/1/2022 2,575,518,715	NET CHANCE IN FUND BALANCE	11 061 704		(330 906 406)	(3/1 068 110)	5 530 852	(336 437 259)
	INET GHANGE IN FUND DALANGE	11,001,704		(330,300,400)	(341,700,110)	3,330,032	(330,437,230)
	Net Assets Reginning Ralance	2 575 518 715	1/1/2022	2 575 518 715			
	Met 153cts Degitting Datanee	<u> </u>	1/1/2022	2,3/3,310,/13			
Net Assets Ending Balance Projected 2.586.580.419 3/31/2022 2.244.612.309	Net Assets Ending Balance Projected	2,586,580,419	3/31/2022	2,244,612,309			

Cincinnati Retirement System DROP Quarterly Report for 2022

	Totals at 12/31/2021		Q1	Q2	Q3		Q4		2022	Life of Plan articipation
<u>Participants</u>										
Beginning			194	190					194	
New Participants	354		6	7					13	367
Withdrawn Particpants	-160	_	-10	-10					-20	-180
Remaining	194		190	187					187	187
DROP Balance										
Opening Balance								\$	23,780,761	
In-Flows to DROP										
Deferred Pension Payments	\$ 41,401,282	\$	2,307,248	\$ 2,235,254				\$	4,542,502	\$ 45,943,784
Member Contributions*	\$ 5,867,528	\$	366,798	\$ 298,366				\$	665,164	6,532,692
Interest Payable	\$ 1,281,844		93,213	\$ 100,044				\$	193,257	\$ 1,475,101
Subtotal	\$ 48,550,654	\$	2,767,259	\$ 2,633,664	\$	-	\$	- \$	5,400,923	\$ 53,951,577
Out-Flows from DROP										
Disbursement of Accounts	\$ (23,268,506)	\$	(1,824,701)	\$ (2,005,118)				\$	(3,829,819)	\$ (27,098,325)
Transfers to Pension Trust										
Participant Fees*	\$ (1,465,352)	\$	(91,668)	\$ (74,593)				\$	(166,261)	\$ (1,631,613)
Forfeited Interest	\$ (36,035)	\$	(1,625)	-				\$	(1,625)	\$ (37,660)
Subtotal	\$ (24,769,893)	\$	(1,917,994)	\$ (2,079,711)	\$	-	\$	- \$	(3,997,705)	\$ (28,767,598)
Change To DROP Quarterly		\$	849,265	\$ 553,953	\$	-	\$	- \$	1,403,218	
Ending DROP Liability	\$ 23,780,761							\$	25,183,979	\$ 25,183,979

^{*} Member Contributions equal 9% of pensionable compensation with 25% of collected amount transferred to Pension Trust as fees for participation in the DROP program.

Demographic Report for the CRS Board

	12/31/2021	1st Quarter (3/31/2022)	2nd Quarter (6/30/2022)	3rd Quarter (9/30/2022)	4th Quarter (12/31/2022)
Total F/T Active Employee Members (Does NOT include DROP participants)	2931	2922	2955		
Total Payees (includes retirees, optionees in pay status, and Survivors - does NOT include DROP participants)	4216	4193	4180		
Number of Retiree & Optionee Deaths YTD (includes Optionees who died and were not in pay status)	213	55	102		

Total Payees includes payees receiving multiple benefits AND Rehired Retirees. For example, a retiree who is receiving another benefit as an optionee is counted twice. This count does not correlate directly to the number of pensioners depicted in the Annual Actuarial Valuation due to differences in accounting for new retirees, deceased pensioners, DROP participants, and payees receiving multiple benefits.

Pensioner count is based on payroll date 1 day after end of quarter

Demographic Report for the CRS Board

	12/31/2017	1st Quarter (3/31/2018)	2nd Quarter (6/30/2018)	3rd Quarter (9/30/2018)	4th Quarter (12/31/2018)
Total F/T Active Employee Members (Does NOT include DROP participants)	3029	3079	3030	3005	3016
Total Monthly Benefits Issued (includes retirees, optionees in pay status, and Survivors - does NOT include DROP participants)	4156	4125	4097	4097	4080
Number of Retiree & Optionee Deaths YTD (includes Optionees who died and were not in pay status)	219	68	133	173	227

	12/31/2018	1st Quarter (3/31/2019)	2nd Quarter (6/30/2019)	3rd Quarter (9/30/2019)	4th Quarter (12/31/2019)
Total F/T Active Employee Members (Does NOT include DROP participants)	3016	3041	2986	2996	2993
Total Payees (includes retirees, optionees in pay status, and Survivors - does NOT include DROP participants)	4080	4077	4076	4070	4063
Number of Retiree & Optionee Deaths YTD (includes Optionees who died and were not in pay status)	227	50	85	136	174

	12/31/2019	1st Quarter (3/31/2020)	2nd Quarter (6/30/2020)	3rd Quarter (9/30/2020)	4th Quarter (12/31/2020)
Total F/T Active Employee Members (Does NOT include DROP participants)	2993	3004	2943	2861	2839
Total Payees (includes retirees, optionees in pay status, and Survivors - does NOT include DROP participants)	4063	4054	4055	4047	4119
Number of Retiree & Optionee Deaths YTD (includes Optionees who died and were not in pay status)	174	60	122	163	230

	12/31/2020	1st Quarter (3/31/2021)	2nd Quarter (6/30/2021)	3rd Quarter (9/30/2021)	4th Quarter (12/31/2021)
Total F/T Active Employee Members (Does NOT include DROP participants)	2839	2799	2843	2923	2931
Total Payees (includes retirees, optionees in pay status, and Survivors - does NOT include DROP participants)	4119	4231	4229	4233	4216
Number of Retiree & Optionee Deaths YTD (includes Optionees who died and were not in pay status)	230	76	117	164	213

Demographic Analysis, 6/30/2022

	Α	CTIVES		
Active	Full Time	Part Time	DROP*	Total
Group C	11	0	6	17
Group E	7	1	3	11
Group F	1,052	64	171	1,287
Group G	1,888	1,090	n/a	2,978
Total	2,958	1,155	180	4,293
Retiree Health Ins. Eligibility	Full Time	Part Time	DROP	Total
Select	11	0	9	20
Model 10% Premium Share	195	9	169	373
Model Grid	1,452	157	2	1,611
Will Never Be Eligible	1,300	989	0	2,289
Total	2,958	1,155	180	4,293
Deferred (Vested)				273
	Full Time	Part Time		Total
Inactive (Not Vested)	766	9,165		9,931
Total Refundable Balances	\$9.4mm	9,103		9,931
Average Refundable Balance	\$950			
Highest Refundable Balance	\$64,300			
# of Accounts > \$10,000	172	\$3.26mm		
Accounts Age 60+	533	\$593,624		
7100041107180 001		, , , , , , , , , , , , , , , , , , ,		
	Eligible	Not Eligible	Not Eligible	
DROP Eligibility	CSA Employees	CMC Employees	Non CSA	
(after 30 yrs svc)	C, E, F	E, F	G	
, , ,	775	360	2,978	
DROP Eligibility Pipeline				
Now	42			
Over Next 5 yrs	170			
6-10 yrs	284			
- · · · ·				
11 yrs+	279			

DROP*: The 2 Qtr. DROP report has an additional 7 people for a total of 187. Reconciliation: 7 Retired or Died before 6/30/2022, account not distributed

			SURVIVORS*	+ OF HONLES +	KETIKEES	
	Total	Survivor	Disability	Continuance	Svc Retirement	Groups
	769	14	73	280	402	Group A
	1,985	3	51	211	1,720	Group B
	241	0	0	10	231	Group C
	172	0	0	6	166	Group D
	73	0	0	1	72	Group E
	870	7	9	15	839	Group F
	18	4	0	1	13	Group G
	62	28	1	24	9	Not Specified
	4,190	56	134	548	3,452	Total
	Total	Survivor	Disability	Continuance	Svc Retirement	Options
	2,284	56	99	548	1,581	Single Life
	913	0	14	0	899	Option 1 (Jt & 100% Surv)
	544	0	14	0	530	Option 2 (Jt & 50% Surv)
	207	0	4	0	203	ption 3 (66.67% Jt & Surv)
	242	0	3	0	239	Option 4 (80% Jt & Surv)
	4,190	56	134	548	3,452	Total
_						
	Model Grid 25%		Model 10%	Select	Secure	Health Ins.
	52	5	509	2877	66	Retirees with CRS Ins
			Fligible but	Inaligihla hut		
			Eligible but	Ineligible but	Ineligible	
			Waived	Other Ins		Retirees Not in CRS Ins
			-	-	Ineligible 160	Retirees Not in CRS Ins
			Waived	Other Ins		Retirees Not in CRS Ins
			Waived	Other Ins		Retirees Not in CRS Ins
			Waived 327	Other Ins 194	160	Retirees Not in CRS Ins Group A
			Waived 327 Avg Ann Benefit	Other Ins 194 Avg Yrs Svc	160 Avg Age	
			Waived 327 Avg Ann Benefit \$34,443	Other Ins 194 Avg Yrs Svc 26.0	Avg Age 84.7	Group A
			Waived 327 Avg Ann Benefit \$34,443 \$49,718	Other Ins 194 Avg Yrs Svc 26.0 27.9	Avg Age 84.7 73.6	Group A Group B
			Waived 327 Avg Ann Benefit \$34,443 \$49,718 \$41,046	Other Ins 194 Avg Yrs Svc 26.0 27.9 25.8	Avg Age 84.7 73.6 72.4	Group A Group B Group C
			Waived 327 Avg Ann Benefit \$34,443 \$49,718 \$41,046 \$36,524	Other Ins 194 Avg Yrs Svc 26.0 27.9 25.8 23.8	Avg Age 84.7 73.6 72.4 67.8	Group A Group B Group C Group D
			Waived 327 Avg Ann Benefit \$34,443 \$49,718 \$41,046 \$36,524 \$35,135	Other Ins 194 Avg Yrs Svc 26.0 27.9 25.8 23.8 23.7	Avg Age 84.7 73.6 72.4 67.8 69.3	Group A Group B Group C Group D Group E
			Waived 327 Avg Ann Benefit \$34,443 \$49,718 \$41,046 \$36,524 \$35,135 \$39,402	Other Ins 194 Avg Yrs Svc 26.0 27.9 25.8 23.8 23.7 25.9	Avg Age 84.7 73.6 72.4 67.8 69.3 62.4	Group A Group B Group C Group D Group E Group F

^{*2}nd Qtr Board Demographic Report uses data 1 day after 6/30/2022

Transform Diabetes Care Member Communications CVS Caremark



Overview of direct communications that are part of TDC

- PODS team deploys messages in 4 channels: Email, Direct Mail (DM), IVR (calls), and SMS
- Outreach to member highly depends on channel permissions and model value assignment
 - For example: If a gap is "low priority", journey of digital touchpoints is prioritized (SMS/Email only),
 whereas if gap is "high priority," higher spend channels like direct mail and IVR are enabled
- Utilize behavioral economics to experiment which message results in behavior change members
 are randomly split into 2 content cohorts in Email and Direct Mail channels
- There are 3 main campaign types in production currently
 - Welcome campaign
 - Introduce TDC to members, provide overview of what to expect as part of the program
 - Interventions campaign
 - **Five care gap categories**: Screenings, SMBG (glucometer device), Medication Adherence, Medication Optimization, and Lifestyle
 - Digital app "onboarding" campaign



Schedule of Communications*

Campaign	Targeted Date to Begin Campaign
Welcome Campaign**	
SMS and Email	Go live Month Week Three
Direct Mail¹	Go Live Month Week Four
Interventions ² and Digital App Onboarding	
Email, and IVR	Go live Month Week Four
SMS	Month 2 Week One
Direct Mail¹	Month 2 Week Two
Digital App Email	Go live Month Week Four
Digital App Direct Mail ¹	Month 2 Week Two

^{*}Clients launch 1st of the month.



^{**}Welcome member communications are sent 10 days after the file is received on the 10th of the month. The received date is therefore subject to change based on the calendar month.

¹Date communications are mailed. USPS first class letters take 2 – 3 days to arrive, assuming no postal delays.

²Intervention campaigns are processed approximately 3 weeks after Welcome onboarding.

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Welcome Letter

Welcome Onboarding

Welcome Letter - Front



You're one of a kind. Your diabetes care should be, too.

Managing diabetes can be complex, and sometimes it's hard to keep up. Transform Diabetes Care is a personalized program, made available by <cli>client name>, that can help make it easier to keep your diabetes and other conditions in check. So you can live well, stay motivated and achieve your best health.

Here's how it works

We'll let you know about things you can do to improve your health. We can send you medication reminders or maybe even let you know about overdue screenings and encourage you to see your doctor. We'll give you the right amount of guidance and coaching based on your specific needs — at no extra cost to you. This is support when and where you need it.



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Welcome Letter - Back

This program is voluntary. You can opt out anytime by calling the Transform Diabetes Care team at 1-800-348-5238. By participating in the Transform Diabetes Care Program, you are consenting to sharing your personal information, including health information, with CVS Caremark to help you manage your health.

Information shared with CVS Caremark is protected by HIPAA (Health Insurance Portability and Accountability Act of 1996) and may result in a CVS Caremark pharmacist reaching out to you. CVS Caremark may also coordinate with your health care provider.

Certain benefits, connected devices, the mobile app and health coaching are available based on satisfaction of program eligibility requirements.

Program availability is subject to change. This program is not a substitute for medical care provided by your doctor and is not a replacement for the advice or treatment you may be receiving from your doctor for conditions like high cholesterol. In the event of a medical emergency, contact 911.

Your privacy is important to us. Our employees are trained regarding the appropriate way to handle your private health information.



♥CVSHealth.

Welcome Onboarding

Page 1 - Front

Simplify your health journey



Introducing the Health Optimizer™ app

Diabetes management can be complex. So, we're offering you a simpler way to manage your condition with the Health Optimizer app. It's a digital assistant that can enhance your diabetes care by tracking your numbers and giving you customized feedback in real-time. All at no extra cost to you. Scan the code below or search "Health

Optimizer" to download the app. Enter the access code "cvshealth" to quickly set up an account. Register with your first and last name as they appear on your CVS Caremark pharmacy benefits card.*

*The access code should only be used by the addressed recipient. Access may be terminated if used by another party.













Page 1 - Back

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Your privacy is important to us. Our employees are trained regarding the appropriate way to handle your private

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Page 2 - Front





We'll let you know about things you can do to help improve your health. Like getting an overdue screening, taking your medication or seeing your doctor.



See other side for other helpful resources

You may get individualized engagement and coaching in the coming months. This could mean developing a care plan, getting help with meal planning, testing your blood glucose or managing your medications.



You'll get helpful alerts, like emails, texts and mailings. You may even get phone calls from a registered nurse. They can walk you through important steps you may need to take and the resources available to help you get there. As you reach your health goals, you'll get fewer alerts from us.

Page 2 - Back

Transform Diabetes Care® program **Great Resources for you**



Everything you need to know

Learn to take care of your diabetes and feel more in control. Visit Health Resources at Caremark.com to see tips on managing diabetes, healthy living and plan perks.







Caremark.com/wps/portal/health_info_center

Virtual visits

Looking for a telehealth option?

MinuteClinic® Virtual Care* has you covered Use your voucher for a personalized virtual session where you'll get help managing chronic conditions, lifestyle coaching and more. A clinician may even recommend other services and screenings to help you stay on track with your health goals.



Sign up:

CVS.com/minuteclinic/virtual-care/e-clinic

health information, with CVS Caremark to help you manage your health.

Available in select locations.

This program is voluntary. You can opt out anytime by calling the Transform Diabetes Care team at 1-800-348-5238. By participating in the Transform Diabetes Care Program, you are consenting to sharing your personal information, including

Information shared with CVS Caremark is protected by Health Insurance Portability and Accountability Act of 1996 (HIPAA) and may result in a CVS Caremark pharmacist reaching out to you. CVS Caremark may also coordinate with your health care provider Certain benefits, connected devices, the mobile app and health coaching are available based on satisfaction of program eligibility

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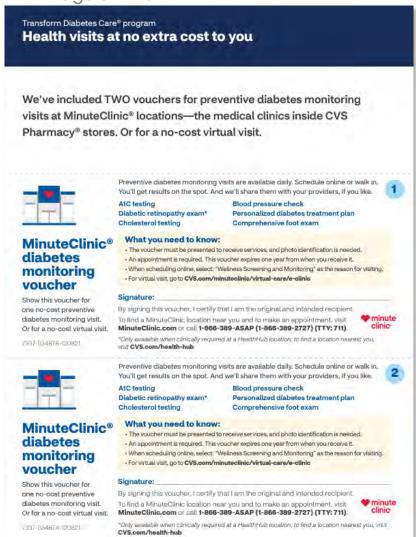
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Welcome Onboarding

Page 3 - Front



Page 3 - Back

Registration kiosk instructions

- 1. At the kiosk, scan the barcode.
- Continue with registration and select "Wellness Screening and Monitoring" as the reason for visit.
- 3. Enter your information.
- 4. Select "No" for using medical insurance.
- Answer the acknowledgment and consents.When you've completed these, you'll be signed in.
- Show this voucher to the provider when you go into the clinic for your visit.

Provider instructions

To confirm the patient's registration, go to "Encounter Information" and "Visit Info" to confirm the following fields are correct:

- . Chief Complaint: Transform Care: Diabetes Monitoring
- . Special Offer: Transform Care: Diabetes Monitoring



important notes: MinuteClinic® locations will not accept offers printed from unauthorized internet postings or reproductions, copies or facsimiles of this voucher/offer. Age restrictions may apply, Original voucher must be surrendered at time of service, voucher is void where prohibited by law, Limit two vouchers per customer per year, No cash back. A MinuteClinic provider will perform exams and tests based on your individual needs when medically necessary.

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Welcome Email





CVS Caremark alerts: We sent you mail saying we'd reach out with helpful tips on how to stay healthy. It has information on plan benefits you may find helpful.

Self-monitoring of blood glucose and blood pressure (SMBG & SMBP)

SMBG - Direct Mail







These tools can help you be healthier.







No link



One Touch Verio Reflect®



Continuous glucose monitoring



Personal glucose profile



One Touch Verio-65



One Touch Verio+65

For questions about ordering a glucometer, call the Transform Diabetes Customer Care team at <1-800-348-5238.>



SMBP - Direct Mail











SMBG - Direct Mail

Autonomy

Continuous glucose monitoring

Talk to your doctor about the best

continuous glucose monitor (CGM) for you.

a patch worn on the skin.

You have options when choosing a CGM.' Call your health plan or

and the type of coverage.

should take this diagnostic test.

balance, if any, paid by a Plan.

pharmacy benefits provider to learn more about the devices they offer

*CGM devices may be covered by the health plan provider, but typically they are covered under the member's pharmacy

benefit. A prior authorization may be required for Medicare members. The member is responsible for the pharmacy

Copayment, copay or coinsurance means the amount a member is required to pay for a prescription in accordance

Personal glucose profile

Ask your doctor if getting a personal

glucose profile is right for you.

If you test your blood sugar on a regular basis and still can't control

· Your health care provider will schedule several

your blood sugar levels over time.*

This is typically covered as a diagnostic test under your medical insurance coverage. The member will be responsible for customary copayment for the provider visit and the diagnostic test.

Copayment, copay or coinsurance means the amount a member is required to pay for a prescription in accordance with a Plan, which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the balance, if any, paid by a Plan.

in-person visits with you. During the first visit, they'll

apply a patch that lies just below the skin. It records

· You'll return to the office at least one time between

3-14 days later, so they can read the information

· The results will help your provider make a treatment

plan that's right for you - including medication.

diet, exercise, sleep and other stress factors.

your blood glucose levels, your doctor can help you decide if you

What you should know:

with a Plan, which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the

A personal CGM can help you and your provider:

· Detect low and high blood sugar events.

based on the direction of your provider.

. Track your blood sugar levels day and night through

· See how various lifestyle factors affect your blood

A personal CGM can be used along with a glucometer,

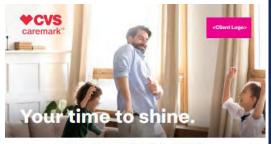
Rio TelCare

Healthy actions make a difference. That's why your doctor should be B - 5 your first stop when considering the best ways to manage your diabetes. Simplify your meals Remove the guesswork



Want to talk to someone?

Have questions or want to learn more? Call the CVS Health Transform Diabetes Program support line at 800-348-5238.



These tools can help you be healthier.

Tools that can help take the stress out of managing your diabetes





Stay organized

Keep all your medical information like blood sugar numbers and lab test results in one place."

Start the day walking Create an exercise routine and get moving in

the mornings."

Did you know you're eligible for a glucometer at no extra cost?'



- plan ahead with easy

to make, healthy recipes."

You have several options, but consider choosing the BioTel Care* Blood Glucose Monitoring System at no extra cost. Features include:"

- · Near real-time data transmission
- · Responsive color touchscreen
- · Clinician and family member access via member and provider portals
- 24/7 monitoring

Visit TransformDiabetesCare.MyTelcare.com to get started.



Scan the code with your phone's camera or call your dedicated Telcare Team at 1-888-342-1160. Please have your Caremark™ Member ID ready.

"While your meter is offered at no cost to you, your supplies may be subject to a copay as required by your plan."
"Includes unlimited test strice and lancets delivered to your goor.

Copayment, copay or consuminor means the amount a member is required to pay for a prescription in accordance with a Pain, which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the chaince, if any patity a Fill of the chains of the ch

This document contains reterences to brand-name medical products that are trademarks or registered trademarks of comparise not affigued with CVS Caramark.

Custom support - in the palm of your hand



Scan. Download, Explore. Scan the code with your phone's camera. Or search "Health Optimizer" to download the app.



No link

Did your provider prescribe a glucometer?



You have options when choosing a glucometer. While discussing which ones are best for you, consider selecting for features like:

- Bluetooth® enabled
- Digital interface
- Compact design

You'll need to make sure your doctor gives you a prescription for more supplies.

Talk to your doctor today about what glucometer option makes sense for you.

One Touch Verio Reflect®

Did you know you're eligible for a glucometer at no extra cost?"



You have several options, but consider choosing the One Touch Verio Reflect* at no extra cost. Features

- · Bluetooth* enabled
- · Digital interface
- · Compact design

And ask your doctor for a prescription for extra test strips and lancets.

NOTICE: If you're a Medicare member, you must contact your provider to get a prescription for a glucometer, visit Medicare.gov/supplier. Or call 1-800-MEDICARE (1-800-633-4227). TTY users can dial 1-877-486-2048.



Scan the code with your phone's camera. Or visit Caremark.com/GlucoseMonitor to order your

Available at phermacies and through in-network clurable medical equipment (DME) providers: Hincluries to lancers and test strips. This document contains references to brand-name medical products that are trademarks or registered trademarks of companies not affiliated with CVS Carlemark.

One Touch Verio-65

Scan the code with your phone's camera. Or visit Caremark.com/GlucoseMonitor to order your starter kit."

One Touch Verio+65

For questions about ordering a glucometer, call the Transform Diabetes Customer Care team at <1-800-348-5238.>





SMBP - Direct Mail

2 Autonomy







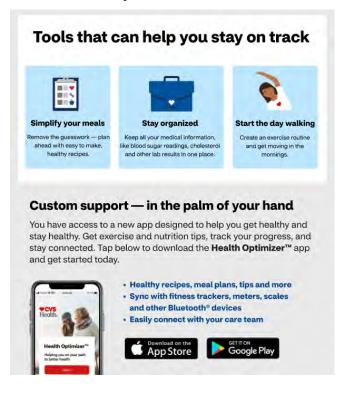




SMBG - Email



Formulary and BioTel Care



Continuous glucose monitoring



Professional glucose profile

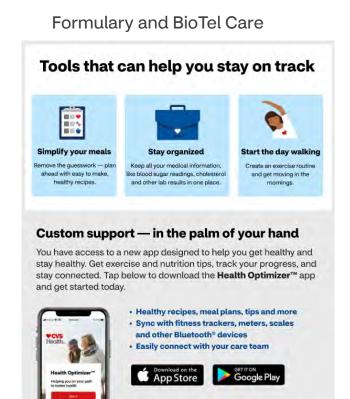




SMBG - Email







Continuous glucose monitoring



Professional glucose profile





SMBG – IVR and SMS



We know for some, living with diabetes can be a challenge. The Centers for Disease Control and Prevention says monitoring blood glucose is an important way to manage diabetes because it measures the effects diet, exercise, and medicine have on your blood sugar.

If your provider has prescribed a glucometer, you can order [<BioTel Care Glucose Monitoring System> <One Touch Verio Reflect>] at no extra cost. Go to [TransformDiabetesCare.Mytelcare.com] to order your starter kit today. Again that's [TransformDiabetesCare.Mytelcare.com]. And if you need additional supplies, ask your provider for a prescription.

If you have questions about your plan or need help finding a provider, call your health plan provider on your ID Card.

Variations based on other SMBG recommendations

[If your provider has prescribed continuous glucose monitoring (CGM), you have options when choosing a Continuous Glucose Monitor. To learn more about the devices and types of coverage, call the member services number on your ID card.]

[If you test your blood sugar on a regular basis and still can't control your blood glucose levels, ask your doctor if getting a personal glucose profile is right for you.]

If you have questions about your plan, call the number on your ID card.

SMBG device type

Continuous Glucose Monitoring Version

Personal Glucose
Profile Version



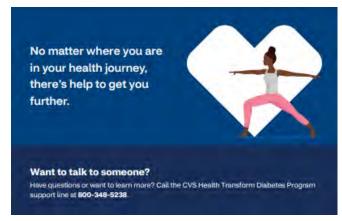
CVS Caremark alerts: Knowing your blood sugar, cholesterol and blood pressure levels are helpful to staying healthy. Ask your doctor how to track these numbers at home. For more information about at home health screening benefits, call your health plan.



Lifestyle

Lifestyle – Direct Mail







<First Name>, you have the power to live healthier, one day at a time.



Healthy habits can help to keep you in control

Having diabetes could put you at a higher risk of developing other health conditions over time. That's why its so important to do everything you can to stay healthy. Making small changes to your lifestyle can have a big impact on your overall well-being.







Maintain a healthy weight

regularly

Uohn's Hopkins Medicine. Diabetes and High Blood Pressure. Available at: Hopkinsmedicine.org/health/conditionsand-diseases/diabetes/diabetes-and-high-blood-pressure. Accessed August 24, 2021.



Trouble quitting tobacco? You're not alone.

Smoking increases your risk of diabetes complications.²
For helpful tips on how to quit, visit

www.cvs.com/minuteclinic/resources/smoking-cessation

*Centers for Disease Control and Prevention. Smoking and diabetes. March 23, 2020. Available at: CDC.gov/tobacco/ campaign/tips/diseases/diabetes.html. Accessed November 25, 2020.



Lifestyle – Direct Mail







Healthy habits can help to keep you in control

Having diabetes could put you at a higher risk of developing other health conditions over time. That's why its so important to do everything you can to stay healthy. Making small changes to your lifestyle can have a big impact on your overall well-being.







Maintain a healthy weight

Exercise regularl

Uohn's Hopkins Medicine, Diabetes and High Blood Pressure, Available at: Hopkinsmedicine.org/health/conditionsand-diseases/diabetes/diabetes-and-high-blood-pressure, Accessed August 24, 2021.



Scan the code with your phone's camera. Then tap the banner to download the **Health Optimizer™** app.

- ✓ Healthy recipes, meal plans, tips and more
- ✓ Sync with fitness trackers, medical devices, scales and meters that are Bluetooth[®] connected
- ✓ Easily connect with your care team



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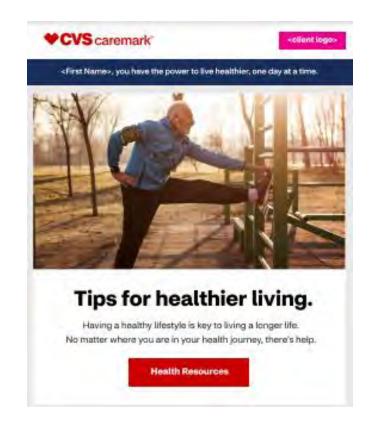
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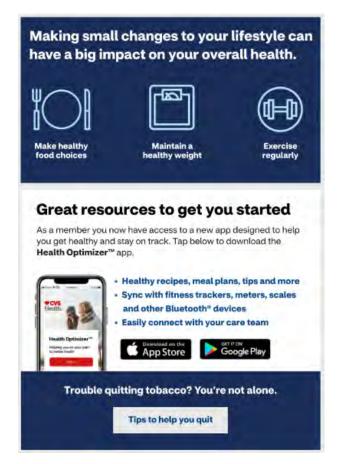
*Centers for Disease Control and Prevention. Smoking and diabetes. March 23, 2020. Available at: CDC.gov/tobacco/ campaign/fips/diseases/diabetes.html. Accessed November 25, 2020.



Lifestyle – Email



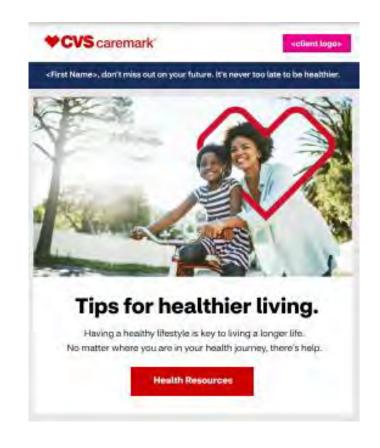


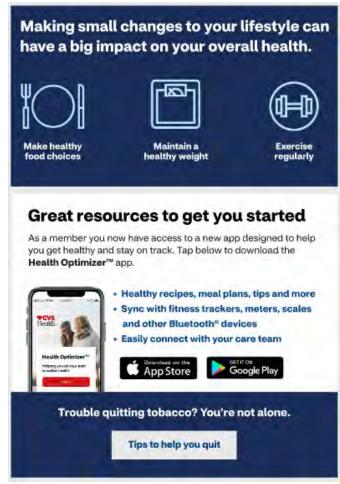




Lifestyle – Email









Lifestyle IVR and SMS



People with a healthy lifestyle can live up to 12 years longer than those who don't. When it comes to managing diabetes and controlling blood sugar levels, being active and eating right can help.

If you have questions about your health plan, need help finding a provider or tobacco cessation resources, call the number listed on your ID card.



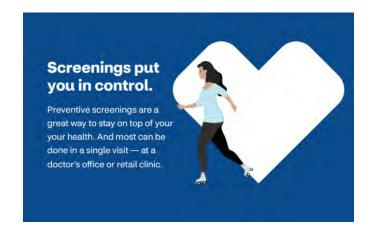
CVS Caremark alerts: Knowing your blood sugar, cholesterol and blood pressure levels are helpful to staying healthy. Ask your doctor how to track these numbers at home. For more information about at home health screening benefits, call your health plan.



Screenings

Screenings - Direct Mail



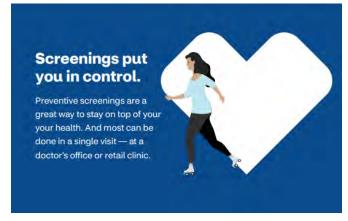








Screenings - Direct Mail





Getting the most out of life starts with taking care of yourself.





functioning tests

These blood or urine tests show how well your kidneys are working. They can detect if there may be any organ damage or abnormalities.

for blood cell production

and nerve function. Abnormal levels of B12 could mean you have an underlying health condition.

for changes in the blood vessels of the retina and measures overall eve-



Remember, you may be able to use the vouchers from your welcome letter at a MinuteClinic® location to complete this test.' Visit CVS.com/minuteclinic to check if the test is offered at a location near you.

Bring this to your doctor appointment.





Screenings help you detect - and even help prevent health complications earlier. And give you a clearer picture of your overall health.

Want to talk to someone?

Have questions or want to learn more? Call the CVS Health Transform Diabetes Program support line at 800-348-5238.



Screenings - Email

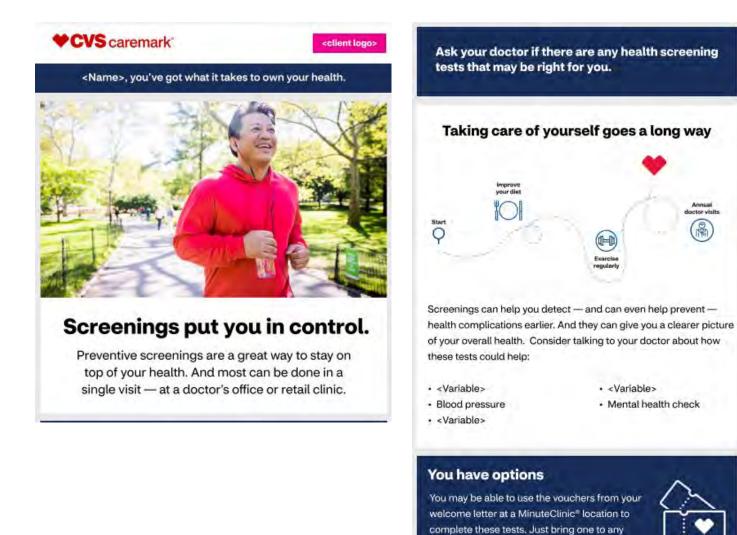
Autonomy (EM)

屬

· <Variable>

location - no appointment needed.

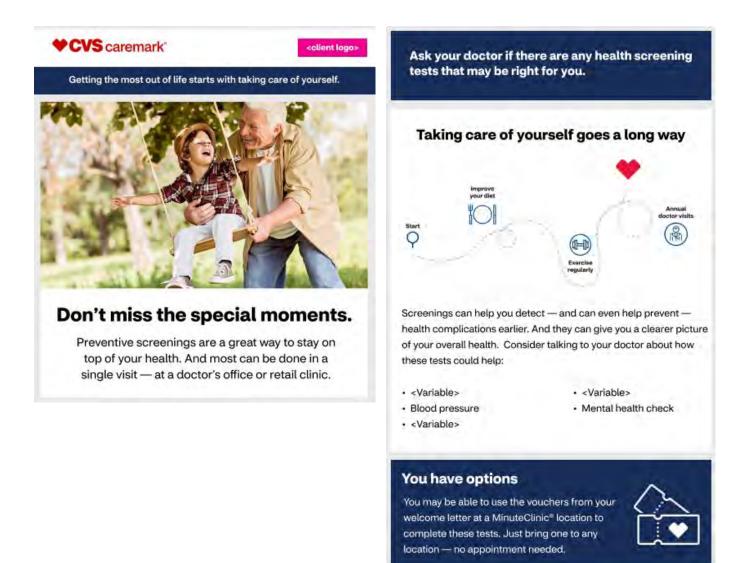
· Mental health check





Screenings - Email

2 Loss Aversion (EM)





Screenings IVR and SMS



Staying up to date with certain health screenings or tests can keep you healthy and help you better manage your diabetes. It looks like you may be due for [Screening Type].

Please call your doctor today to make an appointment for the screenings you may need. If you have questions about your health plan or need help finding a doctor, call the number listed on your ID card.

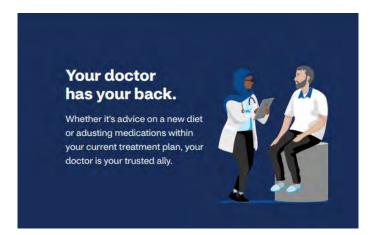


CVS Caremark alerts: Remember to talk to your doctor about regular health checkups & screenings to help you stay in control. Need a doctor? Call your health plan.



Medication Optimization

Med Optimization - Direct Mail





1 Autonomy (DM)







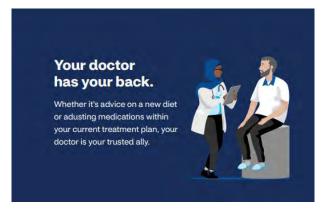
Your pharmacist is also part of your care team. Visit Caremark.com to learn how they can help on your path to better health.

Want to talk to someone?

Have questions or want to learn more? Call the Transform Diabetes Care*
program support line at 1-800-348-5238.



Med Optimization - Direct Mail





Managing your diabetes isn't always easy, but it helps to learn what works for others.





2 Social Proof (DM)



Med Optimization - Email





Med Optimization - Email









Med Optimization - IVR and SMS



Living with diabetes is personal, and everyone's journey is different. With help from your doctor, it's possible to manage your blood sugar through diet and exercise. But sometimes you may need medicine to help better manage diabetes. So ask your doctor if taking [drug class] is right for you.

If you have questions about your prescription plan benefits, or need help finding a pharmacy, visit Caremark.com.



CVS Caremark alerts: Your healthcare journey is unique. You may need certain kinds of medications to help you manage your health. Talk to your doctor about what might be best for you. Visit Caremark.com if you have questions about your prescription benefits.



Medication Adherence

Medication Adherence – Direct Mail









Remember to take your medication by:

- · Always taking it when you brush your teeth
- Keeping it next to things you use every day, like your keys or cell phone
- · Setting an alarm on your smartphone to remind you

Want to talk to someone?

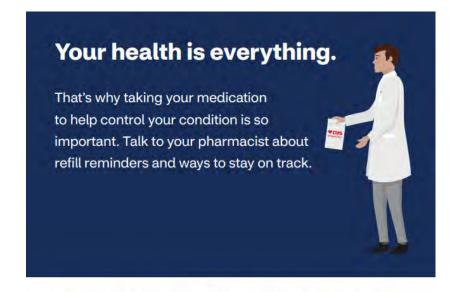
Have questions or want to learn more? Call the CVS Health Transform Diabetes Program support line at **800-348-5238**.

Medication Adherence - Direct Mail





Don't miss out on the special moments. Your health is too important.



Remember to take your medication by:

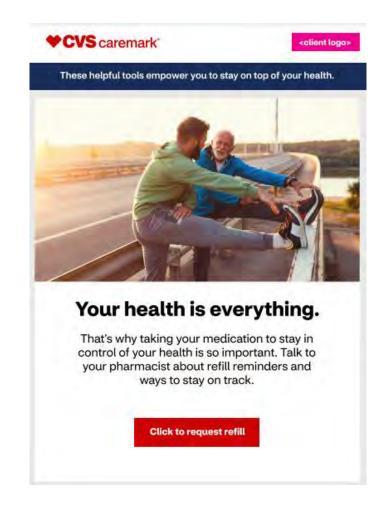
- · Always taking it when you brush your teeth
- Keeping it next to things you use every day, like your keys or cell phone
- Setting an alarm on your smartphone to remind you

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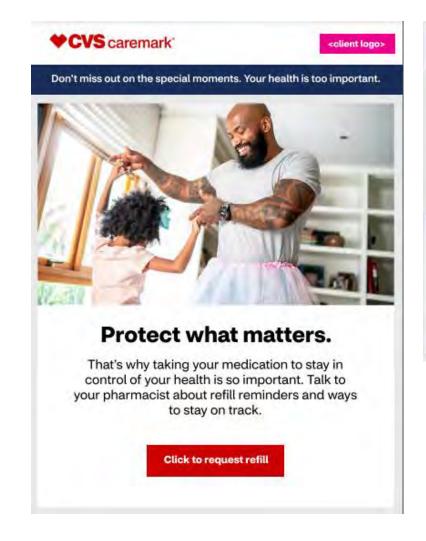
Medication Adherence - Email

1 Autonomy (EM)





Medication Adherence - Email





Medication Adherence – IVR and SMS



Taking care of your health is so important-and so is taking your medicine the way you and your doctor talked about. This will help keep your diabetes in control, regulate your blood sugar, and lower the risk of diabetes complications, so you can stay active and feel your best.

Many pharmacies offer automatic prescription refills, so work with your local pharmacist on a plan that will keep you on track with your medication routine. If there's a medical reason you're not taking your prescription, talk to your doctor about your treatment plan.

Talk to your pharmacist about refill reminders and ways to stay on track. If you have questions about your prescription plan benefits or need help finding a pharmacy, visit Caremark.com.



CVS Caremark alerts: Taking medications as prescribed by your doctor may help you stay in control. Auto refills through your pharmacy can be a good way to create a routine. Talk to your local pharmacist to see how they can help.



Digital App Onboarding Campaign

Digital App Onboarding - Mailer #1

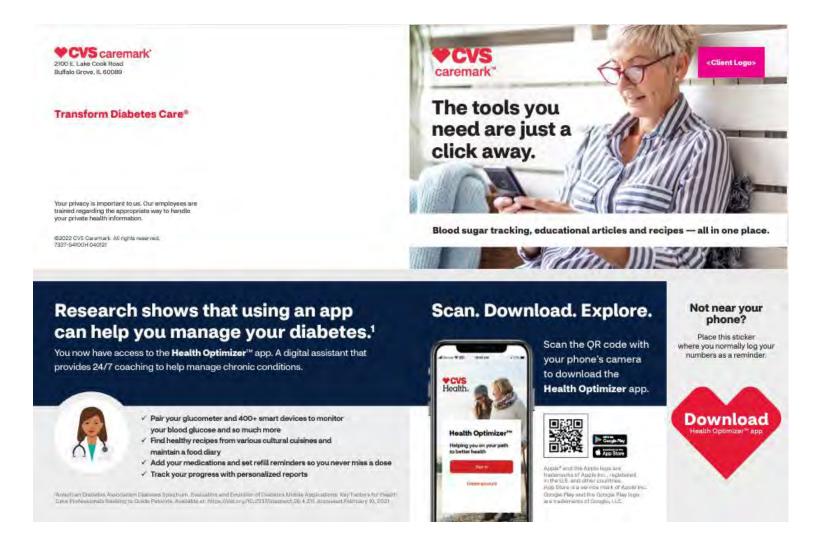
Shaped like a phone cutout





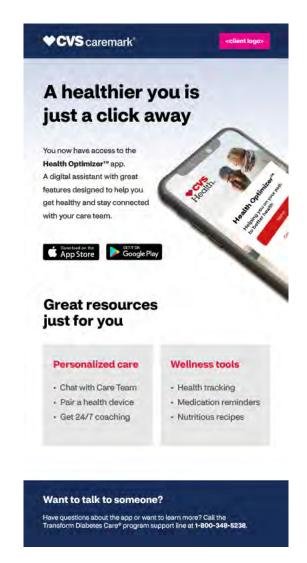


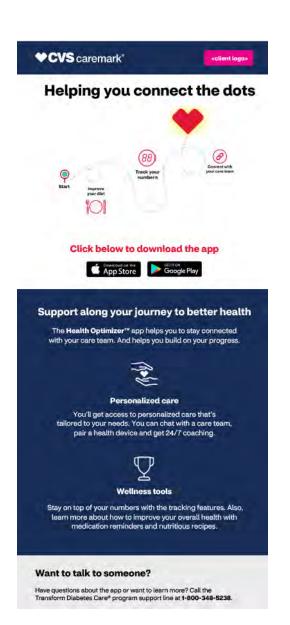
Digital App Onboarding – Mailer #2





Digital App - Email





Appendix

TDC Provider Fax – Sample Communication



Report incorrect fax number:

Notification: Important patient health alert/action

If you received this fax in error, visit Caremark.com/fax then enter your unique PIN \$[persolztn_rec_unique_id]. Select a reason from the drop-down menu and click submit to resolve.

NOTICE TO RECIPIENT(S) OF INFORMATION:

Information disclosed to you pertaining to certain conditions, such as treatment for alcohol or drug abuse, HIV/AIDS and other sexually transmitted diseases, behavioral health and genetic marker information is protected by various federal laws which prohibit any further disclosure of this information by you without the express written consent of the person to whom it pertains on as otherwise permitted by such laws. Any unauthorized further disclosure in violation of state or federal law may result in a fine or jail sentence or both. A general authorization for the release of medior or other information is NOT sufficient consent for release of these types of information. The federal rule at 42 CFR Part 2 restricts use of the information disclosed to criminally investigate or prosecute any alcohol or drug-abuse patient.

CONFIDENTIALITY NOTICE:

This communication and any attachments may contain privileged information for the use of the designated recipients named above. If you are not the intended recipient, you are rehereby notified that you have received this communication in error and that any review, dissemination, distribution, or copying of it or its contents is prohibited. If you have received this communication in error, please notify the sender immediately by telephone and destroy all copies of this communication and any attachments.

The recipient of this fax may make a request to opt out of receiving telemarketing fax transmissions from CVS Caremark. The recipient may call the fold-free number at 877-265-27f1 and/or fax the opt-out request to 401-652-0893, at any time, 24 hours a day/7_days a week. The recipient may also send an opt-out request are amalt to <u>Do Not Callagevacaremark.com</u>. An opt-out request is only validif (i) it identifies the number to which the request relates and (2) the person/entity making the request end; subsequent to the request provide express invitation or permission to CVS Caremark to send facsimile advertisements to such person/entity at that particular number. CVS Caremark is required by law to honor an opt-out request within thirty days of receipt. An opt-out request within thirty days of receipt. An opt-out request will not opt you out of purely informational numadicalisments, such as prior authorization requests and notices.

Plan member privacy is important to us. Our employees are trained regarding the appropriate way to handle members' private health information

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Patient:	DOB:	Physician:	
Dori Smith	12/9/2021	Dr. Don Smith	
Date:	Unique PIN:		
12/9/2021	1592000	1592000	

32021 CVS Caremant, Altrights reserved 7357-55848A 092721



What decides which version of Welcome DM members receive?

Member's geographic proximity to a HealthHUB and CVS Pharmacy, will determine the variable content they receive in their welcome package.

For example, if a member fills their prescription at their local CVS but does not have access to a HealthHUB they will get variable content labeled "Pharmacist".



Health Hub



Pharmacist



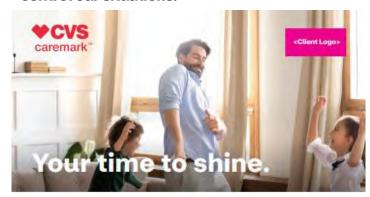
Health Hub No Pharmacist





Behavior Economic Principles – examples and definitions

Autonomy – we have a deep-seated need to control our situations.



These tools can help you be healthier.

Social Proof – we copy the behavior of others, especially in unfamiliar situations.



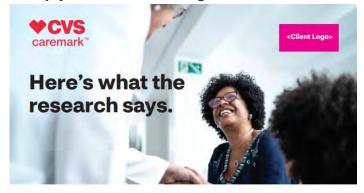
Managing your diabetes isn't always easy, but it helps to learn what works for others.



Loss Aversion – we feel more negative when losing something than positive when we gain it.



Authority – we have a strong tendency to comply with those in charge.



These tools can help you be healthier.

