AUDITED FINANCIAL STATEMENTS

YEAR ENDED JUNE 30, 2014

WITH

INDEPENDENT AUDITORS' REPORT



Office of the State Auditor

1401 MAIN STREET, SUITE 1200 COLUMBIA, S.C. 29201

RICHARD H. GILBERT, JR., CPA DEPUTY STATE AUDITOR (803) 253-4160 FAX (803) 343-0723

December 22, 2014

The Honorable Nikki R. Haley, Governor and Members of the South Carolina Public Employee Benefit Authority Columbia, South Carolina

This report on the audit of the financial statements of the South Carolina Public Employee Benefit Authority Insurance Benefits for the fiscal year ended June 30, 2014, was issued by CliftonLarsonAllen, L.L.P., Certified Public Accountants, under contract with the South Carolina Office of the State Auditor.

If you have any questions regarding this report, please let us know.

Respectfully submitted,

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Richard H. Gilbert, Jr., CPA Deputy State Auditor

RHGjr/cwc

AUDITED FINANCIAL STATEMENTS

YEAR ENDED JUNE 30, 2014

WITH

INDEPENDENT AUDITORS' REPORT

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Internal Control over Financial Reporting and on Compliance and Other Matters
Based on an Audit of Financial Statements Performed in Accordance
With Government Auditing Standards



CliftonLarsonAllen LLP www.claconnect.com

INDEPENDENT AUDITORS' REPORT

Office of the State Auditor South Carolina Public Employee Benefit Authority Insurance Benefits Columbia, South Carolina

Report on the Financial Statements

We have audited the accompanying financial statements of the South Carolina Public Employee Benefit Authority Insurance Benefits (the Fund), as of and for the year ended June 30, 2014, and the related notes to the financial statements, which collectively comprise the Fund's basic financial statements as listed in the table of contents.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express opinions on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinions.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective financial position of the Fund as of June 30, 2014, and the respective changes in financial position and, where



applicable, cash flows thereof for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Emphasis of Matter

As discussed in Note 1, the financial statements present only South Carolina Public Employee Benefit Authority Insurance Benefits and do not purport to, and do not, present fairly the financial position of the State of South Carolina, as of June 30, 2014, and the changes in its financial position for the year then ended in conformity with accounting principles generally accepted in the United States of America.

Other Matters

Required Supplementary Information

Accounting principles generally accepted in the United States of America require that the Management's Discussion and Analysis on pages 3-16 be presented to supplement the basic financial statements. Such information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated December 22, 2014, on our consideration of the Fund's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the result of that testing, and not to provide an opinion on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Fund's internal control over financial reporting and compliance.

Clifton Larson Allen LLP

CliftonLarsonAllen LLP

December 22, 2014 Baltimore, Maryland

MANAGEMENT'S DISCUSSION AND ANALYSIS

The financial statement presentation required under governmental accounting standards provides a comprehensive perspective of the South Carolina Public Employee Benefit Authority (PEBA), Insurance Benefits' assets, liabilities, deferred inflows and outflows of financial resources, net position, revenues, expenses, changes in net position and cash flows. This section of the South Carolina Public Employee Benefit Authority, Insurance Benefits' Audited Financial Statements presents management's discussion and analysis of PEBA, Insurance Benefits' financial performance during the fiscal year ended June 30, 2014. This discussion should be read in conjunction with the financial statements and the notes, which follow this section.

Financial Highlights:

Business Type activities reported an increase in net position of \$46,183,823 and total net position of \$232,235,553 for the year ended June 30, 2014. In comparison, an increase in net position of \$7,189,242 was reported for the year ended June 30, 2013 with total net position of \$186,051,730 for the year ended June 30, 2013.

Overview of Financial Statements:

PEBA, Insurance Benefits is proprietary type internal service fund engaged in governmental activities. Following is a condensed Statement of Net Position, a condensed Statement of Activities and a condensed Statement of Cash Flows.

The Statement of Net Position presents the financial position of PEBA, Insurance Benefits at the end of the fiscal year and requires classification of assets and liabilities into current and noncurrent categories. The difference between total assets, total liabilities, and deferred inflows and outflows of financial resources is reflected in the net position section, which displays net investment in capital assets, restricted net position and unrestricted net position. Net position is generally an indicator of the current financial condition of PEBA, Insurance Benefits, while the change in net position is generally an indicator of the overall financial condition for the year.

In accordance with the provisions of the South Carolina Retiree Health Insurance Trust (Trust), excess Plan reserves above 140% of incurred but not reported claims as of December 31 each year will be transferred to the Trust the following January. This year, \$93,521,443 was transferred to the Trust. The increase in net position before this transfer amounted to \$139,705,266, which is attributed to better than expected claims trend.

The Statement of Revenue, Expenses, and Changes in Net Position present revenue and expenses as operating and are detailed by classification.

Overview of Financial Statements (continued):

The Statement of Cash Flows will aid readers in identifying the sources and uses of cash by the categories of operating, non-capital financing and investing activities.

This schedule is a condensed version of PEBA, Insurance Benefits' assets, liabilities, and net position and is prepared from the Statement of Net Position.

	June 30, 2014			
Assets				
Current assets	\$ 413.3	\$	424.5	
Noncurrent assets:	0.2		0.1	
Total assets	 413.5			
Liabilities				
Current liabilities	180.9		238.2	
Noncurrent liabilities	0.3		0.3	
Total liabilities	 181.2		238.5	
Net position				
Investment in capital assets	0.2		0.1	
Restricted	-		-	
Unrestricted	 232.1		186.0	
Total net position	\$ 232.3	\$	186.1	

Condensed Statements of Net Position (in millions)

Overview of Financial Statements (continued):

The following schedule is a summary of PEBA, Insurance Benefits' operating results for the fiscal year.

Condensed Statements of Revenues, Expenses, and Changes in Net Position Year Ended June 30, (in millions)

	2014	2013	
Operating:	 		
Program revenue	\$ 2,245.4	\$	2,112.8
Expenses	(2,204.5)		(2,112.1)
Total operating income	 40.9		0.7
Non-operating:			
Earnings on investments	5.3		6.5
Total non-operating income	 5.3		6.5
Change in net position	 46.2		7.2
Net position, beginning of the year	186.1		178.9
Net position, end of the year	\$ 232.3	\$	186.1

A condensed version of Statement of Cash Flows is presented as follows:

Condensed Statements of Cash Flows Year Ended June 30, (in millions)

	 2014	 2013
Cash flows from (used in) operating activities	\$ (47.4)	\$ 4.8
Cash flows used in capital and related financing activities	(0.1)	(0.2)
Cash flows from investing activities	5.3	6.6
Net increase (decrease) in cash and cash equivalents	(42.2)	11.2
Cash and cash equivalents, beginning of year	360.5	349.3
Cash and cash equivalents, end of year	\$ 318.3	\$ 360.5

Overview of PEBA, Insurance Benefits:

PEBA, Insurance Benefits manages group health, dental, life, accidental death and dismemberment, and disability programs as authorized in § 1-11-710 and § 1-11-720 of the South Carolina Code of Laws, as well as the flexible benefits program (MoneyPlus) as authorized in § 9-1-60, and the employee adoption assistance program, pursuant to Proviso 105.2 of the 2013-2014 General Appropriations Act.

Following is a list of benefits offered by PEBA, Insurance Benefits differentiated according to self-insured versus insured status.

Self-Insured Programs

- State Health Plan: Standard Plan (PPO) Medicare Supplement Savings Plan (HDHP)
- MUSC Patient Centered Medical Home Plan (Pilot)
- State Dental Plan
- Basic Long Term Disability
- Adoption Assistance Program

Insured Programs

- BlueChoice (HMO began January 1, 2013 and will end 12/31/14)
- Tricare Supplement
- Dental Plus
- State Life
- Optional Life
- Dependent Life
- Supplemental Long Term Disability
- Vision

Benefits are offered to eligible employees and retirees of all state agencies and public school districts, and many local governments. As of June 2014, 683 employers participate in the program. The State Health Plan is PEBA, Insurance Benefits' "flagship" product, a "Preferred Provider Organization" model plan which encompasses medical, prescription drug, and behavioral health coverage. The State Health Plan is the most significant driver of PEBA, Insurance Benefits' financial activity, accounting for approximately 86.1% of all medical revenue.

Overview of the State Health Plan:

The State Health Plan (Plan) consists of the Standard Plan, the Medicare Supplement Plan, and the Savings Plan. The majority of Plan subscribers (74.5%) are enrolled in the Standard Plan, a PPO option available to non-Medicare and Medicare enrollees. Of the remaining subscribers, 21.8% are enrolled in the Medicare Supplement, a retiree option for those enrolled in Medicare and 3.7% are enrolled in the Savings Plan. The Savings Plan is a qualified high deductible health plan (HDHP) available to non-Medicare enrollees.

The State Health Plan remains competitive with other southern state health plans in terms of plan deductibles, coinsurance, and prescription drug coverage. In aggregate, the employer contributes around 74.3% of the total contribution for State Health Plan coverage. The Plan self-contracts provider networks for hospitals and physicians. These networks continue to maintain extremely high participation rates. Following is a look at total enrollment in the State's medical insurance programs and enrollment in the State Health Plan (as of June 2014).

	Program	State Health Plan		
Total Insured Persons:	456,993	433,576		
Subscribers:	260,342	246,910		
Spouses:	74,369	71,223		
Children:	122,282	115,443		
Total Subscribers:	260,342	246,910		
Employees:	179,590	166,793		
Retirees:	77,475	76,874		
Survivors:	2,622	2,614		
COBRA:	655	629		
Active Employees:	179,590	166,793		
State Agencies:	57,939	52,705		
School Districts:	82,596	80,886		
Local Government	39,055	33,202		

State Health Plan Premiums:

The State Health Plan operates under a 4-tier premium structure, varying contribution levels according to level of coverage. The coverage levels include Employee Only, Employee/Spouse, Employee/Child, and Full Family. As of June 30, 2014, 57.3% of subscribers had Employee Only coverage, and the remaining 42.7% covered at least one dependent.

Premiums range from \$5,151.84 annually for Employee Only coverage to \$13,548.72 annually for Full Family coverage. Following are the monthly 2014 State Health Plan employee and employer rates.

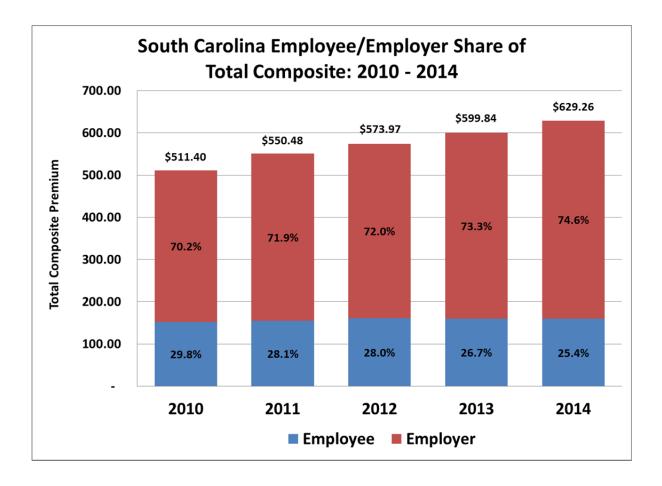
2014 State Health Plan (Standard Plan) Monthly Premiums

ACTUAL RATES

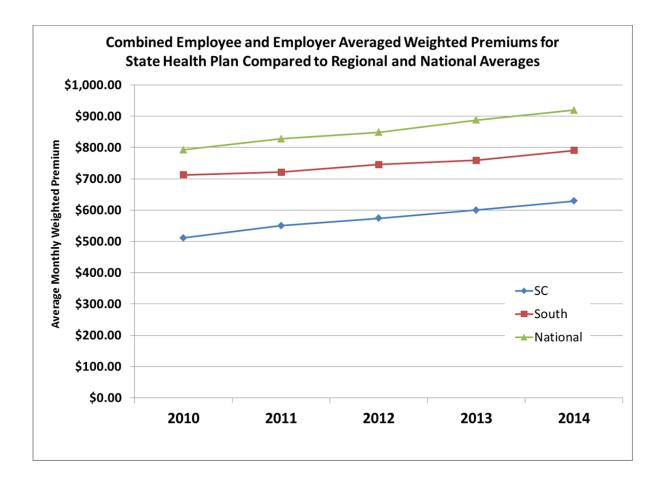
	Employee	Employer	Total
Employee Only	\$97.68	\$331.64	\$429.32
Employee / Spouse	\$253.36	\$656.92	\$910.28
Employee / Child(ren)	\$143.86	\$509.02	\$652.88
Full Family	\$306.56	\$822.50	\$1,129.06
Composite Rate	\$159.70	\$469.56	\$629.26

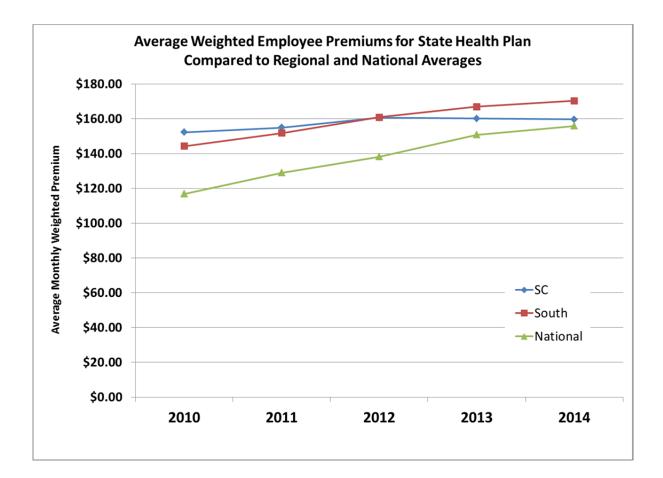
Premium revenue is shared between the employer and the employee (or retiree).

For 2014, the employer share of premiums increased 6.8% and the employee share remained constant. The 2014 employee share reflects approximately 25% of the total premium.



The 2014 composite total premium remains fairly well below both the regional and national levels. For 2014, the State Health Plan composite total premium was approximately 80% of the regional premium and 68% of the national premium.





For 2014, the SHP employee composite dropped slightly below the regional composite, although remains above the national composite.

State Health Plan Contribution Increases:

Contribution increases since 2000 are outlined below.

State Health Plan
Contribution Increases

	Employer Rate Increase	Employee Rate Increase	Total
	Inci cuse		1000
2000	10.0%	0.0%	8.0%
2001	20.0%	10.4%	18.3%
2002	9.5%	22.6%	11.7%
2003	0.0%	36.9%	6.9%
2004	0.0%	27.6%	6.6%
2005	6.1%	29.7%	13.0%
2006	4.8%	0.0%	3.2%
2007	3.1%	0.0%	2.1%
2008	9.7%	0.0%	6.7%
2009	0.0%	0.0%	0.0%
2010	0.0%	0.0%	0.0%
2011	10.3%	0.0%	7.2%
2012	4.5%	4.5%	4.5%
2013	6.37%	0.0%	4.6%
2014	6.8%	0.0%	4.9%

Status of the Plan:

The State Health Plan is currently in a stable financial position and has been able to transfer excess cash reserves during this reporting period, as well as for the previous four reporting periods, to the South Carolina Retiree Health Insurance Trust Fund.

Following are the plan year changes in growth rate in payments per subscriber since 2001.

2001	+11.0%
2002	+8.3%
2003	+12.9%
2004	-0.7%
2005	+4.7%
2006	+7.0%
2007	+6.3%
2008	+3.9%
2009	+8.8%
2010	+0.5%
2011	+3.5%
2012	+6.3%
2013	+3.2%

Following are the plan year medical utilization rates (and growth rates) per 1000 insured persons (SHP primary) from 2000 through 2013 for office visits, ER visits, inpatient cases, and outpatient surgery.

	Office Visits		ER Visits		I/P Cases		O/P Sur	gery	
	Utilization	Growth	Utilization	Growth	Util	ization	Growth	Utilization	Growth
2000	\$5,492.54		\$ 253.76		\$	67.76		\$ 105.54	
2001	5,856.76	+6.6%	254.99	+0.5%		69.27	+2.2%	101.11	-4.2%
2002	5,936.99	+1.4%	251.34	-1.4%		68.99	-0.4%	102.66	+1.5%
2003	6,230.36	+4.9%	253.66	+0.9%		69.03	+0.1%	114.39	+11.4%
2004	6,119.04	-1.8%	235.97	-7.0%		68.88	-0.2%	115.19	+0.7%
2005	6,287.92	+2.8%	240.27	+1.8%		63.93	-7.2%	106.87	-7.2%
2006	6,391.54	+1.6%	239.22	-0.4%		62.82	-1.7%	99.57	-6.8%
2007*	6,519.21		184.15			63.23		205.58	
2008	6,495.30	-0.4%	181.69	-1.3%		61.29	-3.1%	208.18	+1.3%
2009	6,798.85	+4.7%	189.44	+4.3%		60.40	-1.5%	209.76	+0.8%
2010	6,365.96	-6.4%	181.97	-3.9%		58.44	-3.2%	219.12	+4.5%
2011	6,319.44	-0.7%	183.43	+0.8%		55.94	-4.3%	232.18	+6.0%
2012	6,816.70	+7.9%	190.90	+4.1%		59.17	+5.8%	236.20	+1.7%
2013	6,834.42	+0.3%	191.62	+0.4%		59.46	+0.5%	237.50	+0.6%

* Improved data collection methods beginning in 2007 more accurately capture place of service.

Plan year prescription drug utilization has also moderated, as well as shifted to more cost effective delivery channels, as indicated below.

	Rx/Insured Utilization Growth		ured		
			Growth	Generic Share	Mail Service Share
2000	\$	13.12		34.9%	n/a
2001		14.75	+12.5%	34.8%	n/a
2002		15.75	+6.9%	37.1%	3.8%
2003		17.10	+8.5%	39.1%	4.7%
2004		16.81	-1.7%	43.3%	9.6%
2005		17.46	+3.9%	47.1%	9.5%
2006		17.99	+3.0%	50.5%	9.8%
2007		18.41	+2.3%	55.2%	9.9%
2008		18.22	-1.0%	61.3%	9.9%
2009		18.31	+0.5%	62.9%	9.2%
2010		18.06	-1.4%	67.4%	8.9%
2011		17.95	-0.6%	70.2%	8.5%
2012		18.21	+1.4%	74.2%	8.1%
2013		18.33	+0.7%	77.0%	7.7%

Cost containment initiatives continue to influence the Plan's positive trend and include:

- Provider reimbursement pricing policy with provider networks (inpatient and outpatient hospital settings, professional fee schedules and pharmacy pricing)
- Utilization review and management (precertification of inpatient cases and certain outpatient procedures, disease management of specified conditions, complex care management and chronic kidney disease management)
- Chiropractic limit of \$2,000/person/year and limit of one manual therapy unit per visit (implemented 2010)
- Pre-authorization process for high-end radiology procedures (implemented 2010)
- Tobacco surcharge of \$40/contract/month for members with single coverage who use tobacco and \$60/contract/month for members with dependent coverage who use tobacco or cover a family member that does
- "Evidence-based medicine" initiative involving analysis of claims data and communications with doctors regarding best practices
- Mail service pharmacy through Pharmacy Benefits Manager
- Prior authorization/step therapy requirements for specified medications, including "preferred step therapy" program to steer business to "front-line" generics
- Preferred drug list
- "Pay-the-difference" policy for brand drugs with generic equivalents
- Managed care approach for behavioral health services
- "Gold standard" smoking cessation program
- Health education, disease management workshops, and preventive screenings provided through office wellness staff
- Voluntary Data Sharing Agreement with Medicare (maintain current Medicare eligibility on all subscribers yielding significant cost savings)
- Significant patient cost sharing for all service types
- Pharmaceutical manufacturer rebates (for all health plans); the Plan received about \$90.99 M. in rebates during 2014
- Implementation of a Medicare Part D Prescription Drug Program; the Plan received about \$45.27 M. in subsidies during 2014
- A Wellness Incentive, which provides free generic drugs for participants with cardiovascular disease or diabetes who participate in a wellness program for these conditions (implemented 2010)

Going Forward:

Several points of interest going forward include:

- PEBA Insurance Benefits will retain its "grandfathered" status under the Patient Protection and Affordable Care Act (ACA) for 2015.
- This October will be the Plan's first enrollment of ACA eligible employees (full-time, non-permanent and variable-hour) for an effective date of January 1, 2015.
- This year's legislative session provided for a 3.9% increase in the employer contribution rates beginning January 2015. Also, deductibles and copayments will increase (up to 9%) beginning January 2015 to meet projected Plan obligations through 2015.
- To date, 5,241 dependents out of 107,951 (5%) have been removed from health coverage, and an audit is on-going to review dependent coverage eligibility.
- BlueChoice did not renew its contract with PEBA due to declining enrollment and increasing costs, and therefore, will not be an option in 2015.
- A Tricare supplement will again be offered to non-Medicare subscribers on an employee pay all basis.
- The MUSC patient centered heath plan will continue in 2015 as a pilot to employees and dependents of MUSC and the Medical University Hospital Authority (to reduce health care costs while improving the health of an entire population).

Always a significant challenge is the anticipation of re-acceleration of health care trend. Although we continue to experience stable growth, the dynamics that drive health care expenditure growth remain present, including an aging population, advances in medical technology, third-party payment, and government regulations.

Contact Information:

Please direct questions related to the Management Discussion and Analysis and the accompanying financial statements to Phyllis Buie, Chief Financial Officer, at (803) 734-0326.

STATEMENT OF NET POSITION

YEAR ENDED JUNE 30, 2014

Assets

Current assets:	
Cash and cash equivalents	\$ 318,287,454
Premiums receivable	2,177,518
Prescription drug rebate receivable	73,009,445
Medicare Part D Subsidy receivable	16,580,065
Claims receivable	2,913,121
Accrued interest	25,727
Due from South Carolina Retiree Health Insurance Trust Fund	252,246
Due from South Carolina Long Term Disability Trust Fund	34,400
Total current assets	413,279,976
Non-current assets:	
Capital assets, net of accumulated depreciation	172,892
Total assets	413,452,868
Liabilities	
Current liabilities:	
Accounts payable and accrued payroll	541,371
Accrued compensated absences - current portion	479,877
Unearned premium revenue	20,936,659
Claims payable	10,980,398
Claims incurred but not reported	148,008,086
Total current liabilities	180,946,391
Long-term liabilities:	
Accrued compensated absences - long term	270,924
Total long-term liabilities	270,924
Total liabilities	181,217,315
Net Position	
Net investment in capital assets	172,892
Unrestricted	232,062,661
	\$ 232,235,553
Total net position	\$ 232,233,333

STATEMENT OF REVENUE, EXPENSES, AND CHANGES IN NET POSITION

YEAR ENDED JUNE 30, 2014

Operating Revenue Insurance premiums: Active employees \$ 1,520,533,389 Retirees 581,414,135 Total insurance premiums 2,101,947,524 Prescription drug rebates 90,988,929 Medicare Part D Subsidy 45,275,214 Administrative fees and other 7,181,158 2,245,392,825 Total operating revenue **Operating Expenses:** Claims 1,836,473,203 Premiums 200,072,252 Other post employement benefits 93,521,443 Third party administrative fees 64,089,994 Salaries and benefits 6,784,819 Other services 1,722,121 **Professional services** 492,175 293,200 Adoption assistance program Supplies 284,674 Telephone and utilities 79,902 Other operating expenses 668,702 Total operating expenses 2,204,482,485 Operating income 40,910,340 Non-operating revenue: Income from deposits 5,273,483 Change in net position 46,183,823 Net position, beginning of year 186,051,730 232,235,553 \$ Net position, end of year

STATEMENT OF CASH FLOWS

YEAR ENDED JUNE 30, 2014

Cash Flows from Operating Activities

Insurance premiums from customers	\$ 2,100,162,533
Other receipts	115,267,670
Payments to employees	(5,960,296)
Payments for other post employment benefits	(93,521,443)
Payments to providers, suppliers and others	(2,163,333,294)
Net cash used in operating activities	(47,384,830)
Cash Flows from Capital and Related Financing Activities	
Purchase of capital assets	(113,143)
Net cash used in capital and related financing activities	(113,143)
Cash Flows from Investing Activities	
Interest received-deposits and investments	5,263,272
Net cash from investing activities	5,263,272
Net decrease in cash and cash equivalents	(42,234,701)
Cash and cash equivalents, beginning of year	360,522,155
Cash and cash equivalents, end of year	\$ 318,287,454

STATEMENT OF CASH FLOWS

YEAR ENDED JUNE 30, 2014

Reconciliation of operating income to net cash from operating activities	
Operating income	\$ 40,910,340
Adjustments to reconcile operating income to net cash from	
operating activities:	
Depreciation expense	86,151
Effect of changes in operating assets:	
Premiums receivable	115,778
Prescription drug rebate receivable	(18,968,095)
Medicare Part D Subsidy receivable	(9,209,536)
Claims receivable	(2,913,121)
Due from South Carolina Retiree Health Trust	(78,200)
Due from South Carolina Long Term Disability Trust	(3,200)
Effect of changes in operating liabilities:	
Accounts payable, accrued payroll and compensated absences	84,263
Unearned premium revenue	(1,900,769)
Claims payable and incurred but not reported	(55,508,441)
Net cash used in operating activities	\$ (47,384,830)

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

1. Basis of Presentation and Summary of Significant Accounting Policies

The financial statements of all funds of the South Carolina Public Employee Benefit Authority, Insurance Benefits (the Fund) were prepared in conformity with accounting principles generally accepted in the United States of America (GAAP) as applied to governmental entities. The Governmental Accounting Standards Board (GASB) is the accepted standardsetting body for establishing governmental accounting and financial reporting principles. The more significant of the Fund's accounting policies are described below.

Reporting Entity

The core of the financial reporting entity is the primary government, which has a separately elected governing body. As required by accounting principles generally accepted in the United States of America, the financial reporting entity includes both the primary government and all of its component units. Component units are legally separate organizations for which the elected officials of the primary government are financially accountable. In turn component units may have component units.

An organization other than a primary government may serve as a nucleus for a reporting entity when it issues separate financial statements. That organization is identified herein as a primary entity.

The primary government or entity is financially accountable if it appoints a voting majority of the organization's governing body including situations in which the voting majority consists of the primary entity's officials serving as required by law (e.g., employees who serve in an ex officio capacity on the component unit's board are considered appointments by the primary entity) and (1) it is able to impose its will on that organization or (2) there is a potential for the organization to provide specific financial benefits to, or impose specific financial burdens on, the primary entity. The primary entity also may be financially accountable if an organization is fiscally dependent on it even if it does not appoint a voting majority of the board. An organization is fiscally dependent on the primary entity that holds one or more of the following powers:

- (1) Determine its budget without another government's having the authority to approve and modify that budget.
- (2) Levy taxes or set rates or charges without approval by another government.
- (3) Issue bond debt without approval by another government.

Based on these criteria, the Fund has determined that it has no component units. This financial reporting entity includes only the Fund, a primary entity.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

1. Basis of Presentation and Summary of Significant Accounting Policies (Continued)

Reporting Entity (Continued)

The Fund is a fund of the South Carolina Public Employee Benefit Authority ("PEBA"), which is a part of the State of South Carolina primary government. This report contains only the Fund and no other Offices or funds of the South Carolina Public Employee Benefit Authority or any other part of the State of South Carolina primary government are included.

PEBA was created July 1, 2012, by the South Carolina General Assembly as part of Act No. 278. PEBA is a state agency responsible for the administration and management of the state's employee insurance benefit programs and retirement benefit systems.

This act amends Chapter 4, Title 9, relating to retirement law, so as to establish the PEBA, provide for its membership and their compensation, devolve from the State Budget and Control Board to PEBA the administration of the Employee Insurance Program (EIP), administration of the Retirement Division, co-trusteeship of the State Retirement System, and the duties of the South Carolina Deferred Compensation Commission (SCDCC), to provide those actions of PEBA requiring approval by the State Budget and Control Board or its successor, to require PEBA to maintain a public transaction register, and to require an annual fiduciary audit of PEBA.

To amend Chapter 2, Title 9, relating to various elements of the EIP, State Retirement System, and the South Carolina Deferred Compensation Commission, to conform these provisions to PEBA governance.

Consequently, effective July 1, 2012, the operations of the EIP were transferred from the State Budget and Control Board to the newly formed PEBA.

The Fund operates as a unit under the PEBA Board and its Executive Director. The laws of the State and the policies and procedures specified by the State for State agencies are applicable to the Fund's activities. The accompanying financial statements present the financial position and results of operations solely of the Fund and do not include any other agencies or any component units of the State of South Carolina.

The group health, dental, life, accidental death and dismemberment and disability programs managed by the Fund are authorized in Sections 1-11-710 and 1-11-720 of the South Carolina Code of Laws of 1976, as amended.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

1. Basis of Presentation and Summary of Significant Accounting Policies (Continued)

The Fund provides health insurance to eligible employees and retirees of State agencies and its political subdivisions who elect coverage. Coverage elections include three self-insured health plans. The State Health Plan offers a High Deductible Health Plan (SHP Savings Plan), a Preferred Provider Organization (SHP Standard Plan) and Medicare Supplement. The Traditional HMO offered is the BlueChoice HMO and is a fully insured product. Dental coverage is through the State's self-insured plan, which is available to eligible employees and retirees. An additional dental option is offered to subscribers, Dental Plus, which is a fully insured product. Dental coverage is required to elect Dental Plus. The Basic Long-Term Disability Plan is a self-insured group long-term disability plan available to eligible active employees enrolled in a State health plan. Supplemental long-term disability, a fully insured product, is also offered to subscribers. Optional Life and Dependent and/or Spouse Life are fully insured products offered to eligible employees.

For active State and School Districts employees, the employee share of premiums is paid through payroll deductions. The respective employer pays the employer's premium portion for active employees. For retirees of the State and School Districts, most of the employee portion of the premiums is withheld from the individual retirement check and the remaining is individually billed. The employer premium share for retirees of the State and School Districts is paid through retiree insurance surcharge. For Local Subdivisions, the employer is responsible for collecting the retiree premium and remitting the entire premium to the Fund. Effective May 2008, Basic Long Term Disability premiums were transferred to the South Carolina Long Term Disability Insurance Trust Fund in accordance with Act 195. Basic Long Term Disability Claims are transferred each month out of this Trust.

The South Carolina Retirement System began transferring directly into the South Carolina Retiree Health Insurance Trust Fund (SCRHITF) the surcharge for state agencies and school districts effective with the May 2008 surcharge in accordance with Act 195. Effective May 2008, the Fund began transferring the employer portion of retiree premiums from the SCRHITF for claims payment.

Details on eligibility requirements and coverage for all plans are contained in the *Insurance Benefits Guide*. Premium rates for all plans are reviewed on a calendar year basis and adjusted as considered necessary after actuarial calculation.

The State as the predominant participant retains the risk of loss for the self-insured health, dental and basic long-term disability coverages.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

1. Basis of Presentation and Summary of Significant Accounting Policies (Continued)

Basis of Presentation

The financial statements present all proprietary funds of the Fund. The financial statement presentation for the Fund meets the requirements of governmental accounting standards.

As an internal service fund, the Fund in its stand-alone financial statements is considered a proprietary fund. However, the applicable guidance requires internal service funds included in the basic financial statements of the primary government to be reported as part of the governmental activity. Therefore, presentation in the Comprehensive Annual Financial Report of the State of South Carolina will include this fund as a governmental activity. The financial statement presentation provides a comprehensive, entity-wide perspective of the Fund's net position, revenue, expenses and changes in net position and cash flows.

Financial Statements

The Fund is an internal service fund within PEBA as the State's managers have determined that the State is the predominant participant in the Fund.

Basis of Accounting

The Fund's financial statements have been presented using the economic resources measurement focus, which is based upon a determination of net income, financial position, and cash flows. Under this method, all assets and all liabilities associated with the operation of the Fund are included on the statement of net position. Net position is segregated into net investment in capital assets, restricted net position and unrestricted net position components.

The Fund uses the accrual basis of accounting. Revenues are recognized in the accounting period in which they are earned and become measurable; expenses are recognized in the period incurred, if measurable. The Fund reports claims liabilities when it is probable that a loss has occurred and the amount of the loss can be reasonably estimated.

These financial statements have been prepared in accordance with the standards issued by the Governmental Accounting Standards Board (GASB). Additionally, the Fund has adopted the provisions of GASB 65, *Items Previously Reported as Assets and Liabilities* for the year ended June 30, 2014. This Statement did not have an effect on the Fund's financial statements.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

1. Basis of Presentation and Summary of Significant Accounting Policies (Continued)

Cash and Cash Equivalents

For purposes of the statement of cash flows, the Fund considers all highly liquid securities with a maturity of three months or less at the time of purchase to be cash equivalents. Most State agencies including the Fund participate in the State's internal cash management pool; however, some agency accounts are not included in the pool because of restrictions on the use of funds. Because the State's internal cash management pool operates as a demand deposit account, amounts invested in the pool are classified as cash and cash equivalents. The State Treasurer administers the cash management pool.

The State's internal cash management pool consists of a general deposit account and several special deposit accounts. The State records each fund's equity interest in the general deposit account; however, all earnings on that account are credited to the General Fund of the State. Deposits in the general deposit account are recorded and reported at cost. However, the Fund reports its deposits in the special deposit accounts at fair value. Interest earned by the agency's special deposit accounts is posted to the agency's account at the end of each month and is retained by the agency. Interest earnings are allocated based on the percentage of an agency's accumulated daily interest receivable to the total income receivable of the pool.

The amounts shown in the financial statements as "cash and cash equivalents" represent cash on deposit with the State Treasurer as a part of the State's internal cash management pool, and cash invested in various short-term instruments by the State Treasurer and held in separate agency accounts.

Premium Revenue

Premiums billed to employers, employees and retirees (premiums receivable) for insurance coverage are recorded as revenue when earned on a monthly basis.

Unearned Premium Revenue

Premiums billed in advance of coverage, payments received in advance of coverage, or in excess of amounts billed and premiums collected but unearned are recorded as unearned premium revenue.

Capital Assets

Capital assets are capitalized at cost if purchased. Capital assets contributed by other State agencies or funds are recorded at the State's original acquisition cost less accumulated depreciation from the purchase date. Assets donated by other parties are valued at fair market value at the date of gift. The Fund has one class of capital assets, equipment, which is depreciated on a straight-line basis over the estimated useful lives of 3-10 years. The capitalization dollar threshold limit for capital assets is \$5,000.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

1. Basis of Presentation and Summary of Significant Accounting Policies (Continued)

Claims Incurred But Not Reported (IBNR)

Losses are recorded at estimated amounts at the time they are reported and include a provision for expenses associated with claim settlements. Insurance claims are expensed as incurred over the period of coverage. The Fund establishes an unpaid claim liability for claims in the process of review, and for IBNR claims. The liability for IBNR claims is actuarially estimated based on the most current historical claims experience of previous payments, changes in number of members and participants, inflation, award trends, and estimates of health care trend (cost, utilization and intensity of services) changes. Estimates of liabilities for incurred claims are continually reviewed and revised as changes in these factors occur and revisions are reflected in the current year's operating statement in the applicable claims expense. Amounts for allocated and unallocated claims adjustment expenses have been included in the calculation of IBNR.

Claims Payable

Claims payable represents claims related to health and dental claims payable at June 30, 2014. The claims payable balance is based on claims that have been paid by the third party administrators on behalf of the Fund.

Compensated Absences

Generally all permanent full-time State employees and certain part-time employees scheduled to work at least twenty hours per workweek are entitled to accrue and carry forward at calendar year-end maximums of 180 days sick leave and of 45 days annual vacation leave. Upon termination of State employment, employees are entitled to be paid for accumulated unused annual vacation leave up to the maximum, but are not entitled to any payment for unused sick leave. The compensated absences liability includes accrued annual leave earned for which the employees are entitled to paid time off or payment at termination. The leave liability also includes an estimate for unused sick leave and leave from the Fund's leave transfer pool for employees who have been approved as leave recipients under personal emergency circumstances. The Fund calculates the gross compensated absences liability based on recorded balances of unused leave. The entire unpaid liability for which the employer expects to compensate employees through paid time off or cash payments, inventoried at fiscal yearend current salary costs and the cost of the salary-related benefit payments, is recorded in the Fund.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

1. Basis of Presentation and Summary of Significant Accounting Policies (Continued)

Deferred Outflows/Inflows of Resources:

In addition to assets, the statement of net position will sometimes report a separate section for deferred outflows of resources. This separate financial statement element, *deferred outflows of resources*, represents a consumption of net position that applies to a future period(s) and so will not be recognized as an outflow of resources (expense/expenditure) until then. The Fund does not currently have any items that qualify for reporting in this category.

In addition to liabilities, the statement of net position will sometimes report a separate section for deferred inflows of resources. This separate financial statement element, *deferred inflows of resources*, represents an acquisition of net position that applies to a future period(s) and so will not be recognized as an inflow of resources (revenue) until that time. The Fund does not currently have any items that qualify for reporting in this category.

Net Position

The Fund's net position is recorded in three categories:

<u>Net investment in capital assets</u> consists of capital assets net of accumulated depreciation and reduced by outstanding balances for bonds, notes, and other debt that are attributed to the acquisition, construction or improvement of those assets.

<u>Restricted net position</u> results when constraints placed on the use of net position are either imposed by creditors, grantors, contributors, and the like or imposed by law through constitutional provisions or enabling legislation.

<u>Unrestricted net position</u> consists of net position that does not meet the definition of restricted net position or investment in capital assets.

The Fund's resources that make up the unrestricted net position of the Fund are required by State statute to be used for the purposes of providing insurance benefits for employees and retirees. The Fund applies expenses that can use both restricted and unrestricted resources against restricted resources then unrestricted resources.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

1. Basis of Presentation and Summary of Significant Accounting Policies (Continued)

Classification of Revenue

The Fund has established the following criteria for reporting operating revenue or non-operating revenue:

Operating revenue generally results from exchange transactions to provide the services authorized by State Statute. These revenues include (1) premiums for insurance coverage, (2) administrative fees, and (3) other receipts arising from services provided.

Non-operating revenue includes activities that have the characteristics of non-exchange transactions. These revenues include appropriations, investment income, and contract revenue not classified as operating revenue or restricted by the provider to be used exclusively for capital purposes.

2. Deposits

As prescribed by Statute, the State Treasurer is the custodian and investment manager of all deposits of the Fund.

Deposits

All deposits with financial institutions are required to be insured or collateralized with securities held by the State or its agent in the State Treasurer's name as custodian. At June 30, 2014, the Fund had no deposits with financial institutions.

The Fund participates in the State Treasurer's Investment pool. Amounts deposited with the State Treasurer as part of an internal investment pool are invested in U.S. government obligations, federal agency securities, obligations of domestic corporations, certificates of deposit and collateralized repurchase agreements. The pool operates like a demand deposit account and includes primarily short term investments. The investments are carried at cost plus accrued interest, dividends and realized gains and losses, which approximates fair market value. The Fund had cash and cash equivalents of \$318,287,454 held in the State Treasurer's investment pool at June 30, 2014.

During the year, the following amounts were included in income from deposits:

Interest earned	\$	5,273,483
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NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

3. Premiums Receivable

Premiums receivable at June 30, 2014, consist of the following:

Local government	\$ 819,498
State government (Note 9)	1,110,368
Individuals	121,923
School districts	125,729
	\$ 2,177,518

As of June 30, 2014, all of the receivables are considered by management to be collectible. Therefore, no allowance for doubtful accounts has been recognized. In addition, the Fund has applied no discounts to its receivables as of June 30, 2014.

4. Capital Assets

The following summarizes changes in capital assets for the year

	Balance July 1, 2013	Additions	Deletions	Balance June 30, 2014
Furniture and equipment Accumulated depreciation	\$485,270 (339,370)	\$ 113,143 (86,151)	\$ (9,364) 9,364	\$ 589,049 (416,157)
Capital assets, net	\$145,900	\$ 26,992	\$ -	\$ 172,892

Depreciation expense for the year ended June 30, 2014 was \$86,151.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

5. Lease Obligations

The Fund leases office space from the State and is accounted for as an operating lease. Effective July 1, 2013, a new lease was signed with PEBA that expires on June 30, 2018. Rental expense under this lease for the year ended June 30, 2014 was \$140,826. The future minimum lease payments due under this lease are:

Year Ending June 30,	Total
2015	194,986
2016	198,957
2017	202,928
2018	206,899
	\$ 803,770

The Fund has also entered into an operating lease with a party outside of State government for office equipment which contains a cancellation provision and is subject to annual appropriation. In the normal course of business, operating leases are generally renewed or replaced by other leases. Operating leases are generally payable on a monthly basis. For the year ended June 30, 2014, expenses under this lease was approximately \$52,075.

6. Pension Plans

The majority of employees of the Fund are covered by a retirement plan through the South Carolina Retirement System (SCRS), a cost-sharing multiple-employer defined benefit pension plan administered by the Retirement Benefits Division of the PEBA. Generally, all full-time or part-time equivalent State employees in a permanent position are required to participate in and contribute to the SCRS as a condition of employment unless exempted by law as provided in Section 9-1-480 of the South Carolina Code of Laws, as amended, or are eligible and elect to participate in the State Optional Retirement Program (ORP). The SCRS plan provides a life-time monthly retirement annuity benefits to eligible members as well as disability, survivor options, annual benefit adjustments, death benefits, and incidental death benefits to eligible employees and retired members.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

6. Pension Plans (Continued)

The Retirement Division maintains five independent defined benefit plans and issues its own publicly available Comprehensive Annual Financial Report (CAFR) which includes financial statements and required supplementary information. A copy of the separately issued CAFR may be obtained by writing to the South Carolina Public Employee Benefit Authority, P.O. Box 11960, Columbia, South Carolina 29211-1960. Furthermore, the Division and the five pension plans are included in the State of South Carolina's CAFR.

Under the SCRS, Class II members are eligible for a full service retirement annuity upon reaching age 65 or completion of 28 years of credited service regardless of age. Employees who first became members of the System after June 30, 2012 are considered Class III members and are eligible for a full service retirement annuity upon reaching age 65 or upon meeting the rule of 90 requirement (i.e., the members age plus the years of service add up to a total of at least 90). The benefit formula for full benefits effective since July 1, 1989 for the SCRS is 1.82 percent of an employee's average final compensation (AFC) multiplied by the number of years of credited service. For Class II members, AFC is the average annual earnable compensation during 12 consecutive quarters and includes an amount for up to 45 days termination pay at retirement for unused annual leave. For Class III members, AFC is the average annual earnable compensation during 20 consecutive quarters and termination pay for unused annual leave at retirement is not included. Early retirement options with reduced benefits are available as early as age 55 for Class II members and age 60 for Class III members. Class II members are vested for a deferred annuity after five years of earned service. Class III members are vested for a deferred annuity after eight years of earned service. Members qualify for a survivor's benefit upon completion of 15 years of credited service (five years effective January 1, 2002).

Disability annuity benefits are available to Class II members if they have permanent incapacity to perform regular duties of the member's job and they have at least 5 years of earned service (this requirement does not apply if the disability is a result of a job related injury). Class III members can apply for disability annuity benefits provided they have a permanent incapacity to perform the regular duties of the member's job and they have a minimum of eight years of credited service. For disability applications received after December 31, 2013, a member of SCRS will have to be approved for disability benefits from the Social Security Administration in order to be eligible for SCRS disability retirement benefits.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

6. Pension Plans (Continued)

An incidental death benefit equal to an employee's annual rate of compensation is payable upon the death of an active employee with a minimum of one year of credited service or to a working retired contributing member. There is no service requirement for death resulting from actual performance of duties for an active member. For eligible retired members, a lump-sum payment is made to the retiree's beneficiary of up to \$6,000 based on years of service at retirement. TERI participants and retired contributing members are eligible for the increased death benefit equal to their annual salary in lieu of the standard retired member benefit.

Effective January 1, 2001, Section 9-1-2210 of the South Carolina Code of Laws allows employees eligible for service retirement to participate in the Teacher and Employee Retention Incentive (TERI) Program. TERI participants may retire and begin accumulating retirement benefits on a deferred basis without terminating employment for up to five years. Upon termination of employment or at the end of the TERI period, whichever is earlier, participants will begin receiving monthly service retirement benefits which will include any benefit adjustments granted during the TERI period. Because participants are considered retired during the TERI period, they do not earn service credit and are ineligible for disability retirement benefits. The TERI program will end effective June 30, 2018 and a member's participation may not continue after this date.

Effective July 1, 2013, employees participating in the SCRS were required to contribute 7.50% of all earnable compensation. The employer contribution rate for SCRS was 15.52%. Included in the total SCRS employer contribution rate is a base retirement contribution of 10.45%, 0.15% for the incidental death benefit program and a 4.92% surcharge that will fund retiree health and dental insurance coverage.

The Fund's actual contributions to the SCRS for the years ended June 30, 2014, 2013, and 2012 were \$716,495, \$624,065, and \$534,798, respectively, and equaled the required retirement contribution rate, excluding retiree insurance surcharge and incidental death benefit program contributions, of 10.45% for 2014, 10.45% for 2013 and 9.385% for 2012. Also, the Fund paid employer incidental death benefit program contributions of \$6,995, \$6,053 and, \$5,852, at the rate of 0.15% of compensation for the current fiscal years ended June 30, 2014, 2013, and 2012, respectively.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

6. Pension Plans (Continued)

As an alternative to membership in the SCRS, newly hired State and school district employees may elect to participate in the State Optional Retirement Program (ORP), a defined contribution retirement plan. The ORP was established in 1987 under Title 9, Chapter 20, of the South Carolina Code of Laws. State ORP participants direct the investment of their funds into a plan administered by one of four investment providers. The State assumes no liability for the State ORP plan other than for the employer's payment of contributions to designated companies. To elect participation in the ORP, eligible employees must elect membership within their first 30 days of employment. Under State law, contributions to the ORP are required at the same rates as for the SCRS, 10.60% plus the retiree surcharge of 4.92% from the employee in fiscal year 2014. Of the 10.60% employer contribution rate, the employer remits 5.00% directly to the participant's ORP account and the remaining 5.45% retirement contribution and 0.15% incidental death benefit program contribution amounts are remitted to SCRS from the employee in fiscal year 2014.

Article X, Section 16, of the South Carolina Constitution requires that all State-operated retirement systems be funded on a sound actuarial basis. Title 9 of the South Carolina Code of Laws of 1976, as amended, prescribes requirements relating to membership, benefit, and employee/employer contributions for each retirement system. Employee and employer contribution rates to SCRS are actuarially determined.

The surcharge to fund retiree health and dental insurance benefits is collected by the SCRS. Upon receipt of the monies, SCRS remits it monthly to the South Carolina Retiree Health Insurance Trust Fund, which is administered by the Fund and the State Treasurer is the custodian of the funds held in the trust. The Fund is responsible for administration of retiree health and dental insurance benefits. With data provided by the South Carolina Public Employee Benefit Authority, the State Budget and Control Board sets the applicable retiree insurance surcharge rate.

For the current fiscal year, the SCRS did not make separate measurements of assets and pension obligations for individual employers within the cost-sharing plan. Under Title 9 of the South Caroline Code of Laws, the Fund's liability under the plans is limited to the amount of required employer contributions (stated as a percentage of covered payroll) as established by the PEBA and as appropriated in the South Carolina Appropriation Act and from other applicable revenue sources. Accordingly, the Fund recognizes no contingent liability for unfunded costs associated with participation in the plans.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

7. Post-Employment and Other Employee Benefits

In accordance with the South Carolina Code of Laws and the annual Appropriations Act, the State provides post-employment health and dental and long-term disability benefits to retired State and school district employees and their covered dependents. The Fund contributes to the South Carolina Retiree Health Insurance Trust Fund (SCRHITF) and the South Carolina Long-Term Disability Insurance Trust Fund (SCLTDITF), cost sharing multiple employer defined benefit postemployment healthcare, and long-term disability plans administered by the Fund, a part of the PEBA.

Generally, retirees are eligible for the health and dental benefits if they have established at least ten years of retirement service credit. For new hires beginning employment May 2, 2008 and after, retirees are eligible for benefits if they have established 25 years of service for 100% employer funding and 15 through 24 years of service for 50% employer funding.

Benefits become effective when the former employee retires under a State retirement system. Basic Long-Term Disability (BLTD) benefits are provided to active state, public school district, and participating local government employees approved for disability.

Funding Policies

Section 1-11-710 of the South Carolina Code of Laws of 1976, as amended, requires these postemployment and long-term disability benefits be funded through annual appropriations by the General Assembly for active employees to the Fund and participating retirees to PEBA, except for the portion funded through the pension surcharge and provided from the other applicable sources of the Fund, for its active employees who are not funded by State General Fund appropriations participating employers are mandated by State statute to contribute at a rate assessed each year by the Office of the State Budget, 4.92% of annual covered payroll for 2014 and 4.55% of annual covered payroll for 2013. The State Budget and Control Board sets annually the employer contribution rate based on a pay-as-you-go basis. The Fund paid approximately \$232,292 and \$198,539 applicable to the surcharge included with the employer contribution for retirement benefits for the fiscal years ended June 30, 2014 and 2013, respectively. BLTD benefits are funded through a person's premium charged to State agencies, public school districts, and other participating local governments. The monthly premium per active employee paid to the Fund was \$3.22 for the fiscal years ended June 30, 2014 and 2013.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

7. Post-Employment and Other Employee Benefits (Continued)

Effective May 1, 2008 the State established two trust funds through Act 195 for the purpose of funding and accounting for the employer costs of retiree health and dental insurance benefits and long-term disability insurance benefits. The SCRHITF is primarily funded through the payroll surcharge. Other sources of funding include additional State appropriated dollars, mandatory transfers of accumulated Fund reserves, and income generated from investments. For the year ended June 30, 2014, the Fund transferred \$93,521,443 to the SCRHITF. The SCLTDITF is primarily funded through investment income and employer contributions.

A copy of the separately issued financial statements for the benefit plans and the trust funds may be obtained by writing to the South Carolina Public Employee Benefit Authority – Insurance Benefits Division, P.O. Box 11960, Columbia, South Carolina 29211-1960.

Other Employee Benefits

In accordance with the South Carolina Code of Laws and the annual Appropriation Act, the State of South Carolina provides certain health care, dental and life insurance benefits to all permanent full-time and certain permanent part-time employees of the Fund. These benefits are provided on a reimbursement basis by the employer agency based on rates established at the beginning of the service period by the Fund within the PEBA.

The Fund recorded benefit expenses for these insurance benefits for active employees in the amount of \$467,626, \$417,637 and \$421,969 for the years ended June 30, 2014, 2013 and 2012, respectively.

8. Deferred Compensation Plans

Several optional deferred compensation plans are available to State employees and employers of its political subdivisions. Certain employees of the Fund have elected to participate.

The multiple-employer plans, created under Internal Revenue Code Sections 457, 401(k), and 403(b), are administered by third parties and are not included in the Comprehensive Annual Financial Report of the State of South Carolina. Compensation deferred under the plans is placed in trust for the contributing employee. The State has no liability for losses under the plans. Employees may withdraw the current value of their contributions when they terminate State employment. Employees may also withdraw contributions prior to termination if they meet requirements specified by the applicable plan.

This Fund did not contribute for the fiscal year ending June 30, 2014.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

9. Transactions with State Entities

The Fund has significant transactions with the State of South Carolina and various State agencies. Services received at no cost include payroll processing, disbursement processing and maintenance of certain accounting records from the Comptroller General; check preparation, banking and investment functions from the State Treasurer; and legal services from the Attorney General.

Insurance services are provided for a fee to various State agencies and within the South Carolina Public Employee Benefit Authority. The fees are recorded as revenues in the financial statements for the Fund. The insurance coverage provided consists of health, dental vision, life & long-term disability.

The following details the insurance premiums charged by the Fund to other State agencies and divisions of the PEBA during the year ended June 30, 2014:

Adjutant General's Office	\$ 1,754,552
Administrative Law Court	281,313
Aeronautics Commission	81,057
Aid to Subdivisions	514,756
Aiken Technical College	1,042,361
Arts Commission	123,332
Attorney General's Office	1,294,090
Budget and Control Board	5,611,362
Budget and Control Board - State Auditor	283,739
Central Carolina Technical College	1,782,189
Clemson University	35,104,612
Coastal Carolina University	9,398,194
College of Charleston	11,349,877
Commission for Indigent Defense	484,708
Commission for the Blind	668,730
Commission on Higher Education	284,230
Commission on Prosecution Coordination	347,481
Comptroller General's Office	230,969
Conservation Bank	7,043
Criminal Justice Academy	877,431
Denmark Technical College	745,410
Department Archives and History	285,510
Department of Agriculture	974,614
Department of Alcohol and Other Drug Abuse Services	329,204
Department of Commerce	547,649
Department of Consumer Affairs	242,152
Department of Corrections	37,712,704
Department of Disabilities and Special Needs	11,848,082
Department of Education	7,738,425
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NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

9. Transactions with State Entities (Continued)

Department of Employment and Workforce	5,183,908
Department of Health and Environmental Control	23,716,969
Department of Insurance	617,335
Department of Juvenile Justice	9,171,484
Department of Labor, Licensing and Regulations	2,646,288
Department of Mental Health	27,551,013
Department of Motor Vehicles	8,335,482
Department of Natural Resources	6,082,854
Department of Parks, Recreation and Tourism	2,990,401
Department of Probation, Parole and Pardon Services	4,590,576
Department of Public Safety	10,536,884
Department of Revenue	4,913,608
Department of Social Services	23,462,515
Department of Transportation	33,696,497
Department of Vocational Rehabilitation	8,184,954
Education Oversight Committee	47,894
Educational Television Commission	989,764
Florence-Darlington Technical College	1,906,554
Forestry Commission	2,738,930
Francis Marion University	4,007,232
Governor's Office	1,858,849
Greenville Technical College	5,915,016
Health and Human Services	7,959,938
Higher Education Tuition Grants Commission	32,729
Horry-Georgetown Technical College	2,689,642
House of Representatives	1,657,967
Human Affairs Commission	150,605
Jobs Economic Development Authority	13,011
John de la Howe School	459,960
Judicial Department	4,583,003
Lander University	2,998,291
Legislative Audit Council	153,385
Legislative Council	240,825
Legislative Printing, Information and Technology Systems	206,446
Lieutenant Governor's Office	264,361
Medical University of South Carolina	34,896,316
Midlands Technical College	4,533,842
Northeastern Technical College	745,373
Office of Regulatory Staff	530,627

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

9. Transactions with State Entities (Continued)

Office of State Infrastructure Bank	32,839
Office of the Inspector General	36,879
Orangeburg-Calhoun Technical College	1,463,598
Patients' Compensation Fund	45,655
Patriot's Point Development Authority	549,362
Piedmont Technical College	2,234,991
Procurement Review Panel	5,555
Public Employee Benefit Authority	1,890,014
Public Service Commission	337,705
Retirement System Investment Commission	323,976
Rural Infrastructure Authority	25,955
School for the Deaf and Blind	2,531,065
Sea Grant Consortium	89,121
Secretary of State's Office	221,876
South Carolina State University	4,810,888
Spartanburg Community College	2,510,509
State Accident Fund	533,367
State Board of Financial Institutions	318,190
State Commission for Minority Affairs	73,614
State Election Commission	110,653
State Ethics Commission	47,875
State Housing Finance and Development Authority	1,010,582
State Law Enforcement Division	3,760,967
State Library	262,708
State Museum Commission	213,952
State Senate	1,264,803
State Treasurer's Office	517,482
Technical and Comprehensive Education	534,911
Technical College of Lowcountry	1,092,651
The Citadel	4,959,794
Tri County Technical College	2,649,469
Trident Technical College	5,679,402
University of South Carolina	55,203,674
Wil Lou Gray Opportunity School	426,487
Williamsburg Technical College	480,322
Winthrop University	6,978,497
Workers' Compensation Commission	397,447
York Technical College	2,210,824
-	\$ 489,044,763

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

9. Transactions with State Entities (Continued)

The South Carolina Retiree Health Insurance Trust Fund was established by the State of South Carolina through Act 195 on May 1, 2008. In accordance with Act 195, the Trust was created to provide for the employer costs of retiree post-employment health and dental insurance benefits for retired state employees and retired employees of public school districts. The Fund administers the Trust and the PEBA is the Trustee. The State Treasurer is the custodian of the funds held in the Trust and invests those funds in accordance with the statutes of the State. The primary sources which finance the health and dental benefits the Trust provides are the collection of Employer Contributions, additional State appropriations, accumulated Fund reserve balances, and income generated from investments. In accordance with the Act, an annual transfer is based on an actuarial calculation of the amount of cash reserves available over 140% of the incurred but not reported claims. The amount of this transfer was \$93,521,443 in 2014.

The South Carolina Long Term Disability Trust Fund was established by the State of South Carolina through Act 195 on May 1, 2008. In accordance with Act 195, the Trust was created to fund and account for the employer costs of the State's Basic Long-Term Disability Income Benefit Plan. The Fund administers the Trust and the PEBA is the Trustee. The State Treasurer is the custodian of the funds held in the Trust and invests those funds in accordance with the statutes of the State. The primary sources which finance the long-term disability benefits the Trust provides are investment income and the collection of employer contributions.

The Fund had financial transactions with various State agencies during the fiscal year. Significant payments were made to Divisions (Funds) of the State Budget and Control Board for retirement and insurance plans contributions, vehicle rental, printing, and telephone, interagency mail, data processing services, purchasing, record maintenance, internal audit, personnel services, unemployment, and workers' compensation coverage for employees. The identifiable amounts of 2014 expenses applicable to related party transactions are as follows:

South Carolina Retirement Division	\$ 716,495
South Carolina State Accident Fund	19,177
South Carolina Department of Employment and Workforce	2,169
	\$ 737,841

In addition, other post-employment benefits include payments to the following:

South Carolina Retiree Health Insurance	
Trust Fund	\$ 93,521,443

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

9. Transactions with State Entities (Continued)

A significant portion of the Fund's total insurance premium revenue is for insurance premiums charged to other state agencies and divisions of the PEBA. Premiums owed from these entities at June 30, 2014 were:

Aid to Subdivisions27Aiken Tech College3,307Attorney General's Office2,685Budget and Control Board206Commission of the Blind139Commission on Higher Education1,742Commission on Indigent Defense7,345Commission on Prosecution Coordination3Criminal Justice Academy72Department of Agriculture292
Attorney General's Office2,685Budget and Control Board206Commission of the Blind139Commission on Higher Education1,742Commission on Indigent Defense7,345Commission on Prosecution Coordination3Criminal Justice Academy72
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Commission on Higher Education1,742Commission on Indigent Defense7,345Commission on Prosecution Coordination3Criminal Justice Academy72
Commission on Indigent Defense7,345Commission on Prosecution Coordination3Criminal Justice Academy72
Commission on Prosecution Coordination3Criminal Justice Academy72
Criminal Justice Academy 72
Department of Agriculture 292
Department of Alcohol and Other Drug Abuse Services 1,516
Department of Archives and History 103
Department of Consumer Affairs 4,519
Department of Corrections 9,653
Department of Disabilities and Special Needs 235,405
Department of Education 4,106
Department of Employment and Workforce 10,608
Department of Health and Environmental Control 4,689
Department of Insurance 7,712
Department of Juvenile Justice 2,755
Department of Labor, Licensing and Regulations 940
Department of Mental Health 34,129
Department of Motor Vehicles 42,972
Department of Natural Resources 9,884
Department of Parks, Recreation and Tourism 146,742
Department of Probation, Parole and Pardon Services 21
Department of Public Safety 434
Department of Revenue 191,311
Department of Social Services 26,712
Department of Transportation 46,177
Department of Vocational Rehabilitation 43
Educational Television Commission 10.560
Forestry Commission 951
Governor's Office 31,616
Health and Human Services 3,864
Human Affairs Commission 289
Jobs Economic Development Authority 26

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

9. Transactions with State Entities (Continued)

John de la Howe School	1
Judicial Department	69
Legislative Audit Council	14
Legislative Council	838
Lieutenant Governor's Office	325
Office of Inspector General	295
Office of Regulatory Staff	33
Office of State Infrastructure Bank	3,414
Patients' Compensation Fund	62
Patriot's Point Development Authority	28,855
Procurement Review Panel	60
Public Employee Benefit Authority	660
Public Service Commission	11
Rural Infrastructure Authority	310
SC Aeronautics Commission	50
SC State University	154,593
School for the Deaf and Blind	5
Sea Grant Consortium	30,452
Secretary of State's Office	4,410
State Accident Fund	2,155
State Housing Finance and Development Authority	6
State Law Enforcement Division	68
State Library	104
State Museum Commission	1
State Treasurer's Office	2,583
Technical and Comprehensive Education	472
Wil Lou Gray Opportunity School	20,686
Worker's Compensation Commission	948
	\$ 1,110,368

The fund acted as a fiduciary for premiums collected from state agencies for State Life and Long-Term Disability. During the year ended June 30, 2014, \$6,850,376 was collected from state agencies and disbursed to the State Life and Long-Term Disability carrier.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

10. Contingencies

By the nature of its operations and responsibilities as an insurer, the Fund has been named in a number of lawsuits, many of which are pending. A provision has been made in the financial statements for the payment of routine insurance claims. Management is not aware of any other claims that, in their opinion, would have a material effect on the financial statements and, therefore, no liability has been recorded.

11. Risk Management/Reinsurance

The Fund is exposed to various risks of loss and maintains State or commercial insurance coverage for each of those risks except for certain types of risks for which it is self-insured (these risks are further described herein). Management believes such coverage is sufficient to preclude any significant uninsured losses for the covered risks. There were no significant reductions in insurance coverage from coverage in the prior year. Settled claims have not exceeded this coverage in any of the past three years.

The Fund pays insurance premiums to itself and certain other State agencies and commercial insurers to cover risks that may occur in normal operations. The insurers promise to pay to or on behalf of the insured for covered economic losses sustained during the policy period in accord with insurance policy and benefit program limits.

State management believes it is more economical to manage certain risks internally and set aside assets for claim settlement. Several State funds accumulate assets and the State itself assumes substantially all risks for the following:

- 1. Claims of State employees for unemployment compensation benefits (Department of Employment and Workforce);
- 2. Claims of covered employees for workers' compensation benefits for job-related illnesses or injuries (State Accident Fund);
- 3. Claims of covered public employees for health and dental insurance benefits (PEBA, Insurance Benefits); and
- 4. Claims of covered public employees for long-term disability and group life insurance (PEBA, Insurance Benefits).
- 5. Claims of covered property damage, theft, collision (automobile), liability, and general tort (Insurance Reserve Fund).

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

11. Risk Management/Reinsurance (Continued)

Employees elect health coverage through the State Health Plan or a health maintenance organization. All health plans offered through the Fund are self-insured products.

State agencies and other entities are the primary participants in the Fund.

The Fund obtains coverage of up to \$750,000 per loss through a commercial carrier for employee fidelity bond insurance for all employees for losses arising from theft or misappropriation.

The Fund has recorded insurance premium expense regarding its internal operations in the applicable administrative expense categories.

The Fund has not transferred the portion of the risk of loss related to insurance policy deductibles and limits. The Fund has not reported an estimated claims loss expense and the related liability at June 30, 2014 because information at June 30 did not indicate that an asset had been impaired or a liability had been incurred. A liability for claims must be reported only if information prior to issuance of the financial statements indicates that it is probable that an asset has been impaired or a liability has been incurred on or before June 30 and the amount of loss is reasonably estimable.

The Fund self-insures health and dental insurance for all participating governmental employees, including those of the Fund. The Fund also offers an HMO product through BlueChoice, which is fully insured. The basic long-term disability product is a self-insured product. The Fund also offers Dental Plus and State Life products, which are fully insured. The Fund purchases coverage for basic life, optional life, dependent life, supplemental long-term disability, and long-term care from commercial carriers.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

12. Reconciliation of Claims Liabilities by Fund

The schedule below presents the changes in claims liabilities for the past two years for the Fund.

	(in thous and s)				
		2014	2013		
Unpaid claims and claim adjustment expenses at beginning of the fiscal year	\$	214,496	\$	176,801	
Incurred claims and claim adjustment expenses:					
Provision for insured events of the current fiscal year		1,711,034		1,679,254	
Increases in provision for insured events		1,711,001		1,079,201	
of prior fiscal years		125,439		138,333	
Total incurred claims and claim adjustment expenses		1,836,473		1,817,587	
Payments:					
Claims and claim adjustment expenses attributable to					
insured events of the current fiscal year		1,766,542		1,641,559	
Claims and claim adjustment expenses attributable to					
insured events of prior fiscal years		125,439		138,333	
Total payments		1,891,981		1,779,892	
Total unpaid claims and claim adjustment expenses at end					
of the fiscal year	\$	158,988	\$	214,496	
The above totals are comprised of the following:					
Claims payable	\$	10,980	\$	70,963	
Claims incurred but not reported		148,008		143,533	
Total	\$	158,988	\$	214,496	

The HMO self-insured managed care plan liability at June 30, 2014 and 2013 was \$44,664 and \$29,707, respectively, and is included in the claims liability listed above.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

13. Changes in Long-Term Liabilities

Changes in long-term obligations for the year ended June 30, 2014, were as follows:

	Ba	inning dance 1, 2013	In	Increases		Decreases		Ending Salance e 30, 2014	Due Within One Year	
Compensated absences payable	\$	547,826	\$	566,518	\$	(363,543)	\$	750,801	\$ 479,877	

14. Medicare Part D Subsidy

The new Medicare Part D prescription drug benefit became effective in January 2006. The Plan elected to maintain primary coverage for pharmaceuticals for its Medicare eligible retirees. By providing drug coverage at least as valuable as that in the standard Medicare Part D program, the Plan qualifies for the Retiree Drug Subsidy (RDS), an incentive provided in the federal Part D law to encourage employers to retain good prescription benefits for retirees. The Plan earned and recorded \$45,275,214 in RDS funding for the year ended June 30, 2014. As of June 30, 2014, the Plan had a receivable of \$16,580,065.

15. Direct Premium Revenues and Insurance Related Expenses

Total insurance premium revenues and direct expenses by line of insurance are as follows:

		P	remium Revenues	5	Expenses					
				Total			1	Third Party		
		Active		Premium	Claims	Premium		Premium		lministrative
	Employees		Retirees	Revenue	Expenses Expenses			Expenses		
Medical-PPO	\$	1,304,025,947	\$ 538,183,668	\$ 1,842,209,615	\$ 1,126,509,597	\$ -	\$	50,492,403		
Medical-HMO		64,393,760	11,444,811	75,838,571	44,887	71,857,610		-		
Dental		81,632,987	28,653,668	110,286,655	53,207,450	54,621,706		2,242,069		
Prescription										
drug (1)		-	-	-	656,591,269	-		11,355,522		
Life and optional										
dependent life		47,612,366	-	47,612,366	120,000	47,596,101		-		
Vision		15,009,945	3,131,988	18,141,933	-	18,141,816		-		
Long-term										
disability		7,858,384		7,858,384		7,855,019		-		
	\$	1,520,533,389	\$ 581,414,135	\$ 2,101,947,524	\$ 1,836,473,203	\$ 200,072,252	\$	64,089,994		

(1) Prescription drug claims relate to the individual lines but are presented here in aggregate.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2014

16. Subsequent events

Subsequent events were evaluated through December 22, 2014, which is the date the financial statements were available for issue. Events occurring after that date have not been evaluated to determine whether a change in the financial statements would be required.



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

Mr. Richard H. Gilbert Jr., CPA Deputy State Auditor Office of the State Auditor South Carolina Public Employee Benefit Authority Insurance Benefits Columbia, South Carolina

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of South Carolina Public Employee Benefit Authority Insurance Benefits (the Fund), as of and for the year ended June 30, 2014, and the related notes to the financial statements, which collectively comprise South Carolina Public Employee Benefit Authority Insurance Benefits (the Fund), and have issued our report thereon dated December 22, 2014.

Internal Control Over Financial Reporting

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

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

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



Compliance and Other Matters

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

Purpose of this Report

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

Clifton Larson Allen LLP

CliftonLarsonAllen LLP

Baltimore, Maryland December 22, 2014