

eServices Customer Reporting
Sample Report Package
Automated Reports

Reports by Service Level

REPORT NAME	STANDARD
Financial	
Claim Expenses by Size of Payment	<input type="checkbox"/>
Claim Lag Study	<input type="checkbox"/>
Detail Payment †	<input type="checkbox"/>
Large Loss Claim Payments †	<input type="checkbox"/>
Payments by Benefit Type	<input type="checkbox"/>
Payments By Month	<input type="checkbox"/>
Premium vs Claims Incurred Including IBNR ±	<input type="checkbox"/>
Managed Pharmacy	
Managed Pharmacy Plan Performance	<input type="checkbox"/>
Medical	
Claim Experience	<input type="checkbox"/>
Healthcare Cost Management Summary	<input type="checkbox"/>
HRA Plan Design Status ♦	<input type="checkbox"/>
HRA Plan Sponsor Statement of Position ♦	<input type="checkbox"/>
HRA Termed Balance ♦	<input type="checkbox"/>
Network Utilization	<input type="checkbox"/>
Membership	
Membership By Month	<input type="checkbox"/>

Automated Reports are system generated on a prearranged schedule using fixed date and data parameters

± Report includes information for fully insured funding only

† Report includes information for ASO funding only

♦ Report includes HRA plan information

Financial

Claim Expenses by Size of Payment

Payment Category	Metrics	Number of Claimants	% Claimants	Payments	% Payments
Total		2,043	100.0%	\$3,028,750.32	100.0%
<\$.01		19	0.9%	(\$4,365.19)	(0.1%)
\$.01-\$49		195	9.5%	5,472.25	0.2%
\$50-\$99		202	9.9%	\$14,834.39	0.5%
\$100-\$249		420	20.6%	\$69,991.81	2.3%
\$250-\$499		380	18.6%	\$135,179.03	4.5%
\$500-\$999		302	14.8%	\$215,372.49	7.1%
\$1,000-\$2,499		324	15.9%	\$503,095.44	16.6%
\$2,500-\$4,999		103	5.0%	\$361,542.33	11.9%
\$5,000-\$9,999		52	2.5%	\$363,521.02	12.0%
\$10,000-\$14,999		22	1.1%	\$257,225.76	8.5%

Claim Lag Study

Book Year/Month	Metrics Service Year/Month	Payments						Total
		2008-01	2008-02	2008-03	2008-04	2008-05	2008-06	
2008-01		\$111,394	\$0	\$0	\$0	\$0	\$0	\$111,394
2008-02		\$216,056	\$167,146	\$0	\$0	\$0	\$0	\$383,202
2008-03		\$64,015	\$350,339	\$135,190	\$0	\$0	\$0	\$549,544
2008-04		\$8,916	\$37,311	\$303,377	\$166,481	\$0	\$0	\$516,086
2008-05		\$10,550	\$18,506	\$18,923	\$258,669	\$182,371	\$0	\$489,019
2008-06		\$2,222	\$6,085	\$21,927	\$19,803	\$250,822	\$185,902	\$486,760
Total		\$413,152	\$579,387	\$479,417	\$444,953	\$433,193	\$185,902	\$2,536,004

Detail Payment

Subscriber Number	Subscriber Name	Claimant First Name	Relationship	Employment Status	Medicare Status	Benefit Type	Payment Type	Series Designator	Check Number	Service Day	Issue Day	Charge Day	Medicare	Payments					
00011111111	LASTNAME, A.	ANAME	Subscriber	Active	Non-Medicare	Medco Health	Other Payments, Standard	NN	00999903	2/2/2004	26-FEB-04	20-FEB-04		\$18.02					
																	\$11.76		
																		\$47.19	
						Outpatient/Professional Medical	Other Payments, Standard	VE	10000001	2/2/2004	20-FEB-04	23-FEB-04		\$46.40					
																		\$34.93	
			Total											\$158.30					
	Total														\$158.30				
00011111112	LASTNAME, B.	BNAME	Subscriber	Active	Non-Medicare	Medco Health	Other Payments, Standard	NN	00999902	1/26/2004	12-FEB-04	06-FEB-04		\$34.45					
																	\$37.39		
																		\$1.14	
																			\$37.39
																			\$34.45
					Total											\$144.82			
		XNAME	Spouse	Active	Non-Medicare	Medco Health	Other Payments, Standard	NN	00999901	12/22/2003	15-JAN-04	09-JAN-04			\$55.22				
																	\$18.26		
																		\$51.42	
																		\$48.77	
						Outpatient X-Ray and Lab	Other Payments, Standard	VE	12000021	4/26/2004	07-MAY-04	10-MAY-04		\$114.59					
															\$20.30				
					Total											\$308.56			
		YNAME	Child	Active	Non-Medicare	Medco Health	Other Payments, Standard	NN	00999909	3/25/2004	08-APR-04	02-APR-04			\$6.50				
																	\$43.28		
Outpatient/Professional Medical	Other Payments, Standard					VE	30000003	3/25/2004	12-APR-04	13-APR-04		\$43.28							
Student	Other Payments, Standard					VE	20000002	2/16/2004	08-MAR-04	09-MAR-04		\$43.28							
																\$93.06			
			Total											\$93.06					
ZNAME	Child	Active	Non-Medicare	Medco Health	Other Payments, Standard	NN	00999913	5/6/2004	20-MAY-04	14-MAY-04			\$61.71						
															\$44.89				
				Outpatient/Professional Medical	Other Payments, Standard	VF	01000001	5/6/2004	28-MAY-04	01-JUN-04		\$44.89							
			Total											\$106.60					
	Total													\$653.04					
Total														\$3,273,298.92					

Large Loss Claim Payments

Claimant	Relationship	Subscriber	Employment Status	Medicare Status	Policy Number	Suffix	Account	Product	HMO Account Division	Payments
First name	Child	0000000012 LASTNAME, X.	Not Active	Non- Medicare	000001234	AB	1	POS Select Plus (POS)	UNITED HEALTHCARE INC.	\$231,861.76
	Total									\$231,861.76
First name	Child	00000300123 LASTNAME, X.	Not Active	Non-Medicare	000001234	AB	1	POS Select Plus (POS)	UNITED HEALTHCARE INC.	\$4,443.58
First name	Total									\$4,443.58
First name	Other Dependent	00000001234 LASTNAME, X.	Not Active	Non-Medicare	000001234	AC	1	POS Select Plus (POS)	UNITED HEALTHCARE INC.	\$166.597.75
First name	Total									\$166.597.75
First name	Spouse	00000012345 LASTNAME, X.	Active	Non-Medicare	000001234	AB	1	POS Select Plus (POS)	UNITED HEALTHCARE INC.	\$102,951.52
First name	Total									\$102,951.52
Total										\$505,854.61

Payments by Benefit Type

Benefit Type		Relationship Group	Subscriber	Spouse	Dependent/Other	Total
		Metrics	Payments	Payments	Payments	Payments
50	Dental		\$83,151.90	\$64,115.31	\$68,766.18	\$216,033.39
70	Orthodontia		\$0.00	\$0.00	\$8,669.29	\$8,669.29
200	Medco Health		\$351,820.43	\$218,479.41	\$112,327.41	\$682,627.25
260	Inpatient Hospital Room & Board		\$92,086.43	\$40,053.51	\$56,042.84	\$188,182.78
270	Inpatient Hospital Miscellaneous		\$336,389.41	\$94,304.29	\$31,004.03	\$461,697.73
300	Outpatient Hospital Miscellaneous		\$123,245.79	\$126,805.98	\$71,471.47	\$321,523.24
310	Emergency Room		\$34,311.85	\$19,655.80	\$20,616.91	\$74,584.56
320	Surgery		\$79,494.60	\$88,983.14	\$28,898.83	\$197,376.57
330	Anesthesia		\$28,999.63	\$20,529.74	\$6,595.97	\$56,125.34
350	Assistant Surgical		\$10,909.06	\$1,453.11	\$97.53	\$12,459.70
360	Inpatient Medical		\$19,294.39	\$2,400.78	\$14,588.36	\$36,283.53
380	Other Medical		\$9,095.17	\$261.14	\$1,077.58	\$10,433.89
390	Chemotherapy		\$127.18	\$4,399.91	\$789.11	\$5,316.20
400	Radiation Therapy		\$10,490.98	\$53.84	\$0.00	\$10,544.82
410	Outpatient X-Ray and Lab		\$197,836.80	\$121,870.14	\$52,511.69	\$372,218.63
420	Outpatient Psychiatric		\$7,369.57	\$9,068.03	\$6,776.30	\$23,213.90
450	Comprehensive Medical Expenses		\$33,353.46	\$96.04	\$109.13	\$33,558.63
470	Supplemental Accident		\$7,251.83	\$5,189.65	\$15,177.14	\$27,618.62
Total			\$1,628,755.97	\$970,515.94	\$654,695.40	\$3,253,967.31

Payments by Month

Book Year/Month	Benefit Payment Metrics	Medical Payments	Managed Pharmacy Payments	Dental Payments	Capitation Payments	Total Payments
2008-01		\$317,226	\$91,715	\$31,602	\$3,399	\$443,943
2008-02		\$350,872	\$101,771	\$28,873	\$3,276	\$484,792
2008-03		\$513,536	\$109,514	\$39,833	\$3,179	\$666,062
2008-04		\$383,653	\$168,086	\$44,186	\$3,294	\$599,218
2008-05		\$394,700	\$106,412	\$32,445	\$3,252	\$536,810
2008-06		\$386,409	\$105,128	\$47,764	\$3,172	\$542,474
Total		\$2,346,397	\$682,627	\$224,703	\$19,572	\$3,273,299

Premium vs Claims Incurred Including IBNR - Underwriting - Non-Standard

Year/Month	Members	Subscribers	Premium	Premium PMPM	Medical Payments	Capitation Payments	Managed Pharmacy Payments	Total Payments	Claims to Premium Ratio	Total Payments PMPM	12 Month Rolling Average PMPM
2008-01	165,814	64,789	\$46,448,856	\$280.13	\$26,920,205	\$3,907,394	\$8,214,718	\$39,042,318	84.1%	\$235.46	\$270.69
2008-02	164,912	64,945	\$45,894,116	\$300.67	\$27,974,798	\$3,903,596	\$8,015,982	\$39,894,376	86.9%	\$261.36	\$273.63
2008-03	163,541	63,127	\$45,827,494	\$300.72	\$27,655,783	\$3,895,226	\$8,450,951	\$40,001,960	87.3%	\$262.49	\$274.83
2008-04	164,236	63,879	\$45,737,844	\$300.85	\$28,311,318	\$3,885,077	\$8,405,053	\$40,601,448	88.8%	\$267.06	\$278.66
2008-05	168,784	64,984	\$47,134,940	\$310.54	\$29,026,484	\$3,876,716	\$8,654,564	\$41,557,765	88.2%	\$273.79	\$283.09
2008-06	164,222	65,632	\$47,086,836	\$310.59	\$28,015,983	\$3,860,405	\$8,410,831	\$40,287,219	85.6%	\$265.74	\$284.28
2008-07	163,124	64,124	\$46,410,000	\$306.17	\$31,129,666	\$3,861,036	\$8,632,570	\$43,623,272	94.0%	\$287.79	\$286.79
2008-08	165,219	63,555	\$46,949,332	\$310.07	\$29,762,108	\$3,847,580	\$8,598,165	\$42,207,853	89.9%	\$278.76	\$288.46
2008-09	164,547	64,875	\$46,860,841	\$310.44	\$29,681,554	\$3,835,691	\$8,761,837	\$42,279,081	90.2%	\$293.52	\$290.04
2008-10	167,945	65,845	\$46,281,210	\$307.49	\$31,211,241	\$3,825,585	\$9,141,693	\$44,178,519	95.5%	\$280.09	\$291.84
2008-11	166,457	66,901	\$46,773,474	\$311.80	\$27,498,190	\$3,822,505	\$8,455,999	\$39,776,694	85.0%	\$280.86	\$293.07
2008-12	167,855	65,974	\$46,731,337	\$311.75	\$28,739,275	\$3,815,958	\$9,539,989	\$42,095,222	90.1%	\$265.11	\$294.71

Total by Experience Period

Current Period	1,687,165	710,836	\$537,767,671	\$355,547,178	\$41,603,325	\$101,786,721	\$498,937,225	92.8%	\$295.73
Prior Period	1,830,646	5,035,670	\$558,136,281	\$345,924,044	\$46,336,770	\$103,282,353	\$495,543,167	88.8%	\$270.69

Average Membership/PMPM Premium and Payments by Experience Period

Current Period	140,597	59,236	\$318.74	\$210.74	\$24.66	\$60.33	\$295.73
Prior Period	152,554	419,639	\$304.88	\$188.96	\$25.31	\$56.42	\$270.69

% Change

Current Period vs Prior Period	(7.8%)	(85.9%)	4.5%	11.5%	(2.6%)	6.9%	9.2%
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Managed Pharmacy

Managed Pharmacy Plan Performance

Tier Level	Submission Method Category	Number of Claimants	Number of Prescriptions	Discounts	Ingredient Cost Paid Amount	Dispensing Fee	Sales Tax Amount	Deductible	Coinsurance/Copay	Ancillary Amount	Employee Cost Sharing PMPM	Net Paid	Net Paid Per Prescription	Net Paid PMPM
Tier 1	Retail	1,109	4,470	\$89,543	\$75,368	\$9,451	\$222	\$0	\$32,223	\$0	\$2.28	\$52,817	\$11.82	\$3.74
	Home Delivery	71	204	\$12,819	\$10,829	\$0	\$6	\$0	\$3,237	\$0	\$0.23	\$7,598	\$37.24	\$0.54
Tier 2	Retail	1,080	5,300	\$107,443	\$527,314	\$9,414	\$865	\$0	\$81,966	\$0	\$5.80	\$55,627	\$85.97	\$32.25
	Home Delivery	136	450	\$29,856	\$92,985	\$0	\$34	\$0	\$18,341	\$0	\$1.30	\$74,678	\$165.95	\$5.29
Tier 3	Retail	642	1,824	\$33,497	\$166,146	\$3,183	\$438	\$0	\$53,713	\$0	\$3.80	\$16,053	\$63.63	\$8.21
	Home Delivery	52	101	\$5,908	\$18,757	\$0	\$13	\$0	\$6,720	\$0	\$0.48	\$12,050	\$119.31	\$0.85

Detail

Tier Level	Number of Claimants	Number of Prescriptions	Discounts	Ingredient Cost Paid Amount	Dispensing Fee	Sales Tax Amount	Deductible	Coinsurance/Copay	Ancillary Amount	Employee Cost Sharing PMPM	Net Paid	Net Paid Per Prescription	Net Paid PMPM
Tier 1	1,135	4,674	\$102,362	\$86,196	\$9,451	\$228	\$0	\$35,460	\$0	\$2.51	\$60,415	\$12.93	\$4.28
Tier 2	1,146	5,750	\$137,298	\$620,300	\$9,414	\$899	\$0	\$100,307	\$0	\$7.10	\$530,306	\$92.23	\$37.54
Tier 3	676	1,925	\$39,404	\$184,903	\$3,183	\$450	\$0	\$60,433	\$0	\$4.28	\$128,103	\$66.55	\$9.07

Subtotals by Tier

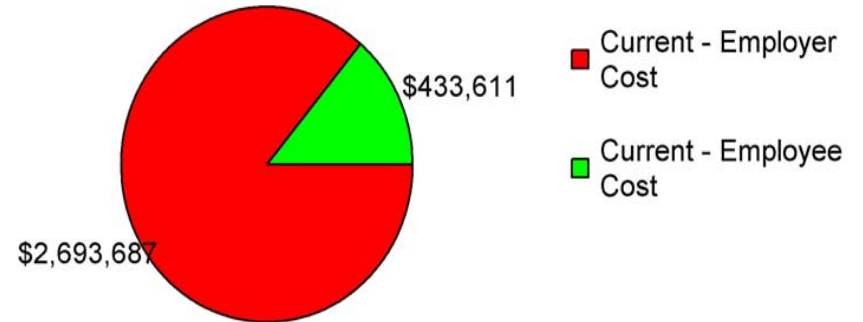
Metrics	Number of Claimants	Number of Prescriptions	Discounts	Ingredient Cost Paid Amount	Dispensing Fee	Sales Tax Amount	Deductible	Coinsurance/Copay	Ancillary Amount	Employee Cost Sharing PMPM	Net Paid	Net Paid Per Prescription	Net Paid PMPM
	1,619	12,349	\$279,064	\$891,399	\$22,047	\$1,578	\$0	\$196,200	\$0	\$13.89	\$718,824	\$58.21	\$50.88

Total

Medical

Claim Experience

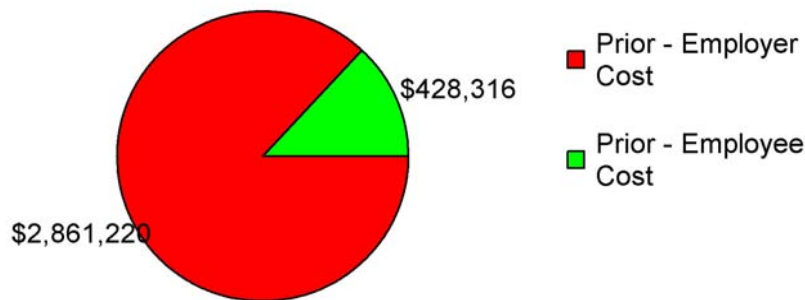
Metrics	Type of Coverage	Medical	Pharmacy
Prior - Average Number of Subscribers		875	811
Current - Average Number of Subscribers		951	912
% Change - Average Number of Subscribers		8.6%	12.5%
Prior - Average Number of Members		2,251	2,169
Current - Average Number of Members		2,402	2,355
% Change - Average Number of Members		6.7%	8.6%
Prior - Contract Size		2.57	2.67
Current - Contract Size		2.53	2.58
% Change - Contract Size		(1.8%)	(3.5%)



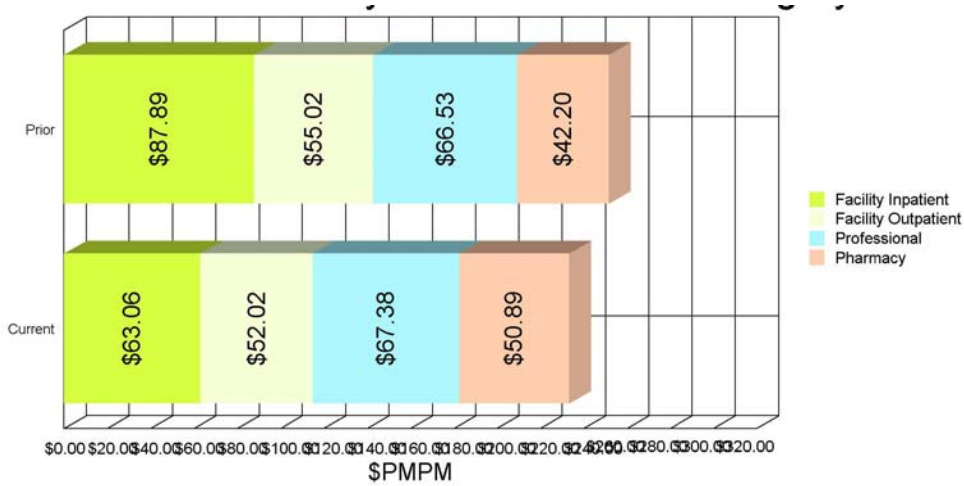
Metrics	Prior Employer Cost	Prior Employer Cost Sharing	Current Employer Cost	Current Employer Cost Sharing	% Change Employer Cost Sharing
	\$2,861,220	87.0%	\$2,693,687	86.1%	(1.0%)

Benefit Cost Sharing Detail

Enrollment Detail



Prior Benefit Cost Sharing (Prior to COB)



Note: Professional Consists of Primary Care, OB/GYN, Specialty and Allied Health

Claim Cost by Healthcare Cost Category

Healthcare Cost Category Rollup	Prior Total Net Paid	Current Total Net Paid	Prior - Net Paid PMPM	Current Net Paid PMPM	% Change Net Paid PMPM
1 Facility Inpatient	\$1,187,027	\$908,820	\$87.89	\$63.06	(28.2%)
2 Facility Outpatient	\$747,608	\$749,809	\$55.35	\$52.03	(6.0%)
3 Physician - Primary Care	\$201,937	\$219,713	\$14.95	\$15.25	2.0%
4 Physician - OB/GYN	\$48,464	\$85,142	\$3.59	\$5.91	64.6%
5 Physician - Specialty	\$531,352	\$566,519	\$39.34	\$39.31	(0.1%)
6 Allied Health	\$116,745	\$99,699	\$8.64	\$6.92	(20.0%)
7 Managed Pharmacy	\$544,779	\$718,824	\$41.87	\$50.88	21.5%
Total	\$3,377,912	\$3,348,526	\$251.64	\$233.36	(7.3%)

Claim Cost by Healthcare Cost Category Detail

Metrics	Prior - Total Capitation Net Paid	Current - Total Capitation Net Paid	Prior - Total Capitation Net Paid PMPM	Current - Total Capitation Net Paid PMPM	% Change Total Capitation Net Paid PMPM
		\$8,478	\$19,563	\$0.63	\$1.36

Other Claim Cost

Metrics	Prior Total Net Paid	Current Total Net Paid	Prior - Net Paid PMPM	Current Net Paid PMPM	% Change Net Paid PMPM
	\$3,386,390	\$3,368,089	\$252.27	\$234.72	(7.0%)

Total Costs

Healthcare Cost Category Detail	Metrics	Prior Number of Units	Current Number of Units	Prior Units per 1000	Current Units per 1000	Prior - Net Paid per Unit	Current Net Paid per Unit	% Change Units per 1000	% Change Net Paid per Unit
2 Facility Outpatient		5,201	4,947	2,310.5	2,059.7	\$143	\$152	(10.9%)	6.1%
3 Physician - Primary Care		2,542	2,641	1,129.3	1,099.6	\$79	\$83	(2.6%)	4.7%
4 Physician - OB/GYN		255	319	113.3	132.8	\$190	\$267	17.2%	40.4%
5 Physician - Specialty		1,476	1,702	655.7	708.6	\$360	\$333	8.1%	(7.5%)
6 Allied Health		249	272	110.6	113.2	\$469	\$367	2.4%	(21.8%)

Outpatient and Professional Utilization by Healthcare Cost Category

Diagnosis Chapter Rollup		Metrics	Prior Total Net Paid	Current Total Net Paid	Prior Net Paid PMPM	Current Net Paid PMPM	% Change Net Paid PMPM
1	CIRCULATORY SYSTEM		\$280,603	\$479,747	\$20.78	\$33.29	60.2%
2	NEOPLASMS		\$440,496	\$352,263	\$32.61	\$24.44	(25.1%)
3	INJURY AND POISONING		\$380,730	\$268,024	\$28.19	\$18.60	(34.0%)
4	MUSKULO CNCTV TISSUE		\$272,875	\$202,001	\$20.20	\$14.02	(30.6%)
5	GENITOURINARY SYSTEM		\$213,695	\$177,593	\$15.82	\$12.32	(22.1%)
6	DIGESTIVE SYSTEM		\$265,921	\$142,089	\$19.69	\$9.86	(49.9%)
7	RESPIRATORY SYSTEM		\$256,180	\$140,856	\$18.97	\$9.77	(48.5%)
8	NERVOUS SYS SENSE ORGANS		\$150,011	\$128,186	\$11.11	\$8.89	(19.9%)
Total			\$2,833,133	\$2,629,702	\$209.77	\$182.48	(13.0%)

Cost by Diagnosis Chapter

Metrics	
Prior - Number of Days	580
Current - Number of Days	360
Prior - Days per 1000	257.7
Current - Days per 1000	149.9
Prior - Net Paid per Day	\$2,069
Current - Net Paid per Day	\$2,690
% Change - Days per 1000	(41.8%)
% Change - Net Paid per Day	30.0%
Prior - Number of Admissions	81
Current - Number of Admissions	80
Prior - Admissions per 1000	36.0
Current - Admissions per 1000	33.3
Prior - Net Paid per Admission	\$14,819
Current - Net Paid per Admission	\$12,107
% Change - Admissions per 1000	(7.4%)
% Change - Net Paid per Admission	(18.3%)

Inpatient Utilization

Healthcare Cost Management Summary

Metrics	Physician Primary Care	Physician - OB/GYN	Physician - Specialty	Allied Health	Facility Inpatient	Facility Outpatient	Medical Pharmacy	Total
	Submitted Charges	\$460,902	\$253,332	\$1,280,446	\$248,791	\$1,870,877	\$1,686,926	
Savings Due to Ineligible Charges	\$49,256	\$69,940	\$142,543	\$39,023	\$200,392	\$174,598	\$1,063	\$676,815
Eligible Charges	\$411,646	\$183,392	\$1,137,903	\$209,768	\$1,670,485	\$1,512,328	\$226	\$5,125,748
Savings Due to Discounts	\$131,198	\$74,196	\$457,038	\$48,010	\$705,733	\$601,839	\$0	\$2,018,013
Covered Amount	\$280,447	\$109,196	\$680,866	\$161,758	\$964,752	\$910,490	\$226	\$3,107,735
Savings due to Deductibles	\$14,591	\$4,819	\$33,332	\$25,152	\$4,823	\$57,338	\$0	\$140,054
Savings due to Coinsurance	\$6,109	\$7,528	\$41,612	\$20,774	\$44,444	\$80,000	\$0	\$200,468
Savings due to Copays	\$37,697	\$4,949	\$22,910	\$14,340	\$0	\$13,193	\$0	\$93,088
Gross Payable	\$222,051	\$91,900	\$583,011	\$101,492	\$915,485	\$759,960	\$226	\$2,674,124
Other Savings	\$2,338	\$6,759	\$16,492	\$1,792	\$6,665	\$10,265	\$112	\$44,422
Net Paid	\$219,713	\$85,142	\$566,519	\$99,699	\$908,820	\$749,694	\$115	\$2,629,702
Net Paid PMPM	\$15.25	\$5.91	\$39.31	\$6.92	\$63.06	\$52.02	\$0.01	\$182.48
Net Paid as a % of Grand Total	8.4%	3.2%	21.5%	3.8%	34.6%	28.5%	0.0%	100.0%

HCCMS excluding Managed Pharmacy

Metrics	Submitted Charges	Savings Due to Discounts	Savings due to Deductibles	Savings Due to Coinsurance	Savings due to Copays	Net Paid	Net Paid PMPM	Net Paid as a % of Grand Total
	\$1,194,088	\$279,064	\$0	\$0	\$196,200	\$718,824	\$50.88	100.0%

HCCMS Managed Pharmacy Costs

Metrics	
Total Deductible as a % of Total Covered Amount	3.5%

Total Coinsurance as a % of Total Covered Amount	5.0%
Total Copay as a % of Total Covered Amount	7.2%
Total Gross Payable as a % of Total Covered Amount	84.3%
Total Other Savings as a % of Total Covered Amount	1.1%
Total Net Paid as a % of Total Covered Amount	83.2%
Submitted Charges	\$6,996,652
Savings Due to Ineligible Charges	\$676,815
Eligible Charges	\$6,319,837
Savings Due to Discounts	\$2,297,078
Covered Amount	\$4,022,759
Savings Due to Deductibles	\$140,054
Savings Due to Coinsurance	\$200,468
Savings Due to Copays	\$289,288
Gross Payable	\$3,392,948
Other Savings	\$44,422
Net Paid	\$3,348,526
Net Paid PMPM	\$233.36

Cost Sharing and Summary Statistics

HRA Plan Design Status

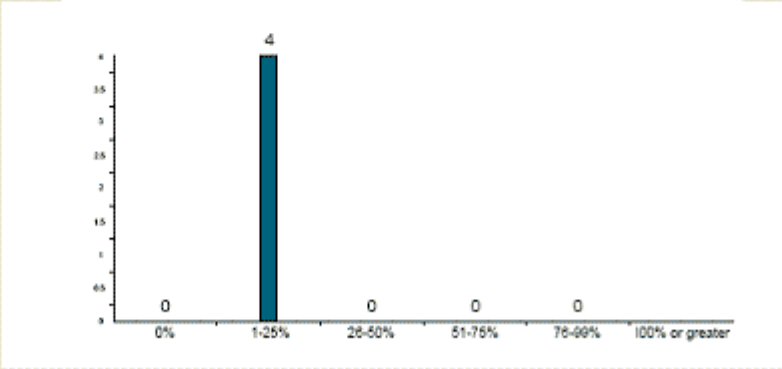
HRA Plan Design Status Summary - All Coverage Tiers & Plan Labels

Start Date: 01/2006 End Date: 08/2007

Health Reimbursement Account (HRA)

Explanation
 This report provides HRA utilization information for claims paid, given the report's date parameters, for all coverage tiers and plan labels.
 The table indicates the number and percentage of the employees and their HRA balances as a percentage of HRA contribution, given the report's date parameters. The graph displays the same information in a bar chart.
 The number of accounts includes only those accounts that are active as of the End Date of the report. Therefore, the number of accounts may not equal the number of subscribers listed on the membership reports.

Percent of HRA Contribution Remaining	Number of Accounts	Percent of Accounts
0%	0	0.00%
1-25%	4	100.00%
26-50%	0	0.00%
51-75%	0	0.00%
76-99%	0	0.00%
100% or greater	0	0.00%
Total	4	100.00%



HRA Plan Sponsor Statement of Position

Quarter/Year	Beginning Obligation	Initial Contribution Amount	Mid Year Contribution Amount	Termed Roll Off Amount	HRA Paid Amount	Remaining Obligation
1Q2008	\$46,846.51	\$37,000.00	\$21,426.17	\$0.00	\$9,694.75	\$96,077.93
2Q2008	\$96,577.93	\$0.00	\$19,000.00	\$750.00	\$9,641.12	\$107,686.81
3Q2008	\$107,686.81	\$0.00	\$17,800.00	\$650.00	\$9,585.77	\$115,251.04
4Q2008	\$115,251.04	\$0.00	\$26,768.68	\$7,419.21	\$17,762.50	\$551,139.59
Grand Total	\$46,846.51	\$37,000.00	\$84,994.85	\$8,819.21	\$46,684.14	\$551,139.59

HRA Termed Balance

Term Year Num	Term Month Num	Term Qtr Year	HRA Balance
2007	8	3QTR2007	\$400.00
2007	9	3QTR2007	\$1,850.00
2008	1	1QTR2008	\$2,012.00
2008	3	1QTR2008	\$1,150.00
2008	5	2QTR2008	\$1,250.00
2008	6	2QTR2008	\$500.00
2008	10	3QTR2008	\$975.00
2008	11	3QTR2008	\$76,040.06
Total			\$84,177.06

Network Utilization

Metrics	Network Benefit Level Provider Participation Status Category	Network Benefits - UHG Network			Non-Network Benefits			Neutral Benefits			Total
		UHC Network Provider	Non-UHC Network Provider	Total	UHC Network Provider	Non-UHC Network Provider	Total	UHC Network Provider	Non-UHC Network Provider	Total	
Prior - Eligible Charges		\$5,187,050	\$268,904	\$5,455,954	\$28,309	\$342,786	\$371,096	\$671	\$37,908	\$38,579	\$5,865,629
Prior - Eligible Charges as % of Total		88.4%	4.6%	93.0%	0.5%	5.8%	6.3%	0.0%	0.6%	0.7%	100.0%
Current - Eligible Charges		\$4,755,082	\$27,423	\$4,782,505	\$33,389	\$236,101	\$269,490	\$7,608	\$66,146	\$73,754	\$5,125,748
Current - Eligible Charges as % of Total		92.8%	0.5%	93.3%	0.7%	4.6%	5.3%	0.1%	1.3%	1.4%	100.0%
% Change - Eligible Charges		(8.3%)	(89.8%)	(12.3%)	17.9%	(31.1%)	(27.4%)	1033.8%	74.5%	91.2%	(12.6%)
Prior - Discounts		\$1,950,434	\$0	\$1,950,434	\$0	\$0	\$0	\$0	\$0	\$0	\$1,950,434
Prior - Discounts as % of Total		100.0%	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%
Current - Discounts		\$1,994,577	\$0	\$1,994,577	\$0	\$0	\$0	\$124	\$0	\$124	\$1,994,701
Current - Discounts as % of Total		100.0%	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%
% Change - Discounts		2.3%	0	2.3%	0	0	0	0	0	0	2.3%
Prior - Discounts as % of Eligible Charges		37.6%	0.0%	35.7%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	33.3%
Current - Discounts as % of Eligible Charges		41.9%	0.0%	41.7%	0.0%	0.0%	0.0%	1.6%	0.0%	0.2%	38.9%
Prior - Total Net Paid		\$2,444,643	\$138,098	\$2,582,741	\$15,275	\$206,286	\$221,561	\$184	\$28,647	\$28,831	\$2,833,133
Prior - Net Paid as % of Total		86.3%	4.9%	91.2%	0.5%	7.3%	7.8%	0.0%	1.0%	1.0%	100.0%
Current - Total Net Paid		\$2,399,561	\$22,851	\$2,422,412	\$12,654	\$141,240	\$153,894	\$4,307	\$49,090	\$53,397	\$2,629,702
Current - Net Paid as % of Total		91.2%	0.9%	92.1%	0.5%	5.4%	5.9%	0.2%	1.9%	2.0%	100.0%
% Change - Total Net Paid		(1.8%)	(83.5%)	(6.2%)	(17.2%)	(31.5%)	(30.5%)	2240.9%	71.4%	85.2%	(7.2%)
Prior - Employer Cost Sharing		87.5%	95.5%	87.9%	63.7%	73.6%	72.8%	30.4%	76.0%	75.3%	86.3%

Membership by Month

Membership Year/Month	Single Subscribers	Subscribers plus Spouse	Subscribers plus Child/Children	Subscribers plus Family	Total Subscribers	Non-Positively Enrolled Dependents	Positively Enrolled Dependents	Total Members
2008-01	351	142	73	390	956	0	1,439	2,395
2008-02	351	141	75	398	965	0	1,459	2,424
2008-03	344	139	73	399	955	0	1,458	2,413
2008-04	343	139	68	399	949	0	1,450	2,399
Total	2,065	834	421	2,384	5,704	0	8,707	14,411