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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ARKANSAS STATE POLICE COMMISSION

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December 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 11/30/09. If you have any further questions, please contact this office at 501-618-8720. Thank you.

Sincerely,

Kathy D. Sparks

Kathy D. Sparks, Major
Administrative Services Division

KS/ma

Arkansas State Police
Uniformed Employee Health Plan
November 2009

DESCRIPTION	MONTH END 11/30/09	ACTUAL YEAR TO DATE
BEGINNING FUND BALANCE:	**$6,405,883.81**	**$6,650,180.41**
PLUS RECEIPTS:		
Active Employees	480,670.00	5,646,466.00
Active Dental/Vision	30,496.01	373,091.71
Retirees	95,279.74	1,130,636.73
COBRA	1,335.00	19,172.50
Act 1500 DL Fees	235,389.85	2,611,952.06
Refunds & Voids	620.04	121,629.30
Interest Earned	418.74	11,091.86
Other/Retiree Drug Subsidy/Reimbursements/Rebates	145,682.27	523,644.10
Other/Stop Loss/Suspension premium	870.00	473,150.29
SUBTOTAL RECEIPTS:	990,761.65	10,910,834.55
FUND BALANCE AVAILABLE:	$7,396,645.46	$17,561,014.96
LESS DISBURSEMENTS:		
Health Claims	$995,656.21	$10,555,049.76
Reinsurance Premiums	33,732.90	351,367.80
CoreSource Administration	26,544.12	301,051.94
Miscellaneous/Refunds	3,370.00	16,203.23
SUBTOTAL DISBURSEMENTS:	1,059,303.23	11,223,672.73
ENDING BALANCE:	**$6,337,342.23**	**$6,337,342.23**

ARKANSAS STATE POLICE - Total Group

1	2	3	4	5	6	7	8
	DENTAL/VISION EMPLOYEES				DELTA DENTAL	VISION	TOTAL Dental/Vision
MO./YR.	SINGLE	ES	EC	FAMILY	CLAIMS	CLAIMS	CLAIMS
Jan-09	135	195	42	256	34,957	7,473	42,430
Feb-09	136	195	41	257	40,250	11,019	51,269
Mar-09	137	195	41	256	41,773	12,499	54,272
Apr-09	138	191	41	256	46,702	8,001	54,703
May-09	136	195	42	252	37,909	9,089	46,998
Jun-09	135	194	41	255	36,142	8,874	45,016
Jul-09	132	196	41	256	36,409	10,509	46,918
Aug-09	130	197	40	257	37,271	8,678	45,949
Sep-09	141	204	42	260	34,779	12,055	46,834
Oct-09	142	202	42	261	41,203	8,961	50,164
Nov-09	140	203	41	263	26,591	5,780	32,371
Dec-09	0	0	0	0	0	0	0
TOTALS:					413,986	102,938	516,924

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
	Medical/Rx Employees				EXPECTED	STOP LOSS	MEDICAL	DRUG CARD	TOTAL MED/RX	ELIGIBLE AGGREGATE	ADMIN	SPECIFIC	AGGREGATE	*OTHER	PPO FEES FROM	TOTAL
MO./YR.	SINGLE	ES	EC	FAMILY	CLAIMS	POINT	CLAIMS	CLAIMS	CLAIMS	CLAIMS	FEES	COST	COST	FEES	INVOICE	COST
Jan-09	198	362	65	410	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	361	64	409	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	361	64	408	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	357	62	410	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	362	63	406	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	362	62	409	770,156	924,187	1,001,151	157,046	1,158,197	1,160,998	15,869	30,719	2,306	12,071	5,516	1,224,678
Jul-09	198	363	61	412	771,755	926,106	865,881	187,986	1,053,867	1,061,758	15,875	30,774	2,306	16,517	5,524	1,124,862
Aug-09	195	362	60	412	769,112	922,934	522,862	161,718	684,580	686,161	15,907	30,662	2,295	21,325	5,536	760,304
Sep-09	204	370	63	417	785,526	942,631	999,948	183,036	1,182,984	1,192,772	15,891	31,330	2,350	25,998	5,530	1,264,083
Oct-09	205	368	62	419	784,993	941,991	514,762	182,834	697,596	698,099	16,265	31,312	2,350	12,600	5,679	765,802
Nov-09	203	370	63	419	786,907	944,289	843,720	103,250	946,970	949,635	16,232	31,381	2,353	13,957	5,666	1,016,559
Dec-09	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTALS:					8,517,749	10,221,299	7,834,792	1,894,002	9,728,794	9,687,329	175,422	339,710	25,482	187,708	61,049	10,518,166
CLAIMS ELIGIBLE FOR SPECIFIC REINSURANCE:										-465,671						-465,671
										9,221,658						10,052,495

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)