



**Mike Beebe**  
Governor

## State of Arkansas

# ARKANSAS STATE POLICE

1 State Police Plaza Drive Little Rock, Arkansas 72209-4822 [www.asp.arkansas.gov](http://www.asp.arkansas.gov)

*"SERVING WITH PRIDE AND DISTINCTION SINCE 1935"*



**Winford E. Phillips**  
Director

### ARKANSAS STATE POLICE COMMISSION

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March 9, 2010

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 2/28/10. If you have any further questions, please contact this office at 501-618-8713.

Thank you.

Sincerely,

Kathy D. Sparks, Major  
Administrative Services Division

KD/jc

# Arkansas State Police Uniformed Employee Health Plan February 2010

DESCRIPTION	MONTH END 2/28/10	ACTUAL YEAR TO DATE
<b>BEGINNING FUND BALANCE:</b>	<b>\$2,852,596.68</b>	<b>\$2,425,954.23</b>
<b>PLUS RECEIPTS:</b>		
Active Employees	480,670.00	961,340.00
Active Dental/Vision	15,949.30	62,075.73
Retirees	97,656.65	282,265.78
COBRA	943.52	1,623.87
Act 1500 DL Fees	243,194.51	475,775.26
Refunds & Voids	16,271.55	21,592.65
Interest Earned	2,081.25	4,245.17
Other-Retiree Drug Subsidy/Reimbursements/ Rebates	83,022.83	258,598.47
Other-Stop Loss/Suspension premium	105,668.99	105,768.99
<b>SUBTOTAL RECEIPTS:</b>	<b><u>1,045,458.60</u></b>	<b><u>2,173,285.92</u></b>
<b>FUND BALANCE AVAILABLE:</b>	<b><u>\$3,898,055.28</u></b>	<b><u>\$4,599,240.15</u></b>
<b>LESS DISBURSEMENTS:</b>		
Health Claims	\$578,480.20	\$1,204,784.50
Reinsurance Premiums	48,103.87	\$96,329.64
UMR Administration	9,868.80	\$21,673.60
Delta Dental Admin.	2,387.25	\$2,387.25
DataPath Administration	788.25	\$788.25
Part D Advisors	2,981.79	\$2,981.79
Other	0.00	\$14,500.00
Miscellaneous/Refunds	5,670.00	\$6,020.00
<b>SUBTOTAL DISBURSEMENTS:</b>	<b><u>648,280.16</u></b>	<b><u>1,349,465.03</u></b>
<b>ENDING FUND BALANCE:</b>	<b><u>\$3,249,775.12</u></b>	<b><u>\$3,249,775.12</u></b>
<b>CERTIFICATE OF DEPOSITS</b>	<b>\$3,000,000.00</b>	<b>\$3,000,000.00</b>
<b>TOTAL FUND BALANCE</b>	<b><u>\$6,249,775.12</u></b>	<b><u>\$6,249,775.12</u></b>

## Delta Dental

MO/YR	Dental/Vision Employees				Dental Claims Paid	Vision Claims Paid	Total Claims Paid
	EE	ES	EC	FAM			
Jan '10	144	195	41	277	\$ 35,769.73	\$1,063.00	\$ 36,832.73
Feb '10	141	196	42	269	\$ 40,064.74	\$ 3,054.15	\$ 43,118.89
March '10							\$ -
April '10							\$ -
May '10							\$ -
June '10							\$ -
July '10							\$ -
Aug '10							\$ -
Sept '10							\$ -
Oct '10							\$ -
Nov '10							\$ -
Dec '10							\$ -
Totals					\$ 75,834.47	\$4,117.15	\$ 79,951.62

# UMR

## 2010 Total Med/Rx

[illegible]

Case Number: ASP0001

**Claims Processed Summary**

State Date: 02/01/2010

End Date: 02/28/2010

Claim Type	Relationship	Original Charge	Charge	Inel	Deduct	Co-Insurance	COB	Per Charge Deduct	Paid By Us
01	CHILD	\$44,203.90	\$41,034.81	\$16,187.57	\$147.73	\$3,851.38	\$2,056.03	\$360.00	\$20,488.13
	SELF	\$769,474.85	\$752,789.54	\$553,395.95	\$7,573.00	\$136,238.88	\$106,099.11	\$1,788.17	\$53,793.54
	SPOUSE	\$282,414.29	\$247,282.78	\$144,594.01	\$3,689.63	\$44,196.20	\$29,531.49	\$2,266.67	\$52,536.27
05	CHILD	\$594.00	\$581.09	\$508.00	\$0.00	\$21.93	\$0.00	\$0.00	\$51.16
	SELF	\$2,195.32	\$2,049.81	\$465.86	\$60.00	\$457.18	\$0.00	\$0.00	\$1,066.77
	SPOUSE	\$1,975.00	\$1,958.00	\$938.86	\$0.00	\$305.74	\$0.00	\$0.00	\$713.40
MP	SELF	\$706.98	\$706.98	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$706.98
		<b>\$1,101,564.34</b>	<b>\$1,046,403.01</b>	<b>\$716,090.25</b>	<b>\$11,470.36</b>	<b>\$185,071.31</b>	<b>\$137,686.63</b>	<b>\$4,414.84</b>	<b>\$129,356.25</b>