



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"



Winford E. Phillips
Director

ARKANSAS STATE POLICE COMMISSION

Dr. Charisse Childers
Chairman
Little Rock

Dr. Lewis Shepherd
Vice-Chairman
Arkadelphia

John Allison
Secretary
Conway

Steve G. Smith
Little Rock

Jane Christenson
Harrison

Daniel "Woody" Futrell
Nashville

Wallace Fowler
Jonesboro

July 8, 2009

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

Dear Senator Wilkins and Representative Maxwell:

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 6/30/09. 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 June 2009

DESCRIPTION	MONTH END 6/30/09	ACTUAL YEAR TO DATE
BEGINNING FUND BALANCE:	\$6,415,131.90	\$6,650,180.41
PLUS RECEIPTS:		
Active Employees	407,588.00	2,445,528.00
Active Dental/Vision	29,617.26	222,724.38
Retirees	93,844.48	653,263.05
COBRA	1,825.00	12,897.50
Act 1500 DL Fees	206,405.46	1,403,098.07
Refunds & Voids	16,406.29	78,345.35
Interest Earned	1,027.89	6,628.19
Other/Retiree Drug Subsidy/Reimbursements/ Rebates	40,452.44	132,206.92
Other/Stop Loss/Suspension premium	0.00	333,977.20
SUBTOTAL RECEIPTS:	<u>797,166.82</u>	<u>5,288,668.66</u>
FUND BALANCE AVAILABLE:	<u>\$7,212,298.72</u>	<u>\$11,938,849.07</u>
LESS DISBURSEMENTS:		
Health Claims	\$1,212,951.61	5,631,733.87
Reinsurance Premiums	33,043.30	184,450.37
CoreSource Administration	25,934.18	169,985.40
Miscellaneous/Refunds	0.00	12,309.80
SUBTOTAL DISBURSEMENTS:	<u>1,271,929.09</u>	<u>5,998,479.44</u>
ENDING BALANCE:	<u>\$5,940,369.63</u>	<u>\$5,940,369.63</u>

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
MO./YR.	Medical/Rx Employees				EXPECTED CLAIMS	STOP LOSS POINT	MEDICAL CLAIMS	DRUG CARD CLAIMS	TOTAL MED/RX CLAIMS	ELIGIBLE AGGREGATE CLAIMS	ADMIN FEES	SPECIFIC COST	AGGREGATE COST	*OTHER FEES	PPO FEES FROM INVOICE	TOTAL COST
	SINGLE	ES	EC	FAMILY												
Jan-09	197	359	65	414	773,137	927,764	574,288	179,341	753,629	764,738	15,929	30,825	2,308	13,664	5,535	821,890
Feb-09	199	358	64	413	771,222	925,466	492,379	94,801	587,180	594,008	15,869	30,756	2,306	9,596	5,515	651,221
Mar-09	200	357	63	414	770,689	924,827	804,009	255,924	1,059,933	1,070,023	15,873	30,737	2,306	24,012	5,521	1,138,382
Apr-09	202	353	61	416	767,926	921,511	643,073	202,480	845,553	803,611	15,873	30,635	2,301	19,307	5,521	919,190
May-09	200	355	61	416	768,992	922,790	572,719	185,586	758,305	705,526	15,839	30,671	2,301	18,661	5,506	831,283
Jun-09	201	355	60	419	771,004	925,205	1,001,151	157,046	1,158,197	1,160,998	15,869	30,753	2,308	12,071	5,516	1,224,714
Jul-09	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Aug-09	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sep-09	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Oct-09	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Nov-09	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dec-09	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTALS:					4,622,970	5,547,564	4,087,619	1,075,178	5,162,797	5,098,904	95,252	184,377	13,830	97,311	33,114	5,586,681
CLAIMS ELIGIBLE FOR SPECIFIC REINSURANCE:										-5,221						-5,221
										5,093,683						5,581,460
AGGREGATE STOP LOSS POINT (PAID) \$378.49 SINGLE \$1,018.14 FAMILY																
AGGREGATE PREMIUM (MED & RX) \$2.23 PER EMPLOYEE																
SPECIFIC PREMIUM (\$115,000 Offset Fund) (\$150,000 DEDUCTIBLE) (PAID) \$15.16 SINGLE \$33.22 FAMILY																
MEDICAL ADMIN FEE, PRE-CERT, COBRA/HIPAA & MEDICARE D \$17.05 PER EMPLOYEE																
DENTAL/VISION ADMIN FEE \$1.99 PER EMPLOYEE																
PPO FEES \$3.75 PER EMPLOYEE (AMCO) \$4.25 PER EMPLOYEE (SHARP)																

ARKANSAS STATE POLICE - Total Group							
1	2	3	4	5	6	7	8
MO./YR.	DENTAL/VISION EMPLOYEES				DELTA DENTAL CLAIMS	VISION CLAIMS	TOTAL Dental/Vision CLAIMS
	SINGLE	ES	EC	FAMILY			
Jan-09	134	193	40	261	34,957	7,473	42,430
Feb-09	135	193	39	262	40,250	11,019	51,269
Mar-09	136	193	39	261	41,773	12,499	54,272
Apr-09	137	189	39	261	46,702	8,001	54,703
May-09	135	190	39	261	37,909	9,089	46,998
Jun-09	135	189	38	264	36,142	8,874	45,016
Jul-09	0	0	0	0	0	0	0
Aug-09	0	0	0	0	0	0	0
Sep-09	0	0	0	0	0	0	0
Oct-09	0	0	0	0	0	0	0
Nov-09	0	0	0	0	0	0	0
Dec-09	0	0	0	0	0	0	0
TOTALS:					237,733	56,955	294,688



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Enclosed is the report for the month ending 7/31/09. If you have any further questions, please contact this office at 501-618-8720. Thank you.

Sincerely,

Kathy D. Sparks, Major
Administrative Services Division

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Arkansas State Police

Uniformed Employee Health Plan

July 2009

DESCRIPTION	MONTH END 7/31/09	ACTUAL YEAR TO DATE
BEGINNING FUND BALANCE:	<u>\$5,940,369.63</u>	<u>\$6,650,180.41</u>
PLUS RECEIPTS:		
Active Employees	1,278,258.00	3,723,786.00
Active Dental/Vision	29,653.54	252,377.92
Retirees	95,648.90	748,911.95
COBRA	1,380.00	14,277.50
Act 1500 DL Fees	232,921.75	1,636,019.82
Refunds & Voids	13,404.33	91,749.68
Interest Earned	1,094.07	7,722.26
Other/Retiree Drug Subsidy/Reimbursements/ Rebates	0.00	132,206.92
Other/Stop Loss/Suspension premium	6,615.84	340,593.04
SUBTOTAL RECEIPTS:	<u>1,658,976.43</u>	<u>6,947,645.09</u>
FUND BALANCE AVAILABLE:	<u>\$7,599,346.06</u>	<u>\$13,597,825.50</u>
LESS DISBURSEMENTS:		
Health Claims	\$1,137,113.13	6,768,847.00
Reinsurance Premiums	33,079.42	217,529.79
CoreSource Administration	25,947.95	195,933.35
Miscellaneous/Refunds	0.00	12,309.80
SUBTOTAL DISBURSEMENTS:	<u>1,196,140.50</u>	<u>7,194,619.94</u>
ENDING BALANCE:	<u><u>\$6,403,205.56</u></u>	<u><u>\$6,403,205.56</u></u>

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.

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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
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	SINGLE	ES	EC	FAMILY												
Jan-09	198	358	65	414	772,604	927,124	574,288	179,341	753,629	764,738	15,929	30,807	2,308	13,664	5,535	821,872
Feb-09	200	357	64	413	770,689	924,827	492,379	94,801	587,180	594,008	15,869	30,737	2,306	9,596	5,515	651,203
Mar-09	201	356	63	414	770,156	924,187	804,009	255,924	1,059,933	1,070,023	15,873	30,719	2,306	24,012	5,521	1,138,364
Apr-09	203	352	61	416	767,393	920,872	643,073	202,480	845,553	803,611	15,873	30,617	2,301	19,307	5,521	919,172
May-09	201	355	61	415	768,459	922,151	572,719	185,586	758,305	705,526	15,839	30,653	2,301	18,661	5,506	831,265
Jun-09	201	355	60	419	771,004	925,205	1,001,151	157,046	1,158,197	1,160,998	15,869	30,753	2,308	12,071	5,516	1,224,714
Jul-09	200	356	60	420	772,386	926,863	865,881	187,986	1,053,867	1,061,758	15,875	30,804	2,310	16,517	5,524	1,124,897
Aug-09	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sep-09	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Oct-09	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Nov-09	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dec-09	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTALS:					5,392,691	6,471,229	4,953,500	1,263,164	6,216,664	6,160,662	111,127	215,090	16,141	113,828	38,638	6,711,488
CLAIMS ELIGIBLE FOR SPECIFIC REINSURANCE:										-175,434						-175,434
										5,985,228						6,536,054
AGGREGATE STOP LOSS POINT (PAID) \$378.49 SINGLE \$1,018.14 FAMILY																
AGGREGATE PREMIUM (MED & RX) \$2.23 PER EMPLOYEE																
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Apr-09	138	188	41	259	46,702	8,001	54,703
May-09	136	190	41	258	37,909	9,089	46,998
Jun-09	135	189	40	261	36,142	8,874	45,016
Jul-09	134	191	40	262	36,409	10,509	46,918
Aug-09	0	0	0	0	0	0	0
Sep-09	0	0	0	0	0	0	0
Oct-09	0	0	0	0	0	0	0
Nov-09	0	0	0	0	0	0	0
Dec-09	0	0	0	0	0	0	0
TOTALS:					274,142	67,464	341,606