



Mike Beebe
Governor

State of Arkansas

ARKANSAS STATE POLICE

1 State Police Plaza Drive Little Rock, Arkansas 72209-4822 www.asp.arkansas.gov

"SERVING WITH PRIDE AND DISTINCTION SINCE 1935"



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November 10, 2008

Senator Henry Wilkins, IV
Representative Scott Sullivan
Co-chairmen
Arkansas Legislative Council
315 State Capitol
Little Rock, AR 72201

Dear Senator Wilkins and Representative Sullivan:

Per Act 1422 of 2001, Section 17, The Department of Arkansas State Police shall report monthly to the Governor, the Chief Fiscal Officer of the State and to the Arkansas Legislative Council or Joint Budget Committee regarding the activity and condition of the Uniformed Employee Health Insurance Plan.

Enclosed is the report for the month ending 10/31/08. If you have any further questions, please contact this office at 501-618-8720. Thank you.

Sincerely,

Kathy D. Sparks, Major
Administrative Services Division

KS/ma

Arkansas State Police

Uniformed Employee Health Plan October 2008

DESCRIPTION	MONTH END 10/31/08	ACTUAL YEAR TO DATE
BEGINNING FUND BALANCE:	<u>\$7,213,757.38</u>	<u>\$7,497,691.12</u>
PLUS RECEIPTS:		
Active Employees	407,588.00	3,806,828.00
Active Dental/Vision	44,625.20	346,618.87
Retirees	95,971.36	1,027,169.19
COBRA	1,881.51	16,213.54
Act 1500 DL Fees	260,041.43	2,444,152.85
Refunds & Voids	675.69	50,032.36
Interest Earned	10,226.98	129,866.50
Other/Reimbursements	21,730.30	136,489.99
SUBTOTAL RECEIPTS:	<u>842,740.47</u>	<u>7,957,371.30</u>
FUND BALANCE AVAILABLE:	<u>\$8,056,497.85</u>	<u>\$15,455,062.42</u>
LESS DISBURSEMENTS:		
Health Claims	726,021.77	7,615,329.84
Reinsurance Premiums	30,667.07	303,188.63
CoreSource Administration	25,192.41	249,741.35
Miscellaneous/Other	140.00	12,326.00
SUBTOTAL DISBURSEMENTS:	<u>782,021.25</u>	<u>8,180,585.82</u>
ENDING BALANCE:	<u><u>\$7,274,476.60</u></u>	<u><u>\$7,274,476.60</u></u>

Jan08 Total

Final Aggregate Reimbursements will be calculated based on actual monthly employee counts and each client's contract basis, as audited at the end of the contract period.

ARKANSAS STATE POLICE																		
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
MO./YR.	MEDICAL/RX EMPLOYEES		DENTAL/VISION EMPLOYEES		EXPECTED CLAIMS	STOP LOSS POINT	MEDICAL CLAIMS	DRUG CARD CLAIMS	ELIGIBLE AGGREGATE CLAIMS	DELTA DENTAL CLAIMS	VISION CLAIMS	TOTAL CLAIMS	ADMIN FEES	SPECIFIC COST	AGGREGATE COST	*OTHER FEES	PPO FEES FROM INVOICE	TOTAL COST
Jan-08	192	812	126	481	736,801	921,001	564,344	160,915	725,503	31,295	8,743	765,297	16,495	27,161	2,410	1,939	5,063	818,364
Feb-08	188	811	123	479	734,538	918,173	502,628	170,585	684,915	34,454	8,320	715,987	16,450	27,077	2,398	3,279	3,775	768,965
Mar-08	187	829	125	488	748,979	936,223	422,205	164,245	587,456	31,296	8,712	626,458	16,709	27,609	2,438	3,174	5,126	681,514
Apr-08	188	832	125	487	751,805	939,757	572,090	168,882	742,338	55,315	9,046	805,333	16,566	27,713	2,448	4,584	5,109	861,753
May-08	190	849	126	499	766,504	958,130	441,057	164,466	606,682	32,519	6,619	644,661	17,015	28,255	2,494	4,868	5,220	702,512
Jun-08	190	851	127	499	768,148	960,185	389,230	167,370	555,595	21,570	9,535	587,705	17,015	28,315	2,498	5,159	5,221	645,914
Jul-08	189	849	125	499	766,144	957,680	570,816	170,225	743,873	43,242	10,127	794,410	17,015	28,241	2,491	9,690	5,220	857,067
Aug-08	189	848	124	499	765,321	956,652	553,902	173,998	725,970	25,903	12,274	766,077	17,037	28,211	2,489	11,629	5,226	830,669
Sep-08	189	847	124	497	764,499	955,624	882,108	162,985	1,012,403	30,375	10,038	1,085,506	16,987	28,181	2,486	7,465	5,210	1,145,835
Oct-08	190	847	125	494	764,859	956,074	512,916	170,547	607,644	28,103	9,537	721,103	16,983	28,194	2,489	4,673	5,205	778,647
Nov-08	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dec-08	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTALS:					7,567,598	9,459,498	5,411,296	1,674,218	6,992,379	334,072	92,951	7,512,537	168,272	278,956	24,641	56,460	50,375	8,091,241
CLAIMS ELIGIBLE FOR SPECIFIC REINSURANCE:									0									0
									6,992,379									8,091,241
AGGREGATE STOP LOSS POINT AGGREGATE PREMIUM (MED & RX) SPECIFIC PREMIUM (\$115,000 Offset Fund) (\$150,000 DEDUCTIBLE) MEDICAL ADMIN FEE, PRE-CERT, COBRA/HIPAA & MEDICARE D DENTAL/VISION ADMIN FEE PPO FEES																		
										24/12		\$ 450.10	SINGLE	\$1,027.81	FAMILY			
														\$2.40	PER EMPLOYEE			
														\$13.36	SINGLE	\$30.29	FAMILY	
														\$16.55	PER EMPLOYEE			
														\$4.59	PER EMPLOYEE			
														\$3.75	PER EMPLOYEE (AMCO)	\$4.25	PER EMPLOYEE (SHARP)	