

**PENNSYLVANIA HEALTH INSURANCE
EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)**

FINANCIAL STATEMENTS

YEAR ENDED DECEMBER 31, 2024

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)

YEAR ENDED DECEMBER 31, 2024

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INDEPENDENT AUDITOR'S REPORT

Board of Directors
Pennsylvania Health Insurance Exchange Authority
Harrisburg, Pennsylvania

Report on the Audit of the Financial Statements

Opinion

We have audited the financial statements of the PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY (the "Authority"), a component unit of the Commonwealth of Pennsylvania, as of and for the year ended December 31, 2024, and the related notes to the financial statements, which collectively comprise the Authority's basic financial statements as listed in the table of contents.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Authority, as of December 31, 2024, and the respective changes in financial position and cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards* (GAS), issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Authority and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for 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.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Authority's ability to continue as a going concern for twelve months beyond the financial statement date, including any currently known information that may raise substantial doubt shortly thereafter.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS and GAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

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In performing an audit in accordance with GAAS and GAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit 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 Authority's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Authority's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Adoption of New Governmental Accounting Standards Board Pronouncements

As described in Note 1 to the financial statements, in 2024 the Authority adopted the required provisions of GASB Statement No. 99 "*Omnibus 2022*", GASB Statement No. 100 "*Accounting Changes and Error Corrections – an amendment of GASB Statement No. 62*", and GASB Statement 101 "*Compensated Absences*." Our opinion is not modified with respect to these matters.

Other Matters

Required Supplementary Information

Accounting principles generally accepted in the United States of America require that the schedule of Authority's proportionate share of the net pension liability, schedule of the Authority's contributions – pension plan, schedule of Authority's proportionate share of the net OPEB liability, and schedule of Authority's contributions – OPEB plan on pages 24-27 be presented to supplement the basic financial statements. Such information is the responsibility of management and, 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.



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Omission of Management's Discussion and Analysis

Management has omitted the management's discussion and analysis that accounting principles generally accepted in the United States of America require to be presented to supplement the basic financial statements. Such missing 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. Our opinion on the basic financial statements is not affected by this missing information.

Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements that collectively comprise the Authority's basic financial statements. The accompanying Schedule of Expenditures of Federal Awards, as required by the audit requirements of Title 2 *U.S. Code of Federal Regulations*, Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, is presented for the purpose of additional analysis and is not a required part of the basic financial statements.

The information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audit of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the Schedule of Expenditures of Federal Awards is fairly stated, in all material respects in relation to the basic financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated May 16, 2025 on our consideration of the Authority'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 solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of 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 Authority's internal control over financial reporting and compliance.

Zelenkofske Axelrod LLC

ZELENKOFSCHE AXELROD LLC

Harrisburg, Pennsylvania
May 16, 2025

Basic Financial Statements

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
STATEMENT OF NET POSITION
DECEMBER 31, 2024

ASSETS

Investments	\$ 118,410,018
Accounts Receivable	3,552,927
Due From Other Governments	<u>5,406,352</u>
Total Assets	<u>127,369,297</u>

DEFERRED OUTFLOWS OF RESOURCES

Deferred Outflows of Resources from Pensions	2,619,032
Deferred Outflows of Resources from Other Postemployment Benefits	<u>3,809,667</u>
Total Deferred Outflows of Resources	<u>6,428,699</u>

LIABILITIES

Current Liabilities:

Accounts Payable	10,995,413
Accrued Liabilities	258,648
Compensated Absences	106,357

Noncurrent Liabilities:

Compensated Absences	287,560
Net Other Postemployment Benefits Liability	3,922,000
Net Pension Liability	<u>8,736,256</u>

Total Liabilities	<u>24,306,234</u>
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DEFERRED INFLOWS OF RESOURCES

Deferred Inflows of Resources from Pensions	187,979
Deferred Inflows of Resources from Other Postemployment Benefits	<u>2,061,000</u>
Total Deferred Inflows of Resources	<u>2,248,979</u>

NET POSITION

Restricted	<u>107,242,783</u>
Total Net Position	<u>\$ 107,242,783</u>

The accompanying notes are an integral part of the financial statements.

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
STATEMENT OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION
YEAR ENDED DECEMBER 31, 2024

Operating Revenues:	
Charges for Services	\$ 96,297,858
Total Operating Revenues	<u>96,297,858</u>
Operating Expenses	
Personnel	6,534,683
Operations	<u>50,664,727</u>
Total Operating Expenses	<u>57,199,410</u>
Operating Income	<u>39,098,448</u>
Nonoperating Revenues / Expenses	
Intergovernmental Revenue	19,536,916
Interest Income	5,143,146
Transfers to Primary Government	<u>(29,571,917)</u>
Total Nonoperating Revenue / Expenses	<u>(4,891,855)</u>
Change in Net Position	34,206,593
Net Position, Beginning of the Year	<u>73,036,190</u>
Net Position, End of Year	<u><u>\$ 107,242,783</u></u>

The accompanying notes are an integral part of the financial statements.

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
STATEMENT OF CASH FLOWS
YEAR ENDED DECEMBER 31, 2024

Cash Flows from Operating Activities:	
Cash receipts from charges for services	\$ 96,942,425
Cash paid for personnel services	(5,375,826)
Cash paid for operating expenses	<u>(49,734,702)</u>
Net cash provided by operating activities	<u>41,831,897</u>
Cash Flows from Noncapital Financing Activities:	
Payments for intergovernmental subsidies	(29,571,917)
Receipts from intergovernmental revenues	<u>19,346,389</u>
Net cash used in noncapital financing activities	<u>(10,225,528)</u>
Cash Flows from Investing Activities:	
Purchase of investment pools	(36,749,515)
Interest on investments	<u>5,143,146</u>
Net cash used in investing activities	<u>(31,606,369)</u>
Change in cash	-
Cash, Beginning of Year	<u>-</u>
Cash, End of Year	<u><u>\$ -</u></u>
Reconciliation of Operating Income to Cash Flows Provided by Operating Activities:	
Operating Income	\$ 39,098,448
Adjustments to reconcile operating income to net cash provided by operating activities:	
Effects of changes in assets, deferred outflows, liabilities, and deferred inflows:	
Accounts receivable	644,567
Accounts payable	930,025
Accrued liabilities	297
Compensated absences	41,394
Other postemployment benefits	907,933
Pension	<u>209,233</u>
Net cash provided by operating activities	<u><u>\$ 41,831,897</u></u>

The accompanying notes are an integral part of the financial statements.

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2024

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A. Organization

The Pennsylvania Health Insurance Exchange Authority (the "Authority") was established by Act 42 of 2019 (effective July 2, 2019), as an independent agency of the Commonwealth of Pennsylvania (the "Commonwealth"). The purpose of the Authority is to create, manage, and maintain in the Commonwealth the Pennsylvania Health Insurance Exchange to benefit the Pennsylvania health insurance market and persons enrolling in health insurance policies and to facilitate or assist in facilitation the purchase of on-exchange qualified plans by qualified enrollees in the individual market or the individual and small group markets.

The Authority's operations are administered by a board consisting of eleven members including the following: the Commissioner, or a designee; the Secretary of Human Services, or a designee; the Secretary of Health, or a designee; four members appointed by the Governor; and four members appointed respectively by the President pro tempore of the Senate, the Minority Leader of the Senate, the Speaker of the House of Representatives, and the Minority Leader of the House of Representatives.

The Authority is a component unit of the Commonwealth reporting entity due to the Commonwealth's ability to impose its will of the Authority. The Authority is presented as an enterprise fund on the accrual basis of accounting.

B. Measurement Focus and Basis of Accounting

The Authority follows Generally Accepted Accounting Principles (GAAP). GAAP allows specialized accounting for government entities, which is governed by pronouncements set by the Government Accounting Standards Board (GASB).

The Authority is considered a special-purpose government since it is engaged solely in business-type activities under GASB Statement No. 34. The Authority's financial statements are prepared using the accrual basis of accounting. Under the accrual basis of accounting revenues are recorded when earned and expenses are recorded when they have been incurred.

All activities of the Authority are accounted for within a single proprietary (enterprise) fund. A proprietary fund is used to account for operations that are (a) financed and operated in a manner similar to private business enterprises where the intent of the governing body is that the costs (expenses, including depreciation) of providing goods or services to the general public on a continuing basis be financed or recovered primarily through user charges; or (b) where the governing body has decided that periodic determination or revenues earned, expenses incurred, and/or net income is appropriate for capital maintenance, public policy, management control, accountability, or other purpose.

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2024

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

B. Measurement Focus and Basis of Accounting (Continued)

The Authority follows the Government Accounting Standards Board (GASB) Statement No. 34, *Basic Financial Statements and Management's Discussion and Analysis*. Within the Statements of Revenues, Expenses and Changes in Net Position, Statement No. 34 requires operating income and expenses to be separated from non-operating income in order to show net operating income. Operating income and expenses are defined as those activities directly related to the Authority's primary business of providing employment through economic development lending. Non-operating revenues and expenses consist of those revenues and expenses that are related to financing and investing types of activities and result from non-exchange transactions, such as investment income/loss.

When an expense is incurred for purposes for which both restricted and unrestricted net positions are available, the Authority's policy is to apply restricted net position first, then unrestricted net position as they are needed.

C. Net Position

Restricted Net Position – This category presents external restrictions imposed by creditors, grantors, contributions or laws and regulations of other governments and restrictions imposed by law through constitutional provisions or enabling legislation. Of this amount, the board has allocated \$75 million towards operations and the remaining balance for program purposes.

D. Investments

The Authority values its investments at fair value. The fair value of the Authority's investments are based upon values provided by external investment managers and quoted market prices.

E. Use of Estimates

The preparation of financial statements requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

F. Statement of Cash Flows

The Authority considers all highly liquid investments with a maturity of three months or less at the time of purchase to be cash equivalents. Cash equivalents are stated at cost, which approximates fair value.

G. Receivables and Due From Other Governments

Receivables are stated at the amount management expects to collect from outstanding balances. Due From Other Governments are recognized when the expenditures related to federal grants are incurred and the Authority has a legal claim to the resources.

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2024

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

H. SERS Pension and OPEB

For purposes of measuring net pension and OPEB liabilities, deferred outflows of resources and deferred inflows of resources related to pension and OPEB, and pension/OPEB expense, information about fiduciary net position of the Pennsylvania State Employee's Retirement System (SERS) and additions to/deductions from SERS's fiduciary net position have been determined on the same basis as they are reported by SERS. For this purpose, benefit payments (including refunds of employee contributions) are recognized when due and payable in accordance with benefit terms. Investments are reported at fair value.

I. Deferred Outflows / Inflows of Resources

The Statement of Net Position report separate sections for deferred outflows and deferred inflows of resources. These separate financial statement elements represent consumption or acquisition of net position that applies to a future period(s) and so will not be recognized as an outflow or inflow of resources (expense/revenue) until then. The Authority has two items that qualify for reporting in these categories: deferred inflows and outflows related to OPEB and deferred inflows and outflows related to pension.

Deferred outflows and inflows of resources related to pension are described further in Note 5 and deferred outflows and inflows related to other postemployment benefits are described further in Note 6. The components of deferred outflows or resources and deferred inflows of resources, other than the difference between projected and actual earnings on investments, are amortized into pension expense over a closed period, which reflects the weighted average remaining service life of all SERS members beginning the year in which the deferred amount occurs (current year). The annual difference between the projected and actual earnings on SERS investments is amortized over a five-year closed period beginning the year in which the difference occurs (current year).

J. Adoption of Governmental Accounting Standards Board Statements

The Authority adopted the required provisions of GASB Statement 99, "*Omnibus 2022*." The adoption of this statement had no effect on previously reported amounts.

The Authority adopted the provisions of GASB Statement 100, "*Accounting Changes and Error Corrections – an amendment of GASB Statement No. 62*." The adoption of this statement had no effect on previously reported amounts.

The Authority adopted the provisions of GASB Statement 101, "*Compensated Absences*." The adoption of this statement resulted in a modification of disclosures (see Note 4).

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
 (Component Unit of the Commonwealth of Pennsylvania)
 NOTES TO FINANCIAL STATEMENTS (CONTINUED)
 YEAR ENDED DECEMBER 31, 2024

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

K. Pending Changes in Accounting Principles

In December 2023, the GASB issued Statement No. 102, "*Certain Risk Disclosures*." The Authority is required to adopt this statement for its calendar year 2025 financial statements.

In April 2024, the GASB issued Statement No. 103, "*Financial Reporting Model Improvements*." The Authority is required to adopt this statement for its calendar year 2026 financial statements.

In September 2024, the GASB issued Statement No. 104, "*Disclosure of Certain Capital Assets*." The Authority is required to adopt this statement for its calendar year 2026 financial statements.

The Authority has not yet completed the various analysis required to estimate the financial statement impact of these new pronouncements.

NOTE 2: DEPOSIT AND INVESTMENT RISK

The Commonwealth's fiscal code, as amended, authorizes the Authority to invest in obligations of the U.S. government and government-sponsored agencies and instrumentalities; certificates of deposits, fully insured or collateralized; certain commercial paper and repurchase agreements; highly rated bank promissory notes or investments funds or trusts; and "prudent man" investments as determined by the Authority's depository (i.e. Commonwealth Treasury Department).

The deposit and investment policies of the Treasury Department are governed by Sections: 301, 301.1 and 505 of the Pennsylvania Fiscal Code (Act of 1929 P.L. 343), and Section 321.1 of the Pennsylvania Administrative Code (Act of 1929 P.L. 177. No. 175).

Treasury deposits must be held in insured depositories approved by the Board of Finance and Revenue and must be fully collateralized. The Fiscal Code grants the Treasury Department the authority to invest in any deposits and investments subject. This authority is subject, however, to the exercise of that degree of judgment and care under the circumstances then prevailing which persons of prudence, discretion and intelligence who are familiar with such matters exercise in the management of their own affairs not in regard to speculation but in regard to the permanent disposition of the funds considering the probable income to be derived therefrom as well as the probable safety of their capital.

Treasury Department deposits and investments may include equity securities and mutual funds.

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2024

NOTE 2: DEPOSIT AND INVESTMENT RISK (CONTINUED)

As of December 31, 2024, the Treasury Department manages the Commonwealth Investment Program (CIP). Treasury is required to exercise careful judgment in determining those investments that are appropriate for each Commonwealth fund based upon distinct investment criteria such as income needs, cash flow requirements, investment time horizons, and risk tolerance. All investments are made in accordance with the statutory authority described in the preceding paragraph. The CIP investment pool structure invests in both equity securities and fixed income securities to achieve the investment objectives of the funds of the Commonwealth Investment Program. Asset allocation targets among cash, equity securities, fixed income securities and alternative are established in order to meet these overall objectives.

Treasury has created two separate Pools within the Commonwealth Investment Program, each with its own distinct investment strategies, goals, and holdings that reflect the differing needs of Commonwealth funds for income, cash flows, and investment risk tolerance. A highly liquid vehicle, Pool 999 (Liquid Asset Pool), consists of short-term fixed income and cash and provides a high degree of liquidity and security but only modest returns. A less liquid vehicle, Pool 998 (Common Investment Pool), allows for investment in assets that offer potentially higher returns with commensurate risk.

As of December 31, 2024, the balance of the Authority's investments held in the Commonwealth Investment Pool was \$118,410,018.

Interest Rate Risk

The Authority's investment policy does not limit investment maturities as a means of managing its exposure to fair value losses arising from changing interest rates. The Authority has elected to use the segmented time distribution method of disclosure for its interest rate risk.

Credit Risk

The investment policies of the Authority are governed by statutes and contractual provisions contained in the bond trust indentures. Investments in U.S. government securities are not considered to have credit risk and, therefore, their credit quality is not disclosed.

Custodial Credit Risk

The custodial credit risk for an investment is the risk that, in the event of the failure of the counterparty to a transaction, the Authority will not be able to recover the value of investment or collateral securities that are in possession of an outside party.

As of December 31, 2024, none of the Authority's investments were exposed to custodial credit risk.

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2024

NOTE 2: DEPOSIT AND INVESTMENT RISK (CONTINUED)

Fair Value

The Authority categorizes its fair value measurements within the fair value hierarchy established by generally accepted accounting principles. The hierarchy is based on the valuation inputs used to measure the fair value of the assets. Level 1 inputs are quoted prices in active markets for identical assets; Level 2 inputs are significant other observable inputs; Level 3 inputs are significant unobservable inputs.

The Authority's investments in the Commonwealth Investment Pool are measured at the Net Asset Value (NAV). The Authority has no unfunded commitments related to its Commonwealth Investment Pool investments. Additionally, these investments do not have a limit on the redemption frequency or require a redemption notice period.

NOTE 3: RELATED PARTY

The Authority entered into an agreement with the Commonwealth, through the Commonwealth Office of Administration to provide administrative and operational support services to the Authority. For the year ended December 31, 2024, the services provided by the Commonwealth to the Authority are recorded as operating expenses of \$255,171.

Act 42 of 2019 authorized the establishment of the Pennsylvania Reinsurance Program as a special fund within the State Treasury to be administered by the Pennsylvania Insurance Department (PID). The reinsurance program will stabilize the rates and premiums for health insurance policies in the individual market. The Act provides that PID shall coordinate with the Authority to fund and operate the reinsurance program. Under a Memorandum of Understanding in July 2024, the Authority transferred \$28,991,917 to the Reinsurance Fund for amounts expended by PID for the operation of the reinsurance program through June 30, 2024. Furthermore, by July 10th of each subsequent year the Authority shall transfer an amount equal to the costs budgeted by PID as administrative costs and any additional amount necessary to fund the reinsurance payments to insurers pursuant to the Act. Additional transfers under Section 9506 of Act 42 of 2019 amounted to \$580,000. As of December 31, 2024, there is no outstanding balance on the agreement.

NOTE 4: COMPENSATED ABSENCES

Most employees earn annual leave, depending on length of credited service, from between 4.25% to 11.55% of regular hours paid. Generally, a maximum of 45 days may be carried forward at the end of each calendar year. Employees are paid for accumulated annual leave upon termination or retirement.

Most employees earn sick leave based on 5.00% of regular hours paid. Generally, a maximum of 300 days may be carried forward at the end of each calendar year.

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2024

NOTE 4: COMPENSATED ABSENCES (CONTINUED)

Most retiring employees that meet service, age or disability requirements are paid in accordance with the following schedule:

Days Available at Retirement	Percentage Payment	Maximum Days Paid
0-100	30%	30
101-200	40%	80
201-300	50%	150
Over 300 (in last year of employment)	100% of days over 300	13

The compensated absence liability at December 31, 2024 is \$393,917.

Beginning Balance	\$ 352,523
Net Increase	41,394
Ending Balance	<u>\$ 393,917</u>

The current portion of the compensated absence liability at December 31, 2024 is \$106,357.

NOTE 5: RETIREMENT BENEFITS

General Information About the Pension Plan

Plan Description

All employees of the Authority participate in the Pennsylvania State Employees' Retirement System (SERS), a cost-sharing multiple-employer defined benefit pension plan established by the Commonwealth to provide pension benefits for employees of state government and certain independent agencies. Membership in SERS is mandatory for Authority (and other state) employees. Article II of the Commonwealth's constitution assigns authority to establish and amend the benefit provisions of the plan to the General Assembly. SERS issues a publicly available financial report that can be obtained at www.sers.pa.gov.

Benefits Provided

SERS provides retirement, death and disability benefits. Member retirement benefits are determined by taking the years of credited service multiplied by the final average salary multiplied by the annual accrual rate. According to the State Employees' Retirement Code, all obligations of SERS will be assumed by the Commonwealth should SERS terminate. Act 2017-5 established two new side-by-side defined benefit/defined contribution benefit options and a new defined contribution only options for all members who enter the plan on or after January 1, 2019. The defined benefit portions of both hybrid options are included in the defined benefit plan.

Contributions

SERS retirement code (71 pa. C.S) requires that all SERS participating employers make contributions to the plan on behalf of all active members and annuitants necessary to fund the liabilities and provide the annuity reserves required to pay benefits. SERS funding policy, as set by the State Employees' Retirement Board, provides for periodic active member contributions at statutory rates.

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2024

NOTE 5: RETIREMENT BENEFITS (CONTINUED)

General Information About the Pension Plan (Continued)

Contributions (Continued)

The SERS funding policy also provides for periodic employer contributions at actuarially determined rates based on the SERS funding valuation, expressed as a percentage of annual retirement covered payroll, such that they, along with employee contributions and an actuarially determined rate of investment return, are adequate to accumulate assets to pay benefits when due.

Act 2017-5 includes a savings “plow-back” provision requiring that the annual savings achieved through SERS benefit changes flow back into the plan through the employer contribution rate rather than to other non-pension obligations.

Act 2019-105 was signed into law on November 27, 2019, which allows eligible employers to enter into an agreement with the SERS Board to make a one-time lump sum payment of 75% to 100% of their respective unfunded accrued liability under the most recent funding valuation in effect at the time of the agreement. Eligible employers that make the one-time lump sum payment will receive credit toward future actuarially determined contributions in periodic amounts specified in an actuarially determined setoff schedule for up to 30 years following the lump sum payment. SERS records these lump sum payments as employer contributions when they are received, and they become part of the Defined Benefit Plan’s general assets that are not segregated or invested separately for the account of the benefit of the contributing employer.

The active plan member contribution rate is 6.25% of covered payroll for employees in Class AA; 5% for Class A; 6.25% for Class A-3; 9.3% for Class A-4; 5% for Class A5; and 4% for Class A6. Contributions to the pension plan from the Authority for the year ended December 31, 2023 and December 31, 2024 were \$985,349 and \$1,049,016, respectively.

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

At December 31, 2024 the Authority reported a liability of \$8,736,256 for its proportionate share of the net pension liability. The net pension liability was measured as of December 31, 2023, and the total pension liability used to calculate the net pension liability was determined by an actuarial valuation as of that date. The Authority’s proportion on the net pension liability was based on the Authority’s share of contributions to the plan relative to all participating agencies of the Commonwealth. At December 31, 2023 the Authority’s proportion was 0.0485 percent, which was an increase of 0.0013 from its proportion measured as of December 31, 2022.

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2024

NOTE 5: RETIREMENT BENEFITS (CONTINUED)

Net Pension Liability, Pension Expense, and Deferred Outflows of Resources and Deferred Inflows of Resources Related to Pensions (Continued)

For the year ended December 31, 2024, the Authority recognized pension expense of \$209,234. At December 31, 2024, the Authority reported deferred outflows of resources and deferred inflows of resources related to pension from the following sources:

	Deferred Outflows of Resources	Deferred Inflows of Resources
Net difference between projected and actual investment earnings	\$ 686,400	\$ -
Changes in assumptions	376,490	-
Changes in proportionate share	245,598	153,879
Difference between employer contributions and proportionate share of contributions	14,870	16,345
Difference between expected and actual experience	246,658	17,755
Contributions subsequent to the measurement date	1,049,016	-
Total	<u>\$ 2,619,032</u>	<u>\$ 187,979</u>

\$1,049,016 reported as deferred outflows of resources related to pensions resulting from Authority contributions subsequent to the measurement date will be recognized as a reduction of the net pension liability in the year ended December 31, 2024. Other amounts reported as deferred outflows of resources and deferred inflows of resources related to pension will be recognized in pension expense as follows:

Year ended December 31:	
2025	\$ 431,084
2026	410,022
2027	639,386
2028	(102,660)
2029	4,205
Total	<u>\$ 1,382,037</u>

Actuarial Assumptions

Every five years, SERS is required to conduct an actuarial experience study to determine whether the assumptions used in its annual actuarial valuation remain accurate based on current and anticipated demographic trends and economic conditions. The 19th *Investigation of Actuarial Experience* study for the period 2015 – 2019 was released and approved by the SERS Board in July 2020. The study recommended decreasing the investment rate of return and inflation assumptions to 7.00% and 2.5%, respectively for 2020 from 7.125% and 2.6%, respectively, for 2019. The study also recommended reducing rates of career salary growth, more favorable annuitant mortality assumptions, and several other changes. The study can be viewed at www.SERS.pa.gov.

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2024

NOTE 5: RETIREMENT BENEFITS (CONTINUED)

Net Pension Liability, Pension Expense, and Deferred Outflows of Resources and Deferred Inflows of Resources Related to Pensions (Continued)

Actuarial Assumptions (Continued)

The actuary and SERS Board review the investment rate of return annually, in addition to the normal five-year experience study cycle, in recognition of changing market environments to ensure this assumption remains reasonable with each actuarial valuation.

The following methods and assumptions were used in the actuarial valuation for the December 31, 2023 measurement date:

Investment rate of return	6.875%, net of manager fees including inflation
Projected salary increases	average of 4.55% with a range of 3.30%-6.95% including inflation
Inflation	2.50%
Mortality rate	projected PubG-2010 and PubNS-2010 Mortality Tables adjusted for actual plan experience and future improvement

The long-term expected real rate of return on pension investments is determined using a building-block method in which best-estimate ranges of expected future real rates of return (expected returns, net of manager fees and inflation) are developed for each major asset class. These ranges are combined to produce the long-term expected rate of return by weighting the expected future real rates of return by the target asset allocation percentage and by adding expected inflation. Best estimates of geometric real rates of return for each major asset class included in the pension plan's target asset allocation as of December 31, 2023, are summarized in the following table:

Asset Class	Target Allocation	Long-term real rate of return
Private equity	16.00%	6.00 %
Real estate	7.00	4.80
U.S. equity	31.00	4.85
International developed markets equity	14.00	4.75
Emerging markets equity	5.00	4.95
Fixed income	22.00	1.75
Inflation protections (TIPS)	3.00	1.50
Cash	2.00	0.25
Total	<u>100.00%</u>	

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2024

NOTE 5: RETIREMENT BENEFITS (CONTINUED)

Net Pension Liability, Pension Expense, and Deferred Outflows of Resources and Deferred Inflows of Resources Related to Pensions (Continued)

Discount Rate

The discount rate, or investment rate of return, used to measure the total pension liability was 6.875% in 2023. The projection of cash flows used to determine the discount rate assumed that contributions from plan members will be made at the current contribution rates and the contributions from participating employers will be made at the actuarially determined rate as set by statute. Based on those assumptions, the pension plan's fiduciary net position was projected to be available to make all projected future benefit payments of current plan members. Therefore, the long-term expected rate of return on pension plan investments was applied to all periods of projected benefit payments to determine the total pension liability.

Sensitivity of the Authority's proportionate share of the net pension liability to change in the discount rate

The following represents the Authority's proportionate share of the 2023 net pension liability calculated using the discount rate of 6.875%, as well as what the Authority's proportionate share of the net pension liability would be if it were calculated using a discount rate that is one percentage point lower or one percentage point higher than the current rate:

	1% Decrease 5.875%	Current Rate 6.875%	1% Increase 7.875%
Authority's share of the net pension liability as of the December 31, 2023 measurement date	\$11,464,772	\$8,736,256	\$6,432,049

Pension plan fiduciary net position

Detailed information about the plan's fiduciary net position is available in the separately issued SERS financial report.

Payable to the Pension Plan

As of December 31, 2024, the Authority did not report a liability within the accounts payable and accrued liabilities on the Statement of Net Position for the Authority's share of the contributions that had not yet been paid to SERS.

NOTE 6: POSTEMPLOYMENT BENEFITS PLAN

General Information About the Postemployment Benefits Plan

Plan Description

Employees of the Authority participate in the Retired Employees' Health Program (REHP), a single-employer defined benefit Other Postemployment Benefit Plan (OPEB) established by the Commonwealth. While the Commonwealth accounts for the REHP as a single-employer plan, the Authority will account for the plan as a cost-sharing plan because the plan is administered as a cost-sharing plan with a single actuarial valuation and the Commonwealth allocates annual OPEB costs to Commonwealth funds and component units, consistent with a pooling arrangement.

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2024

NOTE 6: POSTEMPLOYMENT BENEFITS PLAN (CONTINUED)

General Information About the Postemployment Benefits Plan (Continued)

Plan Description (Continued)

Additionally, the Commonwealth structured the REHP so that employer contributions are irrevocable, plan assets are dedicated to providing benefits to retirees and their beneficiaries in accordance with the terms of the plan, and plan assets are legally protected from creditors of the employer(s) or plan administrator.

The REHP is established as a trust equivalent arrangement administered by the Pennsylvania Employees Benefit Trust Fund (PEBTF), which acts as the third-party administrator under an administrative agreement with the Commonwealth. The REHP provides health care and prescription drug plan benefits to eligible Commonwealth retirees and their eligible dependents. The REHP's benefit provisions are established and may be amended by the Commonwealth of Pennsylvania's Office of Administration.

The REHP does not issue stand-alone financial statements, however the REHP note disclosures will be included in the Commonwealth's Annual Financial Report for the year ended June 30, 2024. Additional information on the REHP, including a complete actuarial report is available for review at www.budget.pa.gov.

Benefits Provided

The REHP provides eligible employees and their dependents with subsidized medical coverage while the retiree is alive. Employees who retire on or after July 1, 2011 are currently required to pay retiree contributions of 3% of their final average salary. Upon enrollment in Medicare, Commonwealth employees currently paying 3% will pay retiree contributions of 1.5% of either their final annual salary or final average salary, whichever applies. Employees must meet one of the following eligibility requirements to receive benefits:

- 25 or more years of service;
- 20 or more years of service and superannuation age – age 60 for general employees and age 55 or 65 for employees subject to Act 120 of 2010
- Disability retirement – requires five years of service

Contributions

REHP employer contributions are contractually required and established by the Commonwealth Office of Administration and the Office of the Budget. All participating agencies and certain plan members must contribute specified amounts to the REHP. During the year ended December 31, 2024, the Authority's contribution rate was \$280 for each current active REHP eligible employee per biweekly pay period with a total contribution for 2024 of \$302,000.

Net OPEB Liability, Pension Expense, and Deferred Outflows of Resources and Deferred Inflows of Resources Related to OPEB

At June 30, 2024 the Authority reported a liability of \$3,922,000 for its proportionate share of the net OPEB liability. The net OPEB liability was measured as of June 30, 2024, and the total OPEB liability used to calculate the net OPEB liability was determined by an actuarial valuation as of that date. The Authority's proportionate share of the net OPEB liability was calculated based on the Authority's share of contributions to the plan relative to all participating agencies of the Commonwealth.

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2024

NOTE 6: POSTEMPLOYMENT BENEFITS PLAN (CONTINUED)

Net OPEB Liability, Pension Expense, and Deferred Outflows of Resources and Deferred Inflows of Resources Related to OPEB (Continued)

As of June 30, 2024 the Authority's proportionate share was 0.0573 percent which was an increase of 0.0059 from its proportion measured June 30, 2023.

For the year ended June 30, 2024, the Authority recognized OPEB expense of \$1,181,000. At June 30, 2024 Authority reported deferred outflows of resources and deferred inflows of resources related to pension from the following sources:

	Deferred Outflows of Resources	Deferred Inflows of Resources
Net difference between projected and actual investment earnings	\$ -	\$ 22,000
Changes in assumptions	117,000	1,012,000
Changes in proportionate share	-	84,000
Difference between employer contributions and proportionate share of contributions	3,423,000	-
Difference between expected and actual experience	123,000	943,000
Contributions subsequent to the measurement date	146,667	-
Total	<u>\$ 3,809,667</u>	<u>\$ 2,061,000</u>

\$146,667 reported as deferred outflows of resources related to OPEB resulting from Authority contributions subsequent to the measurement date will be recognized as a reduction of the net OPEB liability in the year ended December 31, 2024. Other amounts reported as deferred outflows of resources and deferred inflows of resources related to pension will be recognized in OPEB expense as follows:

Year ended June 30:	
2025	\$ 1,056,000
2026	609,000
2027	110,000
2028	(181,000)
2029	8,000
Total	<u>\$ 1,602,000</u>

Actuarial Assumptions

The total OPEB liability as of June 30, 2024 was determined by an actuarial valuation with a measurement date of June 30, 2024 using the following actuarial assumptions, applied to all periods included in the measurement:

Investment returns	6.75%
Inflation rate	2.50%
Payroll growth	2.80%
Health care cost trend rates	8.2% for 2024 decreasing to an ultimate rate of 3.9% for 2075 (Non-Medicare retiree) and 8.2% for 2024 decreasing to an ultimate rate of 3.9% (Medicare retiree).

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2024

NOTE 6: POSTEMPLOYMENT BENEFITS PLAN (CONTINUED)

Net OPEB Liability, Pension Expense, and Deferred Outflows of Resources and Deferred Inflows of Resources Related to OPEB (Continued)

Actuarial Assumptions (Continued)

Mortality rates were based on the Pub-2010 General Employees Headcount Weighted Mortality Tables, and adjusted for mortality improvements using projection scale MP-2021. Disabled participants mortality rates were based on the Pub-2010 Non-Safety Disabled Retiree Headcount Weighted Mortality Tables, with rates set forward two years for males and females, and adjusted for mortality improvements using projection scale MP-2021. The selection of new mortality tables and improvement scales represents a change in assumptions from the previous valuation.

The actuarial assumptions used in the June 30, 2024 valuation were based on the SERS experience study that covered the years 2015 through 2019. The approved recommendations from that study were used to determine the assumptions for this valuation, where applicable. The inflation assumption was selected by the SERS board during a July 2020 meeting based on a review of actual plan experience and relevant economic outlook.

The long-term expected real rate of return on pension investments is determined using a building-block method in which best-estimate ranges of expected future real rates of return (expected returns, net of manager fees and inflation) are developed for each major asset class. These ranges are combined to produce the long-term expected rate of return by weighting the expected future real rates of return by the target asset allocation percentage and by adding expected inflation. Best estimates of arithmetic real rates of return for each major asset class included in the pension plan's target asset allocation as of June 30, 2024, are summarized in the following table:

Asset Class	Target Allocation	Long-term real rate of return
Domestic equity	42.00%	5.00%
International equity	22.00%	5.10%
Fixed income	22.00%	2.40%
Public REITS	4.00%	0.00%
Infrastructure	4.00%	4.30%
Private equity	1.00%	8.80%
Real estate	4.00%	3.80%
Cash and cash equivalents	1.00%	1.20%
Total	<u>100.00%</u>	

Discount Rate

The discount rate used to measure the total OPEB liability of the REHP was 6.09%, which is based on the 20-year Bond Buyer GO Index municipal bond rate as of June 30, 2024 (increase from 5.65%). Since the REHP has insufficient assets to meet next year's projected benefit payments, the municipal bond rate was applied to all periods of the projected benefit payments to determine the total OPEB liability. The projection of cash flows used to determine the single discount rate of each fiscal year-end assumed that employer contributions will be made based on the current funding policy for future years.

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2024

NOTE 6: POSTEMPLOYMENT BENEFITS PLAN (CONTINUED)

Net OPEB Liability, Pension Expense, and Deferred Outflows of Resources and Deferred Inflows of Resources Related to OPEB (Continued)

Sensitivity of the Authority's proportionate share of the net OPEB liability to changes in the healthcare cost trend rates

The following presents the Authority's Proportionate Share of the net OPEB liability as well as what the Authority's Proportionate Share of the net OPEB liability would be if it was calculated using health cost trends that are 1-percentage point lower or 1-percentage higher than the current rate:

	1% Decrease 7.2%	Current discount rate 8.2%	1% Increase 9.2%
Authority's proportionate share of the net OPEB liability	\$ 3,419,000	\$ 3,922,000	\$ 4,524,000

Sensitivity of the Authority's proportionate share of the net OPEB liability to changes in the discount rate.

The following presents the Authority's proportionate share of the net OPEB liability, as well as what the Authority's proportionate share of the net OPEB liability would be if it were calculated using a discount rate that is 1 percentage point lower or higher than the current discount rate:

	1% Decrease 5.09%	Current discount rate 6.09%	1% Increase 7.09%
Authority's proportionate share of net OPEB liability	\$ 4,397,000	\$ 3,922,000	\$ 3,513,000

NOTE 7: CONTINGENCIES

In the normal course of business, there may be various claims and suits pending against the Authority and its appointed officials. Management is of the opinion that these matters, if any, will not have a material adverse effect on the Authority's financial position of as December 31, 2024.

The Authority participates in federal grant programs, which are subject to financial and compliance audits. The amount, if any, of expenditures which may be disallowed by the granting agencies cannot be determined at this time, although the Authority expects such amounts, if any, to be immaterial.

**Required
Supplementary
Information**

Pennsylvania Health Insurance Exchange Authority
(Component Unit of the Commonwealth of Pennsylvania)
Schedule of Authority's Proportionate Share of the Net Pension Liability

	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>
Authority's proportion of the net pension liability	0.0012%	0.0238%	0.0426%	0.0472%	0.0485%
Authority's proportionate share of the net pension liability	\$ 173,301	\$ 3,648,337	\$ 5,250,245	\$ 9,157,108	\$ 8,736,256
Authority's covered payroll	\$ 116,521	\$ 1,767,998	\$ 2,872,580	\$ 3,437,691	\$ 3,559,293
Authority's proportionate share of the net pension liability as a percentage of its covered payroll	149%	206%	183%	266%	245%
Plan fiduciary net position as a percentage of the total pension liability	63%	67%	76%	62%	65%

This schedule will accumulate each year until sufficient information to present a ten-year trend is available.

**Pennsylvania Health Insurance Exchange Authority
(Component Unit of the Commonwealth of Pennsylvania)
Schedule of Authority's Contributions - Pension Plan**

	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>
Contractually required contribution	\$ 20,157	\$ 425,433	\$ 805,605	\$ 901,988	\$ 985,349	\$ 1,049,016
Contributions in relation to the contractually required contribution	20,157	425,433	805,605	901,988	985,349	1,049,016
Contribution deficiency (excess)	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>
Authority's covered payroll	\$ 116,521	\$ 1,767,998	\$ 2,872,580	\$ 3,437,691	\$ 3,559,293	\$ 3,636,246
Contributions as a percentage of covered payroll	17%	24%	28%	26%	28%	29%

This schedule will accumulate each year until sufficient information to present a ten-year trend is available.

Pennsylvania Health Insurance Exchange Authority
(Component Unit of the Commonwealth of Pennsylvania)
Schedule of Authority's Proportionate Share of the Net OPEB Liability

	<u>June 30, 2020</u>	<u>June 30, 2021</u>	<u>June 30, 2022</u>	<u>June 30, 2023</u>	<u>June 30, 2024</u>
Authority's proportion of the net OPEB liability	0.0091%	0.0335%	0.0524%	0.0514%	0.0563%
Authority's proportionate share of the net OPEB liability	\$ 1,116,000	\$ 3,426,000	\$ 5,165,000	\$ 3,995,000	\$ 3,922,000
Authority's covered payroll	\$ 519,000	\$ 2,106,000	\$ 3,060,000	\$ 3,339,000	\$ 3,321,000
Authority's proportionate share of the net OPEB liability as a percentage of its covered payroll	215%	163%	169%	120%	118%
Plan fiduciary net position as a percentage of the total OPEB liability	4%	6%	6%	9%	12%

This schedule will accumulate each year until sufficient information to present a ten-year trend is available.

This schedule is presented as of June 30th to conform with the Commonwealth measurement period.

**Pennsylvania Health Insurance Exchange Authority
(Component Unit of the Commonwealth of Pennsylvania)
Schedule of Authority's Contributions - OPEB Plan**

	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>
Contractually required contribution	\$ 42,000	\$ 93,000	\$ 124,000	\$ 143,000	\$ 302,000
Contributions in relation to the contractually required contribution	43,000	93,000	124,000	143,000	302,000
Contribution deficiency (excess)	<u>\$ (1,000)</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>
Authority's covered payroll	\$ 519,000	\$ 2,106,000	\$ 3,060,000	\$ 3,339,000	\$ 3,321,000
Contributions as a percentage of cover payroll	8%	4%	4%	4%	9%

This schedule will accumulate each year until sufficient information to present a ten-year trend is available.

This schedule is presented as of June 30th to conform with the Commonwealth measurement period.

PENNSYLVANIA HEALTH INSURANCE EXCHANGE PROGRAM
(Component Unit of the Commonwealth of Pennsylvania)
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
YEAR ENDED DECEMBER 31, 2024

<u>Federal Grantor/Pass-Through/Program Title</u>	<u>Pass-Through Grantor's Number</u>	<u>Federal AL Number</u>	<u>Federal Expenditures</u>	<u>Subrecipient Expenditures</u>
U.S. Department of Health and Human Services				
Commonwealth of Pennsylvania - Department of Human Services				
Medical Assistance Program	G04380	93.778	\$ 14,130,565	\$ -
Medical Assistance Program	G05380	93.778	5,406,351	-
Total Medicaid Cluster			19,536,916 *	-
TOTAL EXPENDITURES OF FEDERAL AWARDS			<u>\$ 19,536,916</u>	<u>\$ -</u>

* Denotes program tested as major

The accompanying notes are an integral part of this schedule.

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
NOTES TO THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
YEAR ENDED DECEMBER 31, 2024

NOTE 1: REPORTING ENTITY

The Pennsylvania Health Insurance Exchange Authority is the reporting entity for financial purposes as defined in Note 1A to the Pennsylvania Health Insurance Exchange Authority's financial statements.

NOTE 2: BASIS OF ACCOUNTING

The accompanying Schedule of Expenditures of Federal Awards includes the grant activity of the Pennsylvania Health Insurance Exchange Authority and is presented on the accrual basis of accounting as described in Note 1B to the Pennsylvania Health Insurance Exchange Authority's financial statements. The Pennsylvania Health Insurance Exchange Authority did not elect to use the 10% de minimis indirect cost rate.



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**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**

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Pennsylvania Health Insurance Exchange Authority
Harrisburg, Pennsylvania

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 (*Government Auditing Standards*), the financial statements of the Pennsylvania Health Insurance Exchange Authority (the "Authority") (a component unit of the Commonwealth of Pennsylvania), as of and for the year ended December 31, 2024, and the related notes to the financial statements which collectively comprise the Authority's basic financial statements, and have issued our report thereon dated May 16, 2025.

Report on Internal Control over Financial Reporting

In planning and performing our audit of the financial statements, we considered the Authority's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Authority's internal control. Accordingly, we do not express an opinion on the effectiveness of the Authority'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 Authority'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 or significant deficiencies may exist that were not identified.

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Authority's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. 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.



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The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Authority'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 Authority's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Zelenkofske Axelrod LLC

ZELENKOFSCHE AXELROD LLC

Harrisburg, Pennsylvania
May 16, 2025



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REPORT ON COMPLIANCE FOR MAJOR FEDERAL PROGRAM AND REPORT ON INTERNAL CONTROL OVER COMPLIANCE IN ACCORDANCE WITH THE UNIFORM GUIDANCE

INDEPENDENT AUDITOR'S REPORT

Board of Directors
Pennsylvania Health Insurance Exchange Authority
Harrisburg, Pennsylvania

Report on Compliance for the Major Federal Program

Opinion on the Major Federal Program

We have audited the Pennsylvania Health Insurance Exchange Authority's (the "Authority") (a component unit of the Commonwealth of Pennsylvania), compliance with the types of compliance requirements identified as subject to audit in the *OMB Compliance Supplement* that could have a direct and material effect on the Authority's major federal program for the year ended December 31, 2024. The Authority's major federal program is identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, the Authority complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on its major federal program for the year ended December 31, 2024.

Basis for Opinion on the Major Federal Program

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America (GAAS); the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States (*Government Auditing Standards*); and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of the Authority and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal program. Our audit does not provide a legal determination of the Authority's compliance with the compliance requirements referred to above.

Responsibilities of Management for Compliance

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to the Authority's federal programs.



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Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on the Authority's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material, if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about the Authority's compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the Authority's compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of the Authority's internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of the Authority's internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

Report on Internal Control Over Compliance

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



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Our consideration of internal control over compliance was for the limited purpose described in the Auditor's Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Zelenkofske Axelrod LLC

ZELENKOFSCHE AXELROD LLC

Harrisburg, Pennsylvania
May 16, 2025

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
SCHEDULE OF FINDINGS AND QUESTIONS COSTS
YEAR ENDED DECEMBER 31, 2024

Section I - Summary of Auditor's Results

Financial Statements

Type of auditor's report issued:	<u>Unmodified</u>
Internal control over financial reporting:	
• Material weaknesses identified?	<u>No</u>
• Significant deficiencies identified not considered to be material weaknesses?	<u>None Reported</u>
Noncompliance material to financial statements noted?	<u>No</u>

Federal Awards

Internal control over major programs:	
• Material weaknesses identified?	<u>None Reported</u>
• Significant deficiencies identified not considered to be material weaknesses?	<u>None Reported</u>
Type of auditor's report issued on compliance for major programs:	<u>Unmodified</u>
Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)?	<u>No</u>

Identification of Major Program

<u>AL Number</u>	<u>Name of Program or Cluster</u>
93.778	Medicaid Cluster

Dollar threshold used to distinguish between Type A and Type B programs using risk-based approach:	<u>\$750,000</u>
Auditee qualified as low-risk auditee?	<u>Yes</u>

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
SCHEDULE OF FINDINGS AND QUESTIONS COSTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2024

Section II – Financial Statement Findings and Questioned Costs

None noted.

Section III – Federal Awards' Findings and Questioned Costs

None noted.

PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
(Component Unit of the Commonwealth of Pennsylvania)
SCHEDULE OF PRIOR AUDIT FINDINGS
YEAR ENDED DECEMBER 31, 2024

The summary which follows indicates the current status of findings identified in the prior year Single Audit Report.

<u>Program Name</u>	<u>Prior Year Finding</u>	<u>Brief Description of Finding</u>	<u>Current Year Status</u>
None noted.			