State of Arkansas



Asa Hutchinson

ARKANSAS STATE POLICE

1 State Police Plaza Drive Little Rock, Arkansas 72209-4822 www.asp.arkansas.gov "SERVING WITH PRIDE AND DISTINCTION SINCE 1935"



November 9, 2017

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 10/31/17. If you have any further questions, please contact this office at 501-618-8720.

Thank you

Sincerely,

Captain Mike Kennedy

Administrative Services Division

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

Arkansas State Police Uniformed Health Plan Fund Balance-October 2017

DESCRIPTION	MONTH END	ACTUAL YEAR TO DATE						
BEGINNING FUND BALANCE:	\$2,358,666.54	\$1,292,932.87						
PLUS RECEIPTS:								
Active Employees	605,986.00	6,828,828.00						
Active Dental/Vision	53,195.01	392,688.83						
Retirees	128,961.58	1,257,878.84						
COBRA	2,256.68	7,215.48						
Act 1500 DL Fees	253,753.53	2,445,920.75						
Refunds & Voids	6,689.66	35,823.26						
Interest Earned	842.09	7,255.58						
Other-Stop Loss	74,702.20	784,256.94						
Other-Retiree Drug Subsidy	0.00	201,793.70						
Other-Drug Card Rebate	0.00	148,583.33						
Other-LWOP Premiums	0.00	1,612.00						
Other-Suspension Premiums	223.26	867.47						
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>1,126,610.01</u>	14,062,771.47						
FUND BALANCE AVAILABLE:	<u>\$3,485,276.55</u>	<u>\$15,355,704.34</u>						
LESS DISBURSEMENTS:								
Health, Dental & Vision Claims	1,065,495.20	11,577,289.98						
Reinsurance Premiums	73,808.00	742,779.32						
QualChoice	32,966.00	330,219.00						
Delta Dental Admin.	4,412.52	44,097.93						
DataPath & Primepay COBRA	780.00	8,050.00						
Part D Advisors	0.00	50,448.43						
Miscellanous-Premium Refund	0.00	1,284.51						
Other-Health Plan Consultant	0.00	7,500.00						
Other-Transitional Reinsurance Fee	0.00	0.00						
Other-Professional Svc(GASB report)	0.00	0.00						
Other-Hodges/Mace Admin	1,131.50	13,151.04						
LDI Admin	22,230.00	230,900.00						
PCORI	0.00	63,270.45						
LDI Audit	0.00	2,260.35						
SUBTOTAL DISBURSEMENTS:	<u>\$1,200,823.22</u>	\$13,071,251.01						
ENDING FUND BALANCE:	\$2,284,453.33	\$2,284,453.33						
_								
CERTIFICATES OF DEPOSIT	\$3,500,000.00	3,500,000.00						
TOTAL FUND BALANCE								
TOTAL FOND BALANCE	\$5,784,453.33	\$5,784,453.33						
ACT 1500 Revenue Summary								
TOTAL ACT1500 REVENUE FOR THE MONTH:	09/30/2017	\$491,266.83						
	00/00/2017							
MONTHLY DEPOSIT TO HEALTH PLAN (SEE ABOVE) MONTHLY ACT 1500 TRANSFER TO HOLDING - SMP1100		\$294,858.25 \$204,858.25						
INIONTHEL ACT 1300 TRANSPER TO HOLDING - SMP1100		\$294,858.25						
CAL YEAR TO DATE TRANSFERS TO HOLDING - SMP1100		\$2,210,482.66						
PROJECTED HOLDING BY 12/31/17		\$3,000,000.00						
TOUR TOUR TOUR TOUR TOUR TOUR TOUR TOUR		\$789,517.34						
		Ψ103,011.04						

MOND	De	ental/Visio	n Employe	es	Dental Claims Paid	Vision Claims Paid	Total Claims Paid		
MO/YR	EE	ES	EC	FAM	Dental Claims Paid	Vision Claims Paid			
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	183	208	68	252	\$ 47,855.84	\$ 4,931.83	\$ 52,787.67		
SEP	185	207	68	253	\$ 34,154.89	\$ 6,898.33	\$ 41,053.22		
OCT	186	206	69	251	\$ 36,250.08	\$ 2,472.83	\$ 38,722.91		
NOV							\$ -		
DEC							\$ -		
Totals	184	208	66	258	\$ 436,576.15	\$ 50,399.72	\$ 486,975.87		



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 10 11 12 13 14 15 16 17 18 19 20 21 22 Medical/RX Employees Exclusions Addl Fees Total QualChoice LDI RX Card **Total Combined** under Eligible for Specific Claims Specific Claims Monthly Eligible Monthly LDI RX Card QualChoice **Total Combined** Total Fixed Medical/Fixed Aggregate MO/YR Claims Claims Med/RX Claims Aggregate Aggregate Requested Received **Aggregate Claims** Attachment Point **Admin Fees Admin Fees** Admin Fees Specific Cost Cost Cost Cost 17-Jan 259 462 \$ 1,028,430.71 \$ 362 70 288,124.26 \$ 1,316,554.97 \$ 139,393.88 \$ 1,264,137.77 \$ 24,277.50 \$ 33,315.00 \$ 57,592.50 \$ 68,879.46 \$ 75,283.96 \$ 1,449,431.43 1,316,554.97 \$ 6,404.50 17-Feb 259 365 70 457 953,973.51 \$ 56,827.00 \$ 290,003.02 \$ 1,243,976.53 \$ 179,008.31 1,064,968.22 1,261,622.81 \$ 23,405.00 \$ 33,422.00 \$ 68,697.30 \$ 6,421.80 \$ 75,119.10 | \$ 1,375,922.63 256 17-Mar 364 71 454 769,023.36 322,670.37 \$ 1,091,693.73 \$ 91,213.16 1,256,229.32 6,349.21 \$ 74,079.90 \$ 1,223,234.63 1,000,480.57 24,467.50 \$ 32,993.50 57,461.00 \$ 67,730.69 17-Apr 255 365 70 452 699,194.19 260,575.87 959,770.06 \$ 59,231.72 1,253,174.01 \$ 22,375.00 \$ 33,064.00 6,360.64 \$ 74,478.56 \$ 1,089,687.62 900,538.34 55,439.00 \$ 68,117.92 17-May 255 360 72 447 \$ 1,205,905.32 275,187.30 \$ 1,481,092.62 \$ 185,546.81 356,229.76 \$ 324,735.97 939,316.05 \$ 74,267.66 \$ 1,611,438.28 1,243,114.17 \$ 23,250.00 \$ 32,828.00 56,078.00 \$ 67,940.38 6,327.28 17-Jun 256 360 71 449 687,002.97 280,545.24 967,548.21 29,697.21 \$ 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

62,502.60 \$

S

77,799.80

74,702.20 5

62,502.60

91,624.11

62,349.04

80,778.46

\$ 8,302,249.81 S 2,962,280.58 \$ 11,264,530.39 \$ 515,000.00 \$ TOTALS: 683,181.18 \$ 740,325.45 \$ 10,330,951.59 \$ 12,516,130.01 \$ 232,185.00 \$ 329,790.50 \$ 561,975.50 \$679,323.97 \$63,455.35 \$742,779.32 \$12,569,285.21 Less Total Specific Reimbursements to date Total Plan Costs:

\$ 740,325.45 \$11,828,959.76

\$ 74,026.74 \$ 960,225.06

\$ 74,093.28 \$ 1,257,072.57

\$ 74,365.94 \$ 1,051,460.61

\$ 73,808.00 \$ 1,454,970.99

Specific Contract:	ract: 24/12 Medical & RX Specific Rates:				2017 Spec	2017 Specific Reimbursements:			2016 Specific Reimbursements		
Specific Deductible:		210,000.00	EO:	\$	21.40	Member 1	5	329,193.26	Member 1	\$	56,093.5
Aggregating Specific:	S	200,000.00	EF:	\$	70.54	Member 2	\$	271,738.31	Member 2	\$	2,028.1
						Member 3	5		Member 3	S	13,760.0
Aggregate Contract: 24/12 Medical & RX Aggregate Factors:		Member 4	\$		Member 4	\$	67,512.1				
			EO:	\$	540.35	Member 5	\$		Member 5	\$	
Aggregate Premium:	\$	5.56	EF:	S	1.257.48						

831,267.32

921,944.67

1,127,295,29

Lasers:

17-Jul

17-Aug

17-Sep

17-Oct

17-Nov 17-Dec 255

253

258

257

365 71 447

365 75 445

358 76 448

359 76

Laser 1 \$ 300,000.00 (contingent) Minimum Attachment Point:

Laser 2 \$ 525,000.00

15,169,653.24

533,904.44

799,483.63

446 \$ 1,002,108.96 \$

623,222.72 \$

297,362.88

327,811.66 \$

298,721.95 \$

321,278.03 \$ 1,323,386.99

Year to Date Loss Ratio:

65.98%

831,267.32

1,127,295.29

1,323,386.99

859,595.63

1,248,144.09 \$

1,249,578.35 \$

1,248,507.66 \$

1,246,709.83

21,995.00 \$

22,270.00

22,830.00 \$ 32,854.00

24,810.00 \$ 32,966.00

32,936.00

\$ 32,880.00

54,931.00 \$ 67,688.34 \$ 6,338.40

55,684.00 \$ 67,771.56 \$ 6,321.72

\$ 68,038.66 \$ 6,327.28

\$ 67,464.04 \$ 6,343.96

55,150.00

57,776.00

Laser 3 *The Exclusions under Aggregate are the claims above \$210,000 for those members who are lasered and any Aggregating Specific amount.