



Financial and Policyholder Activity Report

April 2008

**HEALTH INSURANCE RISK-SHARING PLAN AUTHORITY
APRIL 2008 MONTHLY REPORT
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Summary Review
Un-audited HIRSP Authority Financial Statements
For the Four-Month Period Ended April 30, 2008

ASSETS

Total assets decreased to \$74.1 million in April 2008, decreasing during the month by \$4.7 million. Cash assets increased \$2.9 million during the month to \$70.5 million as of April 30, 2008. The monthly increase in cash was offset by a \$6.9 million decrease in assessment receivable assets due to April receipt of billed assessments, resulting in the noted net decrease in assets in the month.

Total assets year-to-date in April 2008 decreased by \$641,712 compared to April 2007 total assets, a decrease of 0.9%. Cash assets year-to-date increased by \$1.4 million relative to April 2007, a 2.0% increase. Assessments receivable decreased \$1.5 million or 53.2% compared to April 2007.

LIABILITIES

Total liabilities decreased to \$30.3 million in April 2008, decreasing during the month by \$4.5 million. Unpaid medical loss liabilities decreased by \$359,262 or 3.9% in April to \$8.9 million, and unpaid drug loss liabilities decreased from March to April by \$92,852 or 13.5%. Unearned assessment liability decreased \$3.1 million as assessment receipts were recognized as income during the month. Unearned premium liability decreased \$1.0 million in April, reflecting the HIRSP quarterly premium billing cycle and April recognition of earned premiums.

Total liabilities year-to-date in April 2008 decreased by \$3.8 million relative to total liabilities in April 2007, decreasing 11.2% from the prior year. April 2008 year-to-date aggregate liabilities for unpaid medical and drug claims were \$9.5 million, decreased \$1.3 million or 12.2% compared to 2007 year-to-date aggregate claim liabilities. Additional year-to-date 2008 decreased liabilities compared to 2007 included a 2008 decrease of \$1.9 million in unearned premium liability, a 2008 decrease of \$68,963 in accounts payable liabilities, and a 2008 decrease of \$528,453 in liability for unearned Federal grants, as there was zero liability for Federal grant funds in April 2008.

CALENDAR YEAR 2008 NET INCOME

Net income for the four months ended April 30, 2008 was \$8.6 million, decreased by \$3.4 million relative to 2007 year-to-date net income of \$12.1 million. Year-to-date 2008 changes in income and expense include decreased premium revenues, decreased assessments, decreased total medical losses and total pharmacy losses, decreased administrative expenses, and decreased non-operating revenues.

Net premium revenues of \$31.3 million year-to-date through April 2008 decreased by \$2.6 million 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 16,371 HIRSP contracts in force as of April 30, 2008 compared to 17,910 contracts as of April 2007, the current number of contracts having decreased from the prior year by 1,539. April 2008 year-to-date total operating revenue of \$55.4 million decreased from 2007 year-to-date by \$2.5 million or 4.3%.

Total incurred medical loss expense for the four months ended April 30, 2008 was \$34.1 million, decreased by \$713,996 or 2.1% from the four months ended April 31, 2007. Year-to-date paid medical losses increased to \$43.3 million, increased by \$2.6 million or 6.3% compared to 2007. April 2008 total medical loss expense was decreased from the paid loss amount by \$9.5 million due to decreased loss reserve liabilities, resulting in the noted total expense of \$34.1 million.

Estimated liabilities for loss reserves have decreased by \$6.8 from December 31, 2007 through April 2008. Estimated loss reserve liabilities were decreased in 2008 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 decrease in loss reserve liability flows through revenues and expenses in the income statement, and results in decreased total medical loss expense, decreased total operating expense, and increased reported net income. The year-to-date change in loss reserves resulted in a \$9.5 million decrease in medical loss expense in April 2008. Absent the change in loss reserve liabilities, the year-to-date reported net income of \$8.6 million would have decreased by \$6.8 million and would have been \$1.9 million as of April 2008.

Total pharmacy loss expense year-to-date in 2008 was \$11.3 million, reflecting a 2008 decrease of \$176,169 or 1.5% compared to 2007 year-to-date total pharmacy loss expense. Aggregate medical and pharmacy loss expense for the first four months of 2008 was \$45.3 million, decreased by \$890,165 or 1.9% compared to aggregate medical and pharmacy loss expense of \$46.2 million for the first four months of 2007.

Total administrative expenses and referral fees of \$2.0 million for the first four months of 2008 decreased by 6.5% compared to the same period in 2007. Year-to-date in 2008, WPS administrative expenses decreased 6.2% to \$1.4 million and pharmacy administration fees decreased 6.7% to \$368,831, primarily due to declining HIRSP contract counts. Actuarial services expense decreased 67.8% to \$27,134.

Investment income for the four months ended April 30, 2008 was \$616,951, decreased by \$400,513 or 39.4% compared to the same period in 2007. The decreased investment income is due to decreased interest rate yield on cash deposits in 2008. Year-to-date 2008 total non-operating revenues are comprised solely of interest income, and decreased \$2.0 million compared to year-to-date 2007. Federal grants awarded to HIRSP in fiscal year 2006-07 contributed \$1.6 million to non-operating revenues year-to-date in 2007.

CASH FLOW

Year-to-date 2008 cash flows from operating activities reflect \$46.1 million of sources of cash compared to \$41.7 million in uses of cash. Non-operating activities provided cash of \$735,732. The net change was a \$5.1 million increase in cash through April 2008. The largest use of cash was payment of medical claims.

2008 OPERATING BUDGET

Relative to the 2008 operating budget for the four-month period ended April 30, 2008, actual net income of \$8.6 million exceeded budgeted net income by \$6.2 million. Actual total revenues of \$56.0 million were under budget by \$254,869. The variance in actual revenues included a \$404,840 excess in net premium revenues, a \$325,713 shortfall in provider contributions, and a \$333,996 shortfall in investment income. Actual total expenses of \$47.4 million were under budget by \$6.4 million. Actual medical and pharmacy loss expenses of \$45.3 million were under budget by \$6.3 million, and administrative expenses of \$2.0 million were under budget by \$149,358. Year-to-date net income was \$8.6 million as of April 30, 2008, whereas the 2008 budget projected net income of \$2.4 million.

RETAINED EQUITY

HIRSP Authority total equity decreased by \$177,459 during the month of April 2008 and equaled \$43.7 million as of April 30, 2008. The April decrease in total equity resulted from April 2008 net operating loss of \$302,587 plus April investment income of \$125,128, which resulted in net loss for the month of \$177,459.

In April 2008, policyholders' equity decreased by \$752,817 to equal \$30.4 million, and exceeded RBC target reserves by \$20.3 million. Providers' equity increased by \$627,531 to equal \$6.7 million, and exceeded RBC target reserves by \$3.3 million. Insurers' equity decreased by \$52,173 to equal \$6.7 million, and exceeded RBC target reserves by \$3.3 million. Year-to-date through April 2008, HIRSP Authority total retained equity of \$43.7 million increased by \$3.2 million from the 2007 year-to-date total equity of \$40.5 million.

Year-to-date through April 2008, total reported net income was \$8.6 million and reported net retained equity increased from \$35.1 million as of December 31, 2007 to \$43.7 million as of April 30, 2008. However, as noted under the caption "Calendar Year 2008 Net Income," reported year-to-date net income has been increased by \$6.8 million due to 2008 decreases in estimated loss reserve liabilities, which flow through revenues and expenses in the income statement and result in increased reported net income. Excluding the effect of the 2008 decreases in loss reserve liabilities, year-to-date net income would have been \$1.9 million and net retained equity would have been \$37.0 million as of April 30, 2008.

Health Insurance Risk-Sharing Plan Authority
April 30, 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	67,641,923	70,515,545	-	-	-	-	-	-	-	-
Other Receivables	739,048	575,608	820,274	601,531	-	-	-	-	-	-	-	-
Drug Rebates Receivable	2,298,874	2,006,092	2,081,288	1,610,054	-	-	-	-	-	-	-	-
Assessments Receivable	18,264,346	12,645,085	8,194,412	1,280,201	-	-	-	-	-	-	-	-
Prepaid Items	14,836	14,268	14,431	19,175	-	-	-	-	-	-	-	-
Net Fixed Assets	28,825	28,362	27,899	27,436	-	-	-	-	-	-	-	-
Total Assets	80,063,761	74,813,322	78,780,227	74,053,942	-	-	-	-	-	-	-	-
Liabilities and Fund Equity												
Liabilities:												
Unpaid Medical Loss Liabilities	11,092,064	9,840,187	9,223,069	8,863,807	-	-	-	-	-	-	-	-
Unpaid Prescription Drug Loss Liabilities	575,000	575,000	689,741	596,889	-	-	-	-	-	-	-	-
Unpaid Loss Adjustment Expense	770,000	770,000	770,000	770,000	-	-	-	-	-	-	-	-
Unearned Premiums	12,794,456	7,868,730	12,444,433	11,440,337	-	-	-	-	-	-	-	-
Unearned Assessments	15,613,256	12,862,921	9,839,542	6,732,488	-	-	-	-	-	-	-	-
Unearned Federal Bonus Grant	-	-	-	-	-	-	-	-	-	-	-	-
Accounts Payable and Other Accrued Liabilities	2,115,982	1,851,552	1,919,771	1,934,209	-	-	-	-	-	-	-	-
Total Liabilities	42,960,758	33,768,390	34,886,556	30,337,730	-	-	-	-	-	-	-	-
Fund Equity:												
Policyholder	26,217,667	29,196,272	31,111,460	30,358,643	-	-	-	-	-	-	-	-
Providers	5,076,153	5,526,722	6,054,326	6,681,857	-	-	-	-	-	-	-	-
Insurers	5,809,183	6,321,938	6,727,885	6,675,712	-	-	-	-	-	-	-	-
Total Retained Earnings	37,103,003	41,044,932	43,893,671	43,716,212	-	-	-	-	-	-	-	-
Total Liabilities and Fund Equity	80,063,761	74,813,322	78,780,227	74,053,942	-	-	-	-	-	-	-	-

Health Insurance Risk-Sharing Plan Authority
for the Period Ended April 30, 2008
Calendar Year 2008

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

Operating Revenues	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Gross Premiums	8,531,568	8,724,789	8,663,222	7,706,807	-	-	-	-	-	-	-	-	33,626,386
Premium Subsidized	(580,275)	(577,024)	(582,048)	(561,321)	-	-	-	-	-	-	-	-	(2,300,668)
Net Premium Revenues	7,951,293	8,147,765	8,081,174	7,145,486	-	-	-	-	-	-	-	-	31,325,718
Provider Contribution	2,921,441	2,688,150	3,145,037	3,786,758	-	-	-	-	-	-	-	-	12,541,386
Insurer Assessments	2,651,090	2,750,335	3,023,379	3,107,054	-	-	-	-	-	-	-	-	11,531,858
Total Operating Revenues	13,523,824	13,586,250	14,249,590	14,039,298	-	-	-	-	-	-	-	-	55,398,962
Operating Expenses													
Medical Losses:													
Losses Paid or Approved for Payment	14,669,923	8,238,591	8,956,769	11,470,894	-	-	-	-	-	-	-	-	43,336,177
Increase (Decrease) in Unpaid Losses	(6,376,711)	(1,761,391)	(876,308)	(508,715)	-	-	-	-	-	-	-	-	(9,523,125)
Deductible Subsidy Paid	48,433	67,349	76,337	67,446	-	-	-	-	-	-	-	-	259,565
Total Medical Losses	8,341,645	6,544,549	8,156,798	11,029,625	-	-	-	-	-	-	-	-	34,072,617
Pharmacy Losses:													
Losses Paid or Approved for Payment	3,409,385	3,001,720	2,959,067	3,132,355	-	-	-	-	-	-	-	-	12,502,527
Increase (Decrease) in Unpaid Losses	(266,155)	-	114,741	(92,852)	-	-	-	-	-	-	-	-	(244,266)
Drug Rebates	(286,361)	(267,918)	(280,011)	(277,811)	-	-	-	-	-	-	-	-	(1,112,101)
Subsidy - Coinsurance Out-of-Pocket Max	-	-	77,792	49,939	-	-	-	-	-	-	-	-	127,731
Total Pharmacy Losses	2,856,869	2,733,802	2,871,589	2,811,631	-	-	-	-	-	-	-	-	11,273,891
Total Losses	11,198,514	9,278,351	11,028,387	13,841,256	-	-	-	-	-	-	-	-	45,346,508
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
Authority Admin Fees	55,689	45,916	63,745	51,293	-	-	-	-	-	-	-	-	216,643
WPS Admin Fees	355,393	348,264	350,371	345,470	-	-	-	-	-	-	-	-	1,399,498
Naxtus Admin Fees	93,885	92,686	92,219	90,041	-	-	-	-	-	-	-	-	368,831
Milliman USA Actuarial Services	22,000	6,096	(5,000)	4,038	-	-	-	-	-	-	-	-	27,134
Other Admin Fees	5,226	5,248	5,174	5,272	-	-	-	-	-	-	-	-	20,920
Total Administrative Expenses	532,193	498,210	506,509	496,114	-	-	-	-	-	-	-	-	2,033,026
Referral fees	5,145	4,760	4,900	4,515	-	-	-	-	-	-	-	-	19,320
Total Operating Expenses	11,735,852	9,781,321	11,539,796	14,341,885	-	-	-	-	-	-	-	-	47,398,854
Net Operating Income (Loss)	1,787,972	3,804,929	2,709,794	(302,587)	-	-	-	-	-	-	-	-	8,000,108
Non-Operating Revenues (Expenses)													
Federal Grant	-	-	-	-	-	-	-	-	-	-	-	-	-
Federal Bonus Grant Funds	-	-	-	-	-	-	-	-	-	-	-	-	-
Investment Income	215,878	137,000	138,945	125,128	-	-	-	-	-	-	-	-	616,951
Miscellaneous Income	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Non-operating Revenues (Expenses)	215,878	137,000	138,945	125,128	-	-	-	-	-	-	-	-	616,951
Net Income (Loss)	2,003,850	3,941,929	2,848,739	(177,459)	-	-	-	-	-	-	-	-	8,617,059
Additions to Retained Earnings													
Policyholder													
Retained Earnings, Beginning of Period	24,569,024	26,217,667	29,196,272	31,111,460	-	-	-	-	-	-	-	-	24,569,024
Current Earnings	1,648,643	2,978,605	1,915,188	(752,817)	-	-	-	-	-	-	-	-	5,789,619
Retained Earnings, End of Period	26,217,667	29,196,272	31,111,460	30,358,643	-	-	-	-	-	-	-	-	30,358,643
RBC Target Reserves	(10,107,074)	(10,107,074)	(10,107,074)	(10,107,074)	-	-	-	-	-	-	-	-	(10,107,074)
Retained Earnings in Excess of RBC	16,110,593	19,089,198	21,004,386	20,251,569	-	-	-	-	-	-	-	-	20,251,569
Providers													
Retained Earnings, Beginning of Period	4,763,374	5,076,153	5,526,722	6,054,326	-	-	-	-	-	-	-	-	4,763,374
Current Earnings	312,779	450,569	527,604	627,531	-	-	-	-	-	-	-	-	1,918,483
Retained Earnings, End of Period	5,076,153	5,526,722	6,054,326	6,681,857	-	-	-	-	-	-	-	-	6,681,857
RBC Target Reserves	(3,369,025)	(3,369,025)	(3,369,025)	(3,369,025)	-	-	-	-	-	-	-	-	(3,369,025)
Retained Earnings in Excess of RBC	1,707,128	2,157,697	2,685,301	3,312,832	-	-	-	-	-	-	-	-	3,312,832
Insurers													
Retained Earnings, Beginning of Period	5,766,755	5,809,183	6,321,938	6,727,885	-	-	-	-	-	-	-	-	5,766,755
Current Earnings	42,428	512,755	405,947	(52,173)	-	-	-	-	-	-	-	-	908,957
Retained Earnings, End of Period	5,809,183	6,321,938	6,727,885	6,675,712	-	-	-	-	-	-	-	-	6,675,712
RBC Target Reserves	(3,369,025)	(3,369,025)	(3,369,025)	(3,369,025)	-	-	-	-	-	-	-	-	(3,369,025)
Retained Earnings in Excess of RBC	2,440,158	2,952,913	3,358,860	3,306,687	-	-	-	-	-	-	-	-	3,306,687
Retained Earnings, End of Period	37,103,003	41,044,932	43,893,671	43,716,212	-	-	-	-	-	-	-	-	43,716,212
RBC Target Reserves	(16,845,124)	(16,845,124)	(16,845,124)	(16,845,124)	-	-	-	-	-	-	-	-	(16,845,124)
Retained Earnings in Excess of RBC	20,257,879	24,199,808	27,048,547	26,871,088	-	-	-	-	-	-	-	-	26,871,088

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

STATEMENT OF CASH FLOWS

Cash Flows from Operating Activities	Month of April 2008	YTD Through April 2008
Sources of Cash		
Cash received for premiums	6,369,331	29,101,940
Cash received for assessments	6,914,212	16,984,145
Total Operating Sources	13,283,543	46,086,085
Uses of Cash		
Cash payments for Medical losses	(7,616,298)	(28,316,527)
Cash payments for Pharmacy losses	(2,428,632)	(11,300,801)
Cash payments for referral fees	(4,655)	(18,480)
Cash payments for other expenses	(501,464)	(2,075,963)
Total Operating Uses	(10,551,049)	(41,711,771)
Net Cash Provided (Used) by Operating Activities	2,732,494	4,374,314

Cash Flows from Non-Operating Activities		
Cash received from investment income	141,128	735,732
Cash received from Federal Grant	-	-
Cash received for miscellaneous income	-	-
Net Cash Provided/(Used) by Non-Operating Activities	141,128	735,732

Cash and Cash Equivalents		
Net Increase (Decrease) in Cash Equivalents	2,873,622	5,110,046
Cash and cash equivalents, beginning of period	67,641,923	65,405,499
Cash and Equivalents, End of Period	70,515,545	70,515,545

RECONCILIATION OF NET OPERATING INCOME TO CASH FLOWS FROM OPERATIONS

Net income (loss) from operations	(302,587)	8,000,108
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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	7,588,653	(928,544)
Decrease (increase) in prepaids	(4,745)	(1,083)
Increase (decrease) in liability for premium overpayments	-	-
Increase (decrease) in liability for accounts payable	(3,108,263)	6,692,721
Increase (decrease) in liability for unearned premiums	(1,038,718)	(2,229,049)
Increase (decrease) in liability for medical Loss liabilities	(313,612)	(6,730,470)
Increase (decrease) in liability for pharmacy loss liabilities	(88,234)	(429,369)
Other adjustments	-	-
Total adjustments	3,035,081	(3,625,794)
Net Cash Provided/(Used) by Operating Activities	2,732,494	4,374,314

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

Operating Revenues	April 2008	March 2008	Variance	Year-to-Date Through April 2008	Year-to-Date Through April 2007	Variance
Gross Premiums	7,706,807	8,663,222	(956,415)	33,626,386	35,664,163	(2,037,777)
Premium Subsidized	(561,321)	(582,048)	20,727	(2,300,668)	(1,711,558)	(589,110)
Net Premium Revenues	7,145,486	8,081,174	(935,688)	31,325,718	33,952,605	(2,626,887)
Provider Contribution	3,786,758	3,145,037	641,721	12,541,386	11,519,380	1,022,006
Insurer Assessments	3,107,054	3,023,379	83,675	11,531,858	12,435,972	(904,114)
Total Operating Revenues	14,039,298	14,249,590	(210,292)	55,398,962	57,907,957	(2,508,995)
Operating Expenses						
Medical Losses:						
Losses Paid or Approved for Payment	11,470,894	8,956,769	2,514,125	43,336,177	40,748,989	2,587,188
Increase (Decrease) in Unpaid Losses	(508,715)	(876,308)	367,593	(9,523,125)	(6,233,448)	(3,289,677)
Deductible Subsidy Paid	67,446	76,337	(8,891)	259,565	271,072	(11,507)
Total Medical Losses	11,029,625	8,156,798	2,872,827	34,072,617	34,786,613	(713,996)
Pharmacy Losses:						
Losses Paid or Approved for Payment	3,132,355	2,959,067	173,288	12,502,527	13,453,702	(951,175)
Increase (Decrease) in Unpaid Losses	(92,852)	114,741	(207,593)	(244,266)	(111,067)	(133,199)
Drug Rebates	(277,811)	(280,011)	2,200	(1,112,101)	(1,909,654)	797,553
Subsidy - Coinsurance Out-of-Pocket Max	49,939	77,792	(27,853)	127,731	17,079	110,652
Total Pharmacy Losses	2,811,631	2,871,589	(59,958)	11,273,891	11,450,060	(176,169)
Total Losses	13,841,256	11,028,387	2,812,869	45,346,508	46,236,673	(890,165)
Loss adjustment expenses	-	-	-	-	-	-
Administrative expenses						
Authority Admin Fees	51,293	63,745	(12,452)	216,643	185,520	31,123
WPS Admin Fees	345,470	350,371	(4,901)	1,399,498	1,491,642	(92,144)
Navitus Admin Fees	90,041	92,219	(2,178)	368,831	395,297	(26,466)
Milliman USA Actuarial Services	4,038	(5,000)	9,038	27,134	84,156	(57,022)
Other Admin Fees And Expenses	5,272	5,174	98	20,920	16,781	4,139
Total Administrative Expenses	496,114	506,509	(10,395)	2,033,026	2,173,396	(140,370)
Referral fees	4,515	4,900	(385)	19,320	19,495	(175)
Total Operating Expenses	14,341,885	11,539,796	2,802,089	47,398,854	48,429,564	(1,030,710)
Net Operating Income (Loss)	(302,587)	2,709,794	(3,012,381)	8,000,108	9,478,393	(1,478,285)
Non-Operating Revenues (Expenses)						
Federal Grant	-	-	-	-	-	-
Federal Bonus Grant Funds	-	-	-	-	1,560,772	(1,560,772)
Investment Income	125,128	138,945	(13,817)	616,951	1,017,464	(400,513)
Miscellaneous Income	-	-	-	-	-	-
Total Non-operating Revenues (Expenses)	125,128	138,945	(13,817)	616,951	2,578,236	(1,961,285)
Net Income (Loss)	(177,459)	2,848,739	(3,026,198)	8,617,059	12,056,629	(3,439,570)

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

	April 2008 Budget	April 2008 Actual	Variance	Year-to-Date Through April 2008 Budget	Year-to-Date Through April 2008 Actual	Variance
Operating Revenues						
Gross Premiums	8,014,591	7,706,807	(307,784)	34,233,027	33,626,386	(606,641)
Premium Subsidized	(779,265)	(561,321)	217,944	(3,312,149)	(2,300,668)	1,011,481
Net Premium Revenues	7,235,326	7,145,486	(89,840)	30,920,878	31,325,718	404,840
Provider Contribution	3,639,288	3,786,758	147,470	12,867,099	12,541,386	(325,713)
Insurer Assessments	3,107,054	3,107,054	-	11,531,858	11,531,858	-
Total Operating Revenues	13,981,668	14,039,298	57,630	55,319,835	55,398,962	79,127
Operating Expenses						
Medical and Pharmacy Losses:	14,116,665	13,723,871	392,794	51,364,834	44,959,212	6,405,622
Deductible Subsidy/RX OOP Max	62,307	117,385	(55,078)	267,485	387,296	(119,811)
Total Medical and Pharmacy Losses	14,178,972	13,841,256	337,716	51,632,319	45,346,508	6,285,811
Loss adjustment expenses	-	-	-	-	-	-
Total Administrative Expenses	533,670	496,114	37,556	2,183,612	2,033,026	150,586
Referral fees	4,808	4,515	293	18,092	19,320	(1,228)
Total Operating Expenses	14,717,450	14,341,885	375,565	53,834,023	47,398,854	6,435,169
Net Operating Income (Loss)	(735,782)	(302,587)	433,195	1,485,812	8,000,108	6,514,296
Non-Operating Revenues (Expenses)						
Federal Grant	-	-	-	-	-	-
Federal Bonus Grant Funds	-	-	-	-	-	-
Investment Income	238,996	125,128	(113,868)	950,947	616,951	(333,996)
Miscellaneous Income	-	-	-	-	-	-
Total Non-operating Revenues (Expenses)	238,996	125,128	(113,868)	950,947	616,951	(333,996)
Net Income (Loss)	(496,786)	(177,459)	319,327	2,436,759	8,617,059	6,180,300

Health Insurance Risk-Sharing Plan Authority
Calendar Year 2008 Interim Reconciliation
As of April 30, 2008

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
1. Operating and Administrative Costs under s.149.143(1)													
Medical Losses Paid or Approved for Payment	14,669,923	8,238,591	8,956,769	11,470,894	-	-	-	-	-	-	-	-	43,336,177
Increase (Decrease) in Unpaid Medical Losses	(6,376,711)	(1,761,391)	(876,308)	(508,715)	-	-	-	-	-	-	-	-	(9,523,125)
Pharmacy Losses Paid or Approved for Payment	3,409,385	3,001,720	2,959,067	3,132,355	-	-	-	-	-	-	-	-	12,502,527
Increase (Decrease) in Unpaid Pharmacy Losses	(266,155)	-	114,741	(92,852)	-	-	-	-	-	-	-	-	(244,266)
Drug Rebates	(286,361)	(267,918)	(280,011)	(277,811)	-	-	-	-	-	-	-	-	(1,112,101)
Total Administrative Expenses	537,338	502,970	511,409	500,629	-	-	-	-	-	-	-	-	2,052,346
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	11,687,419	9,713,972	11,385,667	14,224,500	-	-	-	-	-	-	-	-	47,011,558
2. Adjustments to Operating and Administrative Costs													
Total Non-operating Revenue (Expense) - excluding Federal Grant Funds	215,878	137,000	138,945	125,128	-	-	-	-	-	-	-	-	616,951
3. Total Fiscal Year Program Costs to be Split 60% 20% 20%	11,471,541	9,576,972	11,246,722	14,099,372	-	-	-	-	-	-	-	-	46,394,607
4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)													
Funding Shares													
60% Policyholders	6,882,925	5,746,184	6,748,034	8,459,624	-	-	-	-	-	-	-	-	27,836,767
20% Providers	2,294,308	1,915,394	2,249,344	2,819,874	-	-	-	-	-	-	-	-	9,278,920
20% Insurers	2,294,308	1,915,394	2,249,344	2,819,874	-	-	-	-	-	-	-	-	9,278,920
5. Subsidy Funding Shares													
Premium subsidies	580,275	577,024	582,048	561,321	-	-	-	-	-	-	-	-	2,300,668
Deductible Subsidies	48,433	67,349	76,337	67,446	-	-	-	-	-	-	-	-	259,565
Subsidy - coinsurance out-of-pocket Max	-	-	77,792	49,939	-	-	-	-	-	-	-	-	127,731
Total Subsidies	628,708	644,373	736,177	678,706	-	-	-	-	-	-	-	-	2,687,964
Federal Grant Funds Applied to Low Income Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Net Subsidy Funding Needed	628,708	644,373	736,177	678,706	-	-	-	-	-	-	-	-	2,687,964
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	314,354	322,187	368,089	339,353	-	-	-	-	-	-	-	-	1,343,983
Insurers	314,354	322,186	368,088	339,353	-	-	-	-	-	-	-	-	1,343,981
	628,708	644,373	736,177	678,706	-	-	-	-	-	-	-	-	2,687,964
6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)													
Policyholders	6,882,925	5,746,184	6,748,034	8,459,624	-	-	-	-	-	-	-	-	27,836,767
Providers	2,608,662	2,237,581	2,617,433	3,159,227	-	-	-	-	-	-	-	-	10,622,903
Insurers	2,608,662	2,237,580	2,617,432	3,159,227	-	-	-	-	-	-	-	-	10,622,901
7. Operating Revenues by Source													
Policyholders													
Premium	7,951,293	8,147,765	8,081,174	7,145,486	-	-	-	-	-	-	-	-	31,325,718
Premium and Deductible Subsidies Credited to Policyholders	580,275	577,024	582,048	561,321	-	-	-	-	-	-	-	-	2,300,668
Subtotal	8,531,568	8,724,789	8,663,222	7,706,807	-	-	-	-	-	-	-	-	33,626,386
Providers	2,921,441	2,688,150	3,145,037	3,786,758	-	-	-	-	-	-	-	-	12,541,386
Insurers	2,651,090	2,750,335	3,023,379	3,107,054	-	-	-	-	-	-	-	-	11,531,858
Total	14,104,099	14,163,274	14,831,638	14,600,619	-	-	-	-	-	-	-	-	57,699,630

(cont)

(cont)

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
8. Interim Estimate of Surplus/(Deficit) Account Balance for 2008													
Policyholders													
Prior Period Surplus / (Deficit)	24,569,024	26,217,667	29,196,272	31,111,460	-	-	-	-	-	-	-	-	24,569,024
Premium (Including Premium and Deductible Subsidies)	8,531,568	8,724,789	8,663,222	7,706,807	-	-	-	-	-	-	-	-	33,626,386
Less Cost	6,882,925	5,746,184	6,748,034	8,459,624	-	-	-	-	-	-	-	-	27,836,767
Monthly Change	1,648,643	2,978,605	1,915,188	(752,817)	-	-	-	-	-	-	-	-	5,789,619
Ending Surplus / (Deficit)	26,217,667	29,196,272	31,111,460	30,358,643	-	-	-	-	-	-	-	-	30,358,643
Policyholders' RBC Target Reserves	(10,107,074)	(10,107,074)	(10,107,074)	(10,107,074)	-	-	-	-	-	-	-	-	(10,107,074)
Ending Surplus / (Deficit) Net of RBC Reserves	16,110,593	19,089,198	21,004,386	20,251,569	-	-	-	-	-	-	-	-	20,251,569
Providers													
Prior Period Surplus / (Deficit)	4,763,374	5,076,153	5,526,722	6,054,326	-	-	-	-	-	-	-	-	4,763,374
Contribution	2,921,441	2,688,150	3,145,037	3,786,758	-	-	-	-	-	-	-	-	12,541,386
Less Cost	2,608,662	2,237,581	2,617,433	3,159,227	-	-	-	-	-	-	-	-	10,622,903
Monthly Change	312,779	450,569	527,604	627,531	-	-	-	-	-	-	-	-	1,918,483
Ending Surplus / (Deficit)	5,076,153	5,526,722	6,054,326	6,681,857	-	-	-	-	-	-	-	-	6,681,857
Providers' RBC Target Reserves	(3,369,025)	(3,369,025)	(3,369,025)	(3,369,025)	-	-	-	-	-	-	-	-	(3,369,025)
Ending Surplus / (Deficit) Net of RBC Reserves	1,707,128	2,157,697	2,685,301	3,312,832	-	-	-	-	-	-	-	-	3,312,832
Insurers													
Prior Period Surplus / (Deficit)	5,766,755	5,809,183	6,321,938	6,727,885	-	-	-	-	-	-	-	-	5,766,755
Assessment	2,651,090	2,750,335	3,023,379	3,107,054	-	-	-	-	-	-	-	-	11,531,858
Less Cost	2,608,662	2,237,580	2,617,432	3,159,227	-	-	-	-	-	-	-	-	10,622,901
Monthly Change	42,428	512,755	405,947	(52,173)	-	-	-	-	-	-	-	-	908,957
Ending Surplus / (Deficit)	5,809,183	6,321,938	6,727,885	6,675,712	-	-	-	-	-	-	-	-	6,675,712
Insurer's RBC Target Reserves	(3,369,025)	(3,369,025)	(3,369,025)	(3,369,025)	-	-	-	-	-	-	-	-	(3,369,025)
Ending Surplus / (Deficit) Net of RBC Reserves	2,440,158	2,952,913	3,358,860	3,306,687	-	-	-	-	-	-	-	-	3,306,687
Total HIRSP Retained Earnings	37,103,003	41,044,932	43,893,671	43,716,212	-	-	-	-	-	-	-	-	43,716,212
Total RBC Target Reserves	(16,845,124)	(16,845,124)	(16,845,124)	(16,845,124)	-	-	-	-	-	-	-	-	(16,845,124)
Total Retained Earnings in Excess of RBC Target Reserves	20,257,879	24,199,808	27,048,547	26,871,088	-	-	-	-	-	-	-	-	26,871,088

**Health Insurance Risk-Sharing Plan Authority
Monthly Provider Contribution Report
As of April 2008 Month End (4/28/2008)**

Provider Contribution Calculation for the Current Month - Claims by Claim Type						
Claims Incurred 1/1/2008 and After						
Claim Type	Billed Charges		HIRSP Fee Schedule	HIRSP Allowed	Provider Contribution	HIRSP Paid
Professional	\$8,212,013.38		\$4,660,810.40	\$3,333,019.59	\$1,327,790.81	\$1,971,133.50
Hospital Outpatient	\$4,763,724.99		\$3,405,038.97	\$2,422,816.42	\$982,222.55	\$1,693,562.70
Hospital Inpatient	\$6,527,066.14		\$3,783,533.62	\$2,681,145.47	\$1,102,388.15	\$2,513,651.94
Nursing Home	\$20,227.78		\$19,820.36	\$14,072.50	\$5,747.86	\$13,871.40
Other	\$748,397.79		\$572,681.42	\$416,886.40	\$155,795.02	\$235,188.20
Total	\$20,271,430.08		\$12,441,884.77	\$8,867,940.38	\$3,573,944.39	\$6,427,407.74

Claims Incurred Prior to 1/1/2008						
Claim Type	Billed Charges	U&C Percentage	Usual and Customary	HIRSP Allowed	Provider Contribution	HIRSP Paid
Professional	\$293,083.05	28.5%	\$209,554.38	\$111,112.95	\$98,441.43	\$96,539.08
Hospital Outpatient	\$53,346.60	28.5%	\$38,142.82	\$35,549.56	\$2,593.26	\$26,430.14
Hospital Inpatient	\$623,757.91	28.5%	\$445,986.91	\$217,968.53	\$228,018.38	\$218,196.45
Nursing Home	\$880.26	28.5%	\$629.39	-\$2,703.67	\$3,333.06	-\$2,374.12
Other	\$70,629.20	28.5%	\$50,499.88	\$20,619.28	\$29,880.60	-\$213.46
Total	\$1,041,697.02		\$744,813.37	\$382,546.65	\$362,266.72	\$338,578.09

Provider Contribution on the Increase(Decrease) in Unpaid Losses	\$ (149,453.00)
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Total Provider Contribution	\$3,786,758.11
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**Wisconsin Health Insurance Risk-Sharing Plan
Breakdown of Incurred Claims and Earned Premium
by Quarter and Plan**

3Q06						
Plan	Total Dollars			Per Member Per Month		
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium	
Plan 1A	\$21,855,135	\$11,414,082	191.5%	\$1,041.46	\$543.92	
Plan 1B	17,802,410	15,021,978	118.5%	577.29	487.13	
Plan 2	2,110,951	1,313,471	160.7%	701.78	436.66	
Total	\$41,768,495	\$27,749,531	150.5%	\$761.77	\$506.09	
4Q06						
Plan	Total Dollars			Per Member Per Month		
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium	
Plan 1A	\$25,551,162	\$11,232,336	227.5%	\$1,248.35	\$548.78	
Plan 1B	21,899,539	14,982,682	146.2%	715.79	489.71	
Plan 2	2,121,724	1,319,577	160.8%	712.95	443.41	
Total	\$49,572,425	\$27,534,595	180.0%	\$917.35	\$509.53	
1Q07						
Plan	Total Dollars			Per Member Per Month		
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium	
Plan 1A	\$19,269,099	\$10,353,629	186.1%	\$1,000.73	\$537.71	
Plan 1B	17,199,624	15,315,916	112.3%	546.11	486.30	
Plan 2	1,744,864	1,258,329	138.7%	602.72	434.66	
Total	\$38,213,587	\$26,927,874	141.9%	\$712.34	\$501.96	
2Q07						
Plan	Total Dollars			Per Member Per Month		
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium	
Plan 1A	\$20,901,683	\$10,280,888	203.3%	\$1,103.81	\$542.93	
Plan 1B	20,726,263	15,315,146	135.3%	664.35	490.90	
Plan 2	1,713,211	1,256,896	136.3%	604.09	443.19	
Total	\$43,341,157	\$26,852,930	161.4%	\$818.22	\$506.95	
3Q07						
Plan	Total Dollars			Per Member Per Month		
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium	
Plan 1A	\$21,057,766	\$10,685,401	197.1%	\$1,148.81	\$582.95	
Plan 1B	19,146,919	14,423,771	132.7%	620.79	467.65	
Plan 2	1,488,461	987,774	150.7%	531.21	352.52	
Total	\$41,693,147	\$26,096,946	159.8%	\$802.18	\$502.11	
4Q07						
Plan	Total Dollars			Per Member Per Month		
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium	
Plan 1A	\$22,972,385	\$10,369,954	221.5%	\$1,293.56	\$583.93	
Plan 1B	24,374,402	14,425,926	169.0%	789.45	467.24	
Plan 2	1,274,712	993,617	128.3%	457.21	356.39	
Total	\$48,621,499	\$25,789,496	188.5%	\$945.54	\$501.53	

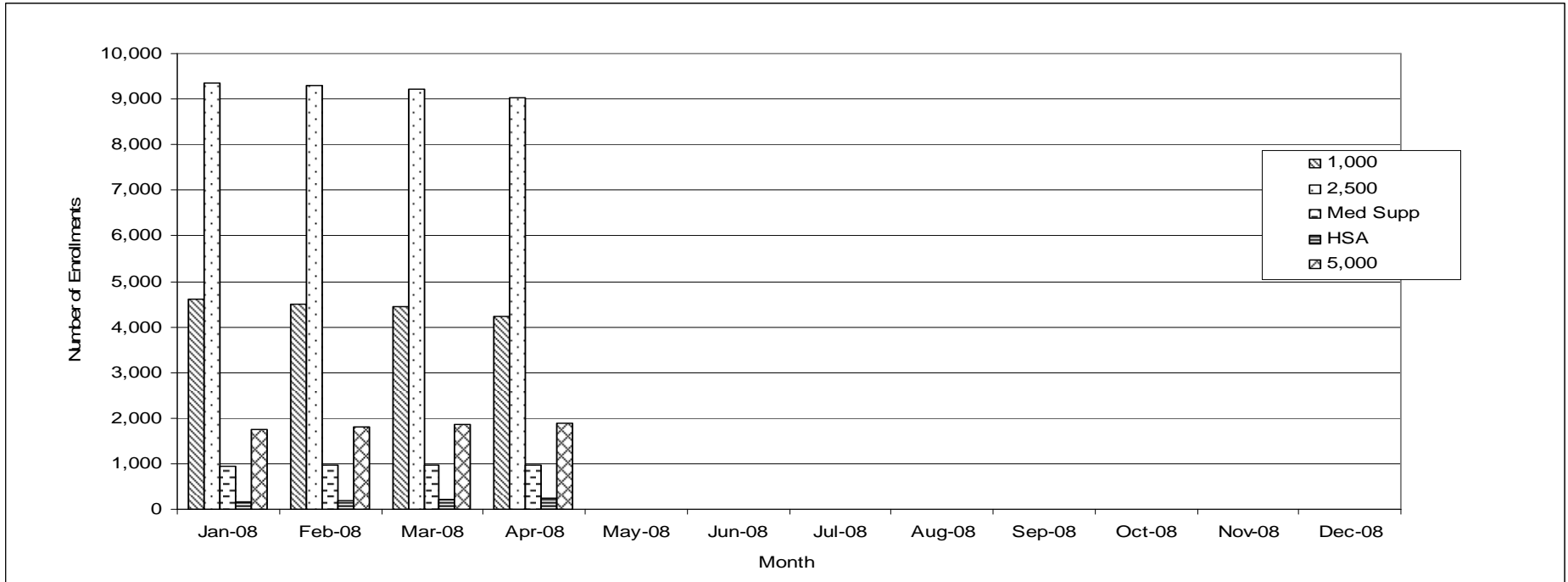
NOTES: Loss Ratio = Incurred Claims / Earned Premiums
 Earned Premium includes Premium Subsidies
 Incurred Claims include Provider Contributions
 Administrative Expenses are not included in this exhibit
 Incurred Claims and Earned Premiums are updated quarterly and restated to reflect
 the most current information available as of March 31, 2008

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

April 2008
16,371

April 2007
17,734

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	4,607	4,501	4,455	4,242								
2,500	9,341	9,294	9,229	9,020								
Med Supp	940	968	968	969								
HSA	162	183	215	244								
5,000	1,748	1,810	1,857	1,896								
Total	16,798	16,756	16,724	16,371								



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

Total Subsidy by Plan			
Plan		Number of Policyholders	% of Total
HIRSP 1,000	Non-subsidized	2,532	15.5%
	Subsidized	1,710	10.4%
	Total	4,242	25.9%
HIRSP 2,500	Non-subsidized	8,484	51.8%
	Subsidized	536	3.3%
	Total	9,020	55.1%
HIRSP Medicare Supplement	Non-subsidized	590	3.6%
	Subsidized	379	2.3%
	Total	969	5.9%
HIRSP Health Savings Account	Non-subsidized	229	1.4%
	Subsidized	15	0.1%
	Total	244	1.5%
HIRSP 5,000	Non-subsidized	1,683	10.3%
	Subsidized	213	1.3%
	Total	1,896	11.6%
Grand Total		16,371	100.0%

Total Subsidy by Level		
Subsidy Level	Number of Policyholders	% of Total
\$25,000 Above	13,518	82.6%
\$20,000 - \$24,999	308	1.9%
\$17,000 - \$19,999	393	2.4%
\$14,000 - \$16,999	486	3.0%
\$10,000 - \$13,999	1,267	7.7%
\$9,999 Under	399	2.4%
Total	16,371	100.0%

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

Summary of Monthly Application Activity	
Number of Applications Pending March	121
Number of Applications Received April	411
Number of Applications Rejected April	30
Number of Applications Closed April	57
Number of Applications Pending April	123
Number of Applications Approved April	322

Detail of Applications Rejected	
65 or older	0
Current Medicaid Coverage	4
Currently covered by other insurance	0
Did not qualify for lost employer coverage.	7
Eligible for Group Health Coverage	17
Insufficient Premium Submitted	0
No Medical Reason	0
Not a Wisconsin Resident	2
Previous HIRSP <12 Months Ago	0
Total	30

Detail of Applications Closed	
Applicant Request	5
Application Data requested; never received	1
Proper eligibility requested; never received	51
Total	57

HIRSP 2008 New Enrollees						
Date	1,000	2,500	Med Supp	3,500	5,000	Total
January	79	218	3	23	100	423
February	43	126	1	25	80	275
March	36	141	1	36	84	298
April	43	173	3	29	116	364
May						
June						
July						
August						
September						
October						
November						
December						
Total	201	658	8	113	380	1360

HIRSP 2008 Disenrollment						
Date	1,000	2,500	Med Supp	3,500	5,000	Total
January	302	348	26	0	2	678
February	146	192	3	5	23	369
March	88	208	10	0	34	340
April	269	382	15	5	61	732
May						
June						
July						
August						
September						
October						
November						
December						
Total	805	1130	54	10	120	2119

Health Insurance Risk-Sharing Plan Authority

Monthly Eligibility Report

April, 2008

A.	Medicare Eligible	4
B.	HIV +	2
C.	Eligible Individual	178
	<i>Newborn Apps</i>	
D.	Letter of Medical Eligibility	138
	1. <i>Letter of Rejection By:</i>	
	<i>Alliance Insurance</i>	2
	<i>American Community Mutual Insurance</i>	18
	<i>American Family</i>	40
	<i>American Heritage</i>	4
	<i>American Medical Security Group</i>	4
	<i>American Republic</i>	4
	<i>Arise</i>	4
	<i>Assurant Health</i>	36
	<i>Blue Cross & Blue Shield United of Wisconsin</i>	52
	<i>Celtic Life Insurance Company</i>	4
	<i>Consumer Life Insurance Company</i>	4
	<i>Dean Health Plan</i>	4
	<i>Golden Rule Insurance Company</i>	34
	<i>Humana Insurance Company</i>	36
	<i>Mega Life and Health Insurance</i>	10
	<i>Pekin Life Insurance</i>	2
	<i>Security Health Plan</i>	8
	<i>Unity Health Plan</i>	2
	<i>Wisconsin Physicians Service Insurance</i>	2
	2. <i>Notice of Benefit Reduction</i>	3
	3. <i>Notice of Premium increase due to a Health Reason</i>	0
	Total	322

Health Insurance Risk-Sharing Plan Authority
Medical Claims Denied Report
AS OF APRIL 2008 MONTH END (4/24/2008)

Processed Month	All Plans			Denial Rate
	Paid	Denied	Total	
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%
MARCH 2008	27,612	5,484	33,096	16.6%
APRIL 2008	31,274	6,312	37,586	16.8%

Denial Reason Detail		
Volume	% of Total	Reason
1326	3.53%	DUPLICATE CLAIM/SERVICE
683	1.82%	EXPENSE(S) INCURRED AFTER COVERAGE TERMINATED. SERVICES PROVIDED AFTER THE TERMINATION DATE, NON-COVERED
554	1.47%	NONCOVERED SERVICES BECAUSE THIS A ROUTINE EXAM OR SCREENING PROCEDURE DONE IN CONJUNCTION OF A ROUTINE EXAM.
528	1.40%	SERVICES PERFORMED BY A PROVIDER WHO IS NOT MEDICAID CERTIFIED ARE NOT COVERED
506	1.35%	THIS IS A PREEXISTING CONDITION. MEDICAL RECORDS OBTAINED FROM YOUR PROVIDER HAVE IDENTIFIED A PRE-EXISTING CONDITION.
476	1.27%	CLAIM DENIED/REDUCED BECAUSE CHARGES HAVE BEEN PAID BY ANOTHER PAYER AS PART OF COORDINATION OF BENEFITS.
227	0.60%	THIS (THESE) SERVICE(S) IS (ARE) NOT COVERED.
190	0.51%	THIS PROCEDURE IS INCIDENTAL TO AND CONSIDERED PART OF THE PRIMARY PROCEDURE.
153	0.41%	WE WILL BE ABLE TO COMPLETE PROCESSING OF THIS CLAIM WHEN WE RECEIVE THE MEDICAL RECORDS WE REQUESTED.
141	0.38%	WE WERE UNABLE TO PROCESS YOUR CLAIM BECAUSE WE DIDNT RECEIVE A REPLY TO OUR QUESTIONAIRE REGARDING WORKER'S COMPENSATION.

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 Authority
Pharmacy Claims Denied Report
As of April 2008 Month End (04/30/2008)**

Processed Month	Denied	% of Total
April 2007	14,885	18.51%
May 2007	17,209	21.13%
June 2007	16,770	20.59%
July 2007	16,482	19.31%
August 2007	16,865	19.34%
September 2007	15,983	20.33%
October 2007	16,711	18.83%
November 2007	16,196	19.15%
December 2007	15,193	18.24%
January 2008	15,826	19.92%
February 2008	11,654	15.92%
March 2008	10,368	14.66%
April 2008	10,325	14.60%

Denial Reason Detail		
Reason	Volume	% of Total
Refill Too Soon	3,244	4.59%
Product/Service Not Covered	2,255	3.19%
Plan Limitations Exceeded	1,496	2.11%
Submit Bill to Other Processor or Primary Payer	1,243	1.76%
Missing/Invalid Dispense as Written Code (DAW)	458	0.65%
Prior Authorization Required	347	0.49%
Duplicate Paid/Captured Claim	274	0.39%
DUR Reject Error	269	0.38%
Claim Submitted Does Not Match Prior Authorization	236	0.33%
Missing/Invalid Prescriber Identification	117	0.17%

Note:

- 1) Each prescription processed and denied is counted as one claim

- 2) Note the different end of month date from previous reports in this packet. This is due to these figures being taken from a production PBM report rather than from the current HIRSP plan administrator's reporting files.

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

Grievance

<u>Type of Grievance</u>		<u># of Grievances</u>	
	Drug & Drug Formulary	7	
	Enrollment/Eligibility Requirements	15	
	Not Covered Benefit	12	
	Not Medically Necessary	3	
	Plan Administration	6	
	Prior Authorization	4	
	Experimental Treatment	1	
	Billing/Claim Processing	4	
<u>Grievance Committee Decision</u>			
	Eligibility Request Closed Prior to Committee	0	
	Approved	27	
	Upheld Denial	23	
	Partial Approval	2	
Total Grievances Received		52	

Appeal

<u>Type of Appeal</u>		<u># of Appeal</u>	
	Drug & Drug Formulary	0	
	Enrollment/Eligibility Requirements	1	
	Experimental Treatment	0	
	Not Medically Necessary	1	
	Plan Administration	0	
	Not Covered Benefit	1	
	Prior Authorization	0	
	Billing/Claim Processing	0	
<u>Appeal Committee Decision</u>			
	Eligibility Requests Closed Prior to Committee	0	
	Approved	1	
	Upheld Denial	1	
	Upheld Denial with IRO Rights	1	
Total Appeals Received		3	