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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January 13, 2016

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 12/31/15. If you have any further questions, please contact this office at 501-618-8720.

Thank you

Sincerely,

Lt. Mike Kennedy
Administrative Services Division

Arkansas State Police Uniformed Health Plan
Fund Balance-December 2015

DESCRIPTION	MONTH END 12/31/15	ACTUAL YEAR TO DATE
BEGINNING FUND BALANCE:	**$2,586,966.98**	**$3,633,461.00**
PLUS RECEIPTS:		
Active Employees	582,910.00	7,581,860.00
Active Dental/Vision	56,096.10	489,083.57
Retirees	113,944.13	1,372,140.17
COBRA	2,489.02	9,523.57
Act 1500 DL Fees	211,998.53	3,035,540.10
Refunds & Voids	0.00	5,053.71
Interest Earned	884.92	9,165.20
Other-Stop Loss	0.00	493,110.99
Other-Retiree Drug Subsidy	17,654.64	271,542.87
Other-Drug Card Rebate		281,943.21
Other-LWOP Premiums	0.00	0.00
Other-Suspension Premiums	126.06	252.12
Other-Additional Premiums	0.00	0.00
SUBTOTAL RECEIPTS:	986,103.40	13,549,215.51
FUND BALANCE AVAILABLE:	$3,573,070.38	$17,182,676.51
LESS DISBURSEMENTS:		
Health, Dental & Vision Claims	1,249,953.84	13,498,203.97
Reinsurance Premiums	63,740.46	762,319.77
QualChoice/LDIRX	30,999.00	373,138.00
Delta Dental Admin.	4,092.62	48,924.33
DataPath Admin.	856.50	10,225.50
Part D Advisors	4,413.66	67,885.73
Miscellanous-Premium Refund	0.00	3,244.91
Other-Hatcher Agency	0.00	14,500.00
Other-Transitional Reinsurance Fee	0.00	185,220.00
Other-Professional Svc(GASB report)	0.00	0.00
SUBTOTAL DISBURSEMENTS:	$1,354,056.08	$14,963,662.21
ENDING FUND BALANCE:	**$2,219,014.30**	**$2,219,014.30**
CERTIFICATES OF DEPOSIT	$5,000,000.00	5,000,000.00
TOTAL FUND BALANCE	**$7,219,014.30**	**$7,219,014.30**

MO/YR	Dental/Vision Employees				Dental Claims Paid	Vision Claims Paid	Total Claims Paid
	EE	ES	EC	FAM			
JAN	170	204	58	278	$ 43,096.95	$ 6,495.00	$ 49,591.95
FEB	170	203	58	274	$ 35,541.40	$ 5,340.00	$ 40,881.40
MAR	171	201	60	273	$ 42,957.05	$ 4,654.00	$ 47,611.05
APR	170	201	60	272	$ 45,028.52	$ 5,646.50	$ 50,675.02
MAY	181	202	61	279	$ 38,428.29	$ 2,638.00	$ 41,066.29
JUN	183	200	62	276	$ 42,758.56	$ 4,752.00	$ 47,510.56
JUL	184	200	62	275	$ 48,772.35	$ 7,094.74	$ 55,867.09
AUG	184	199	62	275	$ 38,903.71	$ 4,741.95	$ 43,645.66
SEP	184	197	61	273	$ 39,154.00	$ 4,514.10	$ 43,668.10
OCT	183	198	62	272	$ 35,751.97	$ 4,492.47	$ 40,244.44
NOV	181	197	60	275	$ 30,243.65	$ 3,675.50	$ 33,919.15
DEC	181	199	60	274	$ 38,416.11	$ 3,867.50	$ 42,283.61
Totals					$ 479,052.56	$ 57,911.76	$ 536,964.32

Arkansas State Police
2015 Total Medical & RX Cash Flow Report
Plan Year 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	11	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	Addl Fees Eligible for 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
15-Jan	225	357	72	466	$ 614,058.15	$ 300,403.01	**$ 914,461.16**	$ -	$ -	$ -	$ -	$ 914,461.16	$ 1,200,216.30	$ 9,927.50	$ 30,867.50	**$ 40,795.00**	$ 59,471.92	$ 4,140.14	**$ 63,612.06**	**$ 1,018,868.22**
15-Feb	228	354	73	463	$ 640,728.01	$ 316,716.44	**$ 957,444.45**	$ -	$ -	$ -	$ -	$ 957,444.45	$ 1,195,747.80	$ 8,904.50	$ 30,840.50	**$ 39,745.00**	$ 59,405.60	$ 4,139.49	**$ 63,545.09**	**$ 1,060,734.54**
15-Mar	228	354	74	461	$ 773,884.11	$ 334,857.80	**$ 1,108,741.91**	$ -	$ -	$ -	$ -	$ 1,108,741.91	$ 1,194,538.86	$ 9,700.00	$ 30,621.00	**$ 40,321.00**	$ 55,159.35	$ 4,155.24	**$ 59,314.59**	**$ 1,208,377.50**
15-Apr	225	355	75	460	$ 671,095.49	$ 423,742.84	**$ 1,094,838.33**	$ -	$ -	$ -	$ -	$ 1,094,838.33	$ 1,194,171.60	$ 9,459.00	$ 30,621.00	**$ 40,080.00**	$ 55,157.70	$ 4,147.80	**$ 59,305.50**	**$ 1,194,223.83**
15-May	225	354	75	460	$ 449,613.81	$ 293,950.50	**$ 743,564.31**	$ -	$ -	$ -	$ -	$ 743,564.31	$ 1,192,962.66	$ 9,364.00	$ 30,718.00	**$ 40,082.00**	$ 55,100.67	$ 4,144.08	**$ 59,244.75**	**$ 842,891.06**
15-Jun	241	356	76	469	$ 653,550.56	$ 318,036.96	**$ 971,587.52**	$ -	$ -	$ -	$ -	$ 971,587.52	$ 1,215,876.34	$ 9,400.00	$ 30,437.50	**$ 39,837.50**	$ 58,630.40	$ 4,084.83	**$ 62,715.23**	**$ 1,074,140.25**
15-Jul	244	357	73	467	$ 688,270.50	$ 325,779.55	**$ 1,014,050.05**	$ -	$ -	$ -	$ -	$ 1,014,050.05	$ 1,212,616.78	$ 9,463.00	$ 32,164.00	**$ 41,627.00**	$ 60,616.61	$ 4,120.08	**$ 64,736.69**	**$ 1,120,413.74**
15-Aug	241	357	75	465	$ 502,877.42	$ 485,465.49	**$ 988,342.91**	$ -	$ -	$ -	$ -	$ 988,342.91	$ 1,211,040.58	$ 9,170.00	$ 31,492.00	**$ 40,662.00**	$ 59,758.24	$ 4,221.36	**$ 63,979.60**	**$ 1,092,984.51**
15-Sep	242	356	73	465	$ 1,132,590.32	$ 294,873.12	**$ 1,427,463.44**	$ -	$ -	$ 83,104.87	$ -	$ 1,427,463.44	$ 1,207,939.16	$ 9,170.00	$ 31,492.00	**$ 40,662.00**	$ 59,540.28	$ 4,195.53	**$ 63,735.81**	**$ 1,531,861.25**
15-Oct	237	359	75	464	$ 761,575.51	$ 326,069.80	**$ 1,087,645.31**	$ 84,118.66	$ -	$ 169,762.79	$ -	$ 1,003,526.65	$ 1,210,147.92	$ 9,808.50	$ 31,300.50	**$ 41,109.00**	$ 59,606.80	$ 4,191.84	**$ 63,798.64**	**$ 1,192,552.95**
15-Nov	238	360	70	465	$ 981,235.75	$ 322,650.93	**$ 1,303,886.68**	$ 192,464.00	$ -	$ 25,441.20	$ -	$ 1,111,422.68	$ 1,207,046.50	$ 9,530.00	$ 31,170.50	**$ 40,700.50**	$ 59,336.97	$ 4,180.77	**$ 63,517.74**	**$ 1,408,104.92**
15-Dec	239	361	71	465	$ 837,595.38	$ 339,896.17	**$ 1,177,491.55**	$ 146,903.94	$ -	$ -	$ -	$ -	$ 1,209,989.78	$ -	$ -	**$ -**	$ 55,830.75	$ 4,225.92	**$ 60,056.67**	**$ 1,237,548.22**
TOTALS:					$ 8,707,075.01	$ 4,082,442.61	**$ 12,789,517.62**	$ 423,486.60	$ -	$ 278,308.86	$ -	$ 11,335,443.41	$ 14,452,294.28	$ 103,896.50	$ 341,724.50	**$ 445,621.00**	$ 697,615.29	$ 49,947.08	**$ 747,562.37**	**$ 13,982,700.99**
Less Total Specific Reimbursements to date																				**$ -**
Total Plan Costs:																				**$ 13,982,700.99**

Specific Contract: 24/12 Medical & RX **Specific Rates:**

Specific Deductible: $ 210,000.00 EO: $ 19.02

Aggregating Specific $ 140,000.00 EF: $ 61.43

Aggregate Contract: 24/12 Medical & RX **Aggregate Factors:**

EO: $ 525.40

Aggregate Premium: $ 3.69 EF: $ 1,208.94

Specific Reimbursements:

Member 1 $ -

Member 2 $ -

Member 3 $ -

Lasers:

Laser 1 $ 275,000.00

Laser 2 $ 350,000.00 (contingent)

Laser 3 $ 525,000.00

Minimum Attachment Point: $ 14,402,595.60

Year to Date Loss Ratio: 78.70%

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