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# **Financial and Policyholder Activity Report**

February 2008

**HEALTH INSURANCE RISK-SHARING PLAN AUTHORITY  
FEBRUARY 2008 MONTHLY REPORT  
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**Summary Review**  
**Un-audited HIRSP Authority Financial Statements**  
**For the Two-Month Period Ended February 29, 2008**

**ASSETS**

HIRSP Authority total assets decreased to \$74.8 million in the month of February 2008, decreasing from the prior month by \$5.2 million. Cash assets increased \$826,075 during the month and equaled \$59.5 million at month-end. The February 2008 monthly net decrease in total assets was primarily due to February collection of billed assessments and a corresponding \$5.6 million decrease in assessment receivable assets.

Year-to-date through February 2008, total assets increased by \$4.2 million compared to February 2007 total assets, an increase of 6%. Cash assets year-to-date in 2008 increased by \$3.1 million relative to February 2007, a 5.5% increase. Year-to-date assessment receivables increased \$893,039, a 7.6% increase, and drug rebate receivables increased \$519,946 or 35% compared to February 2007.

**LIABILITIES**

Total liabilities decreased to \$33.8 million in the month of February 2008, decreasing from the prior month by \$9.2 million. Unpaid medical loss liabilities decreased by \$1.3 million or 11.3% in February, to \$9.8 million. Unpaid drug loss liabilities did not change from January to February. Unearned assessment liability decreased \$2.8 million, and unearned premium liability decreased \$5 million, as assessment and premium receipts were recognized as operating revenue during the month of February.

Year-to-date through February 2008, total liabilities decreased by \$5.1 million relative to total liabilities in February 2007, decreasing 13.2% from the prior year. February 2008 aggregate liabilities for unpaid medical and drug claims were \$10.4 million, decreasing \$2.6 million or 19.8% compared to 2007 year-to-date aggregate claim liabilities. Additional year-to-date decreased liabilities include a decrease of \$401,045 in unearned premium liability, a \$405,236 decrease in unearned assessment liability, a \$455,159 decrease in accounts payable, and a \$1.3 million decrease in unearned Federal grant liability, as liability for unearned Federal grants in February 2008 equaled zero.

**CALENDAR-YEAR 2008 NET INCOME**

Net income for the two months ended February 29, 2008 was \$5.9 million, increased by \$2.8 million relative to 2007 net income of \$3.2 million. Year-to-date 2008 changes in income and expense include decreased premium revenues, decreased assessments, decreased total medical losses, decreased total pharmacy losses, decreased administrative expenses, and decreased non-operating revenues.

Net premium revenues of \$16.1 million year-to-date through February 2008 decreased by \$823,369 compared to 2007 year-to-date, primarily due to decreased HIRSP membership, enrollment changes in HIRSP benefit plans, changes to the plans offered, and new rates. There were 16,852 HIRSP contracts in force as of February 29, 2008 compared to 17,914 contracts as of February 2007, the current number of contracts having decreased from the prior year by 1,062. February 2008 year-to-date total operating revenue of \$27.1 million decreased from 2007 year-to-date by nearly \$2.0 million or 6.8%.

Total incurred medical loss expense for the two months ended February 29, 2008 was \$14.9 million, decreased by \$5.1 million or 25.4% from the two months ended February 28, 2007. The decrease in incurred loss expense was primarily due to a year-to-date \$8.1 million decrease in unpaid loss liabilities, which are established based on actuarial analysis. The estimated loss liabilities were decreased to correct for prior overstatement of estimated liabilities and to adjust for changes in expected loss seasonality due to the introduction of higher deductible benefit plans in 2008. The large decrease in loss liability has the effect of decreasing the reported incurred loss expense, which causes an increase in reported net income. Absent the decreased unpaid loss liabilities, year-to-date incurred loss expense would have increased to \$23 million, and reported net income would be decreased by \$5.8 million. Total incurred pharmacy loss expense for the corresponding period in 2008 was \$5.6 million, reflecting a 2008 decrease of \$570,644 or 9.3% from 2007 year-to-date pharmacy losses. Aggregate incurred medical and pharmacy loss expense for the two months of 2008 were \$20.5 million, decreased by \$5.6 million or 21.6% compared to aggregate medical and pharmacy losses of \$26.1 million for the first two months of 2007.

Year-to-date total administrative expenses and referral fees of \$1 million decreased by \$44,217 or 4.1% to compared to the same period in 2007. Year-to-date actuarial services expense of \$28,096 decreased by 24.4%. WPS administrative expense decreased by 5.2% to \$703,657, primarily due to declining HIRSP contract counts, and pharmacy administration expense decreased by 5.9% to \$186,571. In 2008 and 2007 there has been no change in loss adjustment expenses.

Investment income for the two months ended February 29, 2008 was \$352,878, decreased by \$162,785 or 31.6% compared to the same period in 2007. The decreased investment income is primarily due to decreased interest rate yield on cash deposits in 2008. Year-to-date total non-operating revenues are comprised solely of investment income, and decreased by \$947,072 or 72.9% compared to year-to-date 2007. Federal grants of \$4.4 million awarded to HIRSP in fiscal year 2006-07 contributed \$784,287 to non-operating revenues year-to-date in 2007, whereas there were no Federal grant funds available in January or February 2008.

#### CASH FLOW

Year-to-date 2008 cash flows from operating activities reflect \$15.9 million of sources of cash compared to \$22.2 million in uses of cash. An additional \$456,659 of cash was provided by non-operating activities. The net result is a cash decrease of \$5.9 million year-to-date through February 2008. The largest use of cash was payment of medical claims.

#### CALENDAR-YEAR 2008 OPERATING BUDGET

Relative to the 2008 operating budget as of February 29, 2008, actual net income of \$6 million exceeded budgeted net income by \$3.4 million. Actual total revenues of \$27.5 million were under budget by \$78,148. The variance in total revenues included a \$327,306 excess of actual net premium revenues, a \$283,698 shortfall in actual provider contributions, and a \$121,756 shortfall in actual investment income. Through February 2008, actual total operating expenses were \$3.5 million under budget, including actual medical and pharmacy losses of \$20.5 million that were under budget by \$3.4 million, and actual administrative expenses of \$1 million that were under budget by \$68,509. The combined variances in actual revenues and operating expenses resulted in the noted \$3.4 million excess of actual net income over budgeted net income.

#### RETAINED EQUITY

HIRSP Authority total equity increased by \$3.9 million during the month of February 2008 and equaled \$41 million as of February 29, 2008. The February increase in total equity resulted from February 2008 net operating income of \$3.8 million plus February investment income revenue of \$137,000, which resulted in net income for the month of \$3,941,929.

In February 2008, policyholders' equity increased by \$3 million and equaled \$29.2 million; providers' equity increased by \$450,569 and equaled \$5.5 million; and insurers' equity increased by \$512,755 and equaled \$6.3 million. Year-to-date through February 2008, HIRSP Authority total retained equity of \$41 million increased by \$9.4 million from the 2007 year-to-date total equity of \$31.7 million.

Year-to-date in 2008, total reported net income was \$5.9 million, and reported net retained equity increasing from \$35.1 million as of December 31, 2007 to \$41 million as of February 29, 2008. However, as noted under the caption "Calendar-Year 2008 Net Income," year-to-date incurred loss expense has been decreased by \$8.1 million due to decreases in actuarially derived unpaid loss reserve liability. Excluding the changes in loss reserves, year-to-date net income would have been \$158,546 and total retained equity would be \$35.3 million.

Health Insurance Risk-Sharing Plan Authority  
February 29, 2008  
Calendar Year 2008

Unaudited Balance Sheet

Assets	01/31/2008	02/29/2008	03/31/2008	04/30/2008	05/31/2008	06/30/2008	07/31/2008	08/31/2008	09/30/2008	10/31/2008	11/30/2008	12/31/2008
Cash and Cash Equivalents	58,717,832	59,543,907	-	-	-	-	-	-	-	-	-	-
Other Receivables	739,048	575,608	-	-	-	-	-	-	-	-	-	-
Drug Rebates Receivable	2,298,874	2,006,092	-	-	-	-	-	-	-	-	-	-
Assessments Receivable	18,264,346	12,645,085	-	-	-	-	-	-	-	-	-	-
Prepaid Items	14,836	14,268	-	-	-	-	-	-	-	-	-	-
Net Fixed Assets	28,825	28,362	-	-	-	-	-	-	-	-	-	-
<b>Total Assets</b>	<b>80,063,761</b>	<b>74,813,322</b>	-	-	-	-	-	-	-	-	-	-
<b>Liabilities and Fund Equity</b>												
Liabilities:												
Unpaid Medical Loss Liabilities	11,092,064	9,840,187	-	-	-	-	-	-	-	-	-	-
Unpaid Prescription Drug Loss Liabilities	575,000	575,000	-	-	-	-	-	-	-	-	-	-
Unpaid Loss Adjustment Expense	770,000	770,000	-	-	-	-	-	-	-	-	-	-
Unearned Premiums	12,794,456	7,868,730	-	-	-	-	-	-	-	-	-	-
Unearned Assessments	15,613,256	12,862,921	-	-	-	-	-	-	-	-	-	-
Unearned Federal Bonus Grant	-	-	-	-	-	-	-	-	-	-	-	-
Accounts Payable and Other Accrued Liabilities	2,115,982	1,851,552	-	-	-	-	-	-	-	-	-	-
<b>Total Liabilities</b>	<b>42,960,758</b>	<b>33,768,390</b>	-	-	-	-	-	-	-	-	-	-
Fund Equity:												
Policyholder	26,217,667	29,196,272	-	-	-	-	-	-	-	-	-	-
Providers	5,076,153	5,526,722	-	-	-	-	-	-	-	-	-	-
Insurers	5,809,183	6,321,938	-	-	-	-	-	-	-	-	-	-
<b>Total Retained Earnings</b>	<b>37,103,003</b>	<b>41,044,932</b>	-	-	-	-	-	-	-	-	-	-
<b>Total Liabilities and Fund Equity</b>	<b>80,063,761</b>	<b>74,813,322</b>	-	-	-	-	-	-	-	-	-	-

Health Insurance Risk-Sharing Plan Authority  
for the Period Ended February 29, 2008  
Calendar Year 2008

**Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings**

<b>Operating Revenues</b>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Gross Premiums	8,531,568	8,724,789	-	-	-	-	-	-	-	-	-	-	17,256,357
Premium Subsidized	(580,275)	(577,024)	-	-	-	-	-	-	-	-	-	-	(1,157,299)
<b>Net Premium Revenues</b>	<b>7,951,293</b>	<b>8,147,765</b>	-	-	-	-	-	-	-	-	-	-	<b>16,099,058</b>
Provider Contribution	2,921,441	2,688,150	-	-	-	-	-	-	-	-	-	-	5,609,591
Insurer Assessments	2,651,090	2,750,335	-	-	-	-	-	-	-	-	-	-	5,401,425
<b>Total Operating Revenues</b>	<b>13,523,824</b>	<b>13,586,250</b>	-	-	-	-	-	-	-	-	-	-	<b>27,110,074</b>
<b>Operating Expenses</b>													
Medical Losses:													
Losses Paid or Approved for Payment	14,669,923	8,238,591	-	-	-	-	-	-	-	-	-	-	22,908,514
Increase (Decrease) in Unpaid Losses	(6,376,711)	(1,761,391)	-	-	-	-	-	-	-	-	-	-	(8,138,102)
Deductible Subsidy Paid	48,433	67,349	-	-	-	-	-	-	-	-	-	-	115,782
<b>Total Medical Losses</b>	<b>8,341,645</b>	<b>6,544,549</b>	-	-	-	-	-	-	-	-	-	-	<b>14,886,194</b>
Pharmacy Losses:													
Losses Paid or Approved for Payment	3,409,385	3,001,720	-	-	-	-	-	-	-	-	-	-	6,411,105
Increase (Decrease) in Unpaid Losses	(266,155)	-	-	-	-	-	-	-	-	-	-	-	(266,155)
Drug Rebates	(286,361)	(267,918)	-	-	-	-	-	-	-	-	-	-	(554,279)
Subsidy - Coinsurance Out-of-Pocket Max	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total Pharmacy Losses</b>	<b>2,856,869</b>	<b>2,733,802</b>	-	-	-	-	-	-	-	-	-	-	<b>5,590,671</b>
<b>Total Losses</b>	<b>11,198,514</b>	<b>9,278,351</b>	-	-	-	-	-	-	-	-	-	-	<b>20,476,865</b>
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
Authority Admin Fees	55,689	45,916	-	-	-	-	-	-	-	-	-	-	101,605
WPS Admin Fees	355,393	348,264	-	-	-	-	-	-	-	-	-	-	703,657
Navitus Admin Fees	93,885	92,686	-	-	-	-	-	-	-	-	-	-	186,571
Milliman USA Actuarial Services	22,000	6,096	-	-	-	-	-	-	-	-	-	-	28,096
Other Admin Fees	5,226	5,248	-	-	-	-	-	-	-	-	-	-	10,474
<b>Total Administrative Expenses</b>	<b>532,193</b>	<b>498,210</b>	-	-	-	-	-	-	-	-	-	-	<b>1,030,403</b>
Referral fees	5,145	4,760	-	-	-	-	-	-	-	-	-	-	9,905
<b>Total Operating Expenses</b>	<b>11,736,852</b>	<b>9,781,321</b>	-	-	-	-	-	-	-	-	-	-	<b>21,517,173</b>
<b>Net Operating Income (Loss)</b>	<b>1,787,972</b>	<b>3,804,929</b>	-	-	-	-	-	-	-	-	-	-	<b>5,592,901</b>
<b>Non-Operating Revenues (Expenses)</b>													
Federal Grant	-	-	-	-	-	-	-	-	-	-	-	-	-
Federal Bonus Grant Funds	-	-	-	-	-	-	-	-	-	-	-	-	-
Investment Income	215,878	137,000	-	-	-	-	-	-	-	-	-	-	352,878
Miscellaneous Income	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total Non-operating Revenues (Expenses)</b>	<b>215,878</b>	<b>137,000</b>	-	-	-	-	-	-	-	-	-	-	<b>352,878</b>
<b>Net Income (Loss)</b>	<b>2,003,850</b>	<b>3,941,929</b>	-	-	-	-	-	-	-	-	-	-	<b>5,945,779</b>
<b>Additions to Retained Earnings</b>													
<b>Policyholder</b>													
Retained Earnings, Beginning of Period	24,569,024	26,217,667	-	-	-	-	-	-	-	-	-	-	24,569,024
Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	1,648,643	2,978,605	-	-	-	-	-	-	-	-	-	-	4,627,248
<b>Retained Earnings, End of Period</b>	<b>26,217,667</b>	<b>29,196,272</b>	-	-	-	-	-	-	-	-	-	-	<b>29,196,272</b>
<b>Providers</b>													
Retained Earnings, Beginning of Period	4,763,374	5,076,153	-	-	-	-	-	-	-	-	-	-	4,763,374
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	312,779	450,569	-	-	-	-	-	-	-	-	-	-	763,348
<b>Retained Earnings, End of Period</b>	<b>5,076,153</b>	<b>5,526,722</b>	-	-	-	-	-	-	-	-	-	-	<b>5,526,722</b>
<b>Insurers</b>													
Retained Earnings, Beginning of Period	5,766,755	5,809,183	-	-	-	-	-	-	-	-	-	-	5,766,755
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	42,428	512,755	-	-	-	-	-	-	-	-	-	-	555,183
<b>Retained Earnings, End of Period</b>	<b>5,809,183</b>	<b>6,321,938</b>	-	-	-	-	-	-	-	-	-	-	<b>6,321,938</b>
<b>Total Retained Earnings</b>	<b>37,103,003</b>	<b>41,044,932</b>	-	-	-	-	-	-	-	-	-	-	<b>41,044,932</b>

**Health Insurance Risk-Sharing Plan Authority**  
**Calendar Financial Statement Reconciliation**  
**February 2008**

**STATEMENT OF CASH FLOWS**

<b>Cash Flows from Operating Activities</b>	<b>Month of February 2008</b>	<b>YTD Through February 2008</b>
<b>Sources of Cash</b>		
Cash received for premiums	3,300,865	10,290,506
Cash received for assessments	5,619,261	5,619,261
Total Operating Sources	8,920,126	15,909,767
<b>Uses of Cash</b>		
Cash payments for Medical losses	(5,122,968)	(15,049,215)
Cash payments for Pharmacy losses	(2,668,068)	(6,102,570)
Cash payments for referral fees	(5,180)	(8,925)
Cash payments for other expenses	(532,372)	(1,067,308)
Total Operating Uses	(8,328,588)	(22,228,018)
<b>Net Cash Provided (Used) by Operating Activities</b>	<b>591,538</b>	<b>(6,318,251)</b>

<b>Cash Flows from Non-Operating Activities</b>		
Cash received from investment income	234,537	456,659
Cash received from Federal Grant	-	-
Cash received for miscellaneous income	-	-
<b>Net Cash Provided/(Used) by Non-Operating Activities</b>	<b>234,537</b>	<b>456,659</b>

<b>Cash and Cash Equivalents</b>		
Net Increase (Decrease) in Cash Equivalents	826,075	(5,861,592)
Cash and cash equivalents, beginning of period	58,717,832	65,405,499
<b>Cash and Equivalents, End of Period</b>	<b>59,543,907</b>	<b>59,543,907</b>

**RECONCILIATION OF NET OPERATING INCOME TO CASH FLOWS FROM OPERATIONS**

Net income (loss) from operations	3,804,929	5,592,901
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**Adjustments to Reconcile Net Operating Income to Net Cash Provided By Operating Activities**

Changes in assets and liabilities:

Decrease (increase) in receivables	5,978,409	(12,649,470)
Decrease (increase) in prepaids	567	3,824
Increase (decrease) in liability for premium overpayments	-	-
Increase (decrease) in liability for accounts payable	(2,785,983)	12,826,716
Increase (decrease) in liability for unearned premiums	(4,913,346)	(5,786,647)
Increase (decrease) in liability for medical Loss liabilities	(1,265,990)	(5,787,255)
Increase (decrease) in liability for pharmacy loss liabilities	(227,048)	(518,320)
Other adjustments	-	-
Total adjustments	(3,213,391)	(11,911,152)

<b>Net Cash Provided/(Used) by Operating Activities</b>	<b>591,538</b>	<b>(6,318,251)</b>
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**Health Insurance Risk-Sharing Plan Authority**  
**Comparison of Current vs. Prior Month and Current Fiscal Year-to-Date Vs. Prior Fiscal Year-to-Date**  
**Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings**  
**Calendar Year 2008**

<b>Operating Revenues</b>	<b>February 2008</b>	<b>January 2008</b>	<b>Variance</b>	<b>Year-to-Date Through February 2008</b>	<b>Year-to-Date Through February 2007</b>	<b>Variance</b>
Gross Premiums	8,724,789	8,531,568	193,221	17,256,357	17,782,430	(526,073)
Premium Subsidized	(577,024)	(580,275)	3,251	(1,157,299)	(860,003)	(297,296)
Net Premium Revenues	8,147,765	7,951,293	196,472	16,099,058	16,922,427	(823,369)
Provider Contribution	2,688,150	2,921,441	(233,291)	5,609,591	6,259,328	(649,737)
Insurer Assessments	2,750,335	2,651,090	99,245	5,401,425	5,904,940	(503,515)
<b>Total Operating Revenues</b>	<b>13,586,250</b>	<b>13,523,824</b>	<b>62,426</b>	<b>27,110,074</b>	<b>29,086,695</b>	<b>(1,976,621)</b>
<b>Operating Expenses</b>						
Medical Losses:						
Losses Paid or Approved for Payment	8,238,591	14,669,923	(6,431,332)	22,908,514	23,079,434	(170,920)
Increase (Decrease) in Unpaid Losses	(1,761,391)	(6,376,711)	4,615,320	(8,138,102)	(3,261,627)	(4,876,475)
Deductible Subsidy Paid	67,349	48,433	18,916	115,782	139,985	(24,203)
Total Medical Losses	6,544,549	8,341,645	(1,797,096)	14,886,194	19,957,792	(5,071,598)
Pharmacy Losses:						
Losses Paid or Approved for Payment	3,001,720	3,409,385	(407,665)	6,411,105	6,678,245	(267,140)
Increase (Decrease) in Unpaid Losses	-	(266,155)	266,155	(266,155)	(80,547)	(185,608)
Drug Rebates	(267,918)	(286,361)	18,443	(554,279)	(436,918)	(117,361)
Subsidy - Coinsurance Out-of-Pocket Max	-	-	-	-	535	(535)
Total Pharmacy Losses	2,733,802	2,856,869	(123,067)	5,590,671	6,161,315	(570,644)
Total Losses	9,278,351	11,198,514	(1,920,163)	20,476,865	26,119,107	(5,642,242)
Loss adjustment expenses	-	-	-	-	-	-
Administrative expenses						
Authority Admin Fees	45,916	55,689	(9,773)	101,605	93,178	8,427
WPS Admin Fees	348,264	355,393	(7,129)	703,657	742,510	(38,853)
Navitus Admin Fees	92,686	93,885	(1,199)	186,571	198,171	(11,600)
Milliman USA Actuarial Services	6,096	22,000	(15,904)	28,096	37,159	(9,063)
Other Admin Fees And Expenses	5,248	5,226	22	10,474	5,002	5,472
DHFS Admin Fees	-	-	-	-	-	-
Total Administrative Expenses	498,210	532,193	(33,983)	1,030,403	1,076,020	(45,617)
Referral fees	4,760	5,145	(385)	9,905	8,505	1,400
Total Operating Expenses	9,781,321	11,735,852	(1,954,531)	21,517,173	27,203,632	(5,686,459)
<b>Net Operating Income (Loss)</b>	<b>3,804,929</b>	<b>1,787,972</b>	<b>2,016,957</b>	<b>5,592,901</b>	<b>1,883,063</b>	<b>3,709,838</b>
<b>Non-Operating Revenues (Expenses)</b>						
Federal Grant	-	-	-	-	-	-
Federal Bonus Grant Funds	-	-	-	-	784,287	(784,287)
Investment Income	137,000	215,878	(78,878)	352,878	515,663	(162,785)
Miscellaneous Income	-	-	-	-	-	-
Total Non-operating Revenues (Expenses)	137,000	215,878	(78,878)	352,878	1,299,950	(947,072)
<b>Net Income (Loss)</b>	<b>3,941,929</b>	<b>2,003,850</b>	<b>1,938,079</b>	<b>5,945,779</b>	<b>3,183,013</b>	<b>2,762,766</b>

**Health Insurance Risk-Sharing Plan Authority**  
**Comparison of Budget Vs. Actual**  
**Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings**  
**Calendar Year 2008**

	February 2008 Budget	February 2008 Actual	Variance	Year-to-Date Through February 2008 Budget	Year-to-Date Through February 2008 Actual	Variance
<b>Operating Revenues</b>						
Gross Premiums	8,739,138	8,724,789	(14,349)	17,458,351	17,256,357	(201,994)
Premium Subsidized	(844,262)	(577,024)	267,238	(1,686,599)	(1,157,299)	529,300
Net Premium Revenues	7,894,876	8,147,765	252,889	15,771,752	16,099,058	327,306
Provider Contribution	3,017,324	2,688,150	(329,174)	5,893,289	5,609,591	(283,698)
Insurer Assessments	2,750,335	2,750,335	-	5,401,425	5,401,425	-
<b>Total Operating Revenues</b>	<b>13,662,535</b>	<b>13,586,250</b>	<b>(76,285)</b>	<b>27,066,466</b>	<b>27,110,074</b>	<b>43,608</b>
<b>Operating Expenses</b>						
Medical and Pharmacy Losses:	12,101,247	9,211,002	2,890,245	23,773,477	20,361,083	3,412,394
Deductible Subsidy/RX OOP Max	78,480	67,349	11,131	131,783	115,782	16,001
Total Medical and Pharmacy Losses	12,179,727	9,278,351	2,901,376	23,905,260	20,476,865	3,428,395
Loss adjustment expenses	-	-	-	-	-	-
Total Administrative Expenses	549,980	498,210	51,770	1,099,961	1,030,403	69,558
Referral fees	4,428	4,760	(332)	8,856	9,905	(1,049)
Total Operating Expenses	12,734,135	9,781,321	2,952,814	25,014,077	21,517,173	3,496,904
<b>Net Operating Income (Loss)</b>	<b>928,400</b>	<b>3,804,929</b>	<b>2,876,529</b>	<b>2,052,389</b>	<b>5,592,901</b>	<b>3,540,512</b>
<b>Non-Operating Revenues (Expenses)</b>						
Federal Grant	-	-	-	-	-	-
Federal Bonus Grant Funds	-	-	-	-	-	-
Investment Income	237,317	137,000	(100,317)	474,634	352,878	(121,756)
Miscellaneous Income	-	-	-	-	-	-
Total Non-operating Revenues (Expenses)	237,317	137,000	(100,317)	474,634	352,878	(121,756)
<b>Net Income (Loss)</b>	<b>1,165,717</b>	<b>3,941,929</b>	<b>2,776,212</b>	<b>2,527,023</b>	<b>5,945,779</b>	<b>3,418,756</b>

**Health Insurance Risk-Sharing Plan Authority**  
**Calendar Year 2008 Interim Reconciliation**  
**As of February 29, 2008**

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
<b>1. Operating and Administrative Costs under s.149.143(1)</b>													
Medical Losses Paid or Approved for Payment	14,669,923	8,238,591	-	-	-	-	-	-	-	-	-	-	22,908,514
Increase (Decrease) in Unpaid Medical Losses	(6,376,711)	(1,761,391)	-	-	-	-	-	-	-	-	-	-	(8,138,102)
Pharmacy Losses Paid or Approved for Payment	3,409,385	3,001,720	-	-	-	-	-	-	-	-	-	-	6,411,105
Increase (Decrease) in Unpaid Pharmacy Losses	(266,155)	-	-	-	-	-	-	-	-	-	-	-	(266,155)
Drug Rebates	(286,361)	(267,918)	-	-	-	-	-	-	-	-	-	-	(554,279)
Total Administrative Expenses	537,338	502,970	-	-	-	-	-	-	-	-	-	-	1,040,308
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	11,687,419	9,713,972	-	-	-	-	-	-	-	-	-	-	21,401,391
<b>2. Adjustments to Operating and Administrative Costs</b>													
Total Non-operating Revenue (Expense) - excluding Federal Grant Funds	215,878	137,000	-	-	-	-	-	-	-	-	-	-	352,878
<b>3. Total Fiscal Year Program Costs to be Split 60% 20% 20%</b>	11,471,541	9,576,972	-	-	-	-	-	-	-	-	-	-	21,048,513
<b>4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)</b>													
Funding Shares													
60% Policyholders	6,882,925	5,746,184	-	-	-	-	-	-	-	-	-	-	12,629,109
20% Providers	2,294,308	1,915,394	-	-	-	-	-	-	-	-	-	-	4,209,702
20% Insurers	2,294,308	1,915,394	-	-	-	-	-	-	-	-	-	-	4,209,702
<b>5. Subsidy Funding Shares</b>													
Premium subsidies	580,275	577,024	-	-	-	-	-	-	-	-	-	-	1,157,299
Deductible Subsidies	48,433	67,349	-	-	-	-	-	-	-	-	-	-	115,782
Subsidy - coinsurance out-of-pocket Max	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Subsidies	628,708	644,373	-	-	-	-	-	-	-	-	-	-	1,273,081
Federal Grant Funds Applied to Low Income Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Net Subsidy Funding Needed	628,708	644,373	-	-	-	-	-	-	-	-	-	-	1,273,081
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	314,354	322,187	-	-	-	-	-	-	-	-	-	-	636,541
Insurers	314,354	322,186	-	-	-	-	-	-	-	-	-	-	636,540
	628,708	644,373	-	-	-	-	-	-	-	-	-	-	1,273,081
<b>6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)</b>													
Policyholders	6,882,925	5,746,184	-	-	-	-	-	-	-	-	-	-	12,629,109
Providers	2,608,662	2,237,581	-	-	-	-	-	-	-	-	-	-	4,846,243
Insurers	2,608,662	2,237,580	-	-	-	-	-	-	-	-	-	-	4,846,242
<b>7. Operating Revenues by Source</b>													
Policyholders													
Premium	7,951,293	8,147,765	-	-	-	-	-	-	-	-	-	-	16,099,058
Premium and Deductible Subsidies Credited to Policyholders	580,275	577,024	-	-	-	-	-	-	-	-	-	-	1,157,299
Subtotal	8,531,568	8,724,789	-	-	-	-	-	-	-	-	-	-	17,256,357
Providers	2,921,441	2,688,150	-	-	-	-	-	-	-	-	-	-	5,609,591
Insurers	2,651,090	2,750,335	-	-	-	-	-	-	-	-	-	-	5,401,425
Total	14,104,099	14,163,274	-	-	-	-	-	-	-	-	-	-	28,267,373

(cont)

## 8. Interim Estimate of Surplus/(Deficit) Account Balance for 2007

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Policyholders													
Prior Period Surplus / (Deficit)	24,569,024	26,217,667	-	-	-	-	-	-	-	-	-	-	24,569,024
Premium (Including Premium and Deductible Subsidies)	8,531,568	8,724,789	-	-	-	-	-	-	-	-	-	-	17,256,357
Less Cost	6,882,925	5,746,184	-	-	-	-	-	-	-	-	-	-	12,629,109
Less Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	1,648,643	2,978,605	-	-	-	-	-	-	-	-	-	-	4,627,248
Ending Surplus / (Deficit)	26,217,667	29,196,272	-	-	-	-	-	-	-	-	-	-	29,196,272
Providers													
Prior Period Surplus / (Deficit)	4,763,374	5,076,153	-	-	-	-	-	-	-	-	-	-	4,763,374
Contribution	2,921,441	2,688,150	-	-	-	-	-	-	-	-	-	-	5,609,591
Less Cost	2,608,662	2,237,581	-	-	-	-	-	-	-	-	-	-	4,846,243
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	312,779	450,569	-	-	-	-	-	-	-	-	-	-	763,348
Ending Surplus / (Deficit)	5,076,153	5,526,722	-	-	-	-	-	-	-	-	-	-	5,526,722
Insurers													
Prior Period Surplus / (Deficit)	5,766,755	5,809,183	-	-	-	-	-	-	-	-	-	-	5,766,755
Assessment	2,651,090	2,750,335	-	-	-	-	-	-	-	-	-	-	5,401,425
Less Cost	2,608,662	2,237,580	-	-	-	-	-	-	-	-	-	-	4,846,242
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	42,428	512,755	-	-	-	-	-	-	-	-	-	-	555,183
Ending Surplus / (Deficit)	5,809,183	6,321,938	-	-	-	-	-	-	-	-	-	-	6,321,938
Total HIRSP Retained Earnings	37,103,003	41,044,932	-	-	-	-	-	-	-	-	-	-	41,044,932

**Health Insurance Risk-Sharing Plan Authority  
Monthly Provider Contribution Report  
As of February 2008 Month End (2/27/2008)**

<b>Provider Contribution Calculation for the Current Month - Claims by Claim Type</b>						
Claims Incurred 1/1/2008 and After						
Claim Type	Billed Charges		HIRSP Fee Schedule	HIRSP Allowed	Provider Contribution	HIRSP Paid
Professional	\$5,857,730.88		\$3,330,085.03	\$2,388,140.31	\$941,944.72	\$974,530.98
Hospital Outpatient	\$3,558,464.41		\$2,542,680.92	\$1,813,296.31	\$729,384.61	\$965,974.07
Hospital Inpatient	\$3,499,586.86		\$2,119,800.71	\$1,510,224.26	\$609,576.45	\$1,329,191.38
Nursing Home	\$3,786.00		\$2,707.05	\$1,922.12	\$784.93	\$1,382.16
Other	\$524,324.57		\$349,292.26	\$258,697.24	\$90,595.02	\$69,271.97
<b>Total</b>	<b>\$13,443,892.72</b>		<b>\$8,344,565.97</b>	<b>\$5,972,280.24</b>	<b>\$2,372,285.73</b>	<b>\$3,340,350.56</b>

Claims Incurred Prior to 1/1/2008						
Claim Type	Billed Charges	U&C Percentage	Usual and Customary	HIRSP Allowed	Provider Contribution	HIRSP Paid
Professional	\$1,360,401.18	28.5%	\$972,686.84	\$517,272.88	\$455,413.96	\$434,983.68
Hospital Outpatient	\$347,847.56	28.5%	\$248,711.01	\$228,109.28	\$20,601.73	\$198,434.10
Hospital Inpatient	\$1,641,612.79	28.5%	\$1,173,753.14	\$835,238.54	\$338,514.60	\$806,310.05
Nursing Home	\$35,452.99	28.5%	\$25,348.89	\$17,621.82	\$7,727.07	\$18,156.07
Other	\$218,554.18	28.5%	\$156,266.24	\$153,145.70	\$3,120.54	\$132,548.99
<b>Total</b>	<b>\$3,603,868.70</b>		<b>\$2,576,766.12</b>	<b>\$1,751,388.22</b>	<b>\$825,377.90</b>	<b>\$1,590,432.89</b>

Provider Contribution on the Increase(Decrease) in Unpaid Losses	\$ (509,514.00)
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<b>Total Provider Contribution</b>	<b>\$2,688,149.63</b>
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## Wisconsin Health Insurance Risk-Sharing Plan Breakdown of Incurred Claims and Earned Premium by Quarter and Plan

<b>2Q06</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$23,282,320	\$11,064,423	210.4%	\$1,088.26	\$517.17
Plan 1B	17,051,661	14,364,077	118.7%	551.10	464.24
Plan 2	3,242,457	1,991,718	162.8%	894.47	549.44
<b>Total</b>	<b>\$43,576,438</b>	<b>\$27,420,218</b>	<b>158.9%</b>	<b>\$778.71</b>	<b>\$490.00</b>
<b>3Q06</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$21,935,197	\$11,414,082	192.2%	\$1,045.28	\$543.92
Plan 1B	17,835,325	15,021,978	118.7%	578.36	487.13
Plan 2	2,112,814	1,313,471	160.9%	702.40	436.66
<b>Total</b>	<b>\$41,883,336</b>	<b>\$27,749,531</b>	<b>150.9%</b>	<b>\$763.86</b>	<b>\$506.09</b>
<b>4Q06</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$25,559,696	\$11,232,336	227.6%	\$1,248.76	\$548.78
Plan 1B	21,911,504	14,982,682	146.2%	716.18	489.71
Plan 2	2,121,702	1,319,577	160.8%	712.94	443.41
<b>Total</b>	<b>\$49,592,902</b>	<b>\$27,534,595</b>	<b>180.1%</b>	<b>\$917.72</b>	<b>\$509.53</b>
<b>1Q07</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$19,258,030	\$10,353,629	186.0%	\$1,000.16	\$537.71
Plan 1B	17,210,481	15,315,916	112.4%	546.45	486.30
Plan 2	1,732,053	1,258,329	137.6%	598.29	434.66
<b>Total</b>	<b>\$38,200,564</b>	<b>\$26,927,874</b>	<b>141.9%</b>	<b>\$712.10</b>	<b>\$501.96</b>
<b>2Q07</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$20,929,339	\$10,280,888	203.6%	\$1,105.21	\$542.90
Plan 1B	20,740,288	15,315,146	135.4%	664.80	490.90
Plan 2	1,705,047	1,256,896	135.7%	601.22	443.19
<b>Total</b>	<b>\$43,374,674</b>	<b>\$26,852,930</b>	<b>161.5%</b>	<b>\$818.84</b>	<b>\$506.94</b>
<b>3Q07</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$21,150,950	\$10,685,401	197.9%	\$1,152.58	\$582.28
Plan 1B	19,144,105	14,423,771	132.7%	620.61	467.59
Plan 2	1,405,185	987,774	142.3%	501.49	352.52
<b>Total</b>	<b>\$41,700,239</b>	<b>\$26,096,946</b>	<b>159.8%</b>	<b>\$801.93</b>	<b>\$501.86</b>

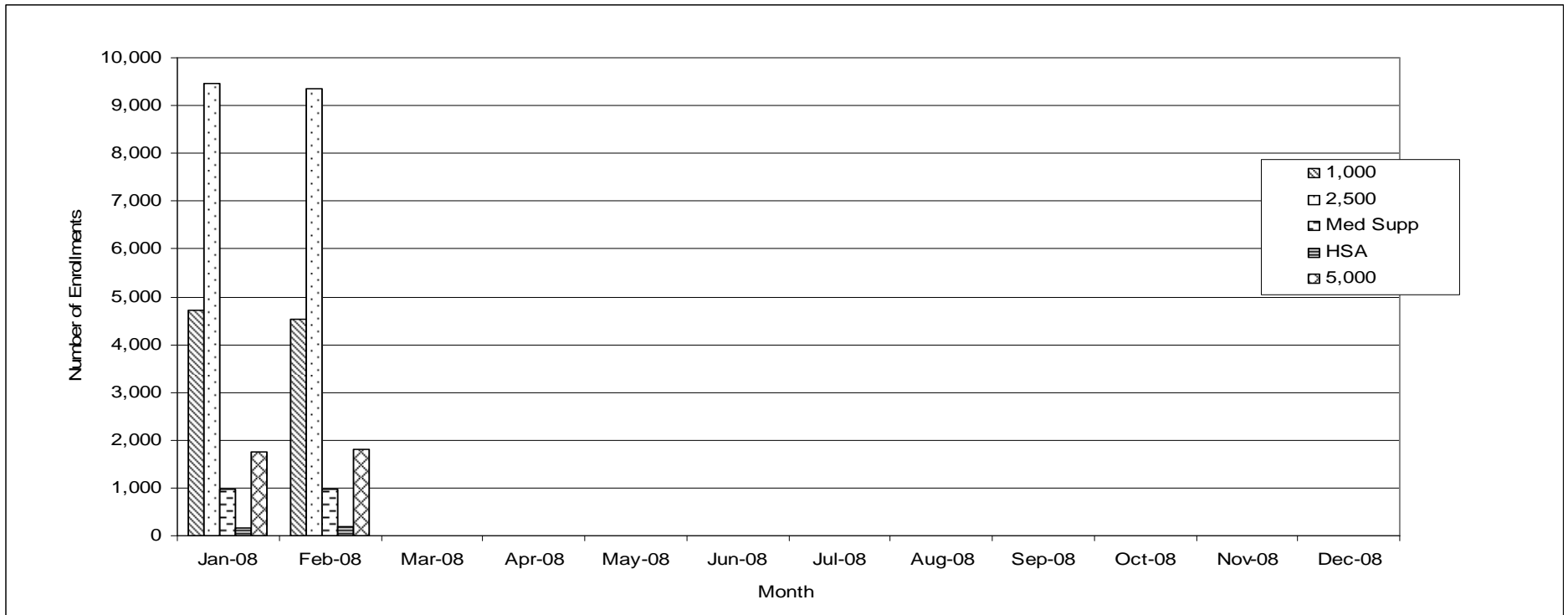
NOTES:            Loss Ratio = Incurred Claims / Earned Premiums  
                       Earned Premium includes Premium Subsidies  
                       Incurred Claims include Provider Contributions  
                       Administrative Expenses are not included in this exhibit  
                       Incurred Claims and Earned Premiums are updated quarterly and restated to reflect  
    the most current information available as of December 31, 2007

**Health Insurance Risk-Sharing Plan Authority  
2007 Year-to-Date Enrollment**

February 2008  
**16,852**

February 2007  
**17,914**

Plan	Jan-08	Feb-08	Mar-08	Apr-08	May-08	Jun-08	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08
1,000	4,721	4,539										
2,500	9,467	9,342										
Med Supp	978	970										
HSA	160	183										
5,000	1,744	1,818										
<b>Total</b>	<b>17,070</b>	<b>16,852</b>										



**Health Insurance Risk-Sharing Plan Authority  
Subsidy Report  
Feb-08**

<b>Total Subsidy by Plan</b>			
<b>Plan</b>		<b>Number of Policyholders</b>	<b>% of Total</b>
HIRSP 1,000	Non-subsidized	2,801	16.6%
	Subsidized	1,738	10.3%
	<b>Total</b>	<b>4,539</b>	<b>26.9%</b>
HIRSP 2,500	Non-subsidized	8,861	52.6%
	Subsidized	481	2.9%
	<b>Total</b>	<b>9,342</b>	<b>55.4%</b>
HIRSP Medicare Supplement	Non-subsidized	592	3.5%
	Subsidized	378	2.2%
	<b>Total</b>	<b>970</b>	<b>5.8%</b>
HIRSP Health Savings Account	Non-subsidized	171	1.0%
	Subsidized	12	0.1%
	<b>Total</b>	<b>183</b>	<b>1.1%</b>
HIRSP 5,000	Non-subsidized	1,629	9.7%
	Subsidized	189	1.1%
	<b>Total</b>	<b>1,818</b>	<b>10.8%</b>
<b>Grand Total</b>		<b>16,852</b>	<b>100.0%</b>

<b>Total Subsidy by Level</b>		
<b>Subsidy Level</b>	<b>Number of Policyholders</b>	<b>% of Total</b>
\$25,000 Above	14,054	83.4%
\$20,000 - \$24,999	307	1.8%
\$17,000 - \$19,999	387	2.3%
\$14,000 - \$16,999	469	2.8%
\$10,000 - \$13,999	1,249	7.4%
\$9,999 Under	386	2.3%
<b>Total</b>	<b>16,852</b>	<b>100.0%</b>

**Health Insurance Risk-Sharing Plan Authority**  
**Summary of Monthly Applicant Activity**  
February, 2008

<b>Summary of Monthly Application Activity</b>	
Number of Applications Pending January	119
Number of Applications Received February	433
Number of Applications Rejected February	21
Number of Applications Closed February	64
Number of Applications Pending February	145
Number of Applications Approved February	306

<b>Detail of Applications Rejected</b>	
65 or older	0
Current Medicaid Coverage	5
Currently covered by other insurance	2
Did not qualify for lost employer coverage.	5
Eligible for Group Health Coverage	9
Insufficient Premium Submitted	0
No Medical Reason	0
Not a Wisconsin Resident	0
Previous HIRSP <12 Months Ago	0
<b>Total</b>	<b>21</b>

<b>Detail of Applications Closed</b>	
Applicant Request	10
Application Data requested; never received	0
Proper eligibility requested; never received	54
<b>Total</b>	<b>64</b>

<b>HIRSP 2008 New Enrollees</b>						
<b>Date</b>	<b>1,000</b>	<b>2,500</b>	<b>Med Supp</b>	<b>3,500</b>	<b>5,000</b>	<b>Total</b>
January	79	218	3	23	100	423
February	43	126	1	25	80	275
March						
April						
May						
June						

# Health Insurance Risk-Sharing Plan Authority

## Monthly Eligibility Report February, 2008

A.	Medicare Eligible	0
B.	HIV +	5
C.	Eligible Individual	178
	<i>New Born Applications</i>	7
D.	Letter of Medical Eligibility	123
	1. <i>Letter of Rejection By:</i>	
	<i>Alliance Insurance</i>	2
	<i>American Community Mutual Insurance</i>	8
	<i>American Family</i>	30
	<i>American Medical Security Group</i>	4
	<i>American National Life Insurance Company of Texas</i>	2
	<i>Arise</i>	4
	<i>Assurant Health</i>	18
	<i>Blue Cross &amp; Blue Shield United of Wisconsin</i>	105
	<i>Celtic Life Insurance Company</i>	2
	<i>Dean Health Plan</i>	10
	<i>Golden Rule Insurance Company</i>	16
	<i>Group Health Cooperative</i>	2
	<i>Humana Insurance Company</i>	29
	<i>John Alden Life Insurance</i>	2
	<i>Pekin Life Insurance</i>	6
	<i>Security Health Plan</i>	4
	<i>Unity Health Plan</i>	2
	<i>Valley Health Plan</i>	2
	2. <i>Notice of Benefit Reduction</i>	3
	3. <i>Notice of Premium increase due to a Health Reason</i>	0
Total		306

**Health Insurance Risk-Sharing Plan Authority  
Medical Claims Denied Report  
AS OF FEBRUARY 2008 MONTH END (2/25/2008)**

Processed Month	All Plans			Denial Rate
	Paid	Denied	Total	
FEBRUARY 2007	27,757	4,949	32,706	15.1%
MARCH 2007	28,785	5,261	34,046	15.5%
APRIL 2007	27,571	5,213	32,784	15.9%
MAY 2007	34,079	6,277	40,356	15.6%
JUNE 2007	27,691	4,910	32,601	15.1%
JULY 2007	27,652	4,910	32,562	15.1%
AUGUST 2007	29,575	5,794	35,369	16.4%
SEPTEMBER 2007	27,077	5,548	32,625	17.0%
OCTOBER 2007	31,047	7,060	38,107	18.5%
NOVEMBER 2007	29,974	5,743	35,717	16.1%
DECEMBER 2007	27,185	5,442	32,627	16.7%
JANUARY 2008	36,066	7,602	43,668	17.4%
FEBRUARY 2008	25,437	5,471	30,908	17.7%

Denial Reason Detail		
Volume	% of Total	Reason
1614	5.22%	DUPLICATE CLAIM/SERVICE.
540	1.75%	SERVICES PERFORMED BY A PROVIDER WHO IS NOT MEDICAID CERTIFIED ARE NOT COVERED
460	1.49%	NONCOVERED SERVICES BECAUSE THIS A ROUTINE EXAM OR SCREENING PROCEDURE DONE IN CONJUNCTION OF A ROUTINE EXAM.
450	1.46%	HSA INCURRED OUTSIDE COVERAGE PERIOD ARE NOT COVERED.
282	0.91%	CLAIM DENIED/REDUCED BECAUSE CHARGES HAVE BEEN PAID BY ANOTHER PAYER AS PART OF COORDINATION OF BENEFITS.
199	0.64%	THIS IS A PREEXISTING CONDITION. MEDICAL RECORDS OBTAINED FROM YOUR PROVIDER HAVE IDENTIFIED A PRE-EXISTING CONDITION.
164	0.53%	THIS PROCEDURE IS INCIDENTAL TO AND CONSIDERED PART OF THE PRIMARY PROCEDURE.
164	0.53%	THIS (THESE) SERVICE(S) IS (ARE) NOT COVERED.
152	0.49%	WE WILL BE ABLE TO COMPLETE PROCESSING OF THIS CLAIM WHEN WE RECEIVE THE MEDICAL RECORDS WE REQUESTED.
138	0.45%	THE PRIMARY SERVICE CODE INCLUDES THE OTHER SERVICES BILLED, THEREFORE, NO PAYMENT HAS BEEN ALLOWED FOR THE OTHER SERVICES.

Note:

1) Claims denied by the PBM are not included.

2) A claim may have some paid lines and some denied lines. Therefore, a claim that has both paid and rejected lines has been counted as a paid claim and as a denied claim. This results in more total claims being reported in this report than in the report titled Claims That Have Finalized to Payment or Denial Report.

**Health Insurance Risk-Sharing Plan  
Appeals and Grievances  
February 2008**

**Grievance**

<u>Type of Grievance</u>		<u># of Grievances</u>	
	Drug & Drug Formulary	2	
	Enrollment/Eligibility Requirements	22	
	Not Covered Benefit	11	
	Not Medically Necessary	3	
	Plan Administration	22	
	Prior Authorization	4	
	Experimental Treatment	0	
	Billing/Claim Processing	2	
<u>Grievance Committee Decision</u>			
	Eligibility Request Closed Prior to Committee	0	
	Approved	27	
	Upheld Denial	30	
	Partial Approval	9	
<b>Total Grievances Received</b>		<b>66</b>	

**Appeal**

<u>Type of Appeal</u>		<u># of Appeal</u>	
	Drug & Drug Formulary	0	
	Enrollment/Eligibility Requirements	1	
	Experimental Treatment	0	
	Not Medically Necessary	0	
	Plan Administration	5	
	Not Covered Benefit	0	
	Prior Authorization	2	
	Billing/Claim Processing	0	
<u>Appeal Committee Decision</u>			
	Eligibility Requests Closed Prior to Committee	0	
	Approved	2	
	Upheld Denial	6	
	Upheld Denial with IRO Rights	0	
<b>Total Appeals Received</b>		<b>8</b>	