



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"

Asa Hutchinson
Governor

William J. Bryant
Director

August 10, 2017

ARKANSAS
STATE POLICE
COMMISSION

Dr. Lewis Shepherd
Chairman
Arkadelphia

John Allison
Vice-Chairman
Conway

Bob Burns
Secretary
Little Rock

Jane Dunlap Christenson
Harrison

Neff Basore
Bella Vista

Bill Benton
Heber Springs

Stephen Edwards
Marianna

Senator Bill Sample
Representative David L. Branscum
Co-chairmen
Arkansas Legislative Council
315 State Capitol
Little Rock, AR. 72201

Dear Senator Sample and Representative Branscum:

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 month ending 7/31/17. If you have any
further questions, please contact this office at 501-618-8720.

Thank you

Sincerely,

Capt. Mike Kennedy signature

Captain Mike Kennedy
Administrative Services Division

**Arkansas State Police Uniformed Health Plan
Fund Balance-July 2017**

DESCRIPTION	MONTH END	ACTUAL YEAR TO DATE
BEGINNING FUND BALANCE:	<u>\$2,500,704.65</u>	<u>\$1,292,932.87</u>
PLUS RECEIPTS:		
Active Employees	0.00	4,404,884.00
Active Dental/Vision	35,641.75	285,775.32
Retirees	128,832.29	875,584.06
COBRA	619.85	3,719.10
Act 1500 DL Fees	247,531.22	1,660,075.44
Refunds & Voids	0.00	28,674.87
Interest Earned	172.62	4,193.55
Other-Stop Loss	29,697.21	569,252.34
Other-Retiree Drug Subsidy	22,846.17	159,181.88
Other-Drug Card Rebate	0.00	96,346.75
Other-LWOP Premiums	0.00	918.79
Other-Suspension Premiums	217.10	644.21
Other-Additional Premiums	0.00	47.29
Other-Additional Premium Contribution	0.00	450,000.00
CD's Redeemed	0.00	1,500,000.00
SUBTOTAL RECEIPTS:	<u>465,558.21</u>	<u>10,039,297.60</u>
FUND BALANCE AVAILABLE:	<u>\$2,966,262.86</u>	<u>\$11,332,230.47</u>
LESS DISBURSEMENTS:		
Health, Dental & Vision Claims	601,197.31	8,043,525.52
Reinsurance Premiums	74,026.74	520,512.10
QualChoice	0.00	198,583.00
Delta Dental Admin.	0.00	26,524.27
DataPath & Primepay COBRA	780.00	5,460.00
Part D Advisors	5,711.54	39,795.47
Miscellaneous-Premium Refund	0.00	1,284.51
Other-Health Plan Consultant	0.00	0.00
Other-Transitional Reinsurance Fee	0.00	0.00
Other-Professional Svc(GASB report)	0.00	0.00
Other-Hodges/Mace Admin	1,128.00	7,910.00
LDI Admin	11,265.00	152,415.00
PCORI	0.00	63,270.45
LDI Audit	0.00	795.88
SUBTOTAL DISBURSEMENTS:	<u>\$694,108.59</u>	<u>\$9,060,076.20</u>
ENDING FUND BALANCE:	<u>\$2,272,154.27</u>	<u>\$2,272,154.27</u>
CERTIFICATES OF DEPOSIT	\$3,500,000.00	3,500,000.00
TOTAL FUND BALANCE	<u>\$5,772,154.27</u>	<u>\$5,772,154.27</u>

ACT 1500 Revenue Summary

TOTAL ACT1500 REVENUE FOR THE MONTH :	06/30/2017	\$495,062.44
MONTHLY DEPOSIT TO HEALTH PLAN (SEE ABOVE)		\$247,531.22
MONTHLY ACT 1500 TRANSFER TO HOLDING - SMP1100		\$247,531.22
CAL YEAR TO DATE TRANSFERS TO HOLDING - SMP1100		\$1,424,637.35
PROJECTED HOLDING BY 12/31/17		\$3,000,000.00

MO/YR	Dental/Vision Employees				Dental Claims Paid	Vision Claims Paid	Total Claims Paid
	EE	ES	EC	FAM			
JAN	188	207	64	272	\$ 54,713.02	\$ 3,015.44	\$ 57,728.46
FEB	186	209	65	269	\$ 51,593.31	\$ 6,467.37	\$ 58,060.68
MAR	183	209	64	264	\$ 56,028.92	\$ 7,853.71	\$ 63,882.63
APR	182	209	64	259	\$ 36,430.74	\$ 5,225.09	\$ 41,655.83
MAY	181	206	64	255	\$ 42,127.14	\$ 4,509.64	\$ 46,636.78
JUN	183	206	64	254	\$ 41,867.05	\$ 5,038.94	\$ 46,905.99
JUL	183	208	66	252	\$ 35,555.16	\$ 3,986.54	\$ 39,541.70
AUG							\$ -
SEP							\$ -
OCT							\$ -
NOV							\$ -
DEC							\$ -
Totals	184	208	64	261	\$ 318,315.34	\$ 36,096.73	\$ 354,412.07



Arkansas State Police
2017 Total Medical & RX Cash Flow Report
"Paid" Reporting

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.

1 2 3 4 5 7 8 9 10 12 13 14 15 16 17 18 19 20 21 22																					
Medical/RX Employees																					
MO/YR	S	ES	EC	F	QualChoice Claims	LDI RX Card Claims	Total Combined Med/RX Claims	Exclusions under Aggregate	Specific Claims Requested	Specific Claims Received	Monthly Eligible Aggregate Claims	Monthly Attachment Point	LDI RX Card Admin Fees	QualChoice Admin Fees	Total Combined Admin Fees	Specific Cost	Aggregate Cost	Total Fixed Cost	Total Medical/Fixed Cost		
17-Jan	259	362	70	462	\$ 1,028,430.71	\$ 288,124.26	\$ 1,316,554.97	\$ -	\$ -	\$ 139,393.88	\$ 1,316,554.97	\$ 1,264,137.77	\$ 24,277.50	\$ 33,315.00	\$ 57,592.50	\$ 68,879.46	\$ 6,404.50	\$ 75,283.96	\$ 1,449,431.43		
17-Feb	259	365	70	457	\$ 953,973.51	\$ 290,003.02	\$ 1,243,976.53	\$ 179,008.31	\$ -	\$ -	\$ 1,064,968.22	\$ 1,261,622.81	\$ 23,405.00	\$ 33,422.00	\$ 56,827.00	\$ 68,697.30	\$ 6,421.80	\$ 75,119.10	\$ 1,375,922.63		
17-Mar	256	364	71	454	\$ 769,023.36	\$ 322,670.37	\$ 1,091,693.73	\$ 91,213.16	\$ -	\$ -	\$ 1,000,480.57	\$ 1,256,229.32	\$ 24,467.50	\$ 32,993.50	\$ 57,461.00	\$ 67,730.69	\$ 6,349.21	\$ 74,079.90	\$ 1,223,234.63		
17-Apr	255	365	70	452	\$ 699,194.19	\$ 260,575.87	\$ 959,770.06	\$ 59,231.72	\$ -	\$ -	\$ 900,538.34	\$ 1,253,174.01	\$ 22,375.00	\$ 33,064.00	\$ 55,439.00	\$ 68,117.92	\$ 6,360.64	\$ 74,478.56	\$ 1,089,687.62		
17-May	255	360	72	447	\$ 1,205,905.32	\$ 275,187.30	\$ 1,481,092.62	\$ 185,546.81	\$ 357,923.04	\$ 324,735.97	\$ 937,622.77	\$ 1,243,114.17	\$ 23,250.00	\$ 32,828.00	\$ 56,078.00	\$ 67,940.38	\$ 6,327.28	\$ 74,267.66	\$ 1,611,438.28		
17-Jun	256	360	71	449	\$ 687,002.97	\$ 280,545.24	\$ 967,548.21	\$ -	\$ 64,276.15	\$ 61,191.00	\$ 967,548.21	\$ 1,244,912.00	\$ 22,505.00	\$ 32,532.00	\$ 55,037.00	\$ 66,995.62	\$ 6,260.56	\$ 73,256.18	\$ 1,095,841.39		
17-Jul	255	365	71	447	\$ 533,904.44	\$ 297,362.88	\$ 831,267.32	\$ -	\$ -	\$ -	\$ 831,267.32	\$ 1,248,144.09	\$ 21,995.00	\$ 32,936.00	\$ 54,931.00	\$ 67,688.34	\$ 6,338.40	\$ 74,026.74	\$ 960,225.06		
17-Aug							\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
17-Sep							\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
17-Oct							\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
17-Nov							\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
17-Dec							\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
TOTALS:					\$ 5,877,434.50	\$ 2,014,468.94	\$ 7,891,903.44	\$ 515,000.00	\$ 422,199.19	\$ 525,320.85	\$ 7,018,980.40	\$ 8,771,334.17	\$ 162,275.00	\$ 231,090.50	\$ 393,365.50	\$ 476,049.71	\$ 44,462.39	\$ 520,512.10	\$ 8,805,781.04		

Less Total Specific Reimbursements to date **\$ 525,320.85**

Total Plan Costs: **\$ 8,280,460.19**

Specific Contract: 24/12 Medical & RX	Specific Rates:	2016 Specific Reimbursements
Specific Deductible: \$ 210,000.00	EO: \$ 21.40	Member 1 \$ 56,093.51
Aggregating Specific: \$ 200,000.00	EF: \$ 70.54	Member 2 \$ 2,028.11
		Member 3 \$ 13,760.08
		Member 4 \$ 67,512.18
		Member 5 \$ -
Aggregate Contract: 24/12 Medical & RX	Aggregate Factors:	
Aggregate Premium: \$ 5.56	EO: \$ 540.35	
	EF: \$ 1,257.48	

Lasers:

Laser 1 \$ 300,000.00 (contingent)	Minimum Attachment Point:	45.17%
Laser 2 \$ 525,000.00	\$ 15,169,653.24	
Laser 3		

**The Exclusions under Aggregate are the claims above \$210,000 for those members who are lasered and any Aggregating Specific amount.*