JOINT COMMITTEE ON GOVERNMENT AND FINANCE

Materials Distributed

June 5, 2007

May 8, 2007

3:00 - 4:00 p.m.

Joint Committee on Government and Finance

Senate House

Tomblin, Chair Thompson, Chair Chafin Caputo (absent)

Helmick DeLong
Kessler Webster
Sharpe White
Caruth Armstead
Deem Border

President Tomblin, Cochair, presided.

1. Approval of Minutes

Upon motion by Speaker Thompson, properly adopted, the minutes of the April 18, 2007, meeting were approved.

2. Lottery Commission and General Revenue Reports

Distributed to members of the Committee were the following: Lottery Operations report for the month ended March 31, 2007 and the General Revenue Fund status report as of April 30, 2007. Distributed with each of the reports were an analysis and a summary of the reports.

3. PEIA, BRIM and CHIP Reports

The following BRIM reports were distributed: An unaudited balance sheet and unaudited income statement for the period ending March 31, 2007.

Robert Ferguson, Jr., Cabinet Secretary, Department of Administration, reported investment income for BRIM was about \$6.8 million for all of FY 06 and so far, with 9 months in FY 07, investment income is \$60.1 million. There is no overall unfunded liabilities except Senate Bill 3 liabilities. Chuck Jones, Director of BRIM, stated that BRIM did pay the claim against the Attorney General's Office for \$125,000.

The following reports from CHIP were distributed: A report of enrollment for April 2007 and financial statements for period ending March 31, 2007. Secretary Ferguson said there is 25,158 children in the program. CHIP will be the lead on pre-screening children K-12 to cover those children that are not covered by other insurance programs.

The following monthly PEIA reports were distributed: Monthly Management Report, Financial Report and Prescription Drug Report for March 2007. Secretary Ferguson said medical expenses are trending at zero and pharmacy is 11 ½ % higher than it was the year before.

WEST VIRGINIA LEGISLATURE

Office of the Legislative Auditor

Budget Division Building I, Room 332-West Wing 1900 Kanawha Bivd, East Charleston, WV 25305-0590



304-347-4870

June 1, 2007

Executive Summary of Lottery, Unemployment, General Revenue and State Road Fund Reports to Joint Committee

Lottery Commission as of April 30, 2007:

Appears to be in good condition. Gross receipts for the months of July - April of fiscal year 2006-2007, were \$ 1,302,899,000.00 which was 3.14% above the same months of fiscal year 2005-2006.

General Revenue Fund as of May 31, 2007:

Collections were at 104.21% of the yearly estimate as of May 31, 2007.

State Road Fund as of May 31, 2007:

Fund collections were at 106.29 of the yearly estimate.

Unemployment Compensation Trust as of March 31, 2007:

Overall ending trust fund balance was \$ 13.9 million greater on March 31, 2007 than on March 31, 2006. Overall disbursements were \$1.8 million less and receipts were \$ 384 thousand greater on March 31, 2007 than on March 31, 2006.

Joint Committee on Government and Finance

WEST VIRGINIA LEGISLATURE

Office of the Legislative Auditor

Budget Division Building 1, Room 332-West Wing 1900 Kanawha Blvd. East Charleston, WV 25305-0590



304-347-4870

MEMORANDUM

To: Honorable Senate President Tomblin

Honorable House of Delegates Speaker Thompson

Honorable Members of the Joint Committee on Government and

Finance

From: Ellen Clark, CPA

Director Budget Division Legislative Auditor's Office

Date: June 1, 2007

Re: Review of West Virginia Lottery Financial Information

As of April 30, 2007 (FY 2007)

We performed an analysis of the Statement of Revenues, Expenses and Retained Earnings for the month ended April 30, 2007, from monthly unaudited financial reports furnished to our office by the West Virginia Lottery Commission. This report is for ten months of fiscal year 2006-2007. The results are as follows:

Lottery Revenues:

Gross lottery revenues are receipts from on-line games, instant games and video lottery. These gross receipts totaled \$1,302,899,000.00. These gross receipts were 3.14 % ABOVE the total as of April 30, 2006 of preceding fiscal year, 2005-2006. This number does not include commission and prize deductions. Gross profit (Gross revenues minus commissions and prize costs) for July 2006 - April 2007 was \$ 568,971,000.00; for the previous fiscal year it was \$539,145,000.00. Expressed as a percentage, gross profit is **5.53% higher** for July - April 2007 than for July - April 2006.

Joint Committee on Government and Finance

Operating Income:

Operating income was \$ 555,646,000.00 for July 2006 - April 2007. For July 2005- March 2006 it was \$ 523,614,000.00. This was an increase of 6.12%. After additions and subtractions of non-operating income and expenses, distributions to the state were \$540,014,000.00.

Operating Transfers to the State of West Virginia:

A total of \$ 540,014,000.00 has been accrued to the state of West Virginia for fiscal year 2006-2007. This is on an accrual basis and may not correspond to the actual cash transfers made during the same time period. (Amounts owed to the different accounts according to the Lottery Act are calculated monthly and accrued to the state; actual cash transfers are often made based upon actual cash flow needs of the day-to-day operation of the lottery.)

A schedule of cash transfers follows:

Bureau of Senior Services		ş	42,136,000.00
Department of Education		ş	32,704,000.00
Educational Broadcasting Authority			
Library Commission	\$		10,522,000.00
Higher Education-Central Office	ş		38,834,000.00
Tourism		\$	7,868,000.00
Department of Natural Resources		ş	3,428,000.00
Division of Culture and History	\$		5,222,000.00
Department of Education and Arts		\$	1,385,000.00
State Building Commission		\$	9,998,000.00

Lottery continued

School Building Authority	\$ 18,000,000.00
SUBTOTAL BUDGETARY TRANSFERS	\$170,097,000.00

Excess Lottery Fund

General Purpose Fund	65,000,000.00
Economic Development Fund	19,000,000.00
Traffic Fund	0
Excess Lottery Surplus	55,330,000.00
Education Improvement Fund	10,000,000.00
WV Infrastructure Council Fund	40,000,000.00
Higher Education Improvement Fund	27,000,000.00
State Park Improvement Fund	5,000,000.00
Refundable Credit	2,989,000.00
School Building Authority	19,000,000.00
TOTAL EXCESS LOTTERY FUND	243,319,000.00

Senate Bill 1010 and 1017 (2006 lottery surplus to TRAFFIC, Development Office, Office of Technology, Capital Outlay Parks)

104,253,000.00

Veterans Instant Ticket Fund

801,000.00

RACETRACK VIDEO LOTTERY TRANSFERS:	
Tourism Promotion Fund	\$10,094,000.00
Development Office Promo Fund	\$2,753,000.00
Research Challenge Fund .5%	\$3,671,000.00

Lottery continued

TOTAL TRANSFERS	*\$558,835,000.0			
SUBTOTAL VIDEO LOTTERY TRANSFERS:	\$40,365,000.00			
1-21				
Workers Compensation Debt Reduction Fund 7%	\$11,000,000.00			
Capitol Dome & Cap. Improvements Fund .5%	\$5,341,000.00			
Cultural Facilities and Cap. Resources Fund .5%	\$1,500,000.00			
Parking Garage Fund 1%	\$500,000.00			
Parking Garage Fund .0625%	\$459,000.00			
Capitol Renovation and Improvement Fund .6875%	\$5,047,000.00			

^{*} CASH BASIS

Total Applicable to last FY 2006:	147,676,000.00
Total Cash Distributions July -April 2007.	558,835,000.00
Total Applied to FY 2006:	147,676,000.00
Total Applied to FY 2007:	411,159,000.00
Total Accrued for FY 2007:	128,855,000.00



P.O. BOX 2067 CHARLESTON, WV 25327

Joe Manchin III Governor PHONE: 304-558-0500 FAX: 304-558-3321

> John C. Musgrave Director

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MAY 1 7 2007

MANAGER

MEMORANDUM.

TO:

Joint Committee on Government and Finance

FROM:

John C. Musgrave, Director

RE:

Monthly Report on Lottery Operations

Month Ending April 30, 2007

DATE:

May 18, 2007

This report of the Lottery operations is provided pursuant to the State Lottery Act.

Financial statements of the Lottery for the month ending April 30, 2007 are attached. Lottery revenue, which includes on-line, instant and video lottery sales, was \$131,198,246 for the month of April.

Transfers of lottery revenue totaling \$40,477,042 made for the month of April to the designated state agencies per Senate Bill 125, Veterans Instant Ticket Fund and the Racetrack Video Lottery Act (§29-22A-10). The amount transferred to each agency is shown in Note 8 on pages 14 and 15 of the attached financial statements.

The number of traditional and limited retailers active as of April 30, 2007 was 1,654 and 1,687 respectively.

A listing of the names and amounts of prize winners has been provided to the Clerk of the Senate, the Clerk of the House and Legislative Services.

If any member of the Committee has questions concerning the Lottery, please call me. Also if any members of the Legislature wish to visit the Lottery offices, I would be pleased to show them our facilities and discuss the Lottery with them.

JCM/rd Attachment

pc: Honorable Joe Manchin III

James Robert Alson, Cabine

James Robert Alsop, Cabinet Secretary - Dept. of Revenue John Perdue, Treasurer

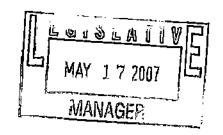
Glen B. Gainer III, Auditor

Members of the West Virginia Lottery Commission

www.wvlottery.com

WEST VIRGINIA LOTTERY





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4. Leasing Report, Department of Administration

A leasing report for the month of April 2007 was distributed. Secretary Ferguson said there has been 21 changes for the month with 3 new contracts, 14 straight renewals, 1 with a decrease in square footage, I with a rent increase, 1 adding square footage and increasing rent and I decreasing.

5. Departments of Health and Human Resources (DHHR) Monthly Reports

A Medicaid report dated May 2007 was distributed. Martha Walker, Cabinet Secretary, DHHR, said that Medicaid is in good financial shape.

6. Monthly Report on the Pharmaceutical Cost Management Council

Shana Phares, Acting Pharmaceutical Advocate and Chair of the Pharmaceutical Cost Management Council, discussed the Advertising Rule and the Central Fill Pharmacy.

7. Department of Transportation

Paul Mattox, Cabinet Secretary, Department of Highways, discussed and answered questions on the Core Maintenance Program and the sale of DOH equipment. Secretary Mattox said the Core Maintenance Program is not an excuse for out-sourcing routine maintenance work or as a means by which management is looking to cut employees from the payroll. The 10 districts in the state will handle the heavy equipment work that needs to be done. Secretary Mattox stated that everyone will be given the equipment they need to deliver the Core Maintenance Program. The idle equipment is what is being sold at the auction.

8. Approval of DOH Audit Contract

Upon motion by Senator Helmick, properly adopted, Mr. Allred is authorized to enter into the contract for the DOH Audit.

9. Scheduled Interim Dates

June 3 - 5 July 8 - 10 August 19 - 21

September 9 - 11

October 7 - 9

November 16 - 18 (Friday, Saturday and Sunday)

December 9 - 11

January 6 - 8, 2008

The meeting was adjourned.

WEST VIRGINIA LOTTERY BALANCE SHEETS (In Thousands)

-Unaudited-

ASSETS		April 30, 2007		June 30, 2006
Current assets:				
Cash and cash equivalents	\$	152,224	\$	197,719
Accounts receivable		37,547		24,790
Inventory		639		588
Current portion of investments held in trust		23		57
Other assets		1,595		1,455
Total current assets	_	192,028	-	224,609
Noncurrent assets:			_	
Capital assets		12,623		11 710
Less accumulated depreciation and amortization		(11,518)		11,719
	-	1,105	_	(11,046)
• •	-	1,200	-	673
Investments held in trust, less current portion	_	280		612
Total assets	s _	193,413	\$	225,894
LIABILITIES AND NET ASSETS	_	<u></u> _		
Current liabilities:				
Accrued nonoperating distributions to the				
State of West Virginia	\$	128,855	\$	147,676
Estimated prize claims	-	13,207	•	15,992
Accounts payable		1,503		2,745
Other accrued liabilities		28,661		38,579
Current portion of deferred jackpot prize obligations		159		336
Total current liabilities		172,385	_	205,328
Deferred jackpot prize obligations, less current portion		135	_	316
Total liabilities Not assets:	_	172,520	_	205,644
Invested in capital assets		1,105		673
Restricted assets (see note 8)		20,643		20,000
Unrestricted (deficit)		(855)		(423)
Total net assets	_	20,893	_	20,250
Total liabilities and net assets	\$	193,413	\$	225,894

The accompanying notes are an integral part of these financial statements.

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STATEMENTS OF REVENUES, EXPENSES AND CHANGES IN FUND NET ASSETS FOR THE TEN MONTH PERIOD ENDED APRIL 30, 2007

(In Thousands)

-Unaudited-

	CURRENT MONTH				YEAR TO DATE			
t aur	2007		2006		2007		2006	
Lottery revenues								
On-line games	\$ 6,063	\$	8,038	\$	73,551	\$	85,646	
Instant games	8,067		10,246		89,108	•	98,410	
Racetrack video lottery	82,614		82,214		810,151		780,320	
Limited video lottery	34,454		31,502		330,089		298,837	
Tamasııı I I	131,198	•	132,000	-	1,302,899	-	1,263,213	
Less commissions On-line games				-		•	_ 2,200,22,2	
	424		563		5,149		5,995	
Instant games	565		717		6,238		6,889	
Racetrack video lottery	39,258		39,068		445,552		431,377	
Limited video lottery	16,883		16,671	_	173,333	_	161,590	
	57,130		57,019		630,272		605,851	
Less on-line prizes	2,922		4,274		36,850		43,708	
Less instant prizes	5,464		7,163		60,583		67,209	
Less ticket costs	122		164		1,308		1,778	
Less vendor fees and costs	455	_	549		4,915		5,522	
	8,963	_	12,150		103,656	•	118,217	
Gross profit	65,105		62,831		568,971	•	-	
Administrative expenses		-	,	•		-	539,145	
Advertising and promotions	565		626		7,607		6,453	
Wages and related benefits	516		516		4,885		4,674	
Telecommunications	225		273		1,993		1,866	
Contractual and professional	512		89		2,925		2,892	
Rental	71		51		549		488	
Depreciation and amortization	48		111		472		1,130	
Other administrative expenses	141		232		1,195		972	
-	2,078		1,898	-	19,626	-	18,475	
Other Operating Income	3,866	-	902	-	6,301	_	2,944	
	, , , , , , , , , , , , , , , , , , , 	_		-	0,001	_	2,3-1-1	
Operating Income	66,893		61,835		555,646		523,614	
Nonoperating income (expense)	-			_		_	********	
Investment income	638		653		5,960		3,374	
Interest expense	(2)		(5)		(31)		(78)	
Distributions to municipalities and counties	(676)		(617)		(6,470)		(5,857)	
Distributions to racetracks-capital reinvestment	(3,331)		(3,315)		(14,448)		(13,245)	
Distributions to the State of West Virginia	(63,437)	_	(58,551)		(540,014)		(507,808)	
	(66,808)		(61,835)		(555,003)	_	(523,614)	
Net income	85		<u> </u>	_	643	_		
Net assets, beginning of year	20,250		250		20 250		950	
Net assets, end of year	\$ 20,335	s _	250	s	20,250 20,893	s —	250 250	

The accompanying notes are an integral part of these financial statements.

WEST VIRGINIA LOTTERY STATEMENTS OF CASH FLOWS FOR THE TEN MONTH PERIOD ENDED APRIL 30, 2007

(In Thousands) -Unaudited-

Cash flows from operating activities:		2007		2006
Cash received from customers and other sources	_			2000
Cash payments for:	\$	1,296,443	\$	1,258,621
Personnel costs				
Suppliers		(4,885)		(4,692)
Other operating costs		(30,706)		(2,556)
Cash provided by an action of the		<u>(716,772)</u>		(727,943)
Cash provided by operating activities		544,080		523,430
Cash flows from noncapital financing activities:				
Nonoperating distributions to the State of West Virginia				
Distributions to municipalities and counties		(558,835)		(446,305)
Distributions to racetrack from racetrack cap. reinv. fund		(6,407)		(5,761)
Deferred jackpot prize obligations and related interest paid		(29,725)		(15,870)
Cash used in proposite 1 5	_	(31)		(78)
Cash used in noncapital financing activities	_	(594,998)	-	(468,014)
Cash flows from conital and related for			-	
Cash flows from capital and related financing acitivities: Purchases of capital assets				
or caption assets		(904)		-
Cash flows from investing activities:				
Maturities of investments held in trust				
Investment earnings received		387		816
Cash provided by investing activities		<u> </u>		(3,348)
* The state of the	-	<u>6,327</u> _	_	(2,532)
Increase (decrease) in cash and cash equivalents				
A COUNTY OF THE COUNTY ENTERING		(45,495)		52,884
Cash and cash equivalents - beginning of period				•
Cash and cash equivalents - end of period	_	<u> 197,719</u>	_	113,742
chit of benon	s	152,224	\$	166,626
Reconciliation of operating income to net cash provided by open				
Operating income				
Adjustments to reconcile operating income to	\$	555,646	\$	523,621
cash provided by operating activities.				
Depreciation and amortization				
Changes in operating assets and liabilities:		472		1,130
(Increase) decrease in accounts receivable				·
(Increase) decrease in inventory		(12,758)		7,536
(Increase) decrease in other assets		(51)		(107)
Increase (decrease) in estimated prize claims		(140)		65
Increase (decrease) in accounts payable		(2,784)		5,614
Increase (decrease) in other accrued liabilities		(1,242)		(359)
Cash provided by operating activities		4,937	_	(14,070)
by o surer of oberstrug seriaties	\$	544,080	s	523,430
tri.				

The accompanying notes are an integral part of these financial statements.

NOTE 1 - LEGISLATIVE ENACTMENT

The West Virginia Lottery (Lottery) was established by the State Lottery Act (Act) passed April 13, 1985, which created a special fund in the State Treasury designated as the "State Lottery Fund." The purpose of the Act was to establish and implement a state-operated lottery under the supervision of a state lottery commission (Commission) and a director. The Commission, consisting of seven members, and the Director are appointed by the Governor. Under the Act, the Commission has certain powers and the duty to establish rules for conducting games, to select the type and number of gaming systems or games and to enter into contracts and agreements, and to do all acts necessary or incidental to the performance of its duties and exercise of its power and duty to operate the Lottery in a highly efficient manner. The Act provides that a minimum annual average of 45% of the gross amount received from each lottery shall be allocated for prizes and also provides for certain limitations on expenses necessary for operation and administration of the Lottery. To the extent available, remaining net profits are to be distributed to the State of West Virginia. As the State is able to impose its will over the Lottery, the Lottery is considered a component unit of the State and its financial statements are discretely presented in the comprehensive annual financial report of the State.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A summary of the significant accounting policies of the Lottery is presented below.

BASIS OF PRESENTATION — The West Virginia Lottery is a component unit of the State of West Virginia, and is accounted for as a proprietary fund special purpose government engaged in business type activities. In accordance with Governmental Accounting Standards Board (GASB) Statement No. 34, "Basic Financial Statements and Management's Discussion and Analysis for State and Local Governments," and with accounting principles generally accepted in the United States of America, the financial statements are prepared on the accrual basis of accounting which requires recognition of revenue when earned and expenses when incurred. As permitted by Governmental Accounting Standards Board (GASB) Statement No. 20, "Accounting and Financial Reporting for Proprietary Functs and Other Governmental Entities That Use Proprietary Fund Accounting," the Lottery has elected not to adopt Financial Accounting Standards Board (FASB) statements and interpretations issued after November 30, 1989 unless the GASB specifically adopts such FASB statements or interpretations.

The inothery is included in the State's basic financial statements as a proprietary fund and business type activity using the accrual basic of accounting. Because of the Lottery's presentation in these financial statements as a special purpose government engaged in business type activities, there may be differences in presentation of amounts reported in these financial statements and the basic financial statements of the State as a result of major fund determination.

USE OF ESTIMATES — The preparation of the financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make certain estimates and develop assumptions that affect the amounts reported in the financial statements and related notes to financial statements. Actual results could differ from management's estimates.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

LOTTERY GAME OPERATIONS - The West Virginia Lottery derives its revenues from three basic types of lottery games: instant, on-line, and video type games. The Lottery develops multiple game themes and prize structures to comply with its enabling legislation, including aggregate annual minimum prize provisions. All bonded retailers and agents comprised principally of grocery and convenience stores serve as the primary distribution channel for instant and on-line lottery sales to the general public.

The Lottery has contracted with a private vendor to manufacture, distribute, and provide data processing support for instant and on-line games. Under the terms of the agreements, the Lottery pays a percentage of gross revenues or gross profits for the processing and manufacture of the games.

Revenue from instant games is recognized when game tickets are sold to the retailers, and the related prize expense is recorded based on the specific game prize structure. Instant ticket sales and related prizes do not include the value of free plays issued for the purpose of increasing the odds of winning a prize.

Sales of on-line lottery tickets are made by licensed agents to the public with the use of computerized terminals. On-line games include POWERBALL, a multi-state "jackpot" game; HOT LOTTO, a multi-state "lotto" game; Cash25 "lotto" game; Daily 3 and 4 "numbers" games; and Travel, a daily "keno" game. Revenue is recognized when the agent sells the tickets to the public. Prize expense is recognized on the basis of actual drawing results.

Commissions are paid to instant game retailers and on-line agents at the rate of seven percent of gross sales. A portion of the commission not to exceed one and one quarter percent of gross sales may be paid from unclaimed prize moneys. The amount paid from unclaimed prize moneys is credited against prize costs. In addition, retailers and agents are paid limited bonus incentives that include prize shares on winning tickets they sold and a ticket cashing bonus on winning tickets they cash. On a weekly basis, retailers and agents must remit amounts due to the Lottery. Retailers may not be able to order additional instant tickets if payment has not been made for the previous billing period, while an agent's on-line terminal may be rendered inactive if payment is not received each week. No one retailer or agent accounts for a significant amount of the Lottery's sales or accounts receivable. Historically credit losses have been nominal and no allowance for doubtful accounts receivable is considered necessary.

Racetrack video lottery is a self-activated video version of lottery games. The board-operated games allow a player to place bets for the chance to be awarded credits which can either be redeemed for cash or be replayed as additional bets. The coin operated games allow a player to use coins, currency, or tokens to place bets for the chance to receive coin or token awards which may be redeemed for cash or used for replay in the coin operated games. The racetrack video lottery games' prize structures are designed to award prizes, or credits, at a stipulated rate of total bets played, and prize expense is netted against total video credits played. The Lottery recognizes as racetrack video lottery revenue "gross terminal income" equivalent to all wagers, net of related prizes. Amounts required by statute to be paid to the private and local government entities are reported as commissions. Racetrack video lottery legislation has established specific requirements for racetrack video lottery and imposed certain restrictions limiting the licensing for operation of racetrack video lottery games to horse and dog

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

racetracks in West Virginia, subject to local county elections permitting the same. The legislation further stipulates the distribution of revenues from racetrack video lottery games, and requires any licensed racetrack to be responsible for acquiring the necessary equipment and bearing the risk associated with the costs of operating and marketing the games.

Limited video lottery is also a self-activated video version of lottery games, which were first placed in operation in December 2001, located in limited licensed retailer areas restricted for adult amusement. The games allow a player to use currency to place bets for the chance to receive free games or vouchers which may be redeemed for cash. The limited video lottery games' prize structures are designed to award prizes, at a stipulated rate of total bets played, and prize expense is netted against total video credits played. The Lottery recognizes as limited video lottery revenue "gross terminal income" equivalent to all wagers, net of related prizes. Amounts required by statute to be paid to private entities are reported as commissions. Limited video lottery permit holders are statutorily responsible for acquiring equipment and bearing the risk associated with the costs of operating the games.

CASH AND CASH EQUIVALENTS - Cash and cash equivalents primarily consist of interest-earning deposits with the West Virginia Investment Management Board (IMB) and are recorded at fair value.

INVENTORY - Inventory consists of instant game tickets available for sale to approved Lottery retailers and are carried at cost.

OTHER ASSETS - Other assets consist primarily of deposits restricted for payment of certain Multi-State Lottery Association activities.

CAPITAL ASSETS – The Lottery leases, under a cancelable operating lease, its office and warehouse facilities. Portions of these facilities were subleased to the Lottery's game vendor until January 31, 2007. The Lottery also leases various office equipment under agreements considered to be cancelable operating leases. Rental expense for the ten months ended April 30, 2007 and April 30, 2006 approximated \$548,570 and \$488,396, respectively. Sublease rental income for the ten months ended April 30, 2007 and April 30, 2006 approximated \$60,508 and \$86,440, respectively.

The Lottery has adopted a policy of capitalizing assets with individual amounts exceeding \$25,000. These assets include leasehold improvements, contributed and purchased equipment, comprised principally of technology property, office furnishings and equipment necessary to administer lottery games, are carried at cost. Depreciation is computed by the straight-line method using three to ten year lives.

COMPENSATED ABSENCES – The Lottery has accrued \$281,146 and \$241,126 of vacation and \$468,058 and \$452,850 of sick leave at June 30, 2006 and 2005, respectively, for estimated obligations that may arise in connection with compensated absences for vacation and sick leave at the current rate of employee pay. Employees fully vest in all earned but unused vacation. In accordance with State personnel policies, employees hired prior to July 1, 2001, vest in unused sick leave only upon

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

retirement, at which time such unused leave can be converted into employer paid premiums for postretirement health care coverage or additional periods of credited service for purposes of determining retirement benefits. For employees hired prior to July 1, 1988, the Lottery pays 100% of the postretirement health care premium. The Lottery pays 50% of the premium for employees hired after June 30, 1988 through July 1, 2001. The estimated obligation for sick leave is based on historical retirement rates and current health care premiums applicable to employee hire dates. Employees hired after June 30, 2001 do not vest in unused sick leave upon retirement.

NET ASSETS - Net assets are presented as restricted, unrestricted and invested in capital assets which represents the net book value of all property and equipment of the Lottery.

OPERATING REVENUES AND EXPENSES – Operating revenues and expenses for proprietary funds such as the Lottery are revenues and expenses that result from providing services and producing and delivering goods and/or services. Operating revenues for the Lottery are derived from providing various types of lottery games. Operating expenses include commissions, prize costs, other direct costs of providing lottery games, and administrative expenses. All revenues and expenses not meeting this definition are reported as nonoperating revenues and expenses.

NOTE 3 - CASH AND CASH EQUIVALENTS

At April 30, 2007 the carrying amounts of deposits (overdraft) with financial institutions were (\$26) thousand with a bank balance of \$20 thousand. Of this balance \$100 thousand was covered by federal depository insurance with the remaining balance collateralized with securities held by the State of West Virginia's agent in the State's name.

A summary of the amount on deposit with the West Virginia Investment Management Board (IMB) is as follows (in thousands):

Amount on deposit with the IMB

<u>April 30, 2007</u> \$152,251

June 30, 2006 \$197,734

The deposits with the IMB are part of the State of West Virginia's consolidated investment cash liquidity pool and are not separately identifiable as to specific types of securities. Investment income is pro-rated to the Lottery at rates specified by the IMB based on the balance of the deposits maintained in relation to the total deposits of all state agencies participating in the pool. Such funds are available to the Lottery with overnight notice.

NOTE 4 - CAPITAL ASSETS

A summary of capital asset activity for the month ended April 30, 2007 is as follows (in thousands):

NOTE 4 - CAPITAL ASSETS (continued)

Capital Assets:

•		prical Cost ne 30, 2006	Ad	ditions	De	letions_	torical Cost pril 30, 2007
Improvements Equipment	\$	1,121 10,598	\$	- 904	\$.	\$ 1,121 11,502
Accumulated Depreciation:	<u>\$</u>	11,719		904	_\$	-	\$ 12,623
		orical Cost ne 30, 2006	_Add	ditions	_Del	etions	torical Cost oril 30, 2007
Improvements Equipment	\$ 	848 10,198 11,046	\$ _\$	64 408 472	\$ _\$	-	\$ 912 10,606 11,518

NOTE 5 - PARTICIPATION IN THE MULTI-STATE LOTTERY

The Lottery is a member of the Multi-State Lottery (MUSL), which operates the semi-weekly POWERBALL jackpot lotto game and HOT LOTTO game, on behalf of participating state lotteries. Each MUSL member sells game tickets through its agents and makes weekly wire transfers to the MUSL in an amount equivalent to the total prize pool less the amount of prizes won in each state. Lesser prizes are paid directly to the winners by each member lottery. The prize pool for POWERBALL, and HOT LOTTO is 50% of each drawing period's sales, with minimum jackpot levels.

Revenues derived from the Lottery's participation in the MUSL POWERBALL jackpot game for the month and year-to-date periods ended April 30, 2007 were \$3,227,386 and \$44,746,546 while related prize costs for the same periods were \$1,568,937 and \$22,418,472.

Revenues derived from the Lottery's participation in the HOT LOTTO game for the month and year-to-date periods ended April 30, 2007 were \$339,129 and \$3,927,561 while related prize costs for the same periods were \$164,714 and \$2,089,272.

MUSL places 2% of each POWERBALL drawing period's sales in separate prize reserve funds that serve as a contingency reserve to protect the respective MUSL Product Groups from unforeseen prize liabilities. Currently, the MUSL Board of Directors has placed a \$75,000,000 limit on the POWERBALL Prize Reserve Fund and a \$25,000,000 limit on the Set Prize Reserve Fund. These funds can only be used at the discretion of the respective MUSL Product Group. Once the prize reserve funds exceed the designated limit, the excess becomes part of that particular prize pool. Prize reserve fund monies are refundable to MUSL Product Group members if the MUSL disbands or, after one year, if a member leaves the MUSL. At April 30, 2007 the POWERBALL prize reserve funds had a

NOTE 5 - PARTICIPATION IN THE MULTI-STATE LOTTERY (continued)

balance of \$91,618,068 of which the Lottery's share was \$2,235,593. The Lottery has charged amounts placed into the prize reserve funds to prize costs as the related sales have occurred.

NOTE 6 - RACETRACK VIDEO LOTTERY

The Racetrack Video Lottery legislation stipulates the distribution of racetrack video lottery revenues. This legislation has been amended since inception to restate revenue distribution based on revenue benchmarks. Initially, four percent (4%) of gross terminal revenue is allocated for lottery administrative costs. Sixty-six percent (66%) of net terminal revenue (gross less 4%) is allocated in lieu of commissions to: the racetracks (47%); other private entities associated with the racing industry (17%); and the local county and municipal governments (2%). The remaining revenues (34%) of net terminal revenue is allocated for distribution to State as specified in the Racetrack Video Lottery Act or subsequent State budget, as described in the Note 8 titled "Nonoperating Distributions to the State of West Virginia."

The first benchmark occurs when the current year net terminal revenue meets the fiscal year 1999 net terminal revenue. The counties and incorporated municipalities split 50/50 the two percent (2%) net terminal revenue.

The second benchmark occurs when the current year gross terminal revenue meets the fiscal year 2001 gross terminal revenue. The four percent (4%) is no longer allocated for lottery administrative costs; instead the State receives this for distribution as specified by legislation or the State budget.

The final benchmark occurs when the current year net terminal revenue meets the fiscal year 2001 net terminal revenue. At this point a 10% surcharge is applied to net terminal revenue, with 58% of the surcharge allocated for distribution to the State as specified by legislation or the State budget, and 42% of the surcharge allocated to separate capital reinvestment funds for each licensed racetrack. After deduction of the surcharge, 55% of net terminal revenue is allocated in lieu of commissions to: the racetracks (42%); other private entities associated with the racing industry (11%); and the local county and incorporated municipality governments (2%). The remaining net terminal revenue (45%) is allocated for distribution to the State as specified in the Racetrack Video Lottery Act or subsequent State budget, as described in Note 8.

Amounts from the capital reinvestment fund may be distributed to each racetrack if qualifying expenditures are made within the statutory timeframe; otherwise amounts accumulated in the fund revert to the state excess lottery revenue fund. A summary of racetrack video lottery revenues for the month ended April 30, 2007 and year-to-date follows (in thousands):

NOTE 6 - RACETRACK VIDEO LOTTERY (continued)

	Current	<u>Month</u>	Year- to	to <u>-Date</u>		
	<u>2007</u>	<u>2006</u>	<u>2007</u>	<u> 2006</u>		
Total credits played	\$868,948	\$871,768	\$8,550,198	\$8,378,357		
Credits (prizes) won	(785,870)	(789,554)	(7,736,324)	(7,598,037)		
MWAP Contributions	(464)	-	(3,723)	-		
Gross terminal income	\$82,614	\$82,214	\$810,151	\$780,320		
Administrative costs		·- •	(17,523)	(17,524)		
Net Terminal Income	\$82,614	\$82,214	\$792,628	\$762,796		
Less distribution to agents Racetrack video lottery revenues	(39,258)	(39,068)	(445,554)	(431,377)		
	\$43,356	\$43,146	347,074	\$331,419		

A summary of video lottery revenues paid or accrued for certain state funds to conform with the legislation follows (in thousands):

	2	<u>April 30, 2007</u>	Year-to Date
State Lottery Fund		<u>-</u>	\$130,127
State Excess Lottery Revenue Fund		\$37,170	161,773
Capital Reinvestment Fund		3,331	14,447
Tourism Promotion Fund 1.375%		981	10,215
Development Office Promotion Fund 375 %		268	2,788
Research Challenge Fund .5 %	`-	357	3,716
Capitol Renovation & Improvement Fund .6875 %	٠.	490	5,110
Parking Garage Fund .0625 %	ī ·	45	465
Parking Garage Fund 1 %		-	500
Cultural Facilities & Capitol Resources Fund .5 %	- 1	•	1,500
Capitol Dome & Capitol Improvements Fund .5 %	30 T \$1.55	714	5,433
Worker's Compensation Debt Reduction Fund 7%	- <u> </u>		11,000
Total nonoperating distributions	·,	\$43,356	\$347,074

NOTE 7 - LIMITED VIDEO LOTTERY

Limited video lottery legislation passed in 2001 has established specific requirements imposing certain restrictions limiting the licensing for the operation of limited video lottery games to 9,000 terminals placed in licensed retailers. These licensed retailers must hold a qualifying permit for the sale and consumption on premises of alcohol or non-intoxicating beer. The Lottery has been charged with the administration, monitoring and regulation of these machines. The legislation further stipulates the distribution of revenues from the limited video lottery games, and requires any licensees to comply with all related rules and regulations of the Lottery in order to continue its retailer status. The Limited Video Lottery legislation stipulates that 2% of gross terminal income be deposited into the state lottery fund for administrative costs. Then, the state share percentage of gross profit is to be transferred to the State Excess Lottery Revenue Fund. Such percentage is between 30 and 50 percent and is subject to change

NOTE 7 - LIMITED VIDEO LOTTERY (continued)

on a quarterly basis. Two percent is distributed to counties and incorporated municipalities in the manner prescribed by the statute. The remaining amount of gross profit is paid to retailers and/or operators as prescribed in the Act, and is recorded as limited video lottery commissions in the financial statements. Municipal and county distributions are accounted for as nonoperating expenses. A summary of limited video lottery revenues for the month ended April 30, 2007 and year-to-date follows (in thousands):

	Current	Month	Year to	Year- to -Date	
	<u>2007</u>	2006	<u>2007</u>	<u>2006</u>	
Total credits played	\$418,645	\$386,318	\$4,018,623	\$3,640,301	
Credits (prizes) won	(384,191)	(354,816)	(3,688,534)	(3,341,464)	
Gross terminal income	\$34,454	\$31,502	\$330,089	\$298,837	
Administrative costs	(688)	(630)	(6,601)	(5,978)	
Gross Profit	\$33,766	\$30,872	\$323,488	\$292,859	
Commissions	(16,883)	(16,671)	(173,333)	(161,590)	
Municipalities and Counties	(676)	(617)	(6,470)	(5,857)	
Limited video lottery revenues	\$16,207	\$13,584	\$143,685	\$125,412	

NOTE 8 - NONOPERATING DISTRIBUTIONS TO THE STATE OF WEST VIRGINIA

As required under its enabling legislation, net assets of the Lottery may not exceed \$250,000. On June 14, 2006 House Bill 106 established additional capitalization up to \$20,000,000, in each year beginning with FY 2006 and continuing for the next six years. Therefore, the Lottery periodically distributes surplus funds, exclusive of amounts derived from limited video lottery and a portion of racetrack video lottery funds, to the State of West Virginia in accordance with the legislation. For the year ending June 30, 2007 the State Legislature budgeted \$170,100,000 of estimated profits of the Lottery for distributions to designated special revenue accounts of the State of West Virginia. With regard to the State Lottery Fund, legislation stipulates that debt service payments be given a priority over all other transfers in instances where estimated profits are not sufficient to provide for payment of all appropriated distributions. Debt service payments of \$1,800,000 and \$1,000,000 per month for the first ten months of each fiscal year currently have such priority. Transfers made pursuant to the State Excess Lottery Revenue Fund have similar requirements; currently payments are \$2,900,000 per month for the first ten months of each fiscal year, with \$1,000,000 of this amount beginning September 2004. In addition, Legislation provides that, if in any month, there is a shortage of funds in the State Excess Lottery Revenue Fund to make debt service payments, the necessary amount shall be transferred from the State Lottery Fund to cover such shortfall, after the State Lottery Fund debt service payments have been made. Repayments to the State Lottery Fund are required to be made in subsequent months as funds become available. During the month ended April 30, 2007 the Lottery made such distributions and accrued additional distributions of \$60,582,342 The Lottery does not have a legally adopted annual budget.

NOTE 8 - NONOPERATING DISTRIBUTIONS TO THE STATE OF WEST VIRGINIA (continued)

Since the enactment of the Racetrack Video Lottery Act, the Lottery is also statutorily required to distribute income from racetrack video lottery operations as described in Note 6. As of April 30, 2007 the Lottery accrued additional distributions relating to racetrack video lottery operations of \$865,542.

Note 7 describes the Limited Video Lottery Act and the statutory distributions required to be made from limited video lottery operations.

A summary of the cash distributions made to certain state agencies to conform to the legislation follows (in thousands):

BUDGETARY DISTRIBUTIONS	April 30, 2007	Year-to-Date
State Lottery Fund: Bureau of Senior Services	\$ -	\$ 42,136
Department of Education	-	32,704
Library Commission	-	10,522
Higher Education-Policy Commission Tourism	-	38,834
Natural Resources	-	7,868
Division of Culture & History	-	3,428
Department of Education & Arts	-	5 ,222
Building Commission	-	1,385
School Building Authority	998	9,998
Total State Lottery Fund	1,800 \$ 2,798	18,000
•	\$ 2,798	\$170,097
State Excess Lottery Revenue Fund:		
Economic Development Fund	\$ 1,900	\$ 19,000
Higher Education Improvement Fund	1,000	10,000
General Purpose Account	-	65,000
Higher Education Improvement Fund		27,000
State Park Improvement Fund	-	5,000
School Building Authority	-	19,000
Refundable Credit	393	2,989
Excess Lottery Surplus	31,683	55,330
West Va. Infrastructure Council	-	40,000
Total State Excess Lottery Revenue Fund	\$ 34,976	\$ 243,319
Senate Bill 1010, 1016 & 1017	\$ -	\$ 104,253
Total Budgetary distributions:	•	
your paresers, mensormous.	<u>\$ 37,774</u>	\$ 517,669
Veterans Instant Ticket Fund	\$ 55	\$ 801

NOTE 8 - NONOPERATING DISTRIBUTIONS TO THE STATE OF WEST VIRGINIA (continued)

Other Racetrack Video Lottery distributions:		
Tourism Promotion Fund 1.375%	\$ 910	\$ 10,094
Development Office Promotion Fund .375%	248	2,753
Research Challenge Fund .5%	331	3,671
Capitol Renovation & Improvement Fund .6875%	455	5,047
Parking Garage Fund .0625 %	42	459
Parking Garage Fund 1 %	···	500
Cultural Facilities & Cap. Resources Fund .5%	-	1,500
Capitol Dome & Cap. Improvements Fund .5%	662	5,341
Workers Compensation Debt Reduction Fund 7%	_	11,000
Total	\$ 2,648	\$ 40,365
Total nonoperating distributions to the		
State of West Virginia (cash basis)	\$40,477	\$558,835
Accrued nonoperating distributions, beginning	(105,895)	(147,676)
Accrued nonoperating distributions, end	128,855	128,855
Total nonoperating distributions to the		
State of West Virginia	<u>\$ 63,437</u>	\$540,014

NOTE 9 - DEFERRED JACKPOT OBLIGATIONS AND INVESTMENTS HELD IN TRUST

Prior to becoming a member of the Multi-State Lottery in 1988, the prize structure of certain games operated solely by the Lottery included jackpot prizes. The Lottery, at its discretion, could choose to award such prizes in the form of either a lump sum payment or in equal installments over a period of 10 or 20 years, through April 30, 2007, the Lottery has awarded twenty-one deferred jackpot prizes totaling approximately \$28,868,786. Deferred prize awards were recognized as prize liabilities equivalent to the present value of future prize payments discounted at interest rates for government securities in effect on the date prizes were won. The imputed interest portion of the deferred prize awards is calculated using the effective interest method at rates ranging from 7.11% to 9.13%. A summary of the present value of the remaining obligations for deferred jackpot prize awards follows (in thousands):

NOTE 9 - DEFERRED JACKPOT OBLIGATIONS AND INVESTMENTS HELD IN TRUST (continued)

Present value of deferred prize award obligations:	April 30, 2007	June 30, 2006
Discounted obligations outstanding	\$ 279	\$ 615
Imputed interest accrued	<u> 15</u>	37
	294	652
Less current portion of discounted		
obligations and accrued interest	<u>(159)</u>	<u>(336)</u>
Long-term portion of deferred prize		
award obligations	<u>\$_135</u>	<u>\$ 316</u>

Future cash payments on deferred prize obligations for each of the remaining three years are as follows (in thousands):

Year Ended	Original Discounted Obligations Outstanding	Imputed <u>Interest</u>	<u>Total</u>
June 30, 2007	_	-	-
June 30, 2008	159	23	182
June 30, 2009	120	10	130
	\$ 279	<u>\$33</u>	<u>\$ 312</u>

The Lottery has purchased long-term investments consisting principally of zero coupon government securities to fund deferred jackpot prize award obligations. Such investments are maintained in a separate trust fund administered by the West Virginia Investment Management Board on behalf of the Lottery and the jackpot prize winners, with investment maturities approximating deferred prize obligation installment due dates. Investments are carried at fair value determined by quoted market prices for the specific obligation or for similar obligations. Changes in fair value are included as part of investment income. In accordance with Statement No. 3 of the Government Accounting Standards Board, these investments are classified as to level of risk in Category 1, which includes investments that are insured or registered, or for which the securities are held by the State or its agent in the State's name.

NOTE 10 - RETIREMENT BENEFITS

All full-time Lottery employees are eligible to participate in the State of West Virginia Public Employees' Retirement System (PERS), a cost-sharing multiple-employer defined benefit public employee retirement system. The PERS is one of several plans administered by the West Virginia Consolidated Public Retirement (CPRB) under the direction of its Board of Trustees, which consists of the Governor, State Auditor, State Treasurer, Secretary of the Department of Administration, and nine members appointed by the Governor. CPRB prepares separately issued financial statements covering all retirement systems it administers, which can be obtained from Consolidated Public Retirement Board, Building 5, Room 1000, State Capitol Complex, Charleston, West Virginia 25305-0720.

Employees who retire at or after age sixty with five or more years of contributory service or who retire at or after age fifty-five and have completed twenty-five years of credited service with age and credited service equal to eighty or greater are eligible for retirement benefits as established by State statute. Retirement benefits are payable monthly for life, in the form of a straight-line annuity equal to two percent of the employee's average annual salary from the highest 36 consecutive months within the last 10 years of employment, multiplied by the number of years of the employee's credited service at the time of retirement.

Covered employees are required to contribute 4.5% of their salary to the PERS. The Lottery is required to contribute 10.5% of covered employees' salaries to the PERS. The required employee and employer contribution percentages have been established and changed from time to time by action of the State Legislature. The required contributions are not actuarially determined; however, actuarial valuations are performed to assist the Legislature in determining appropriate contributions. The Lottery and employee contributions, for the period ending April 30, 2007 are as follows (in thousands):

•	April 30, 2007	Year-to Date
Lottery contributions Employee contributions	\$37	\$372
Total contributions	16 \$53	160 \$532

NOTE 11 - RISK MANAGEMENT

The Lottery is exposed to various risks of loss related to torts; theft of, or damage to, and destruction of assets; errors and omissions; injuries to employees; and natural disasters. The Lottery participates in several risk management programs administered by the State of West Virginia. Each of these risk pools have issued separate audited financial reports on their operations. Those reports include the required supplementary information concerning the reconciliation of claims liabilities by type of contract and tenyear claim development information. Complete financial statements of the individual insurance enterprise funds can be obtained directly from their respective administrative offices.

NOTE 11 - RISK MANAGEMENT (continued)

WEST VIRGINIA WORKERS' COMPENSATION COMMISSION (WCC)

The State of West Virginia operated an exclusive state-managed workers' compensation insurance program (WCC) prior to December 31, 2005. A framework for the privatization of workers' compensation insurance in West Virginia was established with the passage of Senate Bill 1004 and the WCC trust fund was terminated effective December 31, 2005. A privatized business entity, BrickStreet Administrative Services (BAS), was established and became the administrator of the WCC Old Fund, beginning January 1, 2006, and thereafter for seven years, and will have all administrative and adjudicatory authority previously vested in the WCC trust fund in administering old law liabilities and otherwise processing and deciding old law claims. BAS will be paid a monthly administrative fee and rated premium to provide a prompt and equitable system for compensation for injury sustained in the course of and growing out of employment. The monthly administrative fee for the West Virginia Lottery has been set at a level consistent with prior year payments and the new rate or premium will be established on an experience rated basis. The West Virginia Lottery is required to participate in the new BrickStreet Administrative Services (BAS) experience rated pool, which is expected to be rate adjusted on a quarterly basis.

PUBLIC EMPLOYEES' INSURANCE AGENCY (PEIA)

The Lottery participates in the Public Employees' Insurance Agency which provides an employee benefit insurance program to employees. PEIA was established by the State of West Virginia for State agencies, institutions of higher educations, Boards of Education and component units of the State. In addition, local governmental entities and certain charitable and public service organizations may request to be covered by PEIA. PEIA provides a base employee benefit insurance program which includes hospital, surgical, major medical, prescription drug and basic life and accidental death. Underwriting and rate setting policies are established by PEIA. The cost of all coverage as determined by PEIA shall be paid by the participants. Premiums are established by PEIA and are paid monthly, and are dependent upon, among other things, coverage required, number of dependents, state vs. non state employees and active employees vs. retired employees and level of compensation. Coverage under these programs is limited to \$1 million lifetime for health and \$10,000 of life insurance coverage.

The PEIA risk pool retains all risks for the health and prescription features of its indemnity plan. PEIA has fully transferred the risks of coverage to the Managed Care Organization (MCO) Plan to the plan provider, and has transferred the risks of the life insurance coverage to a third party insurer. PEIA presently charges equivalent premiums for participants in either the indemnity plan or the MCO Plan. Altogether, PEIA insures approximately 205,000 individuals, including participants and dependents.

BOARD OF RISK AND INSURANCE MANAGEMENT (BRIM)

The Lottery participates in the West Virginia Board of Risk and Insurance Management (BRIM), a common risk pool currently operating as a common risk management and insurance program for all State agencies, component units, and other local governmental agencies who wish to participate. The Lottery pays an annual premium to BRIM for its general insurance coverage. Fund underwriting and rate setting policies are established by BRIM. The cost of all coverage as determined by BRIM shall be

NOTE 11 - RISK MANAGEMENT (continued)

paid by the participants. The BRIM risk pool retains the risk of the first \$1 million per property event and purchases excess insurance on losses above that level. Excess coverage, through an outside insurer under this program is limited to \$200 million per event, subject to limits on certain property. BRIM has \$1 million per occurrence coverage maximum on all third-party liability claims.

WEST VIRGINIA LEGISLATURE

Office of the Legislative Auditor

Budget Division Building 1, Room 332-West Wing 1900 Kanawha Blvd. East Charleston, WV 25305-0590



304-347-4870

Memorandum

To: Honorable Senate President Tomblin

Honorable House of Delegates Speaker Thompson

Honorable Members of the Joint Committee on Government and

Finance

From: Ellen Clark, C.P.A. 2

Director Budget Division

Legislative Auditor's Office

Date: June 1, 2007

Re: Status of General Revenue Fund May 31, 2007

We have reviewed the cash revenue flows of the West Virginia general revenue fund for the months of July-May of fiscal year 2006-2007. The status of the fund collections are as follows:

The net collections were 104.21% of the estimate for the fiscal year. The amount ABOVE estimate was \$ 137.9 million for the year.

Corporate income/business franchise tax was \$ 46 million above the estimate.

Severance tax was \$ 14.4 million above the estimate as of May 31, 2007.

Joint Committee on Government and Finance

State Road Fund

The state road fund was collected at 106.29% of the estimate for the months of July - May. The entire fund was \$ 32.8 million above the estimate for the year.

Rainy Day and Personal Income Tax Reserve

Revenue Shortfall Reserve Fund A(Rainy Day Fund) had a cash balance of \$ 232,020,709.02 as of May 31, 2007.

202,020,703.02 48 01	Hay 51, 2007.
Balance July 1, 2006	124,153,400.18
Cash flow loan to General Revenue on July 6, 2006 To be repaid 90 days. This is a normal occurrence in July due to cash flow demands; will be repaid in September. Loan repaid on September 28, 2006.	- 50,000,000.00 + 50,000,000.00
Revenues July 1, 2005-June 30,2006 (Surplus from FY 2006 to be transferred in August 2006.)	88,817,007.83
Earnings	19,050,301.01
Balance May 31, 2007	232,020,709.02

Revenue Shortfall Reserve Fund B (Tobacco Settlement Monies) had a cash balance of \$ 273,550,992.65 as of May 31, 2007.

Balance July 1, 2006	234,897,671.95
Earnings	38,653,320.70
Balance May 31, 2007	273,550,992.65

The Special Income Tax Reserve Fund had a cash balance of \$36,619,318.96 as of May 31, 2007.

Balance July 1, 2006	36,619,318.96
Revenues July 2006-June 2007	
Balance May 31, 2007	36,619,318.96

GENERAL REVENUE FUND I Monthly Revenue Estimates - Revi as of May 31, 2007 WVFIMS SOURCE OF REVENUE		NET MONTH COLLECTIONS	FINAL MONTHLY OVER/ UNDER ESTIMATES VS ACTUAL COLLECTIONS	YTD ESTIMATES	NET YTD COLLECTIONS	YEARLY OVER/UNDER ESTIMATES VS ACTUAL YTD COLLECTIONS
			04 500 770	4 004 075 007	4 225 000 004	34,123,807
Personal Income Tax	125,000,000	219,500,773	94,500,773	1,201,875,287	1,235,999,094 910,146,779	12,457,473
Consumer Sales Tax	83,000,000	91,683,205	8,683,205	897,689,306	·	14,026,419
Severance Tax	28,500,000	33,102,451	4,602,451	284,600,000	298,626,419	46,345,041
Corp Income /Business Franchise	6,600,000	8,655,539	2,055,539	244,600,000	290,945,041	14,478,651
Business and Occupation	14,600,000	14,127,818	-472,182	154,800,000	169,278,651	
Use Tax	8,900,000	11,500,031	2,600,031	106,600,000	118,192,420	11,592,420
Insurance Tax	2,100,000	2,629	-2,097,371	105,500,000	98,043,678	-7,456 322
Cigarette Tax	8,800,000	9,925,931	1,125,931	94,300,000	97,062,781	2,762,781
HB 102 - Lottery Transfers	4,100,000	0	-4,100,000	71,900,000	77,900,000	6,000,000
Interest Income	7,400,000	4,569,631	-2,830,369	41,300,000	49,229,811	7,929,811
Departmental Collections	900,000	942,250	42,250	14,900,000	13,652,110	-1,247 890
Property Transfer Tax	1,200,000	966,402	-233,598	14,600,000	11,159,759	-3,440,241
Liquor Profit Transfers	2,140,000	2,879,000	739,000	9,520,000	10,523,726	1,003,726
Beer Tax and Licenses	1,000,000	566,591	-433,409	7,400,000	6,795,377	-604,623
Senior Citizen Tax Credit Reimb.	800,000	0	-800,000	5,900,000	0	-5,900,000
Property Tax	300,000	287,301	-12 699	4,700,000	4,709,627	9,627
Smokeless Tobacco Tax	400,000	294,296	-105 704	4,400,000	4,420,837	20,837
Charter Tax	600,000	152,759	-447.241	4,400,000	4,438,040	38,040
Racing Fees	0	120,000	120,000	1,300,000	1,000,000	-300,000
Miscellaneous Transfers	100,000	0	-100,000	900,000	2,817,177	1,917,177
Miscellaneous Receipts	100,000	91,733	-8,267	900,000	1,047,041	147,041
Business Franchise Fees	170,000	38,901	-131,099	850,000	630,328	-219 672
Telecommunications Tax	0	11,259	11,259	0	-405 611	-405,611
Estate and Inheritance Tax	0	5,064	5,064	0	214,734	214,734
Refundable Credit Reim LTY	0	416,792	416,792	0	3,405,711	3,405,711
Video Lottery Transfers	0	75,736	75,736	0	1,013,549	1,013,549
Special Revenue Transfer	0	0,730	0	o o	0	0
Cash Flow Transfer	ő		0	0	0	0
TOTALS	296,710,000	399,916,091	103,206,091	3,272,934,593	3,410,847,080	137,912,487
Minus Cash Flow Transfer Percent of Estimates	0	0 134.78%	0	0	0 104.21%	0
TOTALS	296,710,000	399,916,091	103,206,091	3,272,934,593	3,410,847,080	137,912,487
Collections this day		40,230,319				

STATE ROAD FUND STATE ROAD FUND FY 2006-2007 Monthly Estimates July 2006 - Revised February 2007 as of May 31, 2007 WVFIMS

FINAL

SOURCE OF REVENUE	MONTH ESTIMATES	NET MONTH COLLECTIONS	MONTHLY OVER/ UNDER ESTIMATI VS ACTUAL COLLECTIONS		NET YTD COLLECTIONS	YEARLY OVER/UNDER ESTIMATES VS ACTUAL YTD COLLECTIONS
Gasoline & Motor Carrier Rd Tax	34,000,000	29,358,149	-4,641,851	295,000,000	324,495,046	29,495,046
Privilege Tax	13,560,000	15,323,254	1,763,254	153,534,000	158,047,965	4,513,965
Licenses & Registration	7,376,000	8,413,576	1,037,576	72,726,000	71,601,646	-1,124,354
Highway Litter Control Fund	140,000	133,299	-6,701	1,375,000	1,355,140	-19,860
TOTALS	55,076,000	53,228,277	-1,847,723	522,635,000	555,499,798	32,864,798

Percent of Estimates		96.65%			106.29%	
Collections this day		18,296,689				

REVENUE SHORTFALL RESERVE FUND A as of May 1, 2007: \$228,171,928.14

REVENUE SHORTFALL RESERVE FUND B as of May 1, 2007: \$266,258,496.96

SPECIAL INCOME TAX REFUND RESERVE FUND as of May 1, 2007: \$36,619,318.96

WEST VIRGINIA LEGISLATURE

Office of the Legislative Auditor

Budget Division Building 1, Room 332-West Wing 1900 Kanawha Blvd. East Charleston, WV 25305-0590



304-347-4870

To: Honorable Senate President Tomblin

Honorable House of Delegates Speaker Thompson

Honorable Members of the Joint Committee on Government

and Finance

From: Ellen Clark, C.P.A.

Director Budget Division

Legislative Auditor's Office

Date: June 1, 2007

Re: West Virginia Unemployment Compensation Trust Fund

We have reviewed the March 2007 monthly report of the Unemployment Compensation Trust Fund we received from WorkForce West Virginia. March is the ninth month of the fiscal year 2006-2007.

For the nine months of fiscal year 2006-2007, the trust fund cash flow was as follows:

Trust Fund Beginning Cash Balance 7-1-2006	\$244,918,539.17
Receipts July 1, 2006 thru June 30, 2007	\$84,660,972.77
Disbursements July 1, 2006 thru June 30, 2007	\$117,106,437.67
Balance March 31, 2007	\$212,473,074.27

ITEMS OF NOTE:

Regular benefits paid for July 2006- March 2007 were \$ 2.2 million more than the same time period in fiscal year 2006. Total disbursements were \$ 1.8 million less than in July 2005- March 2006.

Joint Committee on Government and Finance

Receipts were \$ 384 thousand greater than in July 2005 - March 2006. Overall ending trust fund balance was \$ 13.9 million more in March 2007 than in March 2006.

West Virginia's unemployment rate for the month of March 2007 was 5.4 percent. National unadjusted employment rate was 4.9 %.

Seasonally adjusted unemployment rates were 4.3 percent for West Virginia and 4.5 percent nationally.

Since March 2006 employment has risen 1,500 with gains in the following areas: 2,400 in trade, transportation and utilities, 200 in leisure and hospitality, 400 in natural resources and mining, 100 in construction, 100 in financial services, 400 in other services and 300 in educational and health services. Declines included 2,300 in manufacturing, and 100 in professional and business services.

FINANCIAL CONDITION OF THE UNEMPLOYMENT COMPENSATION TRUST FUND MONTHLY STATUS REPORT FOR THE JOINT COMMITTEE ON GOVERNMENT AND FINANCE FOR THREE MONTHS STARTING JANUARY 2008 AND JANUARY 2007

	JANUARY 08	FEBRUARY 08	MARCH 08	JANUARY 07	FEBRUARY 07	MARCH 07	THREE MONTH TOTAL VARIANCE
Balance Forward	220,211,648.82	210.890.000.67	207,208,405.70	240,863,618.99	231,312,111,17	223,329,812,35	<u>57,197,487.32</u>
Add Receipts:							
Bond Assessment	2.52	0.00	8.02	88.07	0.00	0.00	
Regular Contributions:	8,896,266.88	10,350,268.47	745,314.51	8,735,490.89	11,588,319.51	841,712.84	972,679.10
3. Extended Benefit Funds	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4. Emergency Unemployment Funds	0.00	0.00	0.00	0.00	0.00	0,00	
TEUC Unemployment Funds	0.00	0.00	0.00	0.00	0.00	0.00	
UCFE (Federal Agencies) Reduced Tex Cradits	100,000.00	150,000.00	100,000.00	100,000.00	300,000.00	300,000.00	360,000.00
8. Reed Act Funds	0.00 0.00	0.00 0.00	0.00 329,40 5 .84	0.00 8.00	0.00 0.00	0.00 316,389.43	0.00 (13.036,41)
9. Treasury Interest Credits	0.00	0.00	2,110,028.64	0.00	0.00	2,413,625.60	303,596.88
10. UCX (Military Agencies)	450,000.00	400,000,00	200,000.00	200,000.00	<u>600,000.00</u>	400,000.00	<u>60,000.00</u>
Total Monthly Receipts	<u>7.445,268.38</u>	<u>10.990,266.47</u>	<u>3.484.754.01</u>	7,036,576.96	<u>12,388,319.61</u>	<u>4,071,707,47</u>	1,663,314,08
Less Distaursements							
Debt Bond Receyment	(Retired)	(Retired)	(Refired)	(Réfired)	(Relired)	m.s	n NA
Regular Benefits:	18.234.118.68	14,106,165,08	11.718.400.85	18,078,417,89	19,930,025.12	(Retired) 13,528,940.37	7,480,707.82
Extended Benefits	0.00	0.00	0.00	0.00	0.00	0.00	
Emergency Benefits	-4,334.00	-8,415.00	-3,849.00	-1,245.00	[2,420.00]	(922,00)	
UCFE (Federal Workers)Benefits	100,077.52	98,640.47	95,069.00	123,181.83	109,374.17	91,441,49	30,210.30
UCX (Military Workers) Benefits	437.053.35	385,480,92	344,785.83	388,729,26	331,639.04	308,988.69	(139,968.11)
Reed Act Funds	0.00	0.00	0.00	0.00	0.00	1,000,000.00	1,000,000,00
Other Adjustments	<u>0.00</u>	0.00	<u>0.00</u>	<u>0.00</u>	0.00	<u>0.00</u>	<u>0.00</u>
Total Monthly Disbursement	<u>16,766,916,53</u>	<u>14,583,881.44</u>	<u>12.152.406.68</u>	<u>16,687,083,78</u>	20.388.618,33	14,928,445.55	<u>8,360,983.01</u>
Trust Fund Balance	<u>210.890.000.67</u>	<u>207,206,405,70</u>	198.538.753.03	<u>231.312.111.17</u>	223.329.812.35	212.473.074.27	60,479,838.39

[&]quot;Three month total variance column is the difference between the sum of the previous year's three months data for each category and the current year's three months data. The purpose of the report is to show eignificant changes in receipts, distinctsments, or balances.



Monthly Management Report

TOTAL CLAIMS

APRIL 2007

WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE AGENCY MONTHLY MANAGEMENT REPORT - TOTAL CLAIMS APRIL 2007

Page: 1

Reporting Category	Type of Service	Current Period PEIA Payments	Current Rolling Avg PEIA Payments	12 Months Prior PEIA Payments	12 Months Prior Rolling Avg PEIA Payments	Current Fiscal Yr PEIA Payments	Previous Fiscal Yr PETA Payments
INPATIENT HOSPITAL FACILITY	BEHAVIORAL	173,249.40	176,265.52	136,121.92	172,400.67	1,791,610.60	1,676,318.89
	MATERNITY	168,607.81	154,400.51	120,858.16	140,131.43	1,549,104.44	1,378,700.84
	MEDICAL AND SURGICAL	6,257,982.79	5,956,431.55	5,313,475.18	6,409,611.59	59,064,297.93	
	NEONATAL COMPLICATIONS	15,644.34	98,899.69	30,823.58	64,914.47	1,062,645.23	572,299.53
. sv <u>m</u>		6,615,484.34	6,385,997.27	5,601,278.84	6,787,058.15	63,467,658.20	67,181,412.41
OUTPATIENT ROSPITAT FACILITY	THEFT TOWARD TO SEE THE SEE TH	45,833.01	48.702.17	61,299.85	44.081.29	453,156.45	- 465,885.60
WIENTERS HOUSE IN PROCESS	DIALYSIS	208,859.44	232.087.15	160,586,40	213,058.66	2,294,503.92	_
	EMERGENCY ROOM	452,905.63	423,911.32	363,358.53	424,990.37	4,064,268.21	
	MATERNITY	39,925.05	44,242.02	40,009.16	38,215.80	417,285.28	398,071.97
	MEDICAL AND SURGICAL	7,522,153.83	7,298,806.31	6,313,714.51	7,347,631.77	71,166,993.11	73,809,141.12
51m		8,269,676.96	8,047,748.98	6,938,968.45	8,067,977.89	78,396,206.97	81,041,642.91
PHARMACY	PRESCRIPTION DRUGS	16,700,837.68	16,762,842.65	15,413,116.95	15,000.061.54	166,166,954.21	149,211,921.51
		16,700,837.68	16,762,842.65	15,413,116.95	15,000,061.54	166,166,954.21	149,211,921.51
PROFESSIONAL SERVICES	ADVANCED IMAGING	494.834.90	524,519.83	512,825.21	501,058.36	5,081,489.35	5,065,431.16
	AMBULANCE	272,445,40	276,108.10	293,508.50	250,358.56	2,656,965.00	2,563,630.09
	ANESTHESTA	540,356.11	636,538.52	488,807.86	654,588.76	6,211,548.64	
	BEHAVIORAL	323,002.64	349,892.03	356,511.09	341,691.80	3,298,313.12	
	CARDIOVASCULAR MEDICINE	406,898.52	428,370.40	437,955.51	438,414.17	4,043,823.52	
	CERVICAL CANCER SCREENING	19,279.98	26,140.46	27,248.42	33,888.83	245,486.77	•
	DIALYSIS	7,855.41	11,375,83	10,329.96	28,859.27	106,390.01	
	12 015	406,564.29	455,739.48	390,090.05	474,886.83	4,398,163.18	4,824,734.09

SOURCE: ACORDIA NATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES
NOTE: CLAIMS LISTED ARE ON A PAID BASIS
NOTE: DOES NOT INCLUDE REBATES, PHARMACY ADMINSTRATIVE FEES, OR RECOVERIES

WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE AGENCY MONTHLY MANAGEMENT REPORT - TOTAL CLAIMS APRIL 2007

Page: 2

Reporting Category	Type of Service	Current Period PEIA Payments	Current Rolling Avg PEIA Payments	12 Months Prior PEIA Payments	Rolling Avg PETA Payments	Current Fiscal Yr PEIA Payments	Previous Fiscal Yr PEIA Payments
PROFESSIONAL SERVICES	EVALUATION AND MANAGEMENT IMMUNIZATION INJECTION LAB AND PATHOLOGY MAMMOGRAPHY OTHER OTHER IMAGING OTHER MEDICINE PHYSICAL MEDICINE PROSTATE CANCER SCREENING SURGICAL	4,646,053.57 520,305.72 820,144.36 707,574.77 2,140.45 329,938.57 905,472.05 565,511.82 546,511.01 14,245.40 2,444,696.24	4,655,311.07 192,209.34 790,298.19 638,832.97 77,965.04 417,239.36 931,352.53 702,359.92 594,626.61 16,761.04 2,633,876.38	4,254,758.64 127,746.45 641,911.73 730,413.15 75,441.64 314,064.03 877,558.04 891,384.42 553,095.58 17,855.35 2,285,567.79	146,118.68 811,285.72 595,261.83 100,115.17 503,392.08 843,113.15 642,360.21 554,169.71 14,307.63 2,587,762.77	46,317,065.22 2,441,346.11 7,887,324.38 5,977,861.19 667,166.06 4.065,693.78 8,925,881.60 6,660,099.06 5,783,922.97 150,180.28 25,620,658.20	44,884,149.74 1,599,348.52 7,901,785.64 5,980,221.39 983,434.65 4,922,234.99 8,484.710.21 6,419,895.50 5,602,702.63 150,156.39 25,965,981.62
sum		13,973,831.21 45,559,830.19	14,359,517.09 45,556,105.98	13,287,073.42 41,240,437.66		140,539,378.44	140,151,931.13 437,586,907.96

SOURCE: ACORDIA MATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES NOTE: CLAIMS LISTED ARE ON A PAID BASIS

NOTE: DOES NOT INCLUDE REBATES, PHARMACY ADMINSTRATIVE FEES, OR RECOVERIES

29 rows selected.

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Monthly Management Report PER CAPITA CLAIMS

APRIL 2007

WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE AGENCY MONTHLY MANAGEMENT REPORT - PER CAPITA CLAIMS APRIL 2007

Page: 1

Reporting Category	Type of Service	Current Period PEIA Payments		12 Months Prior	12 Months Prior Rolling Avg PEIA Payments	Current Fiscal Yr PEIA Payments	Previous Fiscal Yr PEIA Payments
INPATIENT HOSPITAL FACILITY	BEHAVIORAL	. 9244	.9688	.7300	-9490	9.5905	
	MATERNITY	. 8997		.6481			
	MEDICAL AND SURGICAL	33.3914					
	NEONATAL COMPLICATIONS	.0835		. 1653	. 3573	5.6884	3.0779
5\III		35.2990		30.0379	37.3625	339.7435	361.3137
OMERICAN HOGDINAL WAGET TIME	DEUNITODAT	.2446	. 2676	.3287	, 2427	2.4258	2.5056
OUTPATIENT HOSPITAL FACILITY	DIALYSIS	1.1144		.8612		12.2825	11.7963
	EMERGENCY ROOM	2.4166		1.9486	2.3395	21.7561	22.4548
	MATERNITY	.2130		.2146	.2103	2.2337	
	MEDICAL AND SURGICAL	40.1368	40.1105	33.8584	40,4461	300.9582	
**************************************		44 . 1254		37.2115	44.4113	419.6563	435.8566
PRARMACY	PRESCRIPTION DRUGS	89.1125	92.1283	82.6556	82.5678	889.4947	802.4886
由出来的未来的企业的企业和未来的企业企业并未会企业。 [51,1170]		89.1125	92.1283	82.6556	82.5678	889.4947	802.4886
PROFESSIONAL SERVICES	ADVANCED IMAGING	2.6403	2.8825	2.7501	2.7580		
PROPERSTONAL SERVICES	AMBULANCE	1.4537		1.5740	1.3782		
	ANESTHESIA	2,8832	3.4981	2.6213		and the second s	
	BEHAVIORAL	1.7235					
	CARDIOVASCULAR MEDICINE	2.1711					
	CERVICAL CANCER SCREENING	.1029					
	DIALYSIS	.0419					
	DME	2.1693	2.5045	2.0919	2.6141	23.5434	29,9403

SOURCE: ACORDIA MATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES

NOTE: CLAIMS LISTED ARE ON A PAID BASIS

NOTE: DOES NOT INCLUDE REBATES, PHARMACY ADMINSTRATIVE FEES, OR RECOVERIES

WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE AGENCY MONTHLY MANAGEMENT REPORT - PER CAPITA CLAIMS APRIL 2007

Page: 2

			Current		12 Months Prior		
Reporting	Type of	Current Period	Rolling Avg	12 Months Prior	Rolling Avg	Current Fiscal Yr	Previous Fiscal Yr
Category	Service	•	•	PEIA Payments	PEIA Payments	PEIA Payments	PETA Payments
PROFESSIONAL SERVICES	EVALUATION AND MANAGEMENT	24.7905	25.5824	22.8169	24.6824	247.9361	241.3950
	IMMUNIZATION	2.7763	1.0565	. 6851	.8041	13.0686	8.6016
	INJECTION	4.3761	4.3432	3,4424	4.4659	42.2210	42.4972
	LAB AND PATHOLOGY	3.7755	3.5104	3.9170	3.2764	31.9996	32.1627
	MAMMOGRAPHY	.0114	.4285	.4046	.5511	3.5724	5.2891
	OTHER	1.7605	2.2930	1.6842	2.7714	21.7637	26.4727
	OTHER IMAGING	4.8314	5.1177	4.7061	4.6409	47.7804	45.6323
	OTHER MEDICINE	3.0175	3.85 9 5	4.7802	3.5361	35.6516	34.5274
	PHYSICAL MEDICINE	2.9161	3.2675	2.9661	3.0504	30.9614	30.1323
	PROSTATE CANCER SCREENING	. 0760	.0921	.0958	.0787	.8039	.8076
	SURGICAL	13.0444	14.4744	12.2568	14.2454	137.1478	139.6497
****************	•						
61111		74.5617	78.9108	71.2543	77.0960	752.3098	753.7623
sim		243.0986	250.3596	221.1592	241.4376	2,401.2044	2,353.4212

SOURCE: ACORDIA NATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES
NOTE: CLAIMS LISTED ARE ON A PAID BASIS
NOTE: DOES NOT INCLUDE REBATES, PHARMACY ADMINSTRATIVE FEES, OR RECOVERIES



PER CAPITA UTILIZATIOI

APRIL 2007

WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE AGENCY MONTHLY MANAGEMENT REPORT - PER CAPITA UTILIZATION APRIL 2007

Pagë:

Reporting Category	Type of Service	Current Period Encounters			Previous Fiscal Yr Encounters
INPATIENT HOSPITAL FACILITY	BUUANTODAT.	.0008	.0007	.0109	
INPATIENT HOSPITAL FACILITY	MATERNITY	.0007	.0005	.0061	
	MEDICAL AND SURGICAL	. 01 9 6	.0166		
	NEONATAL COMPLICATIONS	.0001	.0002	.0018	.0021
1657411669711166677466157766 Stim		.0212	,0180	.2173	.2027
		.0035	.0042	.0375	.0366
OUTPATIENT HOSPITAL FACILITY	DIALYSIS	.0069	•		. 0593
	EMERGENCY ROOM	,0250		.2522	
	MATERNITY	.0017			
	MEDICAL AND SURGICAL	. 2429	.2041	2.3854	2.3866
14+++420444******************************		.2799	. 2373	2.7486	2.7556
PHARMACY	PRESCRIPTION DRUGS	1.0531	1.0137	11.0173	10.5034
\$\$4#**#\$ \$ \$\$##############################	•	1.0531	1.0137	11.0173	10.5034
		.0266	. 0255	. 2773	,2780
PROFESSIONAL SERVICES	ADVANCED IMAGING	.0103	·		
	AMBULANCE	.0197			
	anesthesia Behavioral	.0319			
	CARDIOVASCULAR MEDICINE	.0473	-0509		
	CERVICAL CANCER SCREENING	.0046			
	DIALYSIS	.0013			
	DME	-0390			
	EVALUATION AND MANAGEMENT	.5632		•	
	IMMUNIZATION	. 025	3 .008:	, .273.	, .=

SOURCE: ACORDIA NATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES NOTE: CLAIMS LISTED ARE ON A PAID BASIS

WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE AGENCY MONTHLY MANAGEMENT REPORT - PER CAPITA UTILIZATION APRIL 2007

Page: 2

Reporting Category	Type of Service	Current Period Encounters	12 Months Prior Encounters	Current Fiscal Yr Encounters	Previous Fiscal Yr Encounters
PROFESSIONAL SERVICES	INJECTION LAB AND PATHOLOGY MAMMOGRAPHY OTHER OTHER IMAGING OTHER MEDICINE PHYSICAL MEDICINE PROSTATE CANCER SCREENING SURGICAL	.0327 .1459 .0007 .0318 .1311 .0829 .0904 .0045 .0961	.0289 .1387 .0125 .0288 .1219 .0796 .0954 .0048 .0890	.3283 1.4736 .1120 .4438 1.3189 .8864 1.0424 .0501 1.0289	.3050 1.4024 .1633 .4172 1.3511 .8318 1.0551 .0479 1.0281
sum		2,7401	2.6241	28.8433	28.3682

SOURCE: ACORDIA NATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES NOTE: CLAIMS LISTED ARE ON A PAID BASIS



Monthly Management Report

MEDICARE ELIGIBLE TOTAL CLAIMS

APRIL 2007

WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE AGENCY MONTHLY MANAGEMENT REPORT - TOTAL CLAIMS - MEDICARE ELIGIBLE APRIL 2007

Page: 1

INPATIENT HOSPITAL FACILITY BEHAVIORAL 15,348.36 25,169.02 24,066.30 22,412.15 241,473.20 - 235.70 MEDICAL AND SURGICAL 1,098,730.28 1,138,205.73 1,025,324.06 1,087,721.28 11,177,682.61 10,572.51 sum 1,114,078.64 1,163,374.74 1.049,390.36 1,110,133.44 11,419,155.81 10,808.21	l Yr ents
#URD 1,114,078.64 1,163,374.74 1,049,390.36 1,110,133.44 11,419,155.81 10,608,21	
	6.50
	9.34
OUTPATIENT HOSPITAL FACILITY BEHAVIORAL 8,357.03 9,158.30 7,524.51 6,143.48 91,238.52 63,32	4.87
DIALYSIS 43,260.55 69,498.38 62,310.10 65,797.56 653,683.59 671,53	9.37
MEMERGENCY ROCM 44.472.22 43.744.44 33.910.10 41.324.09 434.296.35 400.70	8.65
MEDICAL AND SURGICAL 853,290.54 919,171.16 752,359.67 925,523.24 9,019,330.25 9,192.43	5.58
sum 949,380.34 1,041,572.28 856,104.38 1,038,788.37 10,198,548.71 10,328,00	8.47
PHARMACY PRESCRIPTION DRUGS 6,543,245.58 6,637,202.89 6,086,612.96 6,187,404.00 65,924,021.59 61,447,66	8.65
Sum 6,543,245.88 6,637,202.89 6,086,612.96 6,187,404.00 65,924,021.59 61,447,66	8.65
PROFESSIONAL SERVICES ADVANCED IMAGING 44,267.60 57,946.61 54,483.77 53,700.20 556,949.85 539.16	0.24
AMBULANCE 99,239.59 112.008.79 111,812.83 95,454.87 1,109,104.75 980,52	
ANESTHESIA 34,689.17 35,715.73 23,862.98 38,720.63 350,708.78 384,46	0.65
BEHAVIORAL 23,455.90 24,561.12 20,021.73 19,714.69 240,163.60 202,24	3.99
CARDIOVASCULAR MEDICINE 59,931.85 66,746.07 62,869.79 66,264.52 643.891.38 651,94	0.19
	1.33
DIALYSIS 2,560.19 1,831.13 1,267.47 6,974.93 18,801.27 59,55	
DME 128,619.25 148,664.96 135,281.05 148,773.14 1,491,273.05 1,551,31	
EVALUATION AND MANAGEMENT 701,097.45 659,582.71 615,802.81 630,782.57 6,596,304.69 6.256,97	
IMMUNIZATION 6,247.59 2,171.36 597.64 740.82 29,990.08 8,21	
INJECTION 122,989.70 142,493.17 105,805.11 120,410.03 1,393,819.30 1,174,53	7.13

SOURCE: ACORDIA NATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES

NOTE: CLAIMS LISTED ARE ON A PAID BASIS

NOTE: DOES NOT INCLUDE REBATES, PHARMACY ADMINISTRATIVE FEES, OR RECOVERIES

WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE AGENCY MONTHLY MANAGEMENT REPORT - TOTAL CLAIMS - MEDICARE ELIGIBLE APRIL 2007

Page:

Reporting Category	Type of Service	Current Period PEIA Payments	Current Rolling Avg PEIA Payments	12 Months Prior PEIA Payments		Current Fiscal Yr P PEIA Payments	revicus Fiscal Yr PEIA Payments
PROFESSIONAL SERVICES	LAB AND PATHOLOGY MAMMOGRAPHY OTHER OTHER IMAGING OTHER MEDICINE PHYSICAL MEDICINE PROSTATE CANCER SCREENING SURGICAL	32,332.65 291.62 66,762.58 118,308.53 71,180.75 52,331.35 236.96	32,522.96 4,996.41 73,442.57 123,515.44 76,391.91 60,557.82 436.07 287,811.99	26,424.48 5,102.46 54,010.54 103,488.91 66,851.55 46,451.45 111.50 261,267.24	6,257.65 86,733.99 116,764.06 56,928.08 57,726.42 191.55	323,627.76 42,116.74 732,651.63 1,228.203.03 713,513.71 597,380.69 4,241.15 2,831,198.90	299,291.99 61,036.29 782.655.48 1,150,838.56 582,506.82 579,227.63 1,851.65 2,794,161.55
**************************************		1,829,554.54	1,911,492.26	1,695,660.07	1,814,436.19	18,904,903.74	18,061.657.76
sum		10,436,259.10	10,753,642.18	9,687,767.77	10,150,762.00	106,446,629.85	100,645,954.22

SOURCE: ACORDIA NATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES
NOTE: CLAIMS LISTED ARE ON A PAID BASIS
NOTE: DOES NOT INCLUDE REBATES, PHARMACY ADMINSTRATIVE FEES, OR RECOVERIES



Monthly Management Report

MEDICARE ELIGIBLE

PER CAPITA CLAIMS

APRIL 2007

WEST VIRGINIA FUBLIC EMPLOYEES INSURANCE AGENCY MONTHLY MANAGEMENT REPORT - PER CAPITA CLAIMS - MEDICARE ELIGIBLE APRIL 2007

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Reporting Category	Type of Service		PEIA Payments	12 Months Prior	PELA Payments		•
INPATIENT HOSPITAL FACILITY	BEHAVIORAL MEDICAL AND SURGICAL	.4247 30.4004	.6852	.6501	. 5977	6.6022	6.3007
sum		30.8250	31.6918	28.3466	29.5770	312.2163	
OUTPATIENT HOSPITAL FACILITY	BEHAVIORAL DIALYSIS EMERGENCY ROOM MEDICAL AND SURGICAL	.2312 1.1970 1.2305 23.6094	1.8944 1.1921	1. 6 831 .9160	1.7530 1.1010		17.9513 10.7116
em		26.2681	28.3759	23.1255	27.6750	278.8431	276.0835
PHARMACY	PRESCRIPTION DRUGS	181.0427	180.7921	164.4142	164.8989	1,802.4586	1,642.5905
sum ·		181.0427	180.7921	164.4142	164.8989	1,802.4586	1,642.5905
PROFESSIONAL SERVICES	ADVANCED IMAGING AMBULANCE ANESTHESIA BEHAVIORAL CARDIOVASCULAR MEDICINE CERVICAL CANCER SCREENING DIALYSIS DME EVALUATION AND MANAGEMENT IMMUNIZATION INJECTION	1.2248 2.7458 .9598 .6490 1.6582 .0043 .0708 3.5587 19.3984 .1729	3.0513 .9732 .6692 1.8184 .0026 .0499 4.0523 17,9812	3.0203 .6446 .5408 1.6983 .0040 .0342 3.6543 16.6343	2.5441 1.0318 .5256 1.7662 .0030 .1856 3.9665 16.8192	30.3245 9.5889 6.5664 17.6049 .0263 .5141 40.7736 180.3526	26.2109 10.2772 5.4063 17.4274 .0308 1.5921 41.4690 167.2587

SOURCE: ACORDIA NATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES NOTE: CLAIMS LISTED ARE ON A PAID BASIS

NOTE: DOES NOT INCLUDE REBATES, PHARMACY ADMINSTRATIVE FEES, OR RECOVERIES

WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE AGENCY MONTHLY MANAGEMENT REPORT - PER CAPITA CLAIMS - MEDICARE ELIGIBLE APRIL 2007

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type of service				Rolling Avg	Current Fiscal Yr	Previous Fiscal Yr PEIA Payments
AND DATHOLOGY	.8946	.8863	.7138	, 7993	8.8485	8.0005
			,1378	.1667	1.1515	1.6316
		2.0017	1.4590	2.3103	20.0318	20.9216
	·	3.3653	2.7955	3.1115	33.5809	30.7637
	1.9695	2.0813	1.8058	1.5183	19.5085	15.5713
	1.4479	1.6500	1.2548	1.5382	16.3333	15.4836
		.0118	.0030	.0051	.1160	.0495
FURGICAL		7.8412	7.0575	7.4145	77.4091	74.6922
	50.6213	52.0921	45.8039	48.3653	516.8876	482.8158
	288.7571	292.9519	261.6901	270.5163	2,910.4056	2,690.4102
	ervice AB AND PATHOLOGY AMMOGRAPHY THER THER IMAGING THER MEDICINE HYSICAL MEDICINE ROSTATE CANCER SCREENING	AB AND PATHOLOGY .8946 AMMOGRAPHY .0081 THER 1.8472 THER IMAGING 3.2734 THER MEDICINE 1.9695 HYSICAL MEDICINE 1.4479 ROSTATE CANCER SCREENING .0066 URGICAL 50.6213	ype of ervice Current Period PEIA Payments Rolling Avg PEIA Payments AB AND PATHOLOGY .8946 .8863 AMMOGRAPHY .0081 .1359 THER 1.8472 2.0017 THER IMAGING 3.2734 3.3653 THER MEDICINE 1.9695 2.0813 HYSICAL MEDICINE 1.4479 1.6500 ROSTATE CANCER SCREENING .0066 .0118 URGICAL 7.3282 7.8412	ype of ervice Current Period PEIA Payments Rolling Avg PEIA Payments 12 Months Prior PEIA Payments AB AND PATHOLOGY .8946 .8863 .7138 AMMOGRAPHY .0081 .1359 .1378 THER 1.8472 2.0017 1.4590 THER IMAGING 3.2734 3.3653 2.7955 THER MEDICINE 1.9695 2.0813 1.8058 HYSICAL MEDICINE 1.4479 1.6500 1.2548 ROSTATE CANCER SCREENING .0066 .0118 .0030 URGICAL 7.3282 7.8412 7.0575 50.6213 52.0921 45.8039	ype of ervice Current Period PEIA Payments Rolling Avg PEIA Payments 12 Months Prior PEIA Payments Rolling Avg PEIA Payments AB AND PATHOLOGY .8946 .8863 .7138 .7993 AMMOGRAPHY .0081 .1359 .1378 .1667 THER 1.8472 2.0017 1.4590 2.3103 THER IMAGING 3.2734 3.3653 2.7955 3.1115 THER MEDICINE 1.9695 2.0813 1.8058 1.5183 HYSICAL MEDICINE 1.4479 1.6500 1.2548 1.5382 ROSTATE CANCER SCREENING .0066 .0118 .0030 .0051 URGICAL 7.3282 7.8412 7.0575 7.4145 50.6213 52.0921 45.8039 48.3653	type of ervice Current Period PEIA Payments Rolling Avg PEIA Payments Rolling Avg PEIA Payments Current Fiscal Yr PEIA Payments AB AND PATHOLOGY .8946 .8863 .7138 .7993 8.8485 AMMOGRAPHY .0081 .1359 .1378 .1667 1.1515 THER 1.8472 2.0017 1.4590 2.3103 20.0318 THER IMAGING 3.2734 3.3653 2.7955 3.1115 33.5809 THER MEDICINE 1.9695 2.0813 1.8058 1.5183 19.5085 HYSICAL MEDICINE 1.4479 1.6500 1.2548 1.5382 16.3333 ROSTATE CANCER SCREENING .0066 .0118 .0030 .0051 .1160 URGICAL 7.3282 7.8412 7.0575 7.4145 77.4091 50.6213 52.0921 45.8039 48.3653 516.8876

SOURCE: ACORDIA NATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES
NOTE: CLAIMS LISTED ARE ON A PAID BASIS

NOTE: DOES NOT INCLUDE REBATES, PHARMACY ADMINSTRATIVE FEES, OR RECOVERIES



Monthly Management Report

MEDICARE ELIGIBLE

PER CAPITA UTILIZATION

APRIL 2007

WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE AGENCY MONTHLY MANAGEMENT REPORT - PER CAPITA UTILIZATION - MEDICARE ELIGIBLE APRIL 2007

Page: 1

Mapaaaaaa	Service	Current Period Encounters	Encounters	Current Fiscal Yr Encounters	Previous Fiscal Yr Encounters
INPATIENT HOSPITAL FACILITY	BEHAVIORAL	.0023	.0018		.0231
	MEDICAL AND SURGICAL	.0700	. 0568	,6914	.5970
*******					.6201
stim		.0723	.0586	. 7236	, 6 201
OUTPATIENT HOSPITAL FACILITY	DEMONITODAT	,0076	.0072	.0750	.0517
OUTPATIENT HOSPITAL FACILITY	DIALYSIS	.0136			
	EMERGENCY ROOM	.0345			.3679
	MEDICAL AND SURGICAL	.4392			3.9430
**************************************		.4949	.4062		
TIMMODICI	PRESCRIPTION DRUGS	1.9644	1.8278	20.3870	19.2117
51m		1.9644	1.8278	20.3870	19.2117
PROFESSIONAL SERVICES	ADVANCED IMAGING	.0564	. 0525	.5840	
PROFESSIONAL SERVICES	AMBULANCE	.0381	.0402	.3978	
	ANESTHESIA	.0411	,0290		
	BEHAVIORAL	. 0233	.021,8		
	CARDIOVASCULAR MEDICINE	.1304			
	CERVICAL CANCER SCREENING	.0007		and the second s	
	DIALYSIS	.0046			
	DME	.1238			
	EVALUATION AND MANAGEMENT	1.0494			
	IMMUNIZATION	.0064			
	INJECTION	.0637			
	LAB AND PATHOLOGY MAMMOGRAPHY	.1042 .0014			

SOURCE: ACORDIA NATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES NOTE: CLAIMS LISTED ARE ON A PAID BASIS

WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE AGENCY MONTHLY MANAGEMENT REPORT - PER CAPITA UTILIZATION - MEDICARE ELIGIBLE APPLIL 2007

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Reporting Category	Type of Service	Current Period Encounters			Previous Fiscal Yr Encounters
PROFESSIONAL SERVICES	OTHER OTHER IMAGING OTHER MEDICINE PHYSICAL MEDICINE PROSTATE CANCER SCREENING SURGICAL	.0752 .2672 .1388 .1176 .0020	.2496 .1340 .1071	1.3274	1.0065 2.6075 1.2369 1.3511 .0128 2.1321
5/m		2,4390		26.2770	25.9358
sun		4.9706	4.7119	52.3443	50.2888

SOURCE: ACORDIA NATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES
NOTE: CLAIMS LISTED ARE ON A PAID BASIS



Monthly Management Report

NON MEDICARE ELIGIBLE TOTAL CLAIMS

APRIL 2007

WEST VIRGINIA FUBLIC EMPLOYEES INSURANCE AGENCY MONTHLY MANAGEMENT REPORT - TOTAL CLAIMS - NON MEDICARE ELIGIBLE APRIL 2007

Page: 1

I			Current		12 Months Prior		
Reporting	Type of	Current Period	Rolling Avg	12 Months Prior	Rolling Avg	Current Fiscal Yr	Previous Fiscal Yr
Category	Service	PEIA Payments	PEIA Payments	PEIA Payments	PKIA Paymente	PEIA Payments	PKIA Payments
INPATIENT HOSPITAL FACILITY	BEHAVIORAL	157,901.04	151,096.51		149,988.52	1,550,137.40	
	MATERNITY	168, 6 07.81	154,400.51		140,131.43	1,549,104.44	1,378,700.84
	MEDICAL AND SURGICAL	5,159,252.51	4,818,225.82	4,288,151.12	5,321,890.30	47,886,615.32	
ı	NEONATAL COMPLICATIONS	15,644.34	98,899.69	30,823.58	64,914.47	1,062,645.23	572,299.53

(- sum - 7-7 		.: 5,501,405_70 _	5,222,622.52	4,551,888.48	5,676,924.71	52,048,502.39	56,373,193.07
1			'				
OUTPATIENT HOSPITAL FACILITY	WOUTHWATE	37,475.98	39.543.87	53,775.34	37,937.81	361,917.93	402,560.73
OUTPATIENT HOSPITAL PACILITY	DIALYSIS	165,598.89	162,588.77	98,276.30	147.261.10	1,640,820.33	1,521,829.19
	EMERGENCY ROOM	408,433.41	380,166.89	- · ·	383,666.27	3,629,971.86	
	MATERNITY	39,925.05	44,238,29		38,212.74	417,285.28	
	MEDICAL AND SURGICAL	6.668.863.29	6,379,635.15	-	6,422,108.52	62.147,662.86	
	MEDICAL MAD SORGICAL	0,000,003.27	0,317,035.25	2,202,222.04	0,422,100.55		
\$UD		7,320,296.62	7,006,172.97	6,082,819.32	7,029,186.46	68,197,658.26	70,713,589.69
****			- ,				-
PHARMACY	PRESCRIPTION DRUGS	10,157,592.10	10,125,639.76	9,326,503.99	8,812, 6 57.55	100,242,932.62	87,764,252.86
***************						***************************************	AM 764 AFA AF
sum		10,157,592.10	10,125,639.76	9,326,503.99	8,812,657,55	100,242,932.62	87,764,252.86
					-		
PROFESSIONAL SERVICES	ADVANCED IMAGING	450,567.30	466,573.22	458,341.44	447,358.16	4,524,539.50	4,526,270.92
PROPESSIONAL SMC+1CMS	AMBULANCE	173,205.81	164,099.31	181,695.67	154,903.69	1,547,860.25	
	ANESTHESIA	505,666.94	600,822.79	464,944.88	615,868,13	5,860,839.86	
	BEHAVIORAL	299,546.74	325,330.90		321,977.17		
	CARDIOVASCULAR MEDICINE	346,966.67	361,624.33	375,085.72	372,149.64	3,399,932.14	
	CERVICAL CANCER SCREENING	19,125.41	26,045.02	•	33,777,83	244,523.39	
	DIALYSIS	5,295.22	9,544.70	•	21,884,34	87,588.74	
	DME	277.945.04	307,074.52	•	326,113.68	2,906,890.13	
		_://245/04	=	==-,	- -		• •

SOURCE: ACORDIA NATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES
NOTE: CLAIMS LISTED ARE ON A PAID BASIS

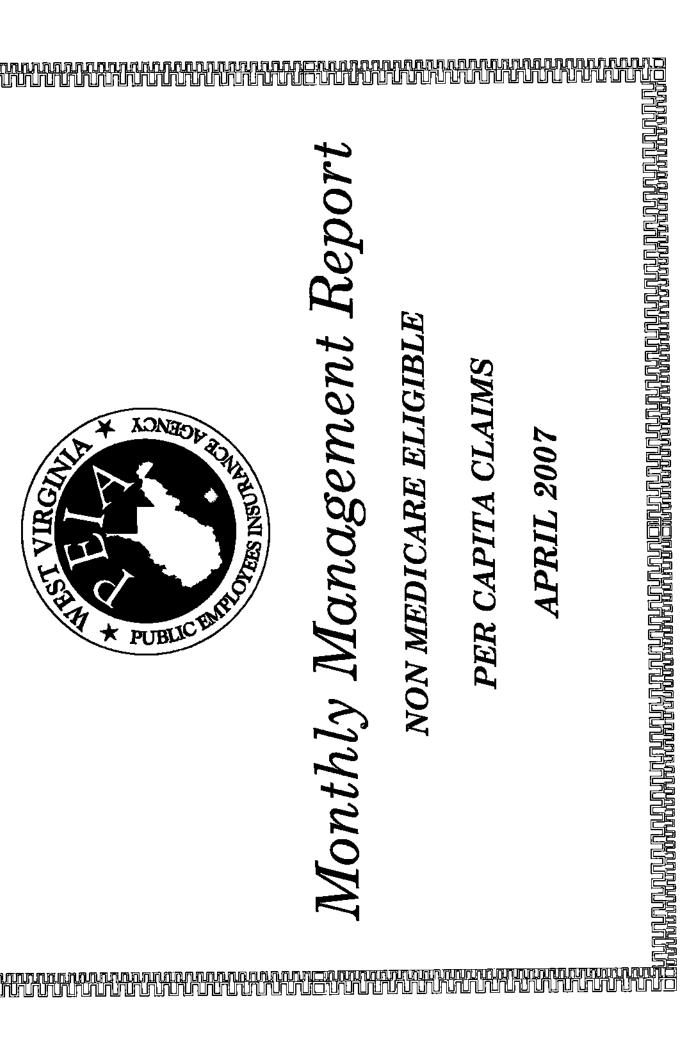
NOTE: DOES NOT INCLUDE REBATES, PHARMACY ADMINSTRATIVE FEES, OR RECOVERLES

WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE AGENCY MONTHLY MANAGEMENT REPORT - TOTAL CLAIMS - NON MEDICARE ELIGIBLE APRIL 2007

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Reporting Category	Type of Service	Current Period PEIA Payments	Current Rolling Avg PEIA Payments	12 Months Prior PEIA Payments		urrent Fiscal Yr P PEIA Payments	revious Fiscal Yr PEIA Payments
PROFESSIONAL SERVICES	EVALUATION AND MANAGEMENT IMMUNIZATION INJECTION LAB AND PATHOLOGY MAMMOGRAPHY OTHER OTHER IMAGING OTHER MEDICINE PHYSICAL MEDICINE PROSTATE CANCER SCREENING SURGICAL	3,944,956.12 514,058.13 697,154.66 675,242.12 1,848.83 263,175.99 787,163.52 494,331.07 494,179.66 14,008.44 2,179,839.00	3,995,728.35 190,037.98 647,805.02 606,310.01 72,968.63 343,796.79 807,837.09 625,968.01 534,068.79 16,324.96 2,346,064.39	3,638,955.83 127,148.81 536,106.62 703,988.67 70,339.18 260,053.49 774,069.13 824,532.87 506,644.13 17,743.85 2,024,300.55	145,377.86 690,875.68 565,270.56 93,857.52 416,658.89 726,349.09 585,432.13 496,443.30 14,116.08	39,720,760.53 2,411,356.03 6,493,505.08 5,654,233.43 625,049.32 3,333,042.15 7,697,678.57 5,946,585.35 5,186,542.28 145,939.13 22,789,459.30	38,627,170.37 1,591,131.70 6,727,248.51 5,680,929.40 922,398.36 4,139,579.51 7,333,871.65 5,837,388.68 5,023,475.00 148,304.74 23,171,820.07
44+44+4+4+++4444+4+4+4444 8um	•	12,144,276.67	12,448,024.82	11,591,413.35	12,191,212.84	121,634,474.70	122,090,273.37
SUM		35,123,571.09	34,802,460.08	31,552,625.14	33,709,981.56	342,123,567.97	336,941,308.99

SOURCE: ACORDIA NATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES
NOTE: CLAIMS LISTED ARE ON A PAID BASIS
NOTE: DOES NOT INCLUDE REBATES, PHARMACY ADMINISTRATIVE FEES, OR RECOVERIES



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WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE AGENCY MONTHLY MANAGEMENT REPORT - PER CAPITA CLAIMS - NON MEDICARE ELIGIBLE APRIL 2007

Page: 1

Reporting Category	Type of Service		Current Rolling Avg PEIA Payments	12 Months Prior	12 Months Prior Rolling Avg PEIA Payments		Previous Fiscal Yr PEIA Payments
INPATIENT ROSPITAL FACILITY	BEHAVIORAL MATERNITY MEDICAL AND SURGICAL NEONATAL COMPLICATIONS	1.0438 1.1146 34.1060 .1034	33.1706	.7498 .8087 28.6921 .2062	•		
**************************************		36.3679	35.9553	30.4568	39,3933	346.4449	379.5472
OUTPATIENT HOSPITAL FACILITY	BEHAVIORAL DIALYSIS EMERGENCY ROOM MATERNITY MEDICAL AND SURGICAL	.2477 1.0947 2.7000 .2639 44.0855	.2723 1.1194 2.6174 .3046 43.9218	.3598 .6576 2.2043 .2674 37.2111	.2633 1.0214 2.6621 .2651 44.5596		2.7103 10.2461 25.4126 2.6798 435.0488
sun		48.3919	48.2354	40.7003	48.7715	453.9369	476.0976
PHARMACY ************************************	PRESCRIPTION DRUGS	67.1483 67.1483	69.7145 69.7145	62.4038 62.4038	61.1313		590.8956 590.8956
PROFESSIONAL SERVICES	ADVANCED IMAGING AMBULANCE ANESTHESIA BEHAVIORAL CARDIOVASCULAR MEDICINE CERVICAL CANCER SCREENING DIALYSIS DME	2.9785 1.1450 3.3428 1.9802 2.2937 .1264 .0350 1.8374	3.2121 1.1299 4.1364 2.2394 2.4896 .1794 .0657	3.0668 1.2157 3.1110 2.2515 2.5097 .1813 .0606 1.7049	3.1034 1.0749 4.2735 2.2334 2.5817 .2344 .1519 2.2630	30.1162 10.3029 39.0109 20.3556 22.6306 1.6276 .5830	30.4743 10.6587 40.9160 21.2612 25.2630 2.2130 1.2671 22.0391

SOURCE: ACORDIA NATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES NOTE: CLAIMS LISTED ARE ON A PAID BASIS NOTE: DOES NOT INCLUDE REBATES, PHARMACY ADMINSTRATIVE FEES, OR RECOVERIES

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WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE AGENCY MONTHLY MANAGEMENT REPORT - PER CAPITA CLAIMS - NON MEDICARE ELIGIBLE APRIL 2007

Page:

Reporting Category	Type of Service	Current Period PEIA Payments		12 Months Prior			Previous Fiscal Yr PEIA Payments
PROFESSIONAL SERVICES	EVALUATION AND MANAGEMENT IMMUNIZATION INJECTION INJECTION IAB AND PATHOLOGY MAMMOGRAPHY OTHER OTHER IMAGING OTHER MEDICINE PHYSICAL MEDICINE PROSTATE CANCER SCREENING SURGICAL	26.0787 3.3983 4.6086 4.4638 .0122 1.7398 5.2037 3.2679 3.2668 .0926 14.4102	1.3083 4.4600 4.1737 .5028 2.3670 5.5608 4.3097 3.6764 .1124 16.1520	.8508 3.5871 4.7104 .4706 1.7400 5.1793 5.5170 3.3900 .1187	1.0081 4.7937 3.9211 .6513 2.8918 5.0392 4.0624 3.4441 .0979 16.0263	37.6357 4.1604 22.1854 51.2372 39.5816 34.5226 .9714 151.6911	10.7127 45.2929 38.2483 6.2103 27.8708 49.3772 39.3017 33.8219 .9985 156.0103
sum		232.1897	239.6021	211.1193	233.8817	2,277.2409	2,268.5449

SOURCE: ACORDIA NATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES NOTE: CLAIMS LISTED ARE ON A PAID BASIS

NOTE: DOES NOT INCLUDE REBATES, PHARMACY ADMINSTRATIVE FEES, OR RECOVERIES



Monthly Management Report

NON MEDICARE ELIGIBLE

PER CAPITA UTILIZATION

APRIL 2007

WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE AGENCY MONTHLY MANAGEMENT REPORT - PER CAPITA UTILIZATION - NON MEDICARE ELIGIBLE APRIL 2007

Page: 1

Reporting Category	Type of Service	Current Period Encounters			Previous Fiscal Yr Encounters
INPATIENT ROSPITAL FACILITY	REHAUTODAT.	.0004	.0005	.0057	.0056
INPRILEME TOOK I THE THETELE	MATERNITY	.0008	.0007	.0076	.0078
	MEDICAL AND SURGICAL	.0076	.0066	.0784	.0816
	NEONATAL COMPLICATIONS	.0001	.0002	.0022	.0027

sum		.0090	.0080	.0940	.0977
OUTPATIENT HOSPITAL FACILITY	BEHAVIORAL	.0025	.0034		
	DIALYSIS	.0052			
	EMERGENCY ROOM	.0227			
	MATERNITY	.0021			
	MEDICAL AND SURGICAL	.1960	. 1667	1.9032	1.9947
**************************************		. 2286		2.2112	2.3110
PHARMACY	PRESCRIPTION DRUGS	.8354	.8121	8.7364	8.3101
er mu		. 8354	.8121	8.7364	8.3101
PROFESSIONAL SERVICES	ADVANCED IMAGING	.0195	.0188		
,11022002012	AMBULANCE	.0036			
	anesthesia	.0146			
	BEHAVIORAL	. 0339			
	CARDIOVASCULAR MEDICINE	.0275			
	CERVICAL CANCER SCREENING	.0056			
	DIALYSIS	.0005 .0188			
	DME	.U188 .4471			
	EVALUATION AND MANAGEMENT IMMUNIZATION	. 0304			

SOURCE: ACORDIA NATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES NOTE: CLAIMS LISTED ARE ON A PAID BASIS

WEST VIRGINIA PUBLIC EMPLOYERS INSURANCE AGENCY

MONTHLY MANAGEMENT REPORT - PER CAPITA UTILIZATION - NON MEDICARE ELIGIBLE APRIL 2007

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Reporting Category	Type of Service	Current Period Encounters	12 Months Prior Encounters	Current Fiscal Yr Encounters	Previous Fiscal Yr Encounters
PROFESSIONAL SERVICES	INJECTION LAB AND PATHOLOGY MAMMOGRAPHY OTHER IMAGING OTHER MEDICINE PHYSICAL MEDICINE PROSTATE CANCER SCREENING SURGICAL	.0253 .1559 .0005 .0215 .0986 .0696 .0839 .0051	.0215 .1490 .0109 .0191 .0903 .0662 .0925 .0057	.0996 .3163 1.0015 .7389 .9730 .0573	.2264 1.4868 .1487 .2688 1.0349 .7299 .9805 .0568
**************************************		1.1343	1.0915	12.0815	12.1299
sum		2,2073	2.1070	23,1231	22.8486

SOURCE: ACORDIA NATIONAL AND EXPRESS SCRIPTS PAID CLAIMS TAPES NOTE: CLAIMS LISTED ARE ON A PAID BASIS



Prescription Drug Report

 $APRIL\ 2007$

8					2006 - 2007		
Plan Demographics	Jan-07	Feb-07	Mar-07	Apr-07	Fiscel	2005 - 2006 Fiscal	Percent-Co.
Total Drug Cost	822,164.637	£19.957.991	,	\$21,224,064	1209,322 138	\$194 D16.558	7.89%
Amount Paid By Plan Sponser	£18,211,514		\$18,781,112		£166.476.422	\$160,406,490	10.68%
Amount Paid By Members	83,953,123	\$3,506,730	\$3,902,377	\$3,590,236	\$42,848,716	\$43,610,069	-1.78%
Total Claims	332,626	296,252	334,269	311,961	3,092,443	2,960,228	4.47%
Average Eögible Member	187,582	187,731	187,988	188,096	187,846	188,816	0.85%
Average 6 of Rx's Per Member Per Month	1,77	1:58	1.78	1.66	1.65	1.58	3.69%
Plan Paid Per Member Per Month (PMPMt)	£97_09	\$87,63	629.91	\$93.76	58E.62	\$80,61	10.08%
Average Eligible Enrollees	97,208	97.283	67.326	67,367	96,991	85.850	1.09%
Average # of Ports Per Enrollee Per Month	3,42	3.08	3.43	3,20	3.19	3.09	3,34%
Plan Paid Par Enrollee Per Month (PEPM)	6167,35	\$169.16	\$192.97	\$181.11	1171 64	8156.76	9.50%
Ra Cost Share		4.0	0,0210-	7.0			
Avg. Claim Cost to Plan	\$54,77	\$66.63	\$56,19	E56.63	\$83.83	850.81	5.85%
AVo. Member Cost/Claim	\$11.89	\$11.84	\$11,57	\$11,51	\$13.88	\$14,73	-5.95%
Percent member Cost Share	17.8%	17.6%	17,2%	16.9%	20.5%	22.5%	-8.94%
Average Ingredient Costs		11.54					
Single Source (no generics evaliable)	£138.25	£141,66	\$143.05	\$144,38	1136 72	\$122.82	11,31%
Multi-Source Brand (generics evaluable)	\$39.51	639.88	842,56	\$57.71	\$39 11		
Generic Drupt	\$24.05	£23,10	\$23.62	\$23,44	9,26 06		
Brand/Generic Dispensing Rates	34-30			4-4-1-1			
Single Source (no generica)	35.32%	36 42%	35.17%	35.03%	36 13%	42.12%	-14.20%
Mudi-Source Brand (penence evaluable)	1.18%	1.18%	1.23%	1.17%	1,25%	1.38%	-
Generic Drug	63.60%	63.40%	63.60%	£03.80	62 62%		10.81%
Geneics Dispensed when available	88.18%	B5.18%	88.10%	98.20%	95 OE%		
Percent of Plan Cost for Smale Source	76.25%	77,64%	77,26%	77.47%	76 13%		-7.95%
Retail Pharmacy Program	,,,,,	,	11200	1		1	1 222
Avg. Day Supply	33.4	39.7	33.5	33.6	33.9	33.1	1,23%
Arg. Plan Cost/Day Supply	£1.63	£1.63	\$1.66		61.67		
Avg. Cleim Cost to Pten	864.31	885.06	855.70		860.36		
Aorp, Member Cost / Claim	£11.82		\$11.67		812 77		
Percent Member Cost Share	17.88%	17.61%	17.25%	, _ 	20.52%		
Special Metric (% of cleans filled)	12.54%	12 74%	12.44%		12 75%		····
Office Meira (% of clarins filled)	1 48%	1,87%	1.61%		1.63%		
Avg. Days Supply for Ment Netwis	B7.9				£7.5		
party, belo coursely to more incident							
Total & Claims Filts 1-34 Days Supply	283,093	251,318	284,841	288,398	2,624,061	2,826,637	
Total # Claims Filts 1-34 Days Supply Total # Claims Filts 35-80 Day Supply	283,093 2,359	251.318 2.087	284,841 2,300	285,395 2.196		2,826,637 21,339	3.73% 4.65%
Total & Claims Filts 1-34 Days Supply Total & Claims Filts 35-80 Day Supply Total & Claims Filts 61-90 Day Supply	283,093 2,359 49,797	251.318 2.087 39,920	284,841 2,300 43,984	288,398 2.196 41,208	2.624.061 22.551 418.100	2,826,637 21,339 380,691	3.73% 4.65% 9.04%
Total & Claims Filts 1-54 Days Supply Total & Claims Filts 55-80 Day Supply Total & Claims Filts 61-90 Day Supply Total & Claims Filts 61-90 Day Supply	283,093 2,359	251.318 2.087 39,920	284,841 2,300 43,984	288,398 2.196 41,208	2.624.061 22.551 414.100	2,826,637 21,339 380,691	3.73% 4.65% 9.04%
Total & Claims Filts 1-34 Days Supply Total & Claims Filts 25-80 Day Supply Total & Claims Filts 61-90 Day Supply Total & Claims Filts 61- Day Supply Mail Service Program	283,093 2,359 49,797 64	251.313 2,067 39,620 45	284,841 2,300 43,984 44	285,395 2,196 41,208 44	2.624.061 22.551 414.100	2,826,637 21,339 380,691 331	3.73% 4.85% 9.04% 3 28.74%
Total & Claims Filts 1-34 Days Supply Total & Claims Filts 35-80 Day Supply Total & Claims Filts 61-90 Day Supply Total & Claims Filts 61-90 Day Supply Total & Claims Filts 61- Day Supply Mail Service Program Avg. Days Supply	283,063 2.359 49,767 64	251,313 2,087 39,820 45	284,841 2,300 43,884 44	285,385 2.196 41,200 44	22.551 22.551 416 100 421 421	2,826,637 21,339 380,691 331	3.73% 4.55% 9.04% 3 28.74% 3 -0.29%
Total & Claims Filts 1-34 Days Supply Total & Claims Filts 35-80 Day Supply Total & Claims Filts 61-90 Day Supply Total & Claims Filts 61- Day Supply Mall Service Program Avg. Days Supply Avg. Park Cost/Days Supply	283,093 2,359 49,767 64 73,6	251,313 2,087 39,620 45 74.1	284,841 2,300 43,984 44 74.2 81,48	288,398 2.196 41.202 44 74.1	2.624.061 22.551 418.100 428 74.1	2,829,637 21,339 380,691 331 742 5 1.33	2.73% 4.65% 9.04% 3 28.74% 3 -0.29% 9 -1.67%
Total & Claims Filts 1-34 Days Supply Total & Claims Filts 35-80 Day Supply Total & Claims Filts 61-90 Day Supply Total & Claims Filts 61-90 Day Supply Mail Service Program Avg. Days Supply Avg. Paler Cost/Days Supply Avg. Cost to Pian	283,093 2,359 43,797 64 73,5 81,59	251,313 2,027 39,620 45 74,1 51,39	284,841 2,300 43,884 44 74,2 \$1,48 \$108.06	288,398 2.196 41.208 44 74.1 5 61.42 6 105.68	2.624.061 22.551 416.100 426 74. 21.31	2,829,637 21,339 380,691 331 742 5 51.33	3.75% 4.65% 9.05% 3 28.74% 3 -0.29% 9 -1.67% 3 -2.25%
Total & Claims Filts 1-34 Days Supply Total & Claims Filts 35-80 Day Supply Total & Claims Filts 61-80 Day Supply Total & Claims Filts 61-90 Day Supply Mail Service Program Avg. Days Supply Avg. Plan Cost/Osyx Supply Avg. Cost to Plan Avg. Member Cost/Claims	283,093 2,359 49,797 64 73.5 81,39 8102,08	251,318 2,087 39,820 45 74,1 \$1,39 1102,98	284,841 2,300 43,884 44 74,2 \$1,44 \$108,06	285,395 2.196 41,200 44 74.1 61,42 8105,85 2 \$18,78	2.624.061 22.551 416.100 426 74. 21.31 810.11	2,829,637 21,339 380,691 331 742 51,339 51,339 51,339 51,339 51,339 51,339 51,339 51,339 51,339 51,339 51,339 51,339 51,339	3.79% 4.65% 9.04% 3 28.74% 3 -0.29% 9 -1.07% 3 -2.25% 7 -8.57%
Total & Claims Filts 1-34 Days Supply Total & Claims Filts 35-80 Day Supply Total & Claims Filts 61-90 Day Supply Total & Claims Filts 61-90 Day Supply Mail Service Program Avg. Days Supply Avg. Pater Cost/Cays Supply Avg. Cost to Pian Avg. Member Cost/Claims Percent Member Cost Bhare	283,093 2,359 49,797 64 73.5 81,39 8102,08 816,81	251,213 2,027 39,020 45 74.1 81,39 4102,90 116,50%	284,841 2,300 43,884 44 742 81,46 \$108,06 818,03	285,395 2,166 41,200 44 74.1 61,42 8105,55 2 \$18,76 5 15,00%	2.624.061 22.551 416.100 426 74. 31.31 \$101.11 622.11	2,829,637 21,339 380,691 331 742 81,33 9 6103,6 9 824,2 18,899	3.73% 4.05% 9.04% 3 28.74% 3 -0.29% 9 -1.07% 3 -2.25% 7 -8.57% 6 -5.65%
Total & Claims Filts 1-34 Days Supply Total & Claims Filts 55-80 Day Supply Total & Claims Filts 51-80 Day Supply Total & Claims Filts 51- Day Supply Mail Service Program Avg. Days Supply Avg. Plan Cost/Osyx Supply Avg. Cost to Plan Avg. Member Cost/Claims Percent Member Cost Share Total & Claims Filt 1-34 Days Supply	283,093 2,359 49,797 64 73.5 81,39 8102,08 816,51 16,36% 893	251,213 2,027 39,020 45 74.1 81,39 1102,90 116,50%	284,841 2,300 43,884 44 242 81,46 \$100,06 818,00 14,299	285,395 2,166 41,200 44 74.1 61,42 8105,55 2 818,78 4 15,00% 3 857	2.624.061 22.551 416.100 426 74. 41.31 \$101.11 622.11	2.826.637 21,339 380.691 331 74. \$1.33	3.73% 4.05% 9.04% 3.28.74% 30.29% 91.07% 32.25% 72.57% 65.65% 8. 0.57%
Total & Claims Filts 1-34 Days Supply Total & Claims Filts 35-80 Day Supply Total & Claims Filts 61-80 Day Supply Total & Claims Filts 61-90 Day Supply Mail Service Program Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Aug. Member Cost/Claims Percent Member Cost Share Total & Claims Filt 1-34 Days Supply Total & Claims Filt 1-34 Days Supply	283,093 2,359 49,797 64 73.5 81,39 8102,08 816,51 16,36% 893	251,213 2,027 39,020 45 74,1 81,39 4102,90 18,89 18,80%	284,841 2,300 43,984 44 742 81,46 \$108,06 818,03 14,299 621	285,395 2,166 41,200 44 74.1 61,42 8105,55 2 818,78 3 857 7	2.624.061 22.551 416.100 426 74. 41.31 \$101.11 622.11 17.645 817	2.826.637 21,339 380.691 331 742 \$1.33 \$1.33 \$1.33 \$1.33 \$1.33 \$1.34	3.73% 4.05% 9.04% 9.04% 3 28.74% 9 -1.07% 9 -2.25% 7 -2.57% 6 -5.65% 8 9.57%
Total & Claims Filts 1-34 Days Supply Total & Claims Filts 35-80 Day Supply Total & Claims Filts 61-90 Day Supply Total & Claims Filts 61-90 Day Supply Mail Service Program Avg. Days Supply Avg. Pass Cost/Days Supply Avg. Cost to Piss Avg. Member Cost/Claim Percent Member Cost Share Total & Claims Filt 1-34 Days Supply Total & Claims Filts 35-80 Days Supply Total & Claims Filts 35-80 Days Supply	283,093 2,359 49,797 64 73.5 81,39 8102,08 816,51 16,36% 893	251,213 2,027 39,020 45 74.1 81,39 4102,90 116,50% 778	284,841 2,300 43,984 44 742 81,46 \$108,06 818,03 14,299 621	285,395 2,166 41,200 44 74.1 61,42 8105,55 2 818,78 3 857 7	2.624.061 22.551 416.100 426 74. 41.31 \$101.11 622.11 17.645 817	2.826.637 21,339 380.691 331 74. \$1.31 \$1.03.6 \$24.2 18.899	3.73% 4.05% 9.04% 9.04% 3 28.74% 9 -1.07% 9 -2.25% 7 -2.57% 6 -5.65% 8 9.57%
Total & Claims File 1-34 Days Supply Total & Claims File 51-80 Day Supply Total & Claims File 61-80 Day Supply Total & Claims File 61-80 Day Supply Math Service Program Avg. Days Supply Avg. Plan Cost/Cays Supply Avg. Cost to Plan Avg. Member Cost/Claim Percent Member Cost Share Total & Claims File 1-34 Days Supply Total & Claims File 51-80 Days Supply Total & Claims File 61-80 Days Supply Total & Claims File 81-80 Days Supply	283,093 2,359 49,797 64 73.5 81,39 8102,08 816,51 16,36% 893	251,213 2,027 39,020 45 74,1 81,39 4102,90 18,89 18,80%	284,841 2,300 43,984 44 742 81,46 \$108,06 818,03 14,299 621	285,395 2,166 41,200 44 74.1 61,42 8105,55 2 818,78 3 857 7	2.624.061 22.551 416.100 426 74. 41.31 \$101.11 622.11 17.645 817	2.826.637 21,339 380.691 331 74. \$1.31 \$1.31 \$1.03.6 \$24.2 18.899	3.73% 4.65% 9.04% 3.28.74% 30.29% -1.07% -2.25% 72.55% 6.5.65% 8.0.57% 2.2.63%
Total & Claims File 1-34 Days Supply Total & Claims File 51-90 Day Supply Total & Claims File 61-90 Day Supply Total & Claims File 61-90 Day Supply Math Service Program Avg. Days Supply Avg. Plan Cost/Cays Supply Avg. Cost to Plan Avg. Member Cost/Claims Percent Member Cost Share Total & Claims File 1-34 Days Supply Total & Claims File 51-90 Days Supply Total & Claims File 61-90 Days Supply Total & Claims File 81-90 Days Supply Total & Claims File 81- Day Supply Total & Claims File 81- Day Supply	283,093 2,359 49,767 54 73.5 81,20 8102,08 816,59 816,59 813,59 813,59	251.213 2.027 39.820 45 74.1 81.92 4102.86 10.50% 778 11.50%	284,841 2,300 43,934 44 24,2 \$1,44 \$108,06 \$18,09 624 2,267	265,395 2.196 41,200 44,200 61,42 8105,55 \$18,76 518,76 3 837 7	2.624.061 22.881 418.100 428 74.3 81.3 81.01 11 622.1 17.646 817 812.265	2,626,637 21,339 380,691 331 743 61,336 61,336 61,336 61,346 61,3	3.79% 4.65% 9.05% 3 28.74% 3 -0.26% 9 -1.07% 3 -2.26% 5 -8.57% 6 -8.65% 5 -8.57% 2 26.39%
Total & Claims File 1-34 Days Supply Total & Claims File 51-90 Day Supply Total & Claims File 51-90 Day Supply Total & Claims File 51- Day Supply Mail Service Program Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Claim Percend Member Cost/Claim Percend Member Cost Share Total & Claims File 34-Days Supply Total & Claims File 51-90 Days Supply Formulary Program S/S Formulary Drups (% by claim)	283,093 2,359 49,797 54 73,5 81,29 8102,08 816,54 815,54 863 10 2,309	251,213 2,027 39,820 45 74.1 81,92 4102,86 16,50% 778 2,122	284,841 2,300 43,934 44 24,2 \$1,00 \$18,00 14,29 621 2,267	265,395 2.196 41.206 44.206 44.206 61.42 8105.65 818.76 818.76 2.274	2.624.061 22.551 418.100 428 74.5 81.3 81.01 17.645 817.645 817.645 817.645	2,826,637 21,339 380,691 331 742 61,336 61,336 61,336 61,337 61,3	3.73% 4.65% 9.05% 3 28.74% 3 -0.25% 9 -1.07% 7 -8.57% 5 8 8.57% 2 26.35% 7 .89%
Total & Claims File 1-34 Days Supply Total & Claims File 61-90 Day Supply Total & Claims File 61-90 Day Supply Total & Claims File 61-90 Day Supply Mail Service Program Avg. Days Supply Avg. Plan Cost/Cays Supply Avg. Cost to Plan Avg. Member Cost/Claim Percend Member Cost/Claim Percend Member Cost/Claim Percend Member Cost Share Total & Claims File 1-34 Days Supply Total & Claims File 61-90 Days Supply Total & Claims File 61-90 Days Supply Total & Claims File 61-90 Days Supply StS Formulary Drups (% by claim) StS Non-Formulary Drups (% by claim)	283,093 2,359 49,797 54 73,5 81,39 8102,08 818,51 16,35% 82 2,309	251,213 2,027 39,820 45 31,92 4102,96 110,86 18,50% 778 2,122 24,77%	284,841 2,300 43,834 44 24,2 81,44 8108,05 14,29 821 2,267 24,809 10,379	285,395 2.196 41.208 44.208 44.208 61.42 8105.85 \$18.78 15.08% 3 837 2.274 6 28.07% 9.98%	2.624.061 22.551 418.100 428 74.5 81.3 \$101.11 622.11 17.645 817 817 817 817 817 817 817 817	2,626,637 21,339 380,691 331 742 61,339 81,036 81,339 81,3	3.79% 4.65% 9.05% 3 28.74% 3 -0.29% 9 -1.07% 3 -2.25% 6 -5.65% 8 0.57% 2 26.57% 2 7.69% 4 -14.25%
Total & Claims Filts 1-34 Days Supply Total & Claims Filts 51-80 Day Supply Total & Claims Filts 61-80 Day Supply Total & Claims Filts 61-80 Day Supply Mail Service Program Avg. Days Supply Avg. Plan Cost/Cays Supply Avg. Cost to Plan Avg. Member Cost/Claim Percend Member Cost/Claim Percend Member Cost Share Total & Claims Filts 35-60 Days Supply Total & Claims Filts 51-90 Days Supply Total & Claims Filts 61-90 Days Supply Total & Claims Filts 81-90 Days Supply Total & Claims Filts 61-90 Days Supply S/S Formulary Drups (% by claim) S/S Non-Formulary Drups (% by claim) M/S Drups (% by claim)	283,093 2,359 49,797 54 73.5 81,39 8102,05 815,51 16,35% 823 10 2,309	251,213 2,027 39,820 45 4102,86 4102,86 118,80% 778 2,122 24,77% 10,65% 0,08%	284,841 2,300 43,834 44 31,44 \$108,05 14,29 621 2,267 24,809 10,379	285,395 2.196 41.208 44.208 45.42 5.16.42 5.16.42 5.16.994 3.837 2.274 5.9894 6.0.0254	2.624.061 22.551 418.100 428 74.6 81.3 \$101.11 622.11 17.645 817 817 817 817 817 817 817 817 817 817	2,829,637 21,339 380,691 331 74: 813: 9 8109,6 1 18,899 7 20,683	3.79% 4.68% 9.05% 3 28.74% 3 -0.29% 9 -1.97% 7 -9.57% 6 -5.65% 8 9.57% 2 26.39% 7 .49% 1 -14.25% 4 -14.25% 5 104.53%
Total & Claims File 1-34 Days Supply Total & Claims File 61-90 Day Supply Total & Claims File 61-90 Day Supply Total & Claims File 61-90 Day Supply Mail Service Program Avg. Days Supply Avg. Plan Cost/Cays Supply Avg. Cost to Plan Avg. Member Cost/Claim Percend Member Cost/Claim Percend Member Cost Share Total & Claims File 13-34 Days Supply Total & Claims File 61-90 Days Supply S/S Formulary Drups (% by claim) S/S Non-Formulary Drups (% by claim) M/S Drups (% by claim) Generic Drups (% by Claim)	283,093 2,359 49,797 54 73,5 \$1,39 \$102,05 \$15,51 16,354 893 10 2,309 24,56% 0,03% 69,50%	251,213 2,027 39,020 45 4102,06 110,86 118,50% 772 2,122 24,77% 10,65% 0,08% 63,40%	284,841 2,300 43,834 44 81,44 818,05 14,29 621 2,267 24,809 10,379 0,039	285,395 2.196 41.208 41	2.624.061 22.551 416.100 420 74.6 51.3 5101.11 622.11 17.645 617 62.265 24.635 11.605 0.045	2,829,637 21,339 380,691 331 742 81,339 81,095 81,339 81,095 81,339 81,3	3.73% 4.65% 9.04% 3 28.74% 3 -0.29% 9 -1.97% 3 -2.25% 7 -8.57% 6 -5.65% 8 9.57% 2 26.39% 7 .49% 10.81% 10.81%
Total & Claims Filts 1-34 Days Supply Total & Claims Filts 51-90 Day Supply Total & Claims Filts 51-90 Day Supply Total & Claims Filts 51-90 Day Supply Mail Service Program Avg. Days Supply Avg. Plan Cost/Cays Supply Avg. Cost to Plan Avg. Member Cost/Claim Percend Member Cost/Claim Percend Member Cost/Claim Percend Member Cost Share Total & Claims Filts 1-34 Days Supply Total & Claims Filts 51-90 Days Supply Total & Claims Filts 61-90 Days Supply Total & Claims Filts 61-90 Days Supply Total & Claims Filts 61-90 Days Supply SiS Formulary Drups (% by claim) SiS Non-Formulary Drups (% by claim) M/S Drups (% by claim) Generic Drups (% by Claim) SiS Formulary Drups (% by S)	283,093 2,359 49,797 54 73,5 \$1,59 \$102,05 \$15,51 16,354 10,2309 24,56% 10,76% 0,03% 63,50% 63,50%	251,213 2,027 39,020 45 4102,05 1102,05 116,50% 772 2,122 24,77% 10,65% 0,085 63,409 60,709	284,841 2,300 43,834 44,834 \$1,44 \$108,00 \$18,00 621 2,267 2,4809 10,379 0,039 63,609 61,000	285,395 2.186 41.208 44.208 44.208 45.42 5105.65 15.08% 3.837 7 2.274 5.926% 6.0.02% 6.0.02% 6.0.02% 6.0.02% 6.0.02% 6.0.02% 6.0.02%	2.624.061 22.551 416.100 426 74.6 51.5 5101.11 622.11 17.645 22.265 24.635 11.605 0.045 62.625	2,829,637 21,339 380,691 331 74: 81.3: 9 8109,6 1 18,829 745 7 20,683 6 13,405 6 0,022 6 58,819	3.79% 4.68% 9.09% 3 28.74% 9 -1.07% 3 -2.25% 7 -8.57% 8 -5.65% 8 9.57% 2 26.39% 7 .69% 10.48% 10.48% 10.48% 10.48%
Total & Claims Filts 1-34 Days Supply Total & Claims Filts 51-90 Day Supply Total & Claims Filts 51-90 Day Supply Total & Claims Filts 51-90 Day Supply Total & Claims Filts 51- Day Supply Mail Service Program Avg. Days Supply Avg. Plan Cost/Cays Supply Avg. Cost to Plan Avg. Member Cost/Claim Percerd Member Cost/Claim Percerd Member Cost/Claim Percerd Member Cost/Claim Total & Claims Filts 1-34 Days Supply Total & Claims Filts 51-30 Days Supply Total & Claims Filts 51-90 Days Supply Total & Claims Filts 51-90 Days Supply Total & Claims Filts 51-90 Days Supply Formulary Program S/S Formulary Drups (% by claim) S/S Non-Formulary Drups (% by claim) S/S Formulary Drups (% by Claim) S/S Formulary Drups (% by S) s/s non-Formulary Drups (% by S)	283,093 2,359 49,797 54 73,5 \$1,59 \$102,08 \$15,51 16,35% 10,2309 24,56% 10,75% 0,03% 63,50% 63,50% 15,52%	251,213 2,027 39,020 45 45 4102,66 4102,66 416,60% 772 2,122 24,77% 10,65% 63,409 60,709	284,841 2,300 43,834 44,834 81,44 8108,06 \$18,07 621 2,267 10,379 0,039 63,809 16,269	285,395 2.166 41,200 44	2.624.061 22.531 416.100 426 74.5 8101.11 622.11 17.645 817.7 8	2,829,637 21,339 380,691 331 742 81,339 81,095 81,339 81,095 824,2 745 7 20,663 8 4 28,719 8 13,409 8 58,819 8 58,819	3.73% 4.65% 9.05% 9.05% 3 28.74% 9 -1.97% 9 -2.25% 7 -8.57% 8 -5.65% 8 9.57% 2 26.39% 7 .09% 10.453% 10.453% 10.453% 10.453% 10.453% 10.453% 10.453% 10.453% 10.453% 10.453% 10.453% 10.453% 10.453% 10.453% 10.453% 10.453%
Total & Claims Filts 1-34 Days Supply Total & Claims Filts 51-90 Day Supply Total & Claims Filts 51-90 Day Supply Total & Claims Filts 51- Day Supply Total & Claims Filts 51- Day Supply Mail Service Program Avg. Days Supply Avg. Plan Cost/Cays Supply Avg. Cost to Plan Avg. Member Cost/Claim Percerd Member Cost/Claim Percerd Member Cost/Claim Percerd Member Cost/Claim Total & Claims Filts 1-34 Days Supply Total & Claims Filts 56-80 Days Supply Total & Claims Filts 56-80 Days Supply Total & Claims Filts 51- Day Supply Formulary Program S/S Formulary Drups (% by claim) S/S Non-Formulary Drups (% by claim) S/S Formulary Drups (% by Claim) S/S Formulary Drups (% by S) s/s non-Formulary Drups (% by S) M/S Drups (% by S)	283,093 2,359 49,797 54 73,5 \$1,59 \$102,08 \$16,51 16,35% 923 10 2,309 24,66% 10,75% 69,50% 69,50% 18,52% 0,07%	251,213 2,027 39,020 45 45 4109,66 410,66 776 2,122 24,77% 10,66% 63,409 60,709 16,986	284,841 2,300 43,834 44,834 81,44 8108,06 14,259 621 2,267 10,379 0,039 63,809 16,269	285,395 2.166 41,200 44,200 44,200 44,100 44	2.624.061 22.551 416.100 426 74. 41.57 8101.11 622.11 17.645 817.7 81.7 8	2,829,637 21,339 380,691 5 331 742 6 5109,6 6 524,2 7 7 7 20,682 6 13,405 6 0,025 6 53,795 6 18,915 6 0,025	3.73% 4.65% 9.05% 9.05% 3 28.74% 9 -1.07% 9 -2.25% 7 -9.57% 8 -5.65% 8 0.57% 2 26.39% 7 .09% 4 -14.22% 4 -14.18% 10.81% 5 10.81% 5 -7.39% 6 -9.62%
Total & Claims Filts 1-34 Days Supply Total & Claims Filts 51-30 Day Supply Total & Claims Filts 51-30 Day Supply Total & Claims Filts 51-30 Day Supply Total & Claims Filts 51- Day Supply Mail Service Program Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Claim Percerd Member Cost/Claim Percerd Member Cost/Claim Percerd Member Cost Brare Total & Claims Filts 1-34 Days Supply Total & Claims Filts 35-50 Days Supply Total & Claims Filts 61-80 Days Supply Total & Claims Filts 61-80 Days Supply Total & Claims Filts 61-80 Days Supply Formulary Program S/S Formulary Drups (% by claim) S/S Non-Formulary Drups (% by claim) S/S Formulary Drups (% by Claim) S/S Formulary Drups (% by S) s/s non-Formulary Drups (% by \$) M/S Drups (% by \$) Generic Drups (% by \$) Generic Drups (% by \$)	283,093 2,359 49,797 54 73,5 \$1,59 \$102,08 \$15,51 16,35% 10,2309 24,56% 10,75% 0,03% 63,50% 63,50% 15,52%	251,213 2,027 39,020 45 45 4109,66 410,66 776 2,122 24,77% 10,66% 63,409 60,709 16,986	284,841 2,300 43,834 44,834 81,44 8108,06 14,259 621 2,267 10,379 0,039 63,809 16,269	285,395 2.166 41,200 44,200 44,200 44,100 44	2.624.061 22.551 416.100 426 74. 41.57 8101.11 622.11 17.645 817.7 81.7 8	2,829,637 21,339 380,691 5 331 742 6 5109,6 6 524,2 7 7 7 20,682 6 13,405 6 0,025 6 53,795 6 18,915 6 0,025	3.73% 4.65% 9.05% 9.05% 3 28.74% 9 -1.07% 9 -2.25% 7 -9.57% 8 -5.65% 8 0.57% 2 26.39% 7 .09% 4 -14.22% 4 -14.18% 10.81% 5 10.81% 5 -7.39% 6 -9.62%
Total & Claims Filts 1-34 Days Supply Total & Claims Filts 51-30 Day Supply Total & Claims Filts 51-30 Day Supply Total & Claims Filts 51-30 Day Supply Total & Claims Filts 51- Day Supply Mail Service Program Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Claim Perceru Member Cost/Claim Perceru Member Cost/Claim Perceru Member Cost Briare Total & Claims Filts 1-34 Days Supply Total & Claims Filts 35-50 Days Supply Total & Claims Filts 51-50 Days Supply Total & Claims Filts 51- Day Supply Formulary Drups (% by claim) SrS Non-Formulary Drups (% by claim) SrS Non-Formulary Drups (% by claim) SrS Formulary Drups (% by S) Sts non-Formulary Drups (% by S) MrS Drups (% by S) Generic Drups (% by S) Specialty Drups	283,093 2,359 49,797 54 73,5 \$1,39 \$102,05 \$16,51 16,36% 893 10 2,309 24,56% 0,07% 69,73% 16,52% 0,07% 23,40%	251,213 2,087 39,820 45 41,95 4109,86 116,50% 778 16 2,122 24,77% 10,65% 63,409 60,709 16,95% 0,109 22,009	284,841 2,300 43,834 44,834 81,44 8108,06 818,02 14,299 624 2,287 10,379	285,395 2.166 41,200 44,200 44 74,1 61,42 8105,65 15,00% 5,18,70 2,274 6,28,07% 6,00% 6,61,71% 6,15,76% 6,00% 6,17,76% 6,00% 6,17,76% 6,00	2.624.061 22.551 416.100 428 74.1 61.57 61.57 61.57 62.57 62.635 62.625 62.625 63.67 64.635 64.635 64.635 65.625 65.625 662.625 662.625 662.625 662.625	2,829,637 21,339 380,691 330 41 742 51,339 5109,6 5109,6 62 745 7 20,682 6 28,719 6 13,409 6 0,029 6 56,619 6 0,029 6 17,019	3.73% 4.65% 9.05% 9.05% 3 28.74% 9 -1.07% 3 -2.25% 7 -9.57% 6 5.65% 5 0.57% 2 26.39% 7 .49% 4 -14.22% 4 10.63% 5 10.61% 5 -7.39% 5 -9.82% 5 38.23%
Total & Claims File 1-34 Days Supply Total & Claims File 51-90 Day Supply Total & Claims File 51-90 Day Supply Total & Claims File 51-90 Day Supply Matt Service Program Avg. Days Supply Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Pian Avg. Member Cost/Claim Percent Member Cost Share Total & Claims File 1-34 Days Supply Total & Claims File 35-60 Days Supply Total & Claims File 51-90 Days Supply Formulary Program S/S Formulary Drups (% by claim) S/S Non-Formulary Drups (% by claim) Generic Drups (% by Claim) S/S Formulary Drups (% by \$) Sta non-Formulary Drups (% by \$) M/S Drups (% by \$) Generic Drups (% by \$) Specialty Drups Total Drups (% by \$) Specialty Drups Total Drups Cost	283,093 2,359 49,797 54 73,5 8102,08 8102,08 816,50 10 2,309 24,56% 0,03% 63,50% 10,75% 0,03% 16,52% 10,07% 23,40%	251,213 2,027 39,020 45 41,95 4109,86 116,80% 778 116,212 24,77% 10,65% 63,409 60,709 16,85% 0,109 22,009 21,009 22,009	284,841 2,300 43,834 44,834 81,44 8108,06 818,02 14,299 624 2,267 2,267 10,379	285,395 2.166 41,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 410,064 45,206 46,206 4	2.624.061 22.551 416.100 428 74. 416.100 428 10. 428 10. 11. 622.11 17. 649 22.263 11.609 11.	2,829,637 21,339 380,691 330 41 74.2 51.3 9 \$103,6 6 \$24.2 1 \$18,695 6 \$2,715 6 \$13,405 6 \$6,817 6 \$18,915 6 \$17,015 8 \$13,226,05	3.73% 4.65% 9.05% 3 28.74% 3 -0.29% 3 -1.67% 5 -2.25% 6 -8.65% 6 -8.65% 6 -14.22% 6 -14.22% 6 10.53% 6 10.53% 6 -7.35% 6 3.323%
Total & Claims File 1-34 Days Supply Total & Claims File 51-90 Day Supply Total & Claims File 51-90 Day Supply Total & Claims File 51-90 Day Supply Matt Service Program Avg. Days Supply Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Claim Percent Member Cost Share Total & Claims File 35-50 Days Supply Total & Claims File 35-50 Days Supply Total & Claims File 51-90 Days Supply Total & Claims File 51-90 Days Supply Total & Claims File 51-90 Days Supply Formulary Program S/S Formulary Drups (% by claim) S/S Non-Formulary Drups (% by claim) Generic Drups (% by Claim) S/S Formulary Drups (% by \$) Sts non-Formulary Drups (% by \$) Sts non-Formulary Drups (% by \$) Seneric Drups (% by \$) Generic Drups (% by \$) Specialty Drups Total Drups (% by \$) Specialty Drups Total Drups Cost Amount Paid by Plan Sportsor	283,093 2,359 49,797 54 73,5 8102,08 8102,08 816,59 933 10 2,309 24,68% 10,75% 63,50% 63,50% 16,52% 10,07% 23,40% 81,511,836 81,452,784	251.213 2.027 39.820 45 4102.85 4102.85 10.65% 712 2,122 24,77% 10.65% 0.085% 63.40% 60.70% 51.483.45 (\$1.447.76%	284,841 2,300 43,884 44 24,894 818,60 14,299 824,809 10,379 0,039 61,009 16,009 22,349	265,395 2.196 41,206 44,206 44,206 44,206 44,206 44,206 44,206 41,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 44,206 46	2.624.061 22.831 418.100 428 74.3 81.3 81.01 11 62.2 17 62.62 11.605 11.605 62.625 62.625 63.6372.23 814.801.78	2,829,637 21,339 380,691 5 33 6 17,43 6 13,43 6 18,897 7 20,683 6 28,719 6 13,409 6 58,819 6 0,029 6 17,019 8 513,226,03	3.73% 4.65% 9.05% 3 28.74% 3 -0.29% 3 -1.67% 5 -1.67% 6 -6.65% 6 -6.65% 6 -14.22% 6 -14.22% 6 10.63% 7 .49%
Total & Claims File 1-34 Days Supply Total & Claims File 51-90 Day Supply Total & Claims File 51-90 Day Supply Total & Claims File 51-90 Day Supply Matt Service Program Avg. Days Supply Avg. Plan Cost/Cays Supply Avg. Plan Cost/Cays Supply Avg. Cost to Plan Avg. Member Cost Share Total & Claims File 35-90 Days Supply Total & Claims File 35-90 Days Supply Total & Claims File 35-90 Days Supply Total & Claims File 51-34 Days Supply Total & Claims File 51-90 Days Supply Formatary Program S/S Formatary Drups (% by claim) S/S Non-Formatary Drups (% by claim) Generic Drups (% by claim) S/S Formatary Drups (% by \$) S/S Drups (% by \$) Security Drups (% by \$) Security Drups Total Drups (% by \$) Specialty Drups Total Drup Cost Amount Paid by Members	283,093 2,359 49,797 54 73,5 81,32 8102,08 816,59 10 2,309 24,66% 0,075% 0,075% 0,075% 16,573% 18,527% 23,60% 81,511,836 81,617,836 81,617,836	251.213 2.027 39.820 45 4102.85 4102.85 10.50% 772 2,122 24,77% 0.056% 0.08% 60.709 16.909 21.009 21.009 51.447.78	284,841 2,300 43,934 44 81,84 8108,06 818,09 62 2,267 24,809 10,379 0,039 61,009 16,269 22,348 81,788,90 81,708,46	265,395 2.196 41,206 44,206 46	2.624.061 22.551 418.100 428 74.5 81.5 81.01 11 622.1 17.649 22.265 11.600 62.629 62.639 17.649 62.639 17.649 62.639 18.600 62.639 17.600 62.639 62.639 62.639 62.639 63.630 63.6	2,626,637 21,339 380,691 5 331 742 6 13.40 7 20,682 6 28,719 6 13,40 6 56,619 6 0,022 6 17,01 8 613,226,03 6 513,226,03 6 58,519,64	3.73% 4.65% 9.05% 3 28.74% 1.07% 3 -2.25% 7 -8.57% 6 -8.55% 8 9.57% 7 -8.57% 6 -14.22% 10.81% 10.81% 10.81% 10.81% 10.81% 10.83% 10.81% 10.83%
Total & Claims File 1-34 Days Supply Total & Claims File 51-90 Day Supply Total & Claims File 51-90 Day Supply Total & Claims File 51- Day Supply Matt Service Program Avg. Days Supply Avg. Plan Cost/Cays Supply Avg. Cost to Plan Avg. Member Cost/Claim Percent Member Cost Share Total & Claims File 35-90 Days Supply Total & Claims File 35-90 Days Supply Total & Claims File 51-90 Days Supply Formulary Program S/S Formulary Drups (% by claim) S/S Non-Formulary Drups (% by claim) S/S Formulary Drups (% by S) sts non-Formulary Drups (% by \$) Sts non-Formulary Drups (% by \$) S/S Drups (% by \$) Generic Drups (% by \$) Specialty Drups Total Drup Cost Amount Peid by Membere Total Claims	283,093 2,359 49,797 54 81,39 8102,08 8162,08 8163,69 10 2,309 24,66% 0,076% 0,07% 23,60% 81,611,836 81,452,784 649,081 1,002	251.213 2.027 39.020 45 4102.0	284,841 2,300 43,934 44 81,439 818,63 14,299 62,267 2,267 2,267 2,267 62,639 61,039 61,039 62,349 62,349 63,444 63,1,03,465	265,395 2.196 41.206 44.206 44.206 44.206 518.76 518.76 518.76 52.77 52.77 60 60 61.77 60 61.77 60 61.77 60 61.77 60 61.77 61 61.77 61 61.77 61 61 61.77 61 61 61 61 61 61 61 61 61 61 61 61 61	2.624.061 22.551 418.100 428 74.5 810.1 810.1 822.1 810.1 822.1 82.2 83.1 84.635 11.600 0.045 62.625 89.07 80.085 80.07 80.085 80.07 80.085 80.07 80.085 80.07 80.085 80.07 80.085 80.07 80.085 80.07 80.085	2,829,637 21,339 380,691 5 331 742 6 13.42 745 7 20,682 6 28,719 6 13,409 6 56,819 6 18,919 6 19,700 6 17,019 6 17,019 6 17,019 6 17,019 6 17,019	2.73% 4.55% 9.05% 9.05% 9.05% 9.05% 9.107% 1.07% 1.07% 5.05% 6.05% 6.05% 6.05% 6.14.22% 6.14.18% 6.14.18% 6.14.18% 6.14.23% 6.15% 6.15% 6.16% 6.
Total & Claims File 1-34 Days Supply Total & Claims File 51-90 Day Supply Total & Claims File 51-90 Day Supply Total & Claims File 51-90 Day Supply Matt Service Program Avg. Days Supply Avg. Days Supply Avg. Cost to Plan Avg. Member Cost/Claim Percent Member Cost Share Total & Claims File 35-90 Days Supply Total & Claims File 35-90 Days Supply Total & Claims File 35-90 Days Supply Total & Claims File 51-90 Days Supply S/S Formulary Drups (% by claim) S/S Non-Formulary Drups (% by claim) M/S Drups (% by claim) Generic Drups (% by claim) S/S Formulary Drups (% by \$) Sits non-Formulary Drups (% by \$) Speciatry Drups Total Drups (% by \$) Speciatry Drups Total Drup Gorl Amount Peid by Members Total Claims Avg & of Ra's per Member per Month	283,093 2,359 49,797 54 73,6 81,29 8102,08 816,51 16,35% 893 10,76% 0,03% 69,50% 59,73% 16,52% 0,07% 23,40% 81,511,834 81,452,784 849,051 1,007 0,000	251,213 2,027 39,020 45 4102,02 4102,0	284,841 2,300 43,934 44,233 81,44 8108,05 14,239 621 2,267 24,809 10,379 0,039 63,609 10,269 22,349 181,788,90 81,788,90 11,099	285,395 2.196 41.208 44.208 44.208 61.42 8105.85 15.089 3.857 2.274 5.969 6.0.259	2.624.061 22.551 418.100 428 74.5 510.71 62.71 62.71 62.72 63.72 62.635 62.625 62.625 63.77 64.635 63.77 64.635 64.637 65.77 6	2,829,637 21,339 380,691 5 331 742 6 13,42 745 7 20,663 6 28,719 6 13,40 6 56,619 6 6 7,79 7 8 10,02 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	3.73% 4.65% 9.05% 3 28.74% 3 -0.25% 9 -1.07% 5 -2.25% 7 -8.57% 6 -8.57% 5 9.57% 5 10.65% 6 14.22% 6 14.18% 6 10.65% 6 10.65% 6 17.35% 6 10.65% 6 10
Total & Claims Filts 1-34 Days Supply Total & Claims Filts 51-80 Day Supply Total & Claims Filts 61-80 Day Supply Total & Claims Filts 61-80 Day Supply Total & Claims Filts 61-80 Day Supply Matt Service Program Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Claim Percend Member Cost Share Total & Claims Filts 35-80 Days Supply Total & Claims Filts 35-80 Days Supply Total & Claims Filts 51-80 Days Supply Total & Claims Filts 51-80 Days Supply Total & Claims Filts 51-80 Days Supply Total & Claims Filts 81-90 Days Supply Formulary Program S/S Formulary Drups (% by claim) S/S Non-Formulary Drups (% by claim) M/S Drups (% by claim) Genetic Drups (% by claim) S/S Formulary Drups (% by \$) Sis non-Formulary Drups (% by \$) Are Drups (% by \$) Genetic Drups (% by \$) Centric Drups (% by \$) Total Drup Cont Amount Paid by Members Total Claims Avg & of Ru's per Member per Month Pian Paid Per Member Per Month (PMPM)	283,093 2.359 49.797 54 73.6 \$1.39 \$102.08 \$16.35% 803 10.76% 0.03% 63.50% 63.50% 59.73% 16.52% 0.07% 23.40% \$1,452,784 \$1,452,784 \$1,452,784 \$1,452,784 \$1,452,784 \$1,452,784 \$1,452,784 \$1,452,784	251,213 2,027 39,020 45 4102,02 4102,0	284,841 2,300 43,934 44,234 \$1,44 \$108,06 \$18,07 42,267 2,267 24,809 10,379 0,039 63,609 61,029 22,349 181,788,90 81,788,90 11,039,46 11,039 0,000 11,039,46	285,395 2.196 41,208 44,208 41	2.624.061 22.551 418.100 428 74.5 51.3 510.1 17.645 62.625 6.6266 6.7046 6.372.23 6.14.807.78 6.10.67 6.10.67 6.10.67 6.10.67 6.10.67 6.10.67 6.10.67 6.10.67 6.10.67 6.10.67 6.10.67 6.10.67 6.10.67 6.10.67 6.10.67 6.10.67	2,629,637 21,339 380,691 5 331 74.3 6 13.4 7 18.695 7 20,663 6 28,719 6 13,409 6 56,619 6 0,029 6 17,019 8 513,226,05 7 1,019 8 5519,64	3.73% 4.65% 9.04% 3.26.74% 3.30.29% 9.1.07% 3.32.26% 3.32.26% 3.32.26% 3.32.26% 4.5.65% 6.5.
Total & Claims Filis 1-34 Days Supply Total & Claims Filis 35-80 Day Supply Total & Claims Filis 61-90 Day Supply Total & Claims Filis 61-90 Day Supply Total & Claims Filis 61-90 Day Supply Matt Service Program Avg. Days Supply Avg. Plan Cost/Cays Supply Avg. Cost to Plan Avg. Member Cost/Claim Percend Member Cost Share Total & Claims Filis 35-90 Days Supply Total & Claims Filis 35-90 Days Supply Total & Claims Filis 51-90 Days Supply SiS Formulary Drups (% by claim) SiS Formulary Drups (% by claim) SiS Non-Formulary Drups (% by claim) SiS Formulary Drups (% by S) Sis non-Formulary Drups (% by \$) Total Drups (% by \$) Specialty Drups Total Drups Cost Amount Paid by Members Total Claims Avg & of Ru's per Member per Month (PMPM) Avg Claim Cost to Plan	283,093 2,359 49,797 54 49,797 54 81,39 8102,08 818,51 16,35% 893 10,76% 0,03% 69,50% 59,73% 16,52% 0,07% 23,40% 81,452,784 548,65* 1,007 87,80	251,213 2,027 39,020 45 4102,66 4102,66 416,86	284,841 2,300 43,934 44,293 818,62 14,299 10,379 0,039 63,609 10,379 0,059 10,379 10,3	285,395 2.196 41,208 44,208 44,208 44,208 44,208 44,208 44,208 45,105,65 45,108 45,108 45,108 46,108 46,108 46,108 47,108 48,108	2.624.061 22.551 418.100 428 74.5 51.3 510.1 62.2 75.645 62.625 6.0045 62.626 6.0045 6	2,829,637 21,339 380,691 331 74.5 81.3: 8103,6 824.2 18,899 745 7 20,663 6 13,409 6 13,409 6 13,409 6 10,029 6 17,019 8 513,226,05 6 11,30 7 0,039 7 0	3.73% 4.65% 9.04% 3.26.74% 3.30.29% 9.1.07% 3.32.28% 7.8.57% 6.5.65% 8.0.57% 6.5.65% 8.0.14.18% 6.
Total & Claims Filis 1-3r Days Supply Total & Claims Filis 35-80 Day Supply Total & Claims Filis 61-90 Day Supply Total & Claims Filis 61-90 Day Supply Total & Claims Filis 61-90 Day Supply Matt Service Program Avg. Days Supply Avg. Plan Cost/Cayx Supply Avg. Cost to Plan Avg. Member Cost/Claim Percent Member Cost Share Total & Claims Filis 35-90 Days Supply Total & Claims Filis 35-90 Days Supply Total & Claims Filis 50-90 Days Supply Total & Claims Filis 61-90 Days Supply Total & Claims Filis 61-90 Days Supply Formatary Program S/S Formatary Drups (% by claim) S/S Non-Formatary Drups (% by claim) S/S Non-Formatary Drups (% by claim) S/S Formatary Drups (% by S) Sis non-Formatary Drups (% by \$) Sis non-Formatary Drups (% by \$) Avg. Drups (% by \$) Sement Drups (% by \$) Cement Drups (% by \$) Total Drups Cost by Members Total Claims Avg. & of Rois per Member per Month (PMPM) Avg. Claim Cost to Member Avg. Claim Cost to Member	283,093 2,359 49,797 54 73.6 81,39 8102,08 818,51 16,35% 893 10 2,309 24,68% 10,76% 0,03% 63,50% 63,50% 16,62% 0,07% 23,40% 81,611,836 81,652,784 648,05* 1,007 87,80 \$1,459,86 \$1,459,86 \$48,98	251,213 2,027 39,020 45 4102,62 4102,62 4108 416,865	284,841 2,300 43,934 44,934 8108,05 142,99 12,267 24,809 10,379 0,039 63,609 16,269 10,378 17,58,90 16,378 17,58,90 16,378 17,58,90 16,378 17,58,90 16,378 17,58,90 16,383 17,58,90 18,384 18,384 19,3	285,395 2.196 41.208 44.208 44.208 44.208 44.208 44.208 45.16.16.26 45.16.26 45.16.26 46.22.274 46.22.26 46.22.26 46.22.26 47.41 47.	2.624.061 22.551 416.100 420 74.6 51.37 51.01 11.605 62.625 6.076 62.626 6.0085 6.17.066 6.0085 6.17.066 6.0085 6.17.066 6.0085 6.17.066 6.0085 6.17.066 6.0085 6.17.066 6.0085	2,829,637 21,339 380,691 331 74.5 81.3: 8109,6 824.2 745 7 20,682 6 28,719 6 13,409 6 56,819 6 0,029 6 17,019 8 513,226,029 6 11,30 7 0,088 6 11,30 7 0,088 7 1,388 7 0,088 7 1,388 7 0,088 7 1,388 7 0,088 7 1,388 7 0,088 7 1,388 7 0,088 7 1,388 7 0,088 7 1,388 7 0,088 7 1,388 7 0,088 7 1,388 7 0,088 7 1,388 7 0,088 7 1,388 7 0,088 7 1,388 7 0,088 7 1,388 7 0,088 7 1,388 7 0,088 7 1,388 7 0,088 7 1,388 7 0,088 7 1,388 7 0,088 7 1,388 7 0,088 7 1,388 7	3.79% 4.68% 9.05% 3.28.74% 9.1.07% 30.29% 9.1.07% 78.57% 6.5.65% 6.5.65% 6.14.25% 6.14.18% 6.14.18% 6.14.18% 6.14.18% 6.14.18% 6.14.18% 6.14.18% 6.14.18% 6.14.18% 6.15.14
Total & Claims Filis 1-3r Days Supply Total & Claims Filis 35-80 Day Supply Total & Claims Filis 61-90 Day Supply Total & Claims Filis 61-90 Day Supply Total & Claims Filis 61-90 Day Supply Matt Service Program Avg. Days Supply Avg. Plan Cost/Cayx Supply Avg. Plan Cost/Cayx Supply Avg. Member Cost/Claim Percent Member Cost Share Total & Claims Filis 35-90 Days Supply Total & Claims Filis 35-90 Days Supply Total & Claims Filis 35-90 Days Supply Total & Claims Filis 81-90 Days Supply Sis Formulary Drups (% by claim) Sis Formulary Drups (% by claim) Sis Formulary Drups (% by claim) Sis Formulary Drups (% by S) Sis non-Formulary Drups (% by \$) Mis Drups (% by \$) Seneric Drups (% by \$) Seneric Drups (% by \$) Total Drups (% by \$) Total Drups (% by \$) Total Drups Cost Amount Paid by Members Total Claims Avg & of Ru's per Member per Month (PMPM) Avg Claim Cost to Plan	283,093 2,359 49,797 54 49,797 54 81,39 8102,08 818,51 16,35% 893 10,76% 0,03% 69,50% 59,73% 16,52% 0,07% 23,40% 81,452,784 548,65* 1,007 87,80	251,213 2,027 39,020 45 4102,06 116,809 116,809 10,065 10,	284,841 2,300 43,934 44,934 81,44 8108,06 14,299 12,267 2,267 24,809 10,379 0,039 63,609 16,269 10,273 16,269 16,269 17,788,90 81,788,90 18,788,90 19,90 10,	285,395 2.196 41,208 44,208 44,208 44,208 44,208 44,208 44,208 41	2.624.061 22.551 416.100 420 74.6 51.37 51.01 11.605 62.625 6.070 62.625 6.0085 62.625 6.0085 62.625 6.0085 62.625 6.0085 62.625 6.0085 62.625 6.0085 62.625 62.625 63.7085 63.7085 64.8078 65.7085 65.7085 65.7085 65.7085 65.7085 65.7085	2,829,637 21,339 380,691 381 1,74: 51,339 1,74: 6,13: 74: 74: 74: 74: 74: 74: 74: 74: 74: 74	3.79% 4.68% 9.05% 3.28.74% 9.1.07% 30.29% 9.1.07% 5.2.25% 79.57% 6.5.65% 6.5.65% 6.14.25% 6.14.18% 6.14.18% 6.14.18% 6.14.18% 6.14.18% 6.14.18% 6.14.18% 6.14.18% 6.14.18% 6.15.25% 6.15.25% 6.16.23%

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	Pin Demographics	.br/-06	Aug-06	Sep-06	Oct-08	Nov-06	Dec-06
-	Total Drug Cost	818,456,108	820,745,030	820,286,092	821,217,186	\$20,977,334	821,698,218
	Amount Paid By Plan Sponser	811,154,067	\$15,960,598	\$16,210,412	£17,207,137	\$17,120,283	\$17,748,223
	Amoura Paid By Members	87,302,041	84.764.435	\$4,087,680	\$4,010,049	83,657,061	\$3,651,995
	Total Claims	274,631	302,938	298.886	313.585	310,868	316,641
•	Average Eligible Member	187,147	187,079	188,336	188,420	168,664	187,429
•	Average # cf Ro's Per Member Per Month	1.47	1.62	1.59	1.65	1,65	7,69
ď	Pien Paid Per Member Per Month (PMPM)	03.68	\$85,31	\$88.07	\$91,32	£90.76	694.68
1	Average Eligible Enrollers	96,213	96.166	96,889	97,008	97,240	97.285
	Average # of Rx's Per Enrollee Per Month	2.85	3.15	3.08	3.23	3.19	9.26
-	Plan Paid Per Errollee Per Month (PEPM)		2.18 2165.69	8167.31	\$177.38	\$176.06	\$182,47
		\$116.93	#100.M2	\$107.01	\$777.56	\$176,UD	- \$164.41
	Ro Cost Stare				22.07	441 -0	- 417.04
	Avrg. Claim Cost to Ptan	840,61	152.69	\$54.24	854.87	855.13	\$56.01
-	AVg. Member Cost/Claim	\$26,69	\$16.79	\$13,68	\$12.78	\$12.42	\$12.18
	Percent member Cost Share	39.6%	23.1%	20.1%	18.9%	18.4%	17.8%
	Average Ingredient Costs						
	Single Source (no generics evallable)	\$131.88	\$133.45	6132.92	\$132.48	£133,16	\$135,BD
	Multi-Source Brand (generics exaltable)	\$35.01	850,99	835.12	\$3 4.88	636,419	6 38,41
	Generic Drugs	623.62	\$2 5,96	\$26.89	\$26,82	£26.65	1.2 6.76
_	Brand/Generic Dispensing Rates						
ı	Single Source (no generics)	38.2%	37.23%	38.58%	38,5%	36,30%	35.96%
	Mull-Source Brand % (generics available)	1,4%	1.48%	1.23%	1.2%	1,23%	1.23%
	Generic Drug	60.4%	61.28%	62.20%	62.3%	62.47%	62.81%
	Generics Dispensed when available	97.15%	97.54%	2 80,89	98.1%	88.08%	98.08%
	Percent of Plan Cost for Single Source	81.7%	76.19%	74.47%	74.1%	73.88%	74.04%
	Retell Pharmacy Program						
3	Avg. Day Supply	34.3	34.7	34.2	34,0	33.8	33.7
	Avg. Pien Cost/Day Supply	\$1.17	· \$1.51	\$1.68	\$1.60	\$1.61	\$1.65
_	Auro, Cladro Cost to Plan	840,20	662.21	\$53.52	\$54,38	\$54.63	886.50
	Avg. Member Cost / Ctalm	828.45	\$16,57	\$19,59	\$12.71	112.35	812.10
	Perperu Member Cost Share	39.7%	23.08%	20.16%	18,9%	16.44%	17.89%
_	Special Maint Nature (% of claims (Bed)	12.5%	13,13%	12,90%	12.6%	12.84%	12.73%
	Other Meira (% of delms filled)	1.7%	1,75%	1,60%	1.6%	1.£1%	1.56%
•	Avg. Days Supply for Maint. Netwiks	87.9	87.9	87.9	87.9	B7.4	88.0
	Total # Claims Fills 1-34 Days Supply	233,143	256,177	253,026	265.880	263,239	268.954
÷	Total # Claims Fills 36-80 Day Supply	2,054	2.301	2,251	2,290	2.27E	2.245
	Toggl # Claims Fills 61-90 Day Supply	36.676	42.247	40,701	42,240	41,831	42.567
-	Total # Claims Fits 61- Day Supply	30	42	28	38	41	48
	Mail Service Program	30				_,_	
					74.4		
		79.0	78.2	74 +		1 7471	1 79.71
	Avg. Days Supply	79.6	78.3	73.1	,	74.7	73.7
=	Avg. Days Supply Avg. Plan Cost/Days Supply	\$1.10	£1.30	\$1.32	\$1.39	£1.39	\$1.48
	Avg. Days Supply Avg. Pizn Cost/Days Supply Avg. Cost to Pizn	\$1.10 \$80.94	81.30 891.98	\$1.32 596.81	\$1.29 \$103,91	£1.39 £103.67	\$1.48 \$108.97
	Avg. Days Supply Avg. Pizn Cost/Days Supply Avg. Cost to Pizn Avg. Member Cost/Ctairn	\$1.10 \$80.94 \$39.84	\$1.30 \$91.98 \$77.94	\$1.32 \$96.61 \$22.49	\$1.39 \$103,91 \$20.08	\$1.39 \$103.67 \$16.46	\$1.48 \$108.97 \$18.59
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Claim Perpert Member Cost/Claim	\$1.10 \$80.84 \$39.84	\$1.30 \$91.98 \$27.94 \$2.19%	\$1.32 \$96.81 \$22.49 18.88%	\$1.39 \$103.31 \$20.08 15.3%	\$1.39 \$103.67 \$16.46 15.80%	\$1.48 \$108.97 \$18.89 14.87%
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Claim Perpera Member Cost/Claim Total # Claims FB 1-34 Days Supply	\$1.10 \$80.84 \$39.84 33.0% 767	\$1.30 \$37.98 \$27.94 22.19% 786	\$1.32 696.81 \$22.49 18.68%	\$103.91 \$103.91 \$20.06 15.3%	\$1.39 \$103.67 \$16.46 16.60% 818	\$1.48 \$108.97 \$18.59 14.57% 621
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Claim Perpert Member Cost/Stain Total # Claims FB 1-34 Days Supply Total # Claims FBs 35-60 Days Supply	\$1.10 \$80.84 \$39.84 33.0% 767 8	\$1.30 \$97.98 \$27.94 22.19% 786	\$1.32 \$96.61 \$22.49 16.68% 621	\$103,91 \$103,91 \$20,06 15,9% 828	\$1.39 \$102.67 \$16.46 15.80% 818	\$1.48 \$108.97 \$18.59 14.57% 821
	Avg. Days Supply Avg. Cost to Plan Avg. Cost to Plan Avg. Member Cost/Claim Percent Member Cost/Claim Porcent Member Cost Share Total # Claims Fill 1-34 Days Supply Total # Claims Fills 35-60 Days Supply Total # Claims Fills 81-80 Days Supply	\$1.10 \$80.84 \$39.84 33.0% 767	\$1.30 \$37.98 \$27.94 22.19% 786	\$1.32 696.81 \$22.49 18.68%	\$103.91 \$103.91 \$20.06 15.3%	\$1.39 \$103.67 \$16.46 16.60% 818	\$1.48 \$108.97 \$18.59 14.57% 621
	Avg. Days Supply Avg. Cost to Plan Avg. Cost to Plan Avg. Member Cost/Claim Percent Member Cost/Claim Percent Member Cost Share Total # Claims Fill 1-34 Days Supply Total # Claims Fills 35-60 Days Supply Total # Claims Fills 81-80 Days Supply Total # Claims Fills 81-80 Days Supply	\$1.10 \$80.84 \$39.84 33.0% 767 8	\$1.30 \$97.98 \$27.94 22.19% 786	\$1.32 \$96.61 \$22.49 16.68% 621	\$103,91 \$103,91 \$20,06 15,9% 828	\$1.39 \$102.67 \$16.46 15.80% 818	\$1.48 \$108.97 \$18.59 14.57% 821
	Avg. Days Supply Avg. Cost to Ptan Avg. Cost to Ptan Avg. Member Cost/Claim Percent Member Cost Share Total # Ctaims FID 1-34 Days Supply Total # Ctaims FIDs 35-60 Days Supply Total # Ctaims FIDs 81-90 Days Supply	\$1.10 \$80.84 \$39.84 33.0% 767 8 2,064	81.30 887.86 827.84 22.19% 786 13	\$1.32 \$96.61 \$22.49 16.68% 521 9	\$1.39 \$103.91 \$20.06 15.3% \$28 \$28 \$28 \$28	\$1.39 \$103.67 \$16.46 16.80% 618 6	\$1.48 \$108.97 \$18.89 14.57% 921 7 2.169
	Avg. Days Supply Avg. Cost to Plan Avg. Cost to Plan Avg. Member Cost/Claim Percent Member Cost Share Total # Ctaims Fill 1-34 Days Supply Total # Ctaims Fills 35-50 Days Supply Total # Ctaims Fills 51-90 Days Supply Total # Ctaims Fills 91- Day Supply Total # Ctaims Fills 91- Day Supply Formulary Program S/6 Formulary Drugs (% by cteim)	\$1.10 \$80.64 \$39.84 33.0% 767 8 2,064	81.30 851.86 \$27.84 22.19% 786 13 2.369	\$1.32 \$96.61 \$22.49 16.68% \$21 9 2.050	\$1.39 \$103.91 \$20.06 15.3% 628 6 2.304	\$1.39 \$102.67 \$16.46 16.80% 618 6 2.345	\$1.48 \$108.97 \$18.89 14.57% 621 7 2.169
	Avg. Days Supply Avg. Cost to Plan Avg. Cost to Plan Avg. Member Cost/Claim Percent Member Cost/Claim Percent Member Cost Share Total # Claims Fill 1-34 Days Supply Total # Claims Fills 35-50 Days Supply Total # Claims Fills 51-90 Days Supply Total # Claims Fills 51-90 Days Supply Total # Claims Fills 51-90 Days Supply Formulary Program S/6 Formulary Drugs (% by claim) S/6 Formulary Drugs (% by claim)	\$1.10 \$80.84 \$39.84 33.0% 767 8 2,064 25.2%	81.30 851.86 \$27.84 22.19% 786 13 2.368 24.78%	\$1.32 \$96.61 \$22.49 16.68% \$21 9 2.050 24.41%	\$1.39 \$103.91 \$20.06 15.3% 628 6 2.304	\$1.39 \$102.67 \$16.46 18.80% 618 6 2.345 24.21%	\$1.48 \$108.97 \$18.89 14.57% 821 7 2.169 24.13%
	Avg. Days Supply Avg. Cost to Plan Avg. Cost to Plan Avg. Member Cost/Claim Percent Member Cost Share Total # Ctaims Fill 1-34 Days Supply Total # Ctaims Fills 35-50 Days Supply Total # Ctaims Fills 51-90 Days Supply Total # Ctaims Fills 91- Day Supply Total # Ctaims Fills 91- Day Supply Formulary Program S/6 Formulary Drugs (% by cteim)	\$1.10 \$80.64 \$39.64 33.0% 767 8 2,064 25.2% 13.0% 0.1%	81.30 851.88 \$27.84 22.19% 786 13 2.369 24.78% 0.16%	\$1.32 \$96.61 \$22.49 16.68% \$21 9 2.050 24.41% 12.16% 0.01%	\$1.39 \$103.91 \$20.06 15.2% 628 6 2.304 24.4% 12.1% 0.0%	\$1.39 \$102.67 \$16.46 15.80% 618 6 2.345 24.21% 12.09% 0.01%	\$1.48 \$108.97 \$108.99 14,57% 821 7 2,169 24.13% 11.83% 0.01%
	Avg. Days Supply Avg. Cost to Plan Avg. Cost to Plan Avg. Member Cost/Claim Percent Member Cost/Claim Percent Member Cost Share Total # Claims Fill 1-34 Days Supply Total # Claims Fills 35-50 Days Supply Total # Claims Fills 51-90 Days Supply Total # Claims Fills 51-90 Days Supply Total # Claims Fills 51-90 Days Supply Formulary Program S/6 Formulary Drugs (% by claim) S/6 Formulary Drugs (% by claim)	\$1.10 \$80.84 \$39.84 33.0% 767 8 2,064 25.2%	81.30 851.86 \$27.84 22.194 786 13 2.369 24.799 12.45% 0.16%	\$1.32 \$96.61 \$22.49 16.68% \$21 9 2.050 24.41%	\$1.39 \$103.31 \$20.06 15.2% 628 5 2.304 24.4% 12.1% 0.0%	\$1.39 \$102.67 \$16.46 18.80% 618 6 2.345 24.21% 12.09% 0.01%	\$1.48 \$108.97 \$19.89 14.57% 821 7 2.169 24.13% 11.83% 0.01%
	Avg. Days Supply Avg. Cost to Plan Avg. Cost to Plan Avg. Member Cost/Claim Percent Member Cost/Claim Percent Member Cost Share Total # Claims Fill 1-34 Days Supply Total # Claims Fills 35-60 Days Supply Total # Claims Fills 51-90 Days Supply Total # Claims Fills 51-90 Days Supply Total # Claims Fills 51-90 Days Supply Formulary Program S/S Formulary Drugs (% by claim) S/S Non-Formulary Drugs (% by claim) M/S Drugs (% by claim)	\$1.10 \$80.64 \$39.64 33.0% 767 8 2,064 25.2% 13.0% 0.1%	81.30 851.88 \$27.84 22.19% 786 13 2.369 24.78% 0.16%	\$1.32 \$96.61 \$22.49 16.68% \$21 9 2.050 24.41% 12.16% 0.01%	\$1.39 \$103.31 \$20.06 15.2% 628 6 2.304 24.4% 12.1% 0.0%	\$1.39 \$102.67 \$16.46 18.80% 618 6 2.345 24.21% 12.09% 0.01%	\$1.48 \$108.97 \$18.89 14.57% 621 7 2.169 24.13% 11.83% 0.01% 62.81% 56.91%
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Ctaim Persent Member Cost/Stain Persent Member Cost Share Total # Ctains Fills 35-50 Days Supply Total # Ctains Fills 35-50 Days Supply Total # Ctains Fills 51-90 Days Supply Total # Ctains Fills 51-90 Days Supply Formulary Program S/S Formulary Drugs (% by ctain) S/S Non-Formulary Drugs (% by ctain) M/S Drugs (% by ctain) Generic Drugs (% by Ctain)	\$1.10 \$80.64 \$39.84 33.0% 767 8 2,064 25.2% 13.0% 0.1% 60.4%	81.30 851.86 \$27.84 22.194 786 13 2.369 24.799 12.45% 0.16%	\$1.32 \$96.61 \$22.49 16.68% \$21 9 2.050 24.41% 12.16% 0.01%	\$1.39 \$103.91 \$20.06 15.2% 628 6 2.304 24.4% 12.1% 0.0% 62.3%	\$1.39 \$102.67 \$16.46 15.80% 618 6 2.345 24.21% 12.09% 0.01% 62.47%	\$1.48 \$108.97 \$18.89 14.57% 621 7 2.169 24.13% 11.83% 0.01% 62.81% 56.91%
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Ctairn Persent Member Cost/Stare Total # Ctairns Fills 35-50 Days Supply Total # Ctairns Fills 35-50 Days Supply Total # Ctairns Fills 51-90 Days Supply Total # Ctairns Fills 51-90 Days Supply Total # Ctairns Fills 51-90 Days Supply Formulary Program S/S Formulary Drugs (% by ctairn) S/S Non-Formulary Drugs (% by ctairn) M/S Drugs (% by ctairn) Generic Drugs (% by Ctairn) S/S Formulary Drugs (% by \$)	\$1.10 \$80.64 \$39.84 33.0% 767 8 2,064 25.2% 13.0% 0.1% 60.4%	81.30 851.86 \$27.84 22.194 786 13 2.369 24.789 0.16% 61.28% 65.21%	\$1.32 \$96.61 \$22.49 16.68% \$21 9 2.050 24.41% 12.16% 0.01% 62.20% 57.16%	\$1.39 \$103.31 \$20.08 15.3% 628 5 2.304 24.4% 12.1% 0.0% 62.3% 56.7%	\$1.39 \$103.67 \$16.46 15.80% 618 6 2.345 24.21% 12.09% 0.01% 55.36% 17.63%	\$1.48 \$108.97 \$18.89 14.57% 821 7 2.169 24.13% 11.83% 0.01% 62.81% 56.91%
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Ctairn Percent Member Cost/Staire Total # Ctairus Fills 35-50 Days Supply Total # Ctairus Fills 35-50 Days Supply Total # Ctairus Fills 51-80 Days Supply Total # Ctairus Fills 51-80 Days Supply Total # Ctairus Fills 51-80 Days Supply Formulary Program S/S Formulary Drugs (% by ctairu) S/S Non-Formulary Drugs (% by ctairu) M/S Drugs (% by etairu) Generic Drugs (% by Ctairu) S/S Formulary Drugs (% by \$) a/s nan-Formulary Drugs (% by \$)	\$1.10 \$80.64 \$39.64 33.0% 767 8 2.064 25.2% 13.0% 0.1% 60.4% 63.6%	81.30 887.88 827.84 22.19% 786 13 2.368 24.76% 0.16% 61.28% 58.21%	\$1.32 596.61 \$22.49 16.68% 621 9 2.050 24.41% 12.16% 0.01% 62.20% 67.16% 17.31%	\$1.39 \$103.31 \$20.08 15.3% 628 6 2.304 24.4% 12.1% 0.0% 62.3% 17.8% 0.0%	\$1.39 \$103.67 \$16.46 16.80% 618 6 2.345 12.09% 0.01% 55.36% 17.63% 0.01%	\$1.48 \$108.97 \$18.89 14.57% 821 7 2.169 24.13% 11.83% 0.01% 62.81% 56.91% 0.01%
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Ctairn Percent Member Cost/Staire Total & Ctairus Fills 13-60 Days Supply Total & Ctairus Fills 13-60 Days Supply Total & Ctairus Fills 13-80 Days Supply Total & Ctairus Fills 13-80 Days Supply Total & Ctairus Fills 13-80 Days Supply Formulary Program S/S Formulary Drugs (% by ctairu) S/S Non-Formulary Drugs (% by ctairu) S/S Formulary Drugs (% by ctairu) S/S Formulary Drugs (% by S) S/S Formulary Drugs (% by S) S/S Formulary Drugs (% by S)	\$1.10 \$80.64 \$39.64 33.0% 767 8 2.064 25.2% 13.0% 0.1% 60.4% 63.6% 18.1%	\$1.30 \$57.88 \$27.94 22.19% 786 13 2.368 24.76% 0.16% 61.28% 58.21% 17.88% 0.46%	\$1.32 596.61 \$22.49 16.68% 621 9 2.050 24.41% 12.16% 0.01% 62.20% 67.16% 17.31% 0.02%	\$1.39 \$103.31 \$20.08 15.3% 628 6 2.304 24.4% 12.1% 0.0% 62.3% 17.8% 0.0%	\$1.39 \$103.67 \$16.46 16.80% 618 6 2.345 12.09% 0.01% 62.47% 55.36% 17.63% 0.01%	\$1.48 \$108.97 \$18.89 14.57% 921 7 2.169 24.13% 11.83% 0.01% 62.81% 56.81%
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Ctairn Percent Member Cost/Staire Total if Ctairns Fill 1-34 Days Supply Total if Ctairns Fill 1-34 Days Supply Total if Ctairns Fill 1-34 Days Supply Total if Ctairns Fill 51-80 Days Supply Total if Ctairns Fill 51-80 Days Supply Total if Ctairns Fill 51-90 Days Supply Total if Ctairns Fill 51-90 Days Supply Formulary Program S/6 Formulary Drugs (% by ctairn) S/6 Non-Formulary Drugs (% by ctairn) S/6 Drugs (% by etairn) Generic Drugs (% by ctairn) S/6 Formulary Drugs (% by \$) S/6 non-Formulary Drugs (% by \$) S/6 non-Formulary Drugs (% by \$) Generic Drugs (% by \$) Generic Drugs (% by \$)	\$1.10 \$80.64 \$39.64 33.0% 767 8 2.064 25.2% 13.0% 0.1% 60.4% 63.6% 18.1%	21.30 57.86 57.94 22.19% 786 13 2.369 24.79% 0.16% 61.28% 65.21% 17.88% 0.45% 23.03%	\$1.32 596.61 \$22.49 16.88% 621 8 2.050 24.41% 0.01% 62.20% 67.16% 17.31% 0.02% 28.25%	\$1.39 \$103.31 \$20.06 15.3% 628 6 2.304 24.4% 12.1% 62.3% 62.3% 17.8% 17.8% 26.6%	\$1.39 \$103.67 \$18.45 16.80% 618 6 2.345 12.09% 0.01% 62.47% 55.36% 17.63% 0.01%	\$1.48 \$108.97 \$19.89 14.57% 621 7 2.169 24.13% 11.83% 0.01% 62.81% 56.91% 0.01% 25.67%
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Claim Percent Member Cost/Staim Percent Member Cost Share Total & Claims Fill 1-34 Days Supply Total & Claims Fill 1-34 Days Supply Total & Claims Fill 55-50 Days Supply Total & Claims Fill 51-80 Days Supply Total & Claims Fill 51-90 Days Supply Formulary Program S/S Formulary Drugs (% by claim) S/S Non-Formulary Drugs (% by claim) M/S Drugs (% by daim) Generic Drugs (% by Claim) B/S Formulary Drugs (% by \$) site non-Formulary Drugs (% by \$) M/S Drugs (% by \$) Generic Drugs (% by \$) Generic Drugs (% by \$) Specially Drugs	\$1.10 \$80.64 \$39.84 33.0% 767 8 2,054 25.2% 13.0% 0.1% 60.4% 63.6% 18.1% 0.0%	81.30 887.86 827.94 22.19% 786 13 2.369 24.79% 0.16% 61.28% 63.21% 0.46% 23.03% 11.870.302	\$1.32 596.61 \$22.49 18.88% 621 8 2.050 24.41% 0.01% 62.20% 67.16% 17.31% 0.02% 28.28%	\$1.39 \$103.31 \$20.06 15.2% 628 6 2.304 24.4% 12.1% 62.3% 66.7% 17.8% 0.0% 26.6%	\$1.39 \$103.67 \$18.45 18.80% 618 6 2.345 12.09% 0.01% 62.47% 55.36% 17.63% 0.01% 24.21%	\$1.48 \$108.97 \$19.89 14.57% 621 7 2.169 24.13% 11.83% 0.01% 62.81% 56.91% 17.12% 0.01%
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Claim Persent Member Cost/Claim Persent Member Cost Share Total if Claims Fill 1-S4 Days Supply Total if Claims Fills 35-60 Days Supply Total if Claims Fills 31-80 Days Supply Total if Claims Fills 11-10 Days Supply Total if Claims Fills 11-10 Days Supply Formulary Program S/S Formulary Drugs (% by claim) S/S Non-Formulary Drugs (% by claim) M/S Drugs (% by elsim) S/S Formulary Drugs (% by s) s/s non-Formulary Drugs (% by 8) s/s non-Formulary Drugs (% by 8) S/S Drugs (% by 8) Generic Drugs (% by 8) Generic Drugs (% by 6) Specially Drugs Total Drug Cost Amount Paid by Plan Sponsor	\$1.10 \$80.64 \$39.84 33.0% 767 8 2.054 25.2% 13.0% 60.4% 63.6% 18.1% 18.0%	\$1.30 \$87.86 \$27.84 22.19% 786 13 2.369 24.79% 0.16% 61.28% 0.46% 29.03% 17.86% 23.03%	\$1.32 596.61 \$22.49 18.88% 821 8 2.080 24.41% 12.16% 62.20% 67.16% 17.31% 0.02% 28.28% \$1.535.438 61.476.197	\$1.39 \$103.31 \$20.06 15.3% 628 6 2.304 24.4% 12.1% 6.2% 66.7% 17.5% 26.6% \$1.479.126	\$1.39 \$103.67 \$18.45 16.80% 618 6 2.345 12.09% 0.01% 62.47% 56.36% 17.63% 0.01% 24.21% 56.36% 17.63% 17.63% 17.63%	\$1.48 \$108.97 \$19.89 14.57% 621 7 2.169 24.13% 11.83% 62.81% 62.81% 56.91% 17.12% 0.01% \$1.565.906
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Claim Persent Member Cost/Claim Persent Member Cost Share Total if Claims Fill 1-34 Days Supply Total if Claims Fills 35-60 Days Supply Total if Claims Fills 31-90 Days Supply Total if Claims Fills 11-10 Day Supply Total if Claims Fills 11-10 Day Supply Formulary Program S/S Formulary Drugs (% by claim) S/S Non-Formulary Drugs (% by claim) M/S Drugs (% by esim) Generic Drugs (% by Claim) B/S Formulary Drugs (% by \$) a/s non-Formulary Drugs (% by \$) s/s non-Formulary Drugs (% by \$) Specially Drugs Total Drugs (% by \$) Generic Drugs (% by \$) Specially Drugs Total Drug Cost Amount Paid by Members	\$1.10 \$80.64 \$39.84 33.0% 767 8 2.054 25.2% 13.0% 60.4% 63.6% 18.1% 18.0% \$1.364.512 \$1.279.355	81.30 887.86 827.84 22.19% 786 13 2.368 24.79% 0.16% 61.28% 65.21% 0.46% 29.03% 11.870.302 81,809.284 \$61.018	\$1.32 596.61 \$22.49 18.88% 821 8 2.080 24.41% 12.16% 62.20% 67.16% 17.31% 0.02% 28.28% \$1.535.438 61.476.197 856.238	\$1.39 \$103.31 \$20.06 15.3% 628 6 2.304 24.4% 12.1% 6.2% 66.7% 17.5% 26.6% \$1.479.126 \$1.423.389 \$65.737	\$1.39 \$103.67 \$18.45 16.80% 818 6 2.345 12.09% 0.01% 62.47% 55.36% 17.63% 0.01% 25.69% \$1.462,459 \$1.407.836 \$1.407.836	\$1.48 \$108.97 \$19.89 14.57% 921 7 2.169 24.13% 11.83% 0.01% 62.81% 56.91% 17.12% 0.01% 25.67%
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Claim Percent Member Cost/Claim Percent Member Cost Share Total & Claims Fill 1-34 Days Supply Total & Claims Fill 54-50 Days Supply Total & Claims Fills 55-60 Days Supply Total & Claims Fills 51-90 Days Supply Total & Claims Fills 51-90 Days Supply Formulary Program S/S Formulary Drugs (% by claim) S/S Non-Formulary Drugs (% by claim) M/S Drugs (% by esim) Generic Drugs (% by Claim) S/S Formulary Drugs (% by \$) sle non-Formulary Drugs (% by \$) S/S Formulary Drugs (% by \$) Generic Drugs (% by \$) Generic Drugs (% by \$) Total Drug Cost Amount Paid by Members Total Claims	\$1.10 \$80.64 \$39.84 33.0% 767 8 2,054 13.0% 60.4% 63.6% 18.1% 18.0% \$1.279.356 \$88.156	\$1.30 \$87.86 \$77.9a \$27.19% 786 13 2.368 \$2.45% 0.16% 61.28% 65.28% 0.45% 23.03% \$1.570.302 \$1.570.302	\$1.32 596.81 \$22.49 18.88% 821 8 2.050 24.41% 12.16% 62.20% 67.16% 17.31% 0.02% 28.28% 51.536.438 51.478.197 \$55,238	\$1.39 \$103.31 \$20.06 15.3% 628 6 2.304 24.4% 12.1% 0.0% 62.3% 66.7% 17.6% 26.6% \$1.479.126 \$1.423.389 \$55.737	\$1.39 \$102.67 \$18.45 16.80% 818 6 2.345 12.09% 0.01% 62.47% 55.36% 17.63% 0.01% 24.21% 55.47% 55.47% 55.47% 17.63% 17.63% 17.63% 17.63%	\$1.48 \$108.97 \$19.89 14.57% 921 7 2.169 24.13% 11.83% 62.81% 62.81% 56.81% 0.01% 25.67% 17.12% 0.01% 17.12%
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Claim Percent Member Cost/Claim Percent Member Cost Share Total & Claims Fill 1-34 Days Supply Total & Claims Fills 35-60 Days Supply Total & Claims Fills 81-80 Days Supply Total & Claims Fills 81-80 Days Supply Formulary Program S/S Formulary Drugs (% by claim) S/S Non-Formulary Drugs (% by claim) M/S Drugs (% by claim) Generic Drugs (% by Claim) S/S Formulary Drugs (% by \$) Specialty Drugs Total Drug Cost Amount Paid by Members Total Claims Avg & of Rore per Member per Month	\$1.10 \$80.64 \$39.84 33.0% 767 8 2,054 13.0% 60.4% 63.6% 18.1% 18.0% \$1.364.512 \$1.279.356 \$85.156	\$1.30 \$87.86 \$77.9a 22.19% 786 13 2.369 24.79% 0.16% 61.28% 61.28% 0.46% 23.03% \$1,570.302 \$1,509.284 \$61.018	\$1.32 \$96.61 \$22.49 18.88% 821 8 2.050 24.41% 12.16% 62.20% 67.16% 17.31% 0.02% 28.26% \$1,478,197 \$56,238 1.132 0.01	\$1.39 \$103.31 \$20.06 15.3% 628 6 2.304 24.4% 12.1% 0.0% 62.3% 56.7% 0.0% 26.6% 26.6% 51.479.126 \$1,479.126 \$1,423.389 \$65.737	\$1.39 \$102.67 \$18.45 16.80% 618 6 2.345 2.345 12.09% 0.01% 62.47% 65.36% 17.63% 10.01% 25.69% \$1.462,469 \$1.407,886 \$1.407,886 \$64.483 1.087	\$1.48 \$108.97 \$18.89 14.57% 921 7 2.169 24.13% 11.83% 0.01% 62.81% 0.01% 25.67% \$1,565.906 \$1,508.096 \$1,508.096
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Ctairn Persent Member Cost/Ctairn Persent Member Cost Share Total # Ctairns Fills 35-50 Days Supply Total # Ctairns Fills 35-50 Days Supply Total # Ctairns Fills 51-90 Days Supply Total # Ctairns Fills 51-90 Days Supply Formulary Program 5/5 Formulary Drugs (% by claim) 6/5 Formulary Drugs (% by S) 6/6 Formulary Drugs (% by \$) 8/6 Formulary Drugs (% by \$) 6/6 Formulary Drugs (% by \$) 6/6 Formulary Drugs (% by \$) 6/7 Formulary Drugs (% by \$) 6/8 Formulary Drugs (% by \$) 6/	\$1.10 \$80.64 \$39.84 33.0% 767 8 2,054 25.2% 13.0% 60.4% 63.6% 18.1% 18.0% \$1,279.355 \$1,279.355 \$1,279.355 \$2,000 \$1,000	\$1.30 \$57.86 \$27.94 22.19% 786 13 2.369 24.76% 0.16% 61.28% 0.16% 23.03% 17.86% 0.46% 23.03% \$1.570.302 \$1,509.264 \$1.139	\$1.32 596.61 \$22.49 16.68% 821 9 2.050 24.41% 12.16% 0.01% 62.20% 67.16% 17.31% 0.02% 28.26% \$1.535.438 \$1.476.197 \$65.238 1.132 0.01	\$1.39 \$103.31 \$20.06 15.3% 528 5304 24.4% 12.1% 0.0% 62.3% 56.7% 17.8% 0.0% 26.6% \$1.479.126 \$1.423.388 \$55,737 1.094	\$1.39 \$102.67 \$18.45 16.80% 618 6 2.345 12.09% 0.01% 62.47% 55.36% 17.63% 0.01% 25.69% 51.462,469 \$1.462,469 \$1.462,469 \$1.462,469	\$1.48 \$108.97 \$19.89 14.57% 921 7 2.169 24.13% 11.83% 0.01% 62.81% 0.01% 25.67% \$1,565.906 \$1,508.096 \$1,508.096 \$1,508.096
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Ctairn Percent Member Cost/Stare Total # Ctairns Fills 35-50 Days Supply Total # Ctairns Fills 35-50 Days Supply Total # Ctairns Fills 51-90 Days Supply Formulary Program S/S Formulary Drugs (% by subm) S/S Non-Formulary Drugs (% by clairn) S/S Non-Formulary Drugs (% by sill) S/S Formulary Drugs (% by \$) sle non-Formulary Drugs (% by \$) sle non-Formulary Drugs (% by \$) Specially Drugs Total Drugs (% by \$) Generic Drugs (% by \$) Specially Drugs Total Drug Cost Amount Paid by Members Total Ctairns Avg # of Ro's per Member per Month (PMPM) Avg Ctairn Cost to Plan	\$1.10 \$80.64 \$39.84 33.0% 767 8 2.064 13.0% 0.1% 60.4% 63.6% 18.1% 0.0% \$1.264.512 \$1.279.355 \$85.156 1.022 0.01	\$1.30 \$77.86 \$77.86 \$27.94 786 13 2.369 24.76% 0.16% 61.28% 0.16% 23.03% 17.86% 0.46% 23.03% \$1.570.302 \$1,509.264 \$1.399 0.01	\$1.32 596.61 \$22.49 16.68% 821 8 2.050 24.41% 12.16% 0.01% 62.20% 67.16% 17.31% 0.02% 28.28% \$1.476.197 \$56.238 1.132 0.01 \$7.86	\$1.39 \$103.91 \$20.06 15.3% 528 5 2.304 24.4% 12.1% 0.0% 62.3% 66.7% 17.8% 26.6% \$1,479.126 \$1,423.386 \$1,423.386 \$1,423.386 \$1,423.386 \$1,423.386 \$1,423.386	\$1.39 \$102.67 \$18.46 16.80% 618 6 2.345 17.09% 0.01% 55.36% 17.63% 0.01% 25.69% \$1.462,459 \$1.462,459 \$1.407,886 \$64.483 1.087 0.01 \$7.46	\$1.48 \$108.97 \$18.89 14.57% 921 7 2.169 24.13% 17.83% 0.01% 62.81% 66.81% 17.12% 0.01% 25.67% \$1.565.906 \$1.508.086 \$57.810 1.161 0.01 \$8.05
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Ctairn Percent Member Cost Share Total & Ctairus Filb 35-50 Days Supply Total & Ctairus Filb 35-50 Days Supply Total & Ctairus Filb 51-80 Days Supply Formulary Program S/S Formulary Drugs (% by supply Formulary Drugs (% by ctairu) S/S Non-Formulary Drugs (% by ctairu) S/S Formulary Drugs (% by ctairu) S/S Formulary Drugs (% by \$) a/s nan-Formulary Drugs (% by \$) A/s nan-Formulary Drugs (% by \$) Specially Drugs Total Drugs (% by \$) Generic Drugs (% by \$) Specially Drugs Total Drug Cost Amount Paid by Members Total Ctairus Avg 8 of Ro's per Member Per Month (PMPM) Avg Ctairu Cost to Plan Avg Ctairu Cost to Plan	\$1.10 \$80.84 \$39.84 33.0% 767 8 2,084 13.0% 0.1% 63.6% 18.1% 0.0% \$1,279.356 \$1,279.356 1.022 0.01 \$55.84	\$1.30 \$57.88 \$27.94 22.19% 786 13 2.368 24.79% 12.45% 0.16% 61.28% 64.28% 64.28% 17.86% 0.46% 23.03% \$1.870.302 \$1.809.284 1.139 0.01 \$81.09 \$81.018 \$81.018 \$81.018 \$81.018 \$81.018 \$85.07	\$1.32 596.61 \$22.49 16.68% 621 9 2.050 24.41% 12.16% 0.01% 62.20% 67.16% 17.31% 0.02% 28.26% \$1.536.438 \$1.132 0.01 \$51.806.63 \$1.475.197	\$1.39 \$103.31 \$20.08 15.2% 628 6 2.304 24.4% 12.1% 0.0% 62.3% 66.7% 17.8% 0.0% 26.6% \$1,479.126 \$1,423.389 \$55.737 1.094 \$2.001 \$7.856 \$1.094	\$1.39 \$102.67 \$18.46 16.80% 818 6 2.345 12.09% 0.01% 55.36% 17.63% 0.01% 25.69% \$1.462,459 \$1.407.836 \$1.407.836 \$1.407.836 \$1.407.836 \$1.205.30 \$1.205.30	\$1.48 \$108.97 \$18.89 14.57% 821 7 2.169 24.13% 11.83% 0.01% 62.81% 62.81% 62.81% 56.81% 17.12% 0.01% 25.67% \$1,565.806 \$1,568.806 \$1,568.806 \$1,268.96 \$1,268.96
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Ctairn Percent Member Cost Share Total & Ctairus Filb 13-60 Days Supply Total & Ctairus Filb 35-60 Days Supply Total & Ctairus Filb 81-80 Days Supply Formulary Program S/S Formulary Drugs (% by steirn) S/S Non-Formulary Drugs (% by ctairu) S/S Non-Formulary Drugs (% by ctairu) S/S Formulary Drugs (% by S) S/S Formulary Drugs (% by \$) S/S Formulary Drugs (% by \$) S/S Formulary Drugs (% by \$) Specialty Drugs Total Drugs (% by \$) Specialty Drugs Total Drug Cost Amount Paid by Members Total Ctairus Avg & of Ry's per Member Per Month (PMPM) Avg Clairu Cost to Plan Avg Clairu Cost to Plan Avg Clairu Cost to Plan Avg Clairu Cost to Member	\$1.10 \$80.64 \$39.84 33.0% 767 8 2,064 13.0% 0.1% 60.4% 63.6% 18.1% 0.0% \$1.364.512 \$1.279.356 \$85.156 1.022 0.01 \$5.64	\$1.30 \$57.88 \$27.94 786 13 2.368 24.78% 0.16% 61.28% 0.16% 65.28% 0.46% 23.03% \$1,870.302 \$1,809.284 \$61.018 1.139 0.01 \$53.67 \$53.67 \$53.67	\$1.32 596.61 \$22.49 16.68% 621 9 2.050 24.41% 12.16% 0.01% 62.20% 67.16% 17.31% 0.02% 28.26% \$1.536.436 \$1.476.197 \$55.238 0.01 \$7.86 \$1.306.63 \$51.45 \$3.79%	\$1.39 \$103.31 \$20.08 15.2% 628 6 8 2.304 24.4% 12.1% 0.0% 62.3% 66.7% 17.8% 0.0% 26.6% \$1,479,126 \$1,423,388 \$65,737 1.054 0.01 \$7.86 3.77%	\$1.39 \$102.67 \$18.46 16.80% 618 6 2.345 12.09% 0.01% 62.47% 62.47% 65.36% 17.63% 0.01% 25.69% \$1.462,469 \$1.407.886 \$4.483 1.087 0.01% \$5.60% \$1.452,459	\$1.48 \$108.97 \$18.89 14.57% 821 7 2.169 24.13% 17.83% 0.01% 62.81% 66.81% 0.01% 25.67% \$1,565.906 \$1,565.906 \$1,567.810 1.161 0.01 \$8.05 \$4.79 3.69%
	Avg. Days Supply Avg. Plan Cost/Days Supply Avg. Cost to Plan Avg. Member Cost/Ctairn Percent Member Cost Share Total & Ctairus Filb 35-50 Days Supply Total & Ctairus Filb 35-50 Days Supply Total & Ctairus Filb 51-80 Days Supply Formulary Program S/S Formulary Drugs (% by supply Formulary Drugs (% by ctairu) S/S Non-Formulary Drugs (% by ctairu) S/S Formulary Drugs (% by ctairu) S/S Formulary Drugs (% by \$) a/s nan-Formulary Drugs (% by \$) A/s nan-Formulary Drugs (% by \$) Specially Drugs Total Drugs (% by \$) Generic Drugs (% by \$) Specially Drugs Total Drug Cost Amount Paid by Members Total Ctairus Avg 8 of Ro's per Member Per Month (PMPM) Avg Ctairu Cost to Plan Avg Ctairu Cost to Plan	\$1.10 \$80.84 \$39.84 33.0% 767 8 2,084 13.0% 0.1% 63.6% 18.1% 0.0% \$1,279.356 \$1,279.356 1.022 0.01 \$55.84	\$1.30 \$57.88 \$27.94 786 13 2.368 24.78% 0.16% 61.28% 0.16% 65.28% 0.46% 23.03% \$1,870.302 \$1,809.284 \$61.018 1.139 0.01 \$53.67 \$53.67 \$53.67	\$1.32 596.61 \$22.49 16.68% 621 9 2.050 24.41% 12.16% 0.01% 62.20% 67.16% 17.31% 0.02% 28.26% \$1.536.436 \$1.478.197 \$55.238 1.132 0.01 \$7.86 \$1.306.63 \$51.45 \$3.79%	\$1.39 \$103.31 \$20.08 15.2% 628 6 8 2.304 24.4% 12.1% 0.0% 62.3% 66.7% 17.8% 0.0% 26.6% \$1,479,126 \$1,423,388 \$65,737 1.054 0.01 \$7.86 3.77%	\$1.39 \$102.67 \$18.46 16.80% 618 6 2.345 12.09% 0.01% 62.47% 62.47% 65.36% 17.63% 0.01% 25.69% \$1.462,469 \$1.407.886 \$4.483 1.087 0.01% \$5.60% \$1.452,459	\$1.48 \$108.97 \$18.89 14.57% 921 7 2.169 24.13% 11.83% 0.01% 62.81% 56.91% 17.12% 0.01% 25.67% \$1.665.906 \$1.7000000000000000000000000000000000000

Utilization Report by Population Level Prescriptions Filled From 04/2007 - 04/2007 WV Public Employees Ins - w/o AccessWV



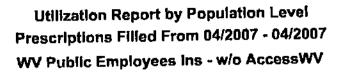
Div Name (DIV)	Avg Mbr Count	Avg Util Mbr/Mnth	Rx Count	Plan Cost	Member Contr/Rx	Plan Cost/Rx	Mail % Rxs	Geл % Rxs	Form % Rxs	Gen Conv %	PMPM Plan Cost
WV PUBLIC EMPLOYEES INSURANCE (WVA)	188.098	96.959	312,837	\$17,689,629	\$11.53	\$56.5 5.	1.0 %	63.8 %	88.2 %	B8.2 %	\$94.05
Grand Total	188.096		312,837	\$17,689,629	\$11,53	\$56.55	1.0 %	63.8 %	88.2 %	98.2 %	\$94.05

Utilization Report by Population Level Prescriptions Filled From 04/2007 - 04/2007 WV Public Employees Ins - w/o AccessWV



WV PUBLIC EMPLOYEES INSURANCE (WVA)

Reporting Level 1		Avg Mbr Count	Avg Util Mbr/Mnth	Rx Count	Plan Cost	Member Contr/Rx	Plan Cost/Rx	Mail % Rxs	Gen % Rxs	Form % Rxs	Gen Conv %	PMPM Plan Cost
		164,755	85,858	277,707	\$15,816,483.49	\$11,57	\$56.95	1.0 %	63.6 %	88.1 %	98.2 %	\$98.00
STATE (1000)		•	10,895	34,408	\$1,815,828,44	\$11.15	\$52,77	1.0 %	65.8 %	89,0 %	98,5 %	\$79.10
NON STATE (2000)		22.956	10,885				\$79,39	0.7 %	60.8 %	69.2 %		\$148.88
COBRA (3000)		385	206	722	\$57,317.05	\$11.52	218.78	-,		•=		
	Grand Total	188,088		312,837	\$17.689.629	\$11.53	\$58.55	1.0 %	63,8 %	88.2 %	98.2 %	\$94.05





WV PUBLIC EMPLOYEES INSURANCE (WVA)

Reporting Level 2	Avg Mbr Count	Avg Util Mbr/Mnth	Rx Count	Plan Cost	Member Contr/Rx	Plan Cost/Rx	Mail % Rxs	Gen % Rxs	Form % Rxs	Gen Conv %	PMPM Plan Cost
STATE AGENCIES (01)	117,259	52,016	141,634	\$7,887,717,41	\$11.84	\$55,69	0.8 %	63.4 %	87.7 %	98.3 %	\$67.27
STATE RETIREES (07)	37,613	27,608	109,158	\$6,406,574.09	\$12.21	\$58.69	1.2 %	63.1 %	88.1 %	98,0 %	\$170.33
·	17,184	7,464	21,168	\$1,094,876.25	\$11,25	\$51.72	0.9 %	65.6 % ·	88.9 %	98.6 %	\$63.71
NON STATE AGENCIES (02)	4,257	3,377	16,041	\$948,815.31	\$6,52	\$59.15	0.9 %	65.4 %	89.7 %	98.3 %	\$222.88
STATE RETIREES ASST 60 (0780)	2,641	1,936	8,103	\$459.245.98	\$11.81	\$56.68	1,3 %	63,4 %	88,2 %	88.0 %	\$173.89
NON STATE RETIREES (08)	2,223	1,788	7,981	\$4 41,161.34	\$7,75	\$55.28	0.9 %	67.1 %	90.8 %	98.3 %	\$198,45
STATE RETIREES ASST 40 (0740)	603	462	2,173	\$131,359.98	\$6.51	\$60.45	1.6 %	65.3 %	90.2 %	98.7 %	\$217.84
NON STATE RETIREES 60 (0860)	2,207	786	1,941	\$75,508.55	\$14.30	\$38.90	0.5 %	73.3 %	90.8 %	99.2 %	\$34.21
NON STATE AGENCIES PLAN B (02B)			1,402	\$74,438.23		\$53.09	1.4 %	66.9 %	89.7 %	97.1 %	\$181.55
STATE RETIREES ASST 20 (0720)	410		1,491	\$57,779,11		\$38.75	1.4 %	70.3 %	90.0 %	99.3 %	\$19.30
STATE AGENCIES (01B)	2,993		722	\$57,317.05		\$79.39	0.7 %	60.8 %	89,2 %	98.2 %	\$148,88
COBRA (COBRA)	385			\$45.133,29		\$51.82				99.0%	\$174.26
NON STATE RETIREES 40 (0840)	259		871	- '		\$63.84	0.0 %				\$156.52
NON STATE RETIREES 20 (0820)	62		152	\$9,704.39		\$58.55					
Grand Total	188.098		312,837	\$17,689.629	\$11.53	50,000	1.0 %	U3.U /4	(M/.L /8		



Key Performance Indicators Comprehensive Indicators WV Public Employees Ins - w/o AccessWV

Current Period: 04/2007 - 04/2007 Previous Period: 04/2006 - 04/2006

	Current Period	Previous Period	% Change
Overall Performance			
Plan Cost PMPM	\$94.05	\$85.77	9.6 %
Average Mbrs/Month	188,096	187,274	0.4 %
Average Subs/Month	97,367	96,202	1.2 %
% Utilizing Members	51.5 %	50.4 %	2.2 %
% Retail Utilizing Members	51.2 %	50.1 %	2.2 %
% Mail Utilizing Members	0,7 %	0.7 %	2.2 %
Rx Measures			
Rxs PMPM	1.66	1.57	6.2 %
Retail Rxs PMPM	1.65	1.55	6.2 %
Mail Rxs PMPM	0.02	0.02	4.4 %
Average Admin Fee/Rx	\$0.00	\$0.00	-96.4 %
Avg Retail Admin Fee/Rx	\$0.00	\$0.00	-96.4 %
Avg Mail Admln Fee/Rx	\$0.00	\$0. <u>00</u>	0.0 %
Average Plan Cost/Rx	\$56.55	\$54.78	3.2 %
Avg Retail Plan Cost/Rx	\$56 .05	\$54.23	3.4 %
Avg Mall Plan Cost/Rx	\$1 <u>05.54</u>	\$1 <u>08.36</u>	-2691
Average Mbr Contrib/Rx	\$11.53	\$12.72	-2.4 %
Avg Retail Mbr Contrlb/Rx	\$11.45	\$12.64	-\$-4 ×.
Avg Mail Mbr Contrib/Rx	<u>\$18.78</u>	<u>\$20.21</u>	-7 * ⁰ / ₂
Average Ing Cost/Rx	\$66.00	\$65.37	1.0 %
Avg Retell Ing Cost/Rx	\$65.43	\$64.74	1.1 %
Avg Mail Ing Cost/Rx	\$122.82	\$127 <u>.07</u>	<u>.84 %</u>
Average AWP/Rx	\$103.52	\$97.35	6.3 %
Avg Retail AWP/Rx	\$102.57	\$96.41	6.4 %
Avg Meil AWP/Rx	\$1 <u>98.84</u>	\$189.08	5. <u>2 %</u>
Average Days Supply/Rx	34.2	34.2	0.2 %
Avp Retail Days/Rx	33.8	33.7	0.3 %
Avg Mell Days/Rx	74.1	74.5	<u>-0.5 %</u>
Average Plan Cost/Day	\$1.65		3.0 %
Avg Retail Plan Cost/Day	\$1.66	\$1,61	3.1 %
Avg Mail Plan Cost/Day	\$1. <u>42</u>		
% Plan Cost	83.1 %		
% Member Contribution	<u>16.9 %</u>		
% Retail Plan Cost	83.0 %		
% Retail Mbr Contrib	<u>17,0_%</u>		
% Mail Plan Cost	B4.9 %		
% Mail Member Contrib	15.1 %	, 15.7 %	39%

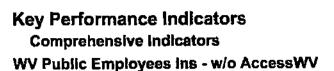


Key Performance Indicators Comprehensive Indicators WV Public Employees Ins. - w/o AccessWV

Current Period: 04/2007 - 04/2007 Previous Period: 04/2006 - 04/2006

	Current Period	Previous Period	% Change	
Rx Sources				
% Mail Rxs	1.0 %	1.0 %	-1.7 %	
% Retail Rxs	99.0 %	99.0 % 98.9 %		
% Member Submit Rxs	0.0 %	0.1 %	-96.4 %	
Rx Types	•		<u>-</u> .	
Avg SSB Plan Cost/Rx	\$124.97	\$110.36	13.2 %	
Avg Retail SSB Plan Cost/Rx	\$124.08	\$109.3 <u>7</u>	13.4 %	
Avg Mail SSB Plan Cost/Rx	\$1 <u>98.33</u>	<u>\$190.32</u>	4.2 %	
Avg MSB Plan Cost/Rx	\$14.52	\$11.52	26.0 %	
Avg Retail MSB Plan Cost/Rx	\$14.52	\$11.42	27.1 %	
Avg Mail MSB Plan Cost/Rx	<u>\$14.01</u>	\$24.47	-42.7 %	
Avg GEN Plan Cost/Rx	\$19.71	\$16.8 <u>1</u>	17.2 %	
Avg Retail GEN Plan Cost/Rx	\$ 19.55	\$16.69	17.1 %	
Avg Mail GEN Plan Cost/Rx	\$37.06	\$30.07	<u>23.3 %</u>	
% Single-Source Brand Rxs	35,1 %	40.7 %	-13.8 %	
% Multi-Source Brand Rxs	1.2 %	1.3 %	-11.2 %	
% Generic Rxs	63.8 <u>%</u>	58.0 %	9.9 %	
% Retail Single-Source Brand	35,0 %	40.6 %	<u>-</u> 13.8 %	
% Retail Multi-Source Brand	1.2 %	1.3 %	-113%	
% Retail Generic	63.9 %	58.1 <u>%</u>	9.9 <u>%</u>	
% Mail Single-Source Brand	42.6 %	48.9 %	-12. 9 %	
% Mail Multi-Source Brand	1.0 %	1.0 %	-1 4 %	
% Mail Generic	56.4 <u>%</u>	50.1 %_	<u>12.6 %</u>	
% Formulary Rxs	88.2 %	84.1 %	4.9 %	
% Retail Formulary Rxs	88.2 %	84.1 %	4.9 %	
% Mail Formulary Rxs	86. <u>7 %</u> _	<u>83.7 %</u>	<u>3.7 %</u>	
% DAW Rxs	0.8 %	0.8 %	-2,5 %	
% Retail DAW Rxs	0.8 %	0.8 %	-3.2 %	
% Mail DAW Rxs	1.6 %	1.0 %	64.4 %	
% Generic Conversion	98.2 %	97.8 %	0.4 %	
% Retail GEN Conversion	98.2 %	97.8 %	0.4 %	
% Mail GEN Conversion	98.3 %	98.1 %	0.2 %	
Period Totals				
Total Plan Cost	\$17,689,628.98	\$16,063,019.64	10.1 %	
Retall Plan Cost	\$17,360,871.47	\$15,741,191.31	10.3 %	
Mail Plan Cost	\$328,757.51	\$321,828.33	2.2 %	
Total Member Contribution	\$3,605,470.99	\$3,728,603.86	-3.3 %	
Retail Member Contrib	\$3,546,979.40	\$3,668,578.36	-3.3 %	

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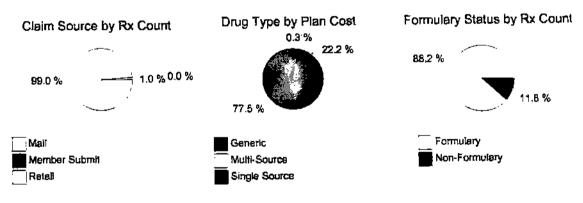


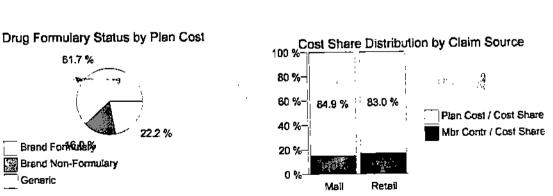


Current Period: 04/2007 - 04/2007 Previous Period: 04/2006 - 04/2006

	Current Period	Previous Period	% Change	
Mail Member Contrib	\$58,491 <u>.59</u>	\$60,025.50	-2.6 %	
Total Rx Count	312,837	293,236	6.7 %	
Retail Rx Count	309,712	290,006	6.8 %	
Member Submit Rxs	10	260	96.2 %	
Mail Rx Count	3,115_	2,970	4.9 %	
Total Admin Fee	\$15.00	\$388.50	96.1 %	
Total UC Savings	\$10,235,462.22	\$9,028,289.09	13.4 %	
Total Lost Savings	\$16,683.61	\$15,2 9 9.38	9.0 %	
Demographics				
Average Age	45.6	45.3	0.7 %	
% Male Members	45.2 %	45.1 %	0.2 %	
% Female Members	54.8 %	54.9 %	-C 1 %	

Graphs based on Current Period: 04/2007 - 04/2007





Page 3 of 3

05/14/07

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Financials

APRIL 2007

State of West Virginia

Public Employees Insurance Agency and Retires Health Benefit Trust Fund

Balance Sheets

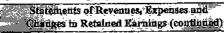
April 30, 2007 and 2006 Accrual Basis (Unaudited-For Internal Use Only)



Assets		Aprīl 2007		April 2006		·· Increase <decrease></decrease>
Cash and cash equivalents	\$	147,272,412	\$	101,256,755	\$	46,016,657
Describe with third_party-administrators		820,472		<u>535,703</u> _		284,769_
Premium accounts receivable-net of		•				
		29,192,451	- 	24,193,926_	=	<u>4,998,525</u>
Other accounts receivable		15,683,706		8,525,537		7,158,169
Total current assets		192,969,041		134,510,921		58,458,120
Investments		171,423,975		155,611,387		15,812,588
Furniture and equipment, not of accumulated depreciation		298,909		166,558		132,353
Restricted cash-premium stabilization life insurance		3,942,867		3,942,703		164
Restricted cash-new computer system		3,484,988		3,833,000		(348,012)
Total assets	\$	372,119,780	\$	298,064,567	\$	74,055,213
Liabilities and Retained Earnings						
Claims payable	\$	53,340,000	\$	54,262,000	\$	(922,000)
Current claims payable	·	11,780,719		11,188,469		592,250
Linestried revenue		7,332,503		3,755,696		3,576,807
Accounts payable		13,471,900		12,165,920		1,305,980
Other accrued liabilities		1,188,634		985,001		203,633
Due to over-reserve fund		27,679,595				27,679,595
Total liabilities		114,793,351		82,357,086		32,436,265
Retained earnings		257,326,429		215,707,481		41,618,948
Total liabilities and retained earnings	\$	372,119,780	\$	298,064,567	\$	74,055,213

For internal use only. See financial comments. Prepared May 29, 2007

State of West Virginia Public Employees Insurance Agency and Retiree Health Benefit Trust Fund



April 30, 2007 and 2006

Accrual Basis (Unaudited-For Internal Use Only)



F''							
	Budgeted Ten Months Ended 30-Apr-07	Actual Ten Months Ended 30-Apr-07	Budget Variance Percent	Actual Ten Months Ended 30-Apr-06	This Year ve Last Year Increase Occrease>	This Year vs Last Year Variance Percent	
Operating Revenue			j	- -			
Premiums Employer Premiums-State Braployee Premiums-State	\$ 343,263,825 80,058,519	\$ 343,544,702 79,968,832	0.08% \$ -0.11%	343,187,675 \$ 68,527,442	357,027 [1,441,390	0.1 0% 16.70%	
Local Premiums Retiree Promiums Basic Life Insurance	59,798,099 55,368,139 5,103,939	60,595,257 55,117,800 5,142,011	1.33% -0.45% 0.75%	57,585,595 46,269,286 5,369,429	3,009,662 8,848,514 (227,418)	5.23% 19.12% -4.24%	
Other Premiums and Adjustments Medicare Part D	1,250,000 16,666,667	1,242,655 16,666,667	-0.59% 0.00%	4,085,946 5,447,000	(2,843,291) 16,666,667	-69_59% 305.98%	
Total Premiums Less:	561,509,188	562,277,924	0.14%	530,472,373	31,805,551	6.00%	
Payments to managed care organizations Life insurance premiums-basic	(48,496,608) (5,103,939)	(48,078,117) (5,139,332)	-0.86% 0.69%	(46,731,115) (5,370,295)	(1,347,002) 230,963	2.88%	
Net premium revenue Administrative fees, net of refunds	507,908,641 3,600,573	509,060,475 3,657,115	0.23% 1.57%	478,370,963 4,979,028	30,689,512 (1,321,913)	6.42% -26.55%	
Net operating revenue	511,509,214	512,717,590	0,24%	483,349,991	29,367,599	6.08%	
Operating Expenses Claims expense-medical	287,813,035	292,630,9 13	1.67%	286,222,127	6,408,786	2.24%	
Claims expense-drugs	155,003,853	158,964,448	2.56%	142,718,591	16,245,857	11.38%	
Administrative service fees	14,444,705	14,384,425	-0.42%	13,529,230	855,195	6.32%	
Wellness and disease management	1,481,294	1,576,884	6.45%	1,326,861	250,023	18.84%	
Other operating expenses	6,459,354	6,624,419	2.56%	5,846,037	778,382	13.31%	
Total operating expense	465,202,241	474.181;089	1.93%	449,642,846	24,538,243	5.46%	
Operating surplus	46,306,973	38,536,501	-16.78%	33,707,145	4,829,356	14.33%	

State of West Virginia Public Employees Insurance Agency and Retiree Health Benefit Trust Fund

Statements of Revenues, Expenses and Changes the Retained Earnings (continued)

April 30, 2007 and 2006

Accrual Basis

(Unaudited-For Internal Use Only)



· · · · · · · · · · · · · · · · · · ·	Budgeted Ten Months Ended 30-Apr-07	Actual Ten Months Ended 30-Apr-07	Budget Variance Percent	Actual Ten Months Ended 30-Apr-06	This Year vs Last Year Increase <decrease></decrease>	This Year vs Lust Year Varlance <u>Percent</u>	
Nonoperating Revenues and Transfers Interest income banks, ner of fees			N/A	15,810	(15,810)	-100:08%	
Interest and investment income Transfer in	16,666,667 5,583,333	22,339,230 5,582,951	34.04% -0.01%	8,513,877 4,887,369	13,825,353 69 5, 582	162-39% [4-23%	
Total nonoperating revenues and transfers	22,250,000	27 922 #8[25.49%	13,417,056		108.11%	
Net Surplus Retained Estnings, beginning of period	68.556.978	\$6,4\$8,682 190,867,749	-3.06%	47,124,201 47,124,201 468,583,280	19.354,481	41.03%	
Retained Earnings, end of period		257,326,429	;	215,707,481	\$ 41,618,948		

For internal use only. See financial comments. Prepared May 29, 2007

State of West Virginia Public Employees Insurance Agency and Retiree Health Benefit Trust Fund Financial Comments

Year-to-Date April 30, 2007 and 2006 Accrual Basis



(Unaudited-For Internal Use Only)

Amounts Indicated in the attached financial statements include the accounts of the West Virginia Public Insurance Agency (PEIA) and the West Virginia Retiree Health Benefit Trust Fund (RHBT).

The Budgeted amounts reflected in these statements have been adjusted to incorporate the changes in premium and expense estimates which resulted from policyholder enrollment changes which took place during open enrollment and other changes in commitments which have occurred. Amounts reported in the Budgeted Column in the attached Statements of Revenues, Expenses, and Changes in Retained Earnings represent a one twelfth per month recognition of the annual budget except for claims expenses, which are from a seasonal budget that was developed by PEIA's Actuary.

PEIA's consulting actuaries have prepared an updated Actuarial Baseline Forecast dated May 22, 2007 which indicates a surplus of \$70,754,257 for Pian Year 2007. The Budget Column indicated in these reports has been adjusted to reflect this update.

West Virginia Board of Risk and insurance Management UNAUDITED BALANCE SHEET

DRA	
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	April 3	ທ ົ
	2007	2006
ASSETS		
Short Term Assets	•	
Cash and Equivalents	\$ 35,838,333 \$	40,412,739
Advance Deposit with Carrier/Trustee	112,767,727	78,579,058
Receivables - Net	4,437,984	4,479,435
Prepaid Insurance	1,024,631	693,484
Total Short Term Assets	154,068,675	124,164,716
Long Term Assets	117,871,901	106,452,065
Total Long Term Assets	117,871,901	
Total Long Term Assets	111,011,901	106,452,065
TOTAL ASSETS	271,940,576	230,616,781
LIABILITIES		
Short Term Liabilities		
Accounts payable	1,126,793	121,781
Claims Payable	218,579	30,510
Agents Commissions Payable	1,672,008	1,733,613
Unearned Revenue	14,037,702	14,108,309
Current Estimated Claim Reserve	50,870,127	49,622,902
Total Short Term Liabilities	67,925,209	65,617,115
	,	00,011,110
Long Term Lieblilities		
Compensated Absences	163,620	166,553
Estimated Noncurrent Cialm Reserve	121,641,987	130,348,442
Total Long Term Lizbilities	121,805,607	130,514,995
i i i i i i i i i i i i i i i i i i i		,,
TOTAL LIABILITIES	189,730,816	196,132,110
Prior Year Net Assets (Deficiency)	44,843,685	526,803
Current Year Earnings (Loss)	37,366,075	33,957,868
TOTAL NET ASSETS (DEFICIENCY)	82,209,760	34,484,671
TOTAL LIABILITIES AND RETAINED EARNINGS (DEFICIENCY)	\$ 271,940,576 \$	230,616,781

West Virginia Board of Risk and Insurance Management UNAUDITED INCOME STATEMENT For the ten months ending



	April 30					
		2007	2006			
Operating Revenues		- -				
Premium Revenues	\$	67,069,051 \$	69,759,537			
Less - Excess Insurance		(5,123,155)	(3,451,242)			
Total Operating Revenues		61,945,896	66,308,295			
Operating Expenses						
Claims Expense		34,981,964	32,944,362			
Property & MS Claims Expense		4,561,210	3,079,564			
Personal Services		1,065,753	997,905			
Operating Expenses		2,527,780	2,517,703			
Total Operating Expenses		43,136,707	39,539,534			
Operating Income (Loss)		18,809,189	26,768,761			
Nonoperating Revenues						
Court Fees		19,140	24,091			
Claim Interest Income		189,219	,			
Investment income		18,348,527	7,165,016			
Total Nonoperating Revenues		18,556,886	7,189,107			
Net Income (Loss)		37,366,075	33,957,868			



West Virginia Children's Health Insurance Program 1018 Kanawha Boulevard East Suite 209 Charleston, WV 25301

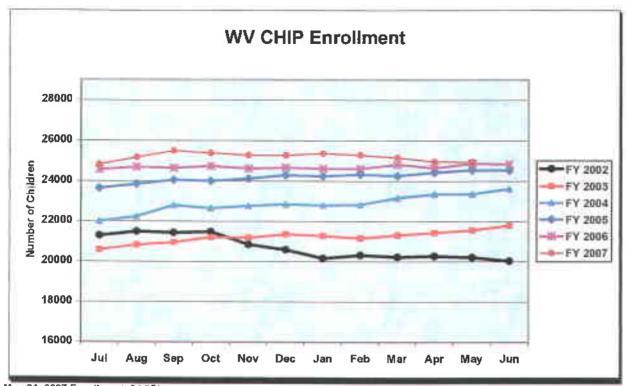
Phone: 304-558-2732

Toll-Free: 1-877-WVA CHIP

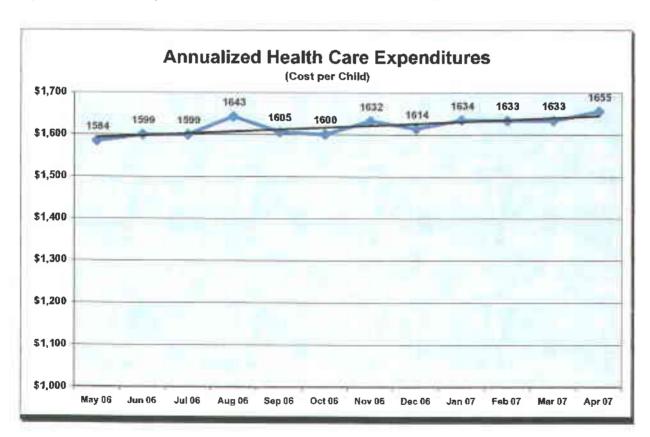
Fax: 304-558-2741 www.wvchip.org

Joint Committee on Government and Finance Report

June 2007



May 31, 2007 Enrollment 24,951



West Virginia Children's Health Insurance Program Comparative Balance Sheet April 30, 2007 and 2006 (Accrual Basis)

Assets:	April 30, 2007	April 30, 2006	Varianc	е
Cash & Cash Equivalents Due From Federal Government Due From Other Funds Accrued Interest Receivable	\$6,527,606	\$2,212,823	\$4,314,783	195%
	\$3,398,976	\$3,255,767	\$143,209	4%
	\$798,846	\$699,339	\$99,507	14%
	\$17,113	\$4,424	\$12,689	287%
Fixed Assets, at Historical Cost Total Assets	\$62,141	<u>\$75,128</u>	(\$12,987)	<u>-17%</u>
	\$10,804,682	<u>\$6,247,481</u>	\$4,557,201	<u>73%</u>
Liabilities: Due to Other Funds	\$227,822	\$78,248	\$149,574	191%
Deferred Revenue Unpaid Insurance Claims Liability	\$5,454,739	\$1,532,442	\$3,922,297	256%
	\$3,970,000	\$3,620,000	\$350,000	<u>10%</u>
Total Liabilities	\$9,652,561	\$ <u>5,230,690</u>	\$4,421,871	<u>85%</u>
Fund Equity Total Liabilities and Fund Equity	\$1,152,121	\$1,016,791	\$135,330	13%
	\$10.804.682	\$6,247,481	\$4,557,201	73%

PRELIMINARY FINANCIAL STATEMENTS

Unaudited - For Management Purposes Only - Unaudited

West Virginia Children's Health Insurance Program Comparative Statement of Revenues, Expenditures and Changes in Fund Balances For the Ten Months Ended April 30, 2007 and April 30, 2006 (Modified Accrual Basis)

	April 30, 2007	April 30, 2006	Varian	ce
Revenues:	April 30, 2007	Αμιίι ου, 2000	4 4114	
Federal Grants	29,614,251	26,131,910	3,482,341	13%
State Appropriations	7,081,157	7,939,871	(858,714)	-11%
Premium Revenues	4,507	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4,507	
Investment Earnings	124,744	42,450	<u>82,294</u>	194%
Total Operating Revenues	36,824,658	<u>34,114,231</u>	2,710,427	<u>8%</u>
Operating Expenditures Claims				
Outpatient Services	8,603,286	8,361,650	241,636	3%
Physicians & Surgical	7,686,034	7,346,602	339,432	5%
Prescribed Drugs	7,076,521	6,538,799	537,722	8%
Dental	4,007,629	4,031,865	(24,236)	-1%
Inpatient Hospital Services	3,372,869	2,181,135	1,191,734	55%
Outpatient Mental Health	1,268,875	1,290,562	(21,687)	-2%
Vision	1,032,985	1,067,539	(34,554)	-3%
Inpalient Mental Health	773,936	451,771	322,165	71%
Durable & Disposable Med Equip.	380,654	303,805	76,849	25%
Medical Transportation	296,476	189,313	107,163	57%
Therapy	289,875	265,051	24,824	9%
Other Services	119,876	92,444	27,432	30%
Less Collections*	(569,036)	(377,019)	(192,017)	51%
Total Claims	34,339,980	<u>31,743,517</u>	2,596,463	<u>8%</u>
General and Admin Expenses:				
Salaries and Benefits	383,160	376,459	6,701	2%
Program Administration	1,615,692	1,556,201	59,491	4%
Eligibility	249,878	212,553	37,325	18%
Outreach & Health Promotion	15,159	87,139	(71,980)	-83%
Current	<u>96,045</u>	<u>95,911</u>	<u>134</u>	0%
Total Administrative	<u>2,359,934</u>	<u>2,328,264</u>	<u>31,670</u>	<u>1%</u>
Total Expenditures	36,699,914	<u>34,071,781</u>	<u>2,628,134</u>	<u>8%</u>
Excess of Revenues				
Over (Under) Expenditures	124,744	42,450	82,294	194%
Fund Equily, Beginning	1,027,377	<u>974,341</u>	53,036	<u>5%</u>
Fund Equily, Ending	1,152,121	<u>1,016,791</u>	<u>135,330</u>	<u>13%</u>

^{*} Collections are primarily drug rebates and subrogation

PRELIMINARY FINANCIAL STATEMENTS

Unaudited - For Management Purposes Only - Unaudited

West Virginia Children's Health Insurance Program Budget to Actual Statement State Fiscal Year 2007 For the Ten Months Ended April 30, 2007

	Budgeted for <u>Year</u>	Year to Date Budgeted Amt	Year to Date Actual Amt	Year to Da Variance		Monthly Budgeted Amt	<u>Apr-07</u>	<u>Mar-07</u>	<u>Feb-07</u>
Projected Cost	\$44,518,706	\$37,098,922	\$33,714,123	\$3,384,799	9%	\$3,709,892	\$3,515,383	\$4,698,153	\$3,290,414
Premiums	oll	\$0	4,507	\$0	n/a	0	\$2,184	1,480	843
Medical Copays	560,000	\$466,667	0	466,667	-100%	46,667	0	0	0
Drug Copays	475,000	\$395,833	0	395,833	-100%	39,583	0	0	0
Subrogation & Rebates	300.000	\$250,00 <u>0</u>	<u>571,527</u>	(321,527)	129%	<u>25,000</u>	<u>42,641</u>	<u>67,252</u>	<u>37,180</u>
Net Benefit Cost	43,183,706	\$35,986,422	\$33,138,089	\$2,848,333	8%	3,598,642	3,470,558	4,629,421	3,252,391
Salaries & Benefits	\$600,000	\$500,000	\$383,160	\$116,840	23%	\$50,000	\$39,339	\$40,548	\$39,293
Program Administration	1,951,762	\$1,626,468	1,503,953	122,515	8%	162,647	177,960	168,054	158,904
Eligibility	324,000	\$270,000	222,907	47,093	17%	27,000	5,160	3,665	104,686
Outreach	100,000	\$83,333	15,160	68,173	82%	8,333	1,381	477	0
Current Expense	169,480	<u>\$141,233</u>	84,851	<u>56,382</u>	40%	14,123	<u>11,511</u>	<u>8,185</u>	<u>8,593</u>
Total Admin Cost	\$3,145,242	\$2,621,035	\$2,210,031	\$411,004	16%	\$262,104	\$235,351	\$220,929	\$311,476
Total Program Cost	\$46,328,948	<u>\$38,607,457</u>	<u>\$35,348,120</u>	\$ <u>3,259,337</u>	8%	\$3,860,746	\$3,705,909	\$4,850,350	\$3,563,867
Federal Share 80 97% State Share 19 03%	37,526,448 <u>8,802,500</u>	\$31,272,040 \$7,335,417	\$28,633,392 \$6,714,728	2,638,648 <u>620,689</u>	8% 8%	3,127,204 <u>733,542</u>	3,000,674 <u>705,234</u>	3,927,328 923,022	2,885,663 <u>678,204</u>
Total Program Cost **	\$46,328,948	\$38,607,457	\$35,348,120	<u>\$3,259,337</u>	8%	\$3,860,746	\$3,705,909	\$4,850,350	\$3,563,867

^{*} Positive percentages indicate favorable variances

Please note: Medical and Drug Co-pay figures are Incomplete.

Unaudited - Cash Basis For Management Purposes Only - Unaudited

^{**} Budgeted Year Based on CCRC Actuary 6/30/2006 Report

WV CHIP Enrollment Report

May 2007

County	County Pop 2005 Est.	Total CHIP	Total Medicaid	Total	CHIP/Medicaid	Total %	# Children Insured	Est # Uninsured
County <u>Ranking</u>		Enrollment	Enrollment	CHIP/Medicaid	Enrollment % of Population	Insured 3/2002*	Ranking*	Eligible*
Manking	(0-18 Yrs)	<u>May-07</u>	<u>May-07</u>	Enrollment	W DE PODDIATION	SIEVUE	nanking	<u> Eligible</u>
Barbour	3,248	304	1,588	1,892	58.3%	92.5%	34	255
Berkeley	22,882	1,167	5,622	6,789	29 7%	93 9%	21	1,084
Boone	5,706	333	2,563	2,896	50 8%	97.9%	4	133
Braxton	3,044	214	1,563	1,777	58 4%	95 6%	13	155
Brooke	4,658	298	1,451	1,749	37.5%	98.5%	3	0**
Cabell	18,900	976	8,045	9,021	47.7%	91.6%	39	1,218
Calhoun	1,389	139	829	968	69.7%	88 0%	52	207
Clay	2,454	194	1,365	1,559	63 5%	95.1%	15	94
Doddridge	1,607	133	761	894	55 6%	96 4%	6	60
Fayette	9,692	993	4,742	5,735	59 2%	92 1%	36	706
Gilmer	1,154	102	581	683	59.2%	92.8%	32	115
Grant	2,463	167	912	1,079	43.8%	95 8%	11	82
Greenbrier	7,110	586	2,842	3,428	48 2%	94.8%	17	306
Hampshire	5,110	287	1,816	2,103	41.2%	91.3%	40	295
Hancock	6,270	406	2,191	2,597	41.4%	92 9%	31	443
Hardy	2,950	135	1,028	1,163	39 4%	93.6%	26	200
Harrison	14,973	957	5,927	6,884	46 0%	99.9%	1	0**
Jackson	6,277	373	2,310	2,683	42.7%	93 9%	22	340
Jefferson	11,465	421	2,133	2,554	22.3%	93.9%	23	651
Kanawha	40,647	2,083	16,560	18,643	45 9%	96.4%	7	772
Lewis	3,577	318	1,751	2,069	57.8%	88.0%	53	431
Lincoln	4,945	413	2,539	2 952	59 7%	93 3%	27	327
Logan	7,610	504	3,871	4,375	57.5%	92.1%	37	654
Marion	11,245	788	4,285	5,073	45.1%	95.9%	10	516
Marshall	7,176	408	2,750	3,158	44 0%	97.5%	5	217
Mason	5,461	315	2,502	2,817	51 6%	95.7%	12	249
McDowell	5,170	428	3,498	3,926	75.9%	93.8%	25	373
Mercer	12,687	1,091	6,521	7,612	60.0%	91 0%	41	1,268
Mineral	5,973	291	2,052	2,343	39 2%	90 7%	43	251
Mingo	6,204	430	3,340	3,770	60.8%	88.5%	51	566
Monongalia	14,346	670	4,071	4,741	33.0%	92.6%	33	1,144
Monroe	2,728	255	937	1,192	43.7%	93 1%	29	196
Morgan	3,365	220	962	1,182	35 1%	89 2%	49	285
Nicholas	5,478	466	2,460	2,926	53 4%	94.4%	19	324
Ohio	9,068	474	3,078	3,552	39 2%	95.6%	14	480
Pendleton	1,632	133	433	566	34.7%	99 0%	2	19
Pleasants			467	572	35.9%	93 9%	24	88
Pocahonias	1,593	105			47 0%	87 7%	54	224
	1,717	163	644	807		90 2%	47	236
Presion	6,354	552	2,387	2,939	46 3%	93 2%	28	486
Putnam	12,522	631	3,181	3,812	30 4%	91 7%	38	
Raleigh	15,992	1,320	6,846	8,166	51 1%	89.7%	48	1,395 653
Randolph	5,971	471	2,470	2,941	49 3%		9	
Ritchie	2,234	140	778	918	41.1%	96.2%		81
Roane	3,266	306	1,661	1,967	60 2%	90 5%	44	336
Summers	2,322	216	1,187	1,403	60 4%	88.9%	50	315
Taylor	9,307	219	1,434	1,653	50 0%	90.9%	42	356
Tucker	1,354	176	457	633	46 8%	93.1%	30	103
Tyler	1,887	106	869	975	51.7%	94 9%	16	93

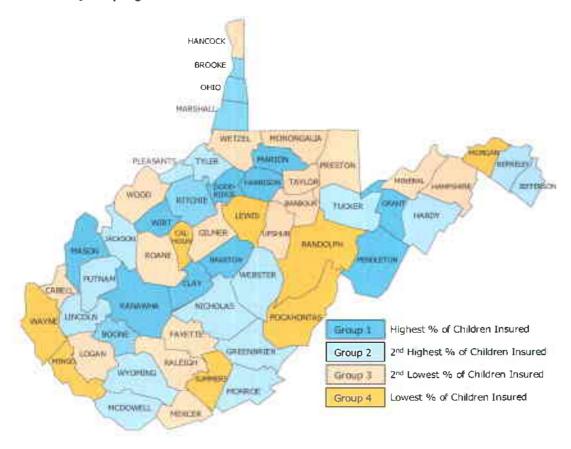
WV CHIP Enrollment Report

May 2007

County <u>Ranking</u>	County Pop. 2005 Est (0-18 Yrs)	Total CHIP Enrollment <u>May-07</u>	Total Medicaid Enrollment <u>May-07</u>	Total CHIP/Medicaid Entollment	CHIP/Medicaid Enrollment	Total % Insured 3/2002*	# Children Insured Ranking*	Est. # Uninsured <u>Eligible*</u>
Upshur	4,956	399	2,233	2,632	53_1%	90.4%	46	547
Wayne	9,176	565	4,182	4,747	51 7%	87 7%	55	1,034
Webster	2,020	205	1,075	1,280	63 4%	94 7%	18	103
Wetzel	3,732	241	1,629	1,870	50_1%	92 5%	35	334
Wirt	1,268	129	561	690	54 4%	96 3%	8	46
Wood	19,063	1,089	7,639	8 728	45 8%	90.5%	45	1,624
Wyoming	5,092	446	2,778	3,224	63 3%	94 0%	20	231
Totals	382,490	24,951	152,357	177,308	46 4%	93 4%		22,446

^{*}Based on data from "Health Insurance in West Virginia: The Children's Report" – a survey by The Institute for Health Policy Research at the West Virginia University Robert C. Byrd Science Center

^{**}There may be some uninsured eligible children in these counties, but according to the results of the survey sampling none were found.



Legislative Oversight Commission on Health and Human Resources Accountability

June 2007

Department of Administration

State Children's Health Insurance Program UPDATE



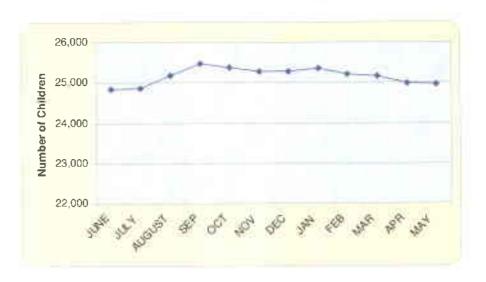
WV CHILDREN'S HEALTH INSURANCE AGENCY

REPORT FOR JUNE 2007

I. Enrollment on May 31, 2007: 24,951

See Attachment I for enrollment by county.

Current 12-Month Enrollment Period: June 2006 through May 2007



Enrollee Totals: March 2007 to May 2007

Mont	h Tota		1 Year	Total
Marc	h 1,808	3	Average	1,816
Apri	l 1,72		High	2,204
May	1,42	7	Low	1,427

New Enrollee (Never Before on CHIP) Totals: March 2007 to May 2007

	Month	Total	1 Year	Total
Г	March	743	Average	879
ı	April	715	High	1,149
L	May	609	Low	609

II. Re-enrollment for 3 Month Period: February 2007 to April 2007

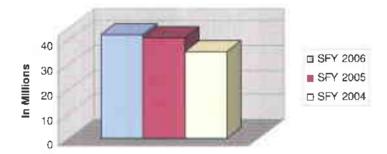
Total Forms Mailed		Enrolled within Notice Period			ed Cases Closure	Final Closures	
Month	Total	#	%	#	%	#	%
February	2,070	1,109	54%	297	14%	664	32%
March	2,084	1,218	58%	249	12%	617	30%
April	1,884	1.133	60%	210	11%	541	29%

III. Financial Activity

Please see this month's financial statement at Attachment 2. The average annualized claims cost per child for the month ended April 2007 was \$1,655.

Annual Expenditures for a 3 Year Period: SFY 2004 - SFY 2006

	SFY 2006	FFP% 2006	SFY 2005	FFP% 2005	SFY 2004	FFP% 2004
Federal	34.247.276	81.09	33,767,136	82.26	29.144.455	82 63
State	7.986.385	18.91	7,235.862	17.74	6,126,578	17.37
Total Costs	42,233,661	100.00	41,002,998	100.00	35.271.033	100.00



Monthly Budgeted and Current 3 Month Period: February 2007 - April 2007

	Budgeted Per	Wtd. Avg.				
	Month	For Otr.	April 2007	March 2007	February 2007	
Federal	3,127,204	3 271.221	3 000 674	3,927,328	2,885,662	
State	733,542	768,820	705.235	923,022	678,204	
Total	3.860,746	4,040,042	3.705.909	4,850,350	3,563,866	



WVCHIP Report For June 2007 Page 3

IV. Other Highlights

- WVCHIP Premium currently has 68 enrollees as of May 31.
- ➤ In the months of March and April, WVCHIP families were asked to designate their primary care providers from a directory of participating physicians to serve as their medical home. As of April 30th, approximately 20% of all enrolled children have a designated medical home. Families have the incentive of having no copayments assessed for services in their medical home.
- During the first week of June, WVCHIP has prepared and will submit its State Plan Amendment allowing for the Governor's special prevention initiative which would allow WVCHIP to fund comprehensive wellness exams for any child entering Kindergarten who is uninsured. With West Virginia child uninsured rate projected at 5% of children, which is estimated at around 1,100 children entering Kindergarten with no coverage whatsoever, the total cost of providing these exams is estimated to be under \$200,000. WVCHIP anticipates that it will be able to fund this amount under its existing 2008 budget without supplemental funds.

WV CHIP Enrollment Report

May 2007

County	County Pop 2005 Est	Enrollment	Total Medicaid Enrollment	Total CHIP/Medicaid	CHIP/Medicaid Enrollment	Total % Insured	# Children Insured	Est. # Uninsured
Ranking	(0-18 Yrs)	<u>May-07</u>	<u>May-07</u>	Enrollment	% of Population	3/2002*	Ranking*	Eligible*
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Braxton	3,044	214	1,563	1,777	58.4%	95 6%	13	155
Brooke	4,658	298	1,451	1,749	37.5%	98 5%	3	0**
Cabell	18,900	976	8,045	9,021	47.7%	91 6%	39	1,218
Calhoun	1,389	139	829	968	69.7%	88.0%	52	207
Clay	2,454	194	1,365	1,559	63.5%	95.1%	15	94
Doddridge	1,607	133	761	894	55.6%	96.4%	6	60
Fayette	9,692	993	4,742	5,735	59 2%	92.1%	36	706
Gilmer	1,154	102	581	683	59 2%	92 8%	32	115
Grant	2,463	167	912	1,079	43.8%	95 8%	11	82
Greenbrier	7,110	586	2,842	3,428	48.2%	94.8%	17	306
Hampshire	5,110	287	1,816	2,103	41.2%	91 3%	40	295
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Hardy	2,950	135	1,028	1,163	39.4%	93.6%	26	200
Harrison	14,973	957	5,927	6,884	46.0%	99 9%	1	0**
Jackson	6,277	373	2,310	2,683	42.7%	93.9%	22	340
Jefferson	11,465	421	2,133	2,554	22.3%	93 9%	23	651
Kanawha	40,647	2,083	16,560	18,643	45 9%	96 4%	7	772
Lewis	3,577	318	1,751	2,069	57.8%	88.0%	53	431
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Logan	7,610	504	3,871	4,375	57.5%	92.1%	37	654
Marion	11,245	788	4,285	5,073	45.1%	95.9%	10	516
Marshall	7,176	408	2,750	3,158	44.0%	97 5%	5	217
Mason	5,461	315	2,502	2,817	51 6%	95 7%	12	249
McDowell	5,170	428	3,498	3,926	75.9%	93.8%	25	373
Mercer	12,687	1,091	6,521	7,612	60.0%	91 0%	41	1,268
Mineral	5,973	291	2,052	2,343	39.2%	90.7%	43	251
Mingo	6,204	430	3,340	3,770	60 8%	88 5%	51	566
Monongalia	14,346	670	4,071	4,741	33.0%	92.6%	33	1,144
Monroe	2,728	255	937	1,192	43.7%	93.1%	29	196
Morgan	3,365	220	962	1,182	35 1%	89 2%	49	285
Nicholas	5,478	466	2,460	2,926	53 4%	94.4%	19	324
Ohio	9,068	474	3,078	3,552	39.2%	95.6%	14	480
Pendleton	1,632	133	433	566	34.7%	99.0%	2	19
Pleasants	1,593	105	467	572	35.9%	93.9%	24	88
Pocahontas	1,717	163	644	807	47.0%	87.7%	54	224
Preston	6,354	552	2,387	2,939	46 3%	90 2%	47	236
Pulnam	12,522	631	3,181	3,812	30 4%	93 2%	28	486
Raleigh	15,992	1,320	6,846	8,166	51.1%	91.7%	38	1,395
Randolph	5,971	471	2,470	2,941	49.3%	89.7%	48	653
Ritchie	2,234	140	778	918	41 1%	96.2%	9	81
Roane	3,266	306	1,661	1,967	60.2%	90.5%	44	336
Summers	2,322	216	1,187	1,403	60.4%	88.9%	50	315
Taylor	3,307	219	1,434	1,653	50.0%	90.9%	42	356
Tucker	1 354	176	457	633	46.8%	93.1%	30	103
	1,887	106	869	975	51.7%	94 9%	16	93

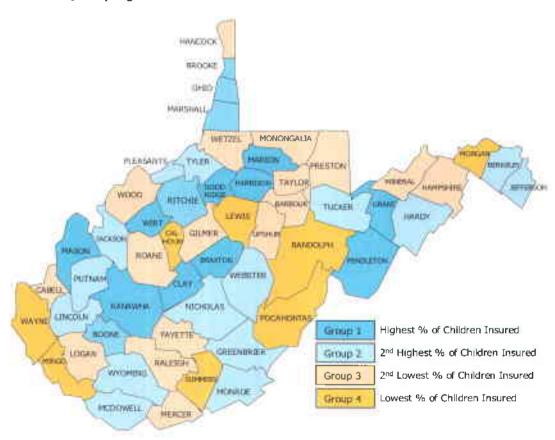
WV CHIP Enrollment Report

May 2007

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Wayne	9,176	565	4,182	4,747	51 7%	87 7%	55	1,034
Webster	2,020	205	1,075	1,280	63.4%	94.7%	18	103
Welzel	3,732	241	1,629	1,870	50.1%	92.5%	35	334
Wirt	1,268	129	561	690	54.4%	96 3%	8	46
Wood	19,063	1,089	7,639	8,728	45.8%	90.5%	45	1,624
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^{*}Based on data from "Health Insurance in West Virginia: The Children's Report" – a survey by The Institute for Health Policy Research at the West Virginia University Robert C. Byrd Science Center

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Prescribed Drugs	7,686,034 7 ,076,521	7,346,602 6,538,799	339,432 537,722	5% 8%
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Therapy	289,875	265,051	24,824	9%
Other Services	119,876	92,444	27,432	30%
Less: Collections*	(569,036)	(377,019)	(192,017)	51%
Total Claims	34,339,980	31,743,517	2,596,463	8%
General and Admin Expenses:				-
Salaries and Benefits	383,160	376,459	6,701	2%
Program Administration	1,615,692	1,556,201	59,491	4%
Eligibility	249,878	212,553	37,325	18%
Outreach & Health Promotion	15,159	87,139	(71,980)	-83%
Current	<u>96,045</u>	<u>95,911</u>	134	0%
Total Administrative	<u>2,359,934</u>	2,328,264	<u>31,670</u>	1%
Total Expenditures	<u>36,699,914</u>	<u>34,071,781</u>	2,628,134	8%
Excess of Hevenues				
Over (Under) Expenditures	124,744	42,450	82,294	194%
Fund Equity, Beginning	1,027,377	<u>974,341</u>	<u>53,036</u>	5%
Fund Equity, Ending	<u>1,152,121</u>	1,016,791	135,330	13%

^{*} Collections are primarily drug rebates and subrogation

PRELIMINARY FINANCIAL STATEMENTS

Unaudited - For Management Purposes Only - Unaudited

West Virginia Children's Health Insurance Program WVFIMS Fund 2154 For the Month Ended April 30, 2007 (Accrual Basis)

Investment Account

 Funds Invested
 \$5,534,796

 Interest Earned
 124,744

 Total
 \$5,659,540

Unaudited - For Management Purposes Only - Unaudited

West Virginia Children's Health Insurance Program
Budget to Actual Statement
State Fiscal Year 2007
For the Ten Months Ended April 30, 2007

	Budgeted for <u>Year</u>	Year to Date Budgeted Amt	Year to Date Actual Amt	Year to D <u>Varianc</u>		Monthly Budgeted Amt	<u> Apr-07</u>	<u>Mar-07</u>	Feb-07
Projected Cost	\$44,518,706	\$37,098,922	\$33,714,123	\$3,384,799	9%[\$3,709,892	\$3,515,383	\$4,698,153	\$3,290,414
Premlums	O	\$0	4,507	\$0	n/a	0	\$2,184	1,480	843
Medical Copays	560,000	\$466,667	0	466,667	-100%	46,667	0	0	0
Drug Copays	475,000	\$395,833	0	395,833	-100%	39,583	0	0	0
Subrogation & Rebates	300,000	<u>\$250,000</u>	<u>571,527</u>	<u>(321,527)</u>	129%	<u>25,000</u>	<u>42.641</u>	<u>67,252</u>	<u>37,180</u>
Net Benefit Cost	43,183,706	\$35,986,422	\$33,138,089	\$2,848,333	8%	3,598,642	3,470,558	4,629,421	3,252,391
Salaries & Benefits	\$600,000	\$500,000	\$383,160	\$116,840	23%	\$50,000	\$39,339	\$40,548	\$39,293
Program Administration	1,951,762	\$1,626,468	1,503,953	122,515	8%	162,647	177,960	168,054	158,904
Eligibility	324,000	\$270,000	222,907	47,093	17%	27,000	5,160	3,665	104,686
Outreach	100,000	\$83,333	15,160	68,173	82%	8,333	1,381	477	0
Current Expense	<u>169,480</u>	<u>\$141,233</u>	<u>84,851</u>	<u>56.382</u>	40%	<u>14.123</u>	<u>11.511</u>	<u>8,185</u>	<u>8,593</u>
·									
Total Admin Cost	\$3,145,242	\$2,621,035	\$2,210,031	\$411,004	16%	\$262,104	\$235,351	\$220,929	\$311,476
								m. 050 050	ma con nn:1
Lotai Program Cost	<u>\$46,328,948</u>	<u>\$38,607,457</u>	<u>\$35,348,120</u>	\$ <u>3,259,337</u>	8%	<u>\$3,860,746</u>	\$3,705,909	\$4,850,350	\$3,563,86 7
Federal Share 80.97%	37,526,448	\$31,272,040	\$28,633,392	2,638,648	8%	3,127,204	3,000,674	3,927,328	2,885,663
State Share 19.03%	<u>8,802,500</u>	<u>\$7,335,417</u>	<u>\$6,714,728</u>	<u>620.689</u>	8%	<u>733.542</u>	<u>705,234</u>	<u>923,022</u>	<u>678,204</u>
		[]	** *** ***	An	44 000 000	00 500 000
Total Program Cost	" <u>\$46.328.948</u>	<u>\$38,607,457</u>	<u>\$35.348.120</u>	<u>\$3,259,337</u>	8%	<u>\$3,860,746</u>	\$3,705,909	<u>\$4,850,350</u>	<u>\$3,563,867</u>

^{*} Positive percentages indicate favorable variances

Please note: Medical and Drug Co-pay figures are incomplete.

^{**} Budgeted Year Based on CCRC Actuary 6/30/2006 Report.

Department of Administration Leasing Report For The Period of May 1, 2007 through May 30, 2007

NEW CONTRACT OF LEASE

DEPARTMENT OF AGRICULTURE

AGR-047 New contract of Lease for 1 year containing 502 square feet of office space at \$11.95 per square foot, full service, with the Department of Human Resources, in the City of Hinton, Summers County.

WV MASSAGE THERAPY LICENSURE BOARD

BMT-004 New contract of lease for 2 year containing 553 square feet of office space at \$12.00 per square foot, full service with Kanawha Investment Corporation, in the City of Charleston, Kanawha County.

INSURANCE COMMISSION

INS-021 New contract of lease for 1 year containing 613 square feet of office space at \$13.00 per square foot, full service with Department of Administration, in the City of Huntington, Cabell County.

BUREAU OF EMPLOYMENT PROGRAMS

EMS-105 New contract of lease for 3 months with an option to renew containing 317 square feet of office space at \$14.00 per square foot, full service with Berkeley Business Park Associates, in the City of Martinsburg, Berkeley County.

DIVISION OF CORRECTIONS

COR-082 New contract of lease for 3 years containing 2,100 square feet of office space at \$5.43 per square foot, full service with F & R Properties, Inc, in the City of Keyser, Mineral County.

WV COMMISSION FOR NATIONAL AND COMMUNITY SERVICE

NCS-004 New contract of lease for 3 years containing 4,136 square feet of office space at \$7.89 per square foot, full service with Thomas F. Fielder, in the City of Charleston, Kanawha County.

DIVISION OF REHABILITATION SERVICES

DRS-093 New contract of lease for 10 years containing 7,000 square feet of office space at \$14.00 per square foot including trash and snow removal, for the first five years then \$15.00 per square foot for remainder of the term.

STRAIGHT RENEWALS

DEPARTMENT OF HEALTH AND HUMAN RESOURCES

HHR -152 Renewal for 1 year, containing 2,878 square feet of office space, at the same rate of \$6.50 per square foot, full service, between the County Commission of Jefferson County, in the City of Kearneysville.

DHS-156 Renewal for 1 year containing 19,255 square feet of office space at the same rate of \$13.00 per square foot, full services, with the Department of Administration, in the City of Weirton, Hancock County.

BUREAU OF EMPLOYMENT PROGRAMS

EMIS-099 Renewal for 1 year containing 5,342 square feet of office space at the same rate of \$13.00 per square foot, full service, with the Department of Administration, in the City of Weirton, Hancock County.

LOTTERY COMMISSION

LOT-009 Renewal for 1 year containing 3,346 square feet of office space at the same rate of \$13.00 per square foot, full services, with the Department of Administration, in the City of Weirton, Hancock County.

DIVISION OF VETERANS AFFAIRS

VET-030 Renewal for 3 years containing 3,821 square feet of office space at the same rate of \$10.40 per square foot, full service, with Standard Properties, LLC, in the City of Charleston, Kanawha County.

WV STATE POLICE

PSA-088 Renewal for 10 years containing 300 square feet of office space at the same rate of \$0.00 per square foot, full service, with Ceredo Volunteer Fire Department, in the City of Huntington, Wayne County.

DIVISION OF FORESTRY

FOR-040 Renewal for 1 year containing 168 square feet of office space at the same rate of \$8.93 per square foot, full service, excluding janitorial and snow removal, with Neal W. and Helen G. Kellison, in the City of Marlinton, Pocahontas County.

FOR-066 Renewal for 2 years containing 364 square feet of office space at the same rate of \$6.59 per square foot, full service, excluding janitorial, with Centaur Arts and Framing, in the City of Harrisville, Ritchie County.

DEPARTMENT OF ENVIRONMENTAL PROTECTION

DEP-161 Renewal for 5 years consisting of a Tower Monitoring Site located on the roof of Building #20 (Guthrie Center) in the City of Charleston, Kanawha County.

FAIRMONT STATE COLLEGE

FSC-023 Renewal for 6 months containing 200 square feet of office space at the same rate of \$7.80 per square foot, full service, with K & K Enterprises, dba K & K Storage, in the City of Fairmont, Marion County.

RENEWAL/RENT INCREASES

WY DIVISION OF AGRICULTURE

AGR-043 Renewal for 5 years consisting 66,722 square feet of warehouse space with a monthly rental increase from \$22,240.67 per month to \$23,630.71 per month with Mary F. Love and James F. Love III, in the City of Charleston Kanawha County.

FAIRMONT STATE COLLEGE

FSC-024 Renewal for 1 year consisting 1,400 square feet of office space with a monthly rental increase from \$500.50 per month to \$550.00 per month, no utility services, with Teresa Puccio, in the City of Fairmont, Marion County.

RENEWAL AND ADJUST SQUARE FEET & INCREASING RENT

WV Geological and Economic Survey

GES-001 Renewal for 5 years with a square footage adjustment from 1,099 square feet to 1,188 square feet, and an increase in rent from \$1,262.25 per month to \$1,386.00 per month, full service, excluding janitorial with Morris Square Associates, LLC, in the City of Charleston, Kanawha County.

Joint Committee on Government and Finance

June 2007

Department of Health and Human Resources

MEDICAID REPORT

WV DEPARTMENT OF HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES SFY 2007 MEDICAID CASH REPORT As of May 25, 2007

9 Months Actua	18
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3 Months Remaining

MONTH OF MARCH 2007	ACTUALS	ACTUALS	PROJECTED	TOTAL
	3/1/07 Thru	Year-To-Date Thru	4/1/2007 Thru	SFY2007
REVENUE SOURCES	3/31/07	3/31/07	08/30/07	
Beg. Bal. 7/01/06 (5084/1020 prior mth)	4,714,645	\$22,969,601		\$22,969,601
MATCHING FUNDS				1
Medical Services	34,867,140	269,251,810	125,153,877	394,405,687
Rural Hospitals Under 150 Beds (0403/940)	216,333	1,947,000	649,000	2,596,000
Tertiary Funding (0403/547)	258,833	2,517,000	839,000	3,356,000
Lottery Waiver (Less 450,000) (5405/539)	0	12,550,000	0	12,550,000
Lottery Transfer (5405/871)	0	10,300,000	0	10,300,000
Trust Fund Appropriation (5185/189)	0	0	30,556,594	30,556,594
Provider Tax (5090/189)	11,800,000	116,759,353	38,840,647	155,600,000
Certified Match	1,952,380	16,367,287	6,513,723	22,881,010
Reimbursables (1)	356,222	3,149,903		5,099,481
CMS - 64 Adjustments		(2,168,464)	2,168,464	0
TOTAL MATCHING FUNDS	\$54,165,552	\$453,643,490	\$204,721,305	\$660,314,373
FEDERAL FUNDS	149,620,363	1,156,968,023	\$488,702,894	\$1,645,670,917
TOTAL REVENUE SOURCES	\$203,785,915	\$1,610,611,513	\$695,373,777	\$2,305,985,290
TOTAL EXPENDITURES:				
Provider Payments	\$191,274,667	\$1,601,697,962	\$616,862,267	\$2,218,560,229
TOTAL	\$12,511,249	\$8,913,551		\$87,425,061

Note: Proj. FMAP (06' - 72,99% applicable July - Sept. 2006) (07' - 72.82% applicable Oct. 2006 - June 2007) (1) This amount will revert to State Only if not reimbursed.

WY DEPARTMENT OF HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES SFY 2007 EXPENDITURES BY PROVIDER TYPE As of May 25, 2007

MONTH OF MARCH 2007	ACTUALS	ESTIMATED	ESTIMATED	ACTUALS	ACTUALS	PROJECTED
- · · · · · · · · · · · · · · · · · · ·		Estimated	Estimated	Сителі	Year To-Date	04/01/07
DESCRIPTION	SFY 2006	SFY2007	Current Month	Mondin	Thru	Thru
			<u>Mar-07</u>	Mar-07	3/31/07	06/30/07
EXPENDITURES:					}	
Impatient Hospital Services	223,854,909	248,693,098	19,122,546	23,613,932	166,389,371	82,223,725
Impatient Hospital Services - DSH Adjustment Payments	53,916,150	53,935,110	- 10,122,010	8.342.827	40,652,822	13,282,288
Mental Health Facilities	38.085.565	42,090,761	3,237,761	3,624,431	30,060,886	12,039,876
Mental Health Facilities - DSH Adjustment Payments	20,354,226	18,887,046	-	31,407	14,110,061	4,776,994
Nursing Facility Services	402,803,863	416,788,280	34,732,190	32,403,182	308,208,866	108,577,436
Intermediate Care Facilities - Public Providers	160	•		-	•	-
Intermediate Care Facilities - Private Providers	53,642,336	59,638,870	4,981,572	4,467,580	44,035,471	15,503,399
Physicians Services	126,950,184	117,845,021	9,072,694	10,062,425	95,846,839	22,299,382
Quipatient Hospital Services	93,921,521	103,013,508	7,924,118	8.775.847	72,334,839	30,678,667
Prescribed Drugs	378,095,030	310,458,196	23,881,400	28,948,285	226,219,381	84,238,814
Drug Rebate Offset - National Agreement	(112,878,531)	(116,033,400)	(3,626,044)	(5,352,723)	(67,434,240)	(48,599,160)
Drug Rebate Offset - State Sidebar Agreement	(29,528,976)	(29,278,840)	(73,192)	(12,472)	(21,154,250)	(8,122,390)
Dentizi Services	38,320,543	40,972,725	3,161,748	2,969,088	27.515.382	13,457,363
Other Practitioners Services	20,069,824	21,174,205	1,828,785	1,650,812	16.304,767	5,869,448
Clinic Services	48,760,646	37,478,034	2,882,926	4,069,426	29,357,167	8,120,877
Lab & Radiological Services	13,045,112	13,892,145	1,088,627	694,488	6,853,831	8,038,314
Home Health Services	28,490,072	27,898,140	2,145,857	2,761,452	20,589,711	7,306,429
Hysterectomies/Sterilizations	682,237	693,464	53,343	48, 222	456,877	236,587
Pregnancy Terminations		39.092	3,007	-		39,092
EPSOT Services	3,450,995	10,881,433	837,033	171.580	1,883,890	8,997,543
Rural Health Clinic Services	7,652,987	7,621,694	586,284	555,278	4,813,414	2,708,280
Medicare Health Insurance Payments - Part A Premiums	17,903,197	17,191,600	1,432,633	1,421,479	12,615,851	4,675,749
Medicare Health Insurance Payments - Part B Premiums	61,684,326	64,000,000	5,333,333	6,348,223	48,415,293	17,584,707
120% - 134% Of Powerty	2,881,904	-	-	274,880	2,592,507	(2,692,507)
Medicaid Health Insurance Payments: Managed Care Organizations (MCO)	213,950,846	241,784,020	20,148,688	17,626,088	167,887,188	73,896,834
Medicaid Health Insurance Payments: Group Health Plan Payments	289,548	348,380	28,865	55,310	275,430	70,960
Home & Community-Based Services (MR/DD)	185,607,767	207,361,030	16,950,848	16,999,322	146,800,432	60,560,598
Home & Community-Based Services (Aged/Disabled)	60,658,000	59,874,724	4,605,748	4,417,950	41,404,106	18,470,618
Community Supported Living Services			-	-	38	(38)
Personal Care Services	27,037,173	38,654,021	2,811,848	2,859,658	27,291,091	9,282,930
Targeted Case Management Services	9,026,219	9,285,672	714,282	678,776	5,998,691	3,288,981
Primary Care Case Management Services	699,866	796,780	66,398	61,953	563,688	243,112
Hospice Benefits	6,545,960	9,357,560	719,812	699,322	6,898,845	2,460,715
Federally Qualified Health Center	17,133,736	18,681,010	1,283,155	1,428,497	10,882,233	5,798,777
Other Care Services	117,082,516	132,238,168	10,172,013	10,783,037	95,777,577	36,458,589
Less: Recoupments) 0	•	•	(198,884)	(2,168,212)	2,168,212
NET EXPENDITURES:	2,124,059,808	2,182,055,749	174,858,246	188,187,874	1,578,038,556	604,019,193

WY DEPARTMENT OF HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 8FY 2007 EXPENDITURES BY PROVIDER TYPE As of May 25, 2007

MONTH OF MARCH 2007	ACTUALS	ESTIMATED	ESTIMATED	ACTUALS	ACTUALS	PROJECTED
		Estimated	Estimated	Current	Year To-Date	04/01/07
DESCRIPTION	SFY 2006	SFY2007	Current Month	Month	Thru	Thru
			Mar-07	Mer-07	3/31/07	06/30/07
Collections: Third Party Liability (line 9A on CMS-64) Collections: Probate (line 9B on CMS-64) Collections: Identified through Fraud & Abuse Effort (line 9C on CMS-64) Collections: Other (line 9D on CMS-64)	(6,144,263) (117,505) (248) (7,731,974)			•	(2,379,318) (24,888) (389,328) (766,824)	2,379,318 24,888 389,328 766,824
Plus: Medicaid Port D Expenditures	8,942,213	29,504,480	2,458,707	2,483,833	21,181,601	8,322,879
Plus: State Only Medicaid Expenditures	4,507.985	3,500,000	269,231	380,041	3,336,958	163,042
TOTAL MEDICAID EXPENDITURES	\$2,123,516,039	\$2,215,060,229	\$177,586,184	\$190, 99 1,748	\$1,598,994,767	\$818,085,472
Plus: Reimbursables (1)	4,448,208	3,500.000	269,231	282,919	2,703,205	796,795
TOTAL EXPENDITURES	\$2,127,982,245	\$2,218,560,229	\$177,855,415	\$191,274.667	\$1,601,697,982	\$816,862,287

⁽¹⁾ This amount will revert to State Only if not reimbursed

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BUREAU FOR MEDICAL SERVICES Medicald Approved Claims Report As of May 25, 2007

			SFY	2006	SFY 2007 TENTATIVE			
REF#	CMS 64 Category Of Service	JUL-SEP 2005	OCT-DEC 2005	JAN-MAR 2006	APR-JUN 2006	JUL-SEP 2006	OCT-DEC 2006	JAN-MAR 2007
1A	Inpatient Hospital Services	50,660,147	44,239,858	46,342,049	88,465,831	59.004.884	45,420,674	66,749,428
1B	Inpatient Hospital Services - DSH	13 494 023	13 466,678	13,470,677	13 477 601	13,487,307	13,398,746	13,766,769
2A	Mental Health Facilities	6,454,836	6,912,113	13,562,413	12,299,762	9,611,035	9,654,320	10,474,752
2B	Mental Health Facilities - DSH	4,684,394	6,274,180	4,694,816	4 700,836	4,707,635	4 689 840	4,712,576
3	Nursing Facility Services	98 020,447	98,903,504	100,422,510	96,189,829	97,869,357	102,858,858	101,811,138
4B	Intermediate Care Facilities - Private Providers	12,722,547	13,147,300	14,288,039	13,501,343	14,866,833	14,906,183	14,332,092
5	Physicians Services	33,583,781	30,844,222	32,178,805	35 100 502	22,184,181	27,917,656	31,403,555
6	Outpatient Hospital Services	24,086,719	23 085 591	23 092,102	28,178,798	24,854,201	24,036,809	26,181,656
7	Prescribed Drugs	109.529.189	119,401,991	77,862,448	72.148.648	73.996.679	79,099,520	82,648,402
7	Part D Premium - State Only	0	0	6,871,393	6.832.317	7.036.703	6,973,263	9,606,390
7A1	Drug Rebate Offset - National	(26,479,767)	(34,649,872)	(28 295,179)	(23,449,375)	(31,036,177)	(23,748,198)	(23.588,007)
7A2	Drug Rebate Offset - State	(6.074.088)	(6,473,002)	(6.236 973)	(10 749.249)	(6,167,738)	(7,473,084)	(2 805 535)
	Total Rebates	(32.553.855)	(41,122,874)	(34,532,152)	(34.198 624	(37.203.915)	(31,221,282)	(26,393,542)
	NET DRUG COST	76 975 334	78 279,117	50,201,689	44,782,341	43 829.467	54,851,501	65,861,250
8	Dental Services	9,309,731	10,225,378	9,538,773	10,675,862	9 747 640	10 030,108	8,754,914
9	Other Practitioners Services	5,745,239	5,127,471	5 390 387	6,262,904	5,011,125	4 708 250	5,290,755
10	Clinic Services	9,029,258	9,030,351	11,577,234	7,711,808	7,646,097	8,289,028	9,205,518
11	Lab & Radiological Services	3,086,682	3,614,604	3 834 362	2,175,779	4,266,918	4 334 075	4,531,502
12	Home Health Services	6,908,765	7,280,231	7,528,844	7,418,116	6,685,878	6,548,543	8,638,345
13	Hysterectomies/Sterilizations	165,370	161_149	207,520	159,288	156,636	161.379	132,905
14	Pregnancy Termination	96,251	70,984	90,137	90,528	64,402	34,849	84,150
15	EPSDT Services	1,151,400	882,248	691,405	4,229,031	6,283,348	5.972.258	507,684
16	Rural Health Clinic Services	2,005,835	1,747,828	2 179,575	2,099,858	1,690,077	1,651,481	1,790,771
17A	Medicare - Part A Premiums	3,620,829	6,261,928	4,152,571	4,108,236	2,784,018	4 185 821	4,245,061
17B	Medicare - Part B Premiums	14,211,799	14,560,223	15 692 417	16,143,572	10,649,879	16,255,310	17,021,684
18A	Managed Care Organizations	42,730,774	51,288,669	60,115,171	59,817,308	60 065 446	68,259,290	53,713,498
18C	Group Health Plan Payments	58 739	96,095	58,501	76,212	85 876	0	159,219
19	Home & Community-Based Services (MR/DD)	46,486,558	45,677,907	45,757,241	47,796,799	46,908,117	47,174,803	53,073,494
20	Home & Community-Based Services (Aged/Disabled)	15,894,777	15,026,274	15,203,425	14,647,406	13,700,224	13,512,164	14,314,401
23	Personal Care Services	5,982,676	5,952,653	6 417 084	8 491 635	8,931,805	8,741,934	8,865,553
24	Targeted Case Management	2,210,932	2,398,029	2,284,222	2 593 955	2,125,578	2,022,280	1,906,926
25	Primary Care Case Management	140 880	122,019	140,814	192,360	187 035	234.915	186,249
26	Hospice Benefits	1,148,368	1,818,491	1,720,716	2,074,858	2,525,227	2 043.527	2 869,003

BUREAU FOR MEDICAL SERVICES Medicaid Approved Claims Report As of May 25, 2007

	<u></u>	SFY 2006				SFY 2007 TENTATIVE		
REF	CMS 64 Category Of Service	JUL-SEP 2005	OCT-DEC 2005	JAN-MAR 2006	APR-JUN 2006	JUL-SEP 2006	OCT-DEC 2006	JAN-MAR 2007
28	Federally Qualified Health Center	4,022,834	4,348,762	5 ,572,223	3,907,444	3,423,360	3,928,153	4,478,179
29	Other Care Services	26,938,503	25,585,317	26,768,853	32,342,339	28,700,010	30,004,526	27,072,764
	Unclassified	9,229	1,855	6,837	10,477	211,611	53	(20)
1//	TOTALS	521,637,657	526,431,029	523,181,412	569,722,618	512,265,207	535,827,334	562,135,771

This report's data is prepared based on claims received and approved for payment (Modified Accural basis of Accounting). Therefore, the data presented in this report will not match the CMS-64 Quarterly Reports which are prepared on a cash basis.

The following report approximates the Medicare Part-D Prescription Drug Expenditures related to WV's Part-D Premium (clawback) payments.

7 Medicald Prescribed Drugs	109,529,189	119,401,991	77,862,448	72,148,648	73,996,679	79,099,520	82,648,402
7.2 Medicare Part D (Estimated)	0	0	28,266,867	28,108,119	28,946,904	28,506,512	40,013,131
/// Estimated Medicald & Medicare	109,529,189	119,401,991	108,129,315	100,254,767	102,943,583	107,608,032	122,681,533
Prescribed Drug Payments							

PUBLIC COMMENTS FOR PROPOSED ADVERTISING REPORTING RULE

Pharmaceutical Cost Management Council
June 5, 2007



May 24, 2007

RECEIVED

Ms. Shana Kay Phares
Office of the Pharmaceutical Advocate
Building 1, Room M-146
State Capitol Complex
Charleston, WV 25305

MAY 2 4 2007

Pharmaceutical Advocate Office

Re: Proposed Emergency Rule Implementing the Pharmaceutical Availability and Affordability Act of 2004, W. Va. Code § 5A-3C-1 et seq.

Dear Ms. Phares:

The Pharmaceutical Research and Manufacturers of America (PhRMA) appreciates the opportunity to provide comments on the regulation proposed on April 24, 2007, by the West Virginia Pharmaceutical Cost Management Council to implement the Pharmaceutical Availability and Affordability Act of 2004, codified at W. Va. Code § 5A-3C-1 et seq. PhRMA represents the country's leading pharmaceutical research and biotechnology companies, which are devoted to inventing medicines that allow patients to live longer, healthier, and more productive lives. PhRMA companies are leading the way in the search for new cures. PhRMA members invested an estimated \$43 billion in 2006 in discovering and developing new medicines. Industry-wide research and investment reached a record \$55.2 billion in 2006. PhRMA companies are the source of nearly all new drugs discovered and marketed throughout the world.

PhRMA shares the Council's objective of making prescription drugs more accessible to residents of the state of West Virginia and has worked closely with the Council since its inception. As you know, during the past years, PhRMA has been part of a multi-faceted, collaborative effort in West Virginia, working with state agencies, private sector interests, patient advocate groups, and others to help the state's residents improve affordability and access to prescription drugs.

The Pharmaceutical Availability and Affordability Act requires pharmaceutical manufacturers and labelers to disclose information regarding the costs of marketing and advertising prescription drugs in West Virginia. Effective marketing of medicines to health care professionals and to consumers ensures that patients have access to the products they need and that the products are used correctly for maximum patient benefit. In 2002, PhRMA adopted its *Code on Interactions with Healthcare Professionals* (the PhRMA Code). This document is based on the firm belief that a health care professional's care of patients should be based, and should be perceived as being based, solely on each patient's

Pharmaceutical Research and Manufacturers of America

Ms. Shana Kay Phares Proposed Emergency Rule – Pharmaceutical Availability and Affordability Act of 2004 May 24, 2007 page 2

medical needs and the health care professional's medical knowledge and experience. In 2005, PhRMA adopted its Guiding Principles on Direct to Consumer Advertisements About Prescription Medicines (the DTC Principles). These principles are based on the premise that direct-to-consumer (DTC) advertising should educate consumers and encourage informed conversation about health, disease, and treatment options between patients and their health care providers. Together the PhRMA Code and DTC Principles ensure that advertising and marketing further the public health by encouraging appropriate use of prescription drugs.

PhRMA appreciates the Council's efforts to revise the proposed regulation and believes that the current proposal is far more consistent with the Pharmaceutical Availability and Affordability Act than the former proposed rule, issued June 28, 2006. We do, however, have a few concerns regarding the proposed requirements. Those concerns, as well as potential revisions to the proposed regulation that would alleviate our concerns, are described in the following comments.

I. Payments to Physicians

The proposed rule requires companies to report the number of West Virginia prescribers to whom they provided gifts, grants, or payments totaling \$100 or more for the purpose of advertising. Limiting the scope of reportable payments to those made for the purpose of advertising is consistent with the statute, which requires companies to report "expenses associated with advertising and direct promotion of prescription drugs." The proposed rule therefore properly excludes payments to health care providers for bona fide consulting services and related expenses.

PhRMA recommends that individual payments or gifts to physicians valued at less than \$25 be excluded from the calculation of total payments to physicians in a given year. This exclusion is necessary because companies do not generally keep records regarding the distribution of items of de minimus value, such as pens, mugs, and other "reminder" items, intended to "remind" health care professionals of the name of a new medicine. Moreover, the purpose of the reporting requirement is to enable the state to "determine the scope of prescription drug advertising costs and their effect on the cost, utilization, and delivery of health care services." Inexpensive reminder items are unlikely to affect the cost, utilization, and delivery of health care services and are presumably not the type of item that the legislature intended to be reported. Other states, such as Maine, Vermont, and the District of Columbia, exempt items valued at less than \$25 from their reporting requirements. Similarly, West Virginia's Ethics Law exempts items of "nominal value" from its prohibition on gifts to state employees.

Ms. Shana Kay Phares . Proposed Emergency Rule -- Pharmaceutical Availability and Affordability Act of 2004 May 24, 2007 page 3

In addition, the current proposed rule also lowers the minimum aggregate amount required to be reported from \$1,000, the amount in the former proposed rule, to \$100. PhRMA suggests that \$1,000 aggregate (annual) minimum be reinstated. In either case, in calculating the aggregate amount per physician, individual items valued at less than \$25 should be excluded, for the reasons discussed above.

Proposed Revision

Section 306-1-3.4 should be revised to read:

1. List, in the corresponding table in Appendix A, the total number of West Virginia prescribers to whom you provided, directly or indirectly, gifts, grants, or payments of any kind in the stated amounts for the purpose of advertising prescription drugs. Do not include items exempted in W.Va. Code §5A-3C-13(c) or individual gifts or payments valued at less than \$25.

Appendix A should be revised to read:

List below the total number of West Virginia prescribers to whom you provided directly or indirectly, gifts, grants, or payments of any kind in the stated amounts for the purpose of advertising prescription drugs. Do not include items exempted in W. Va. Code § 5A-3C-13(c) or individual gifts or payments valued at less than \$25.

Annual Aggregate Amount of fees, food entertainment, recreational activities, travel expenses, gifts, grants or other payments	Total Number of Prescribers	
\$1,000 - \$2,500		
\$2,501 - \$5,000		_
\$5,001 - \$7.500		-

Ms. Shana Kay Phares Proposed Emergency Rule – Pharmaceutical Availability and Affordability Act of 2004 May 24, 2007 page 4

\$7,501 - \$10,000	
\$10,001 or over	

II. Expenses Associated with National or Regional DTC Advertising

The proposed rule requires companies to report all advertising and direct promotion to residents of West Virginia. For national or regional DTC expenses, companies should report West Virginia's share by multiplying the total amount spent on advertising by West Virginia's most recent population as reported by the U.S. Census Bureau divided by the total population targeted by the DTC advertising.

As the proposed rule contemplates, many DTC advertising campaigns sponsored by pharmaceutical companies are national or regional in nature — neither tailored to West Virginia nor intended specifically to persuade West Virginia residents. These campaigns, although they may reach West Virginia residents, should not be reported under the regulation implementing the Pharmaceutical Availability and Affordability Act.

Neither Vermont nor California requires companies to report national or regional advertising costs. Maine specifically exempts advertising and promotion purchased for a national or regional market, even when the campaign includes advertising within the state. The Council should adopt the same approach as Maine and exempt all national and regional advertising. DTC advertising campaigns targeted solely to West Virginia consumers or health care providers would of course be reportable under the rule.

Proposed Revision

Section 206-1-3.3 should be revised to read:

The Company should report all advertising and direct promotion to residents of this state. Expenses associated with DTC advertising purchased for a national or regional market that includes advertising in West Virginia are not subject to these reporting requirements.

III. Payments to Patient Support Groups or Advocacy Groups

The proposed regulation requires companies to report the names of any diseasespecific patient support or advocacy group to which they made gifts, grants, or payments

totaling \$10,000 or more for the purpose of advertising prescription drugs and the total amount contributed to each named support group. Limiting the scope of reportable payments to those made for the purpose of advertising is consistent with the statute, which requires companies to report "expenses associated with advertising and direct promotion of prescription drugs." The proposed rule therefore properly excludes expenses associated with patient education materials and disease management materials, as well as other educational and informational programs or materials.

Under the current proposed rule, however, a payment to a national advocacy organization would be reportable even if the payment were made to the organization's headquarters or to a subsidiary or chapter located in another state. But companies have no way of tracking whether these payments are in turn used by the recipient for advertising activities in West Virginia. The statute, moreover, requires reporting of advertising expenses only "as they pertain to residents of this state." As a result, the Council should limit the rule to patient support groups or advocacy groups actually located in West Virginia. It should also expressly exclude payments made to national or regional groups unless the payment is made to a location in West Virginia.

Proposed Revision

Section 206-1-3.4 should be revised to read:

3. List, in the corresponding table in Appendix A, the name of any disease-specific patient support or advocacy group located in West Virginia to which you made, directly or indirectly, gifts, grants, or payments of any kind totaling \$10,000 or more for the purpose of advertising prescription drugs and the total amount contributed to each named support group. Payments made to national or regional patient support groups or advocacy groups are not subject to these reporting requirements unless the payment is made to a subsidiary or chapter located in West Virginia.

IV. Payments to Pharmacies

The proposed regulation requires companies to report the name of any pharmacy licensed in West Virginia to which they made gifts, grants, or payments totaling \$10,000 or more for the purpose of advertising prescription drugs. Companies must also report the type of advertising used and the total amount contributed to each named pharmacy. Limiting the scope of reportable payments to those made for the purpose of advertising is

consistent with the statute, which requires companies to report "expenses associated with advertising and direct promotion of prescription drugs."

Under the current proposed rule, however, a payment to a national chain pharmacy that is licensed in West Virginia would be reportable even if the payment went to the chain's corporate headquarters or to a branch or outlet of the chain in another state. The Council should therefore limit the rule to pharmacies located in West Virginia. Moreover, it should expressly exclude payments made to national or regional chain pharmacies unless the payment is made to a branch or outlet of the chain located in West Virginia.

Proposed Revision

Section 206-1-3.4 should be revised to read:

4. List, in the corresponding table in Appendix A, the name of any pharmacy licensed and located in West Virginia to which you made, directly or indirectly, gifts, grants, or payments of any kind totaling \$10,000 or more, for the purpose of advertising prescription drugs, the type of advertising used, and the total amount contributed to each named pharmacy. Payments made to national or regional chain pharmacies are not subject to these reporting requirements unless the payment is made to a branch or outlet of the chain located in West Virginia.

V. Protection of Confidential Information and Trade Secrets

The current proposed rule does not explicitly state that the information submitted by companies in their annual reports will be a public record, as the former proposed rule did. The statute, however, expressly provides that "information submitted to the council pursuant to this section is confidential and is not a public record." PhRMA suggests that the Council amend the proposed regulation to specifically include language that reflects the statutory provision. The regulation implementing Maine's marketing disclosure statute includes this type of provision, as does the proposed regulation implementing the District of Columbia's marketing disclosure statute. We also request that the Council establish privacy and security standards, as well as penalties, to protect against the unauthorized disclosure of confidential information.

In addition, the statute provides that data complied in aggregate form by the Council are a public record as long as they do not reveal "trade information that is protected by state or federal law." The Council should therefore amend the proposed rule

to provide explicit protection for information that a company identifies as a "trade secret," as that term is used in the Federal Trade Secrets Act, 18 U.S.C. § 1905. This law generally protects anything that would be a trade secret or confidential commercial information under the Federal Freedom of Information Act. See Department of Justice, Freedom of Information Act Guide, Exemption 4 (May 2004).

Proposed Revision

Section 206-1-2 should be revised to include a definition of "trade secret" that reads:

2.9 "Trade secret" means any information deemed to be a trade secret under 18 U.S.C. § 1905.

The proposed rule should be revised to add a new § 206-1-4 that reads:

- § 206-1-4. Confidentiality and Public Information
- 4.1 Notwithstanding any provision of law to the contrary, information submitted to the Council pursuant to this rule shall be confidential and not a public record.
- 4.2 A manufacturer or labeler subject to reporting required by W. Va. Code § 5A-3C-13 may, as part of its annual report, identify any information that it claims as a trade secret and, if so identified, shall certify in writing the reasons for its claim that the information is a trade secret.
- 4.3 Data compiled in aggregate form by the Council are a public record as long as they do not reveal trade information that is protected by state or federal law.

VI. Reporting for 2007

The proposed regulation requires reporting to begin in March of 2008 for the reporting period from July 1, 2007, to December 31, 2007. The legislative rulemaking process will not, however, be completed by July 1, 2007, and realistically may not be completed until 2008. Because the requirements of the final rule may differ from those of the proposed rule, companies should not be required to begin collecting information until the Legislature has approved the final rule.

Once the final legislative rule is available, companies should be given an adequate period of time to establish internal procedures and reporting systems that will ensure that the information required by the Council is captured accurately. Establishing these procedures may require, for example, software purchases, training of personnel, dry runs, system reconfiguration, and the like.

PhRMA therefore requests that the Council specify in the final rule that the initial reporting period will begin in the first quarter beginning 90 days after the effective date of the final rule and continue until the end of the current calendar year. Subsequent reporting periods would cover the entire calendar year, as provided in the proposed rule. This delayed implementation would be consistent with the approach taken in Vermont. The Vermont marketing disclosure law was enacted in 2001 but provided that initial disclosures would not be due until 2004, covering the 12-month period ending June 30, 2003.

Proposed Revision

Section 206-1-3.1 should be revised to read:

After the effective date of these regulations, all pharmaceutical manufacturers and/or labelers whose prescription drugs are dispensed in West Virginia or to a West Virginia resident via mail must complete and file with the Council, on or before April 1, Appendix A listing the advertising expenses incurred by the manufacturer or labeler in the preceding calendar year. For purposes of the annual report due April 1, 2008[9] only, manufacturers and labelers shall report the required information only for the period from the quarter beginning 90 days after the effective date of this rule through December 31, 2007[8].

VII. Electronic Reporting

The former proposed rule included a provision that the Council could adopt procedures to permit electronic filing. This provision is not included in the current proposed rule. We assume that this omission was simply an oversight. Submission of the required information in paper format may be burdensome to both the reporting companies and the Council in view of the volume of information to be reported. As a result, we recommend that the Council follow the examples of Maine and Vermont and allow companies to report expenses in an electronic submission via spreadsheet or database, with the required paper certification to be filed in conjunction with their electronic submission.

Proposed Revision

Section 206-1-3.5 should be revised to read:

The manufacturer or labeler shall file signed originals of completed Appendix A forms with the Council, at the Office of the Pharmaceutical Advocate, Main Building 1, Room M-146, Capitol Complex, Charleston, West Virginia 25305. The Council will adopt procedures to permit electronic filing.

PhRMA appreciates the opportunity to provide these comments, and looks forward to continuing to work with the Council on a variety of efforts to improve access to needed prescription medicines for residents of West Virginia.

Sincerely,

Marjorie E. Powell











RECEIVED

May 24, 2007

MAY 2 5 2007 -

Ms. Shana Phares, Acting Pharmaceutical Advocate Governor's Office Building 1, Room M-146 1900 Kanawha Boulevard, East Charleston, WV 25305

Pharmaceutical Advocate Office *

Dear Ms. Phares:

This public comment is submitted on behalf of AARP, the West Virginia AFL-CIO, West Virginia Education Association, the West Virginia Council of Churches, the United Steel Workers District 8, Communications Workers of America, AFSCME Council 77, West Virginians for Affordable Health Care, Association of Retired School Employees, West Virginia Citizen Action Group, AFT-WV and the Consumer Protection Alliance. We make the following public comments on the West Virginia Pharmaceutical Cost Management Council's (hereafter Council) proposed legislative rule regarding pharmaceutical advertising expense reporting.

First, we support the reduction from \$1,000 to \$100 for the threshold for reporting the number of prescribers receiving gifts, grants and payments from drug manufacturers. This is an important addition to last year's aborted advertising expense reporting rule.

However, the rule does not require the total amount spent by manufacturers on gifts, grants and payments to prescribers to be reported. For example, the proposed emergency rule requires drug manufacturers to report the number of prescribers who receive more than \$10,001 during the six month period between July 1 and December 31, 2007. These amounts could be \$10,002 or \$5 million. It is impossible to determine under the proposed emergency rule. This is a serious defect and should be remedied by the Council by requiring drug manufacturers to report the total expenses spent on gifts, grants or payment to all prescribers during the reporting period. This critical information is needed to negotiate discount prices for prescription drugs.















Additionally, the disclosure of pharmaceutical drug detailing is critical in order to ascertain the true cost of prescription drugs and should be part of the Council's advertising expense reporting rule. A recent Kaiser Family Foundation report, *Prescription Drug Trends*¹¹, found that manufacturers spend 70 percent more on advertising to physicians (i.e., detailing) than they did on advertising to consumers: \$7.2 billion versus \$4.2 billion.

If the Council's advertising expense regulation only requires reporting on direct to consumer advertising, the information received will paint an unrealistic picture of the manufacturer's advertising expenses and will deny the Council valuable information needed for future negotiations with the drug manufacturers' for discounts that preclude both detailing expenses and direct to consumer advertising.

We agree with the legal opinion by the West Virginia Attorney General that the Council has the authority under the statue to require the disclosure of pharmaceutical drug detailing within legislative rules. The Attorney General's opinion dispels the assertion that the words "shall include" found in §5A-3C-13(b) should be read to mean "shall only include."

Additionally, §5A-3C-13(d) makes clear that the Council is authorized to establish the "form and manner of reporting required as the **council determines necessary to effectuate the purpose of this article**" (emphasis added). One of the specified purposes of the article is: "That there is an increasing need for citizens of West Virginia to have **affordable** access to prescription drugs" (emphasis added). The question arises whether the Council can meet the purposes of the act without requiring reporting on detailing expenses? In our opinion the answer to this question is no. The Council can only accomplish the purposes of the act by requiring full and complete reporting, including detailing expenses.

Accordingly, we recommend that Title 206, Legislative Rule, West Virginia Pharmaceutical Cost Management Council, Series 1, Prescription Drug Advertising Expense Reporting include: information regarding pharmaceutical drug detailing in West Virginia; the total number of drug detailers working in the West Virginia market; the salary range and aggregate salary of all detailers; the minimum requirements for hire; and the aggregate expenditures associated with the pharmaceutical drug detailers.

^[1] Kalser Family Foundation, *Prescription Drug Trends* (June 2008), at http://www.kff.org/rxdrugs/upload/3057-05.pdf (last accessed May 7, 2007).

If you believe that the addition of detailing expenses would prevent the proposed emergency rule from being adopted, then we recommend that you adopt a separate rule that requires the detailing information outlined above. Under this arrangement, if the detailing rule is rejected by either the Legislature or the Courts it will have no impact on the emergency rule currently filed with the Secretary of State's Office.

It is imperative that West Virginia contain the cost of prescription drugs in order to protect all of our citizens' access to affordable life saving medications. The adoption of this rule and the inclusion of "pharmaceutical drug detailing" is vital to West Virginia being able to fulfill the intention of the ground breaking legislation passed in 2004. These organizations that represent at least 400,000 West Virginians urge you to act quickly on this important matter.

Sincerely yours,

Frank Bellinetti

State Director

AARP

Dennis Sparks

Executive Director

WV Council of Churches

Charles Delauder

President

WV Education Association

Ed Hartman

Executive Director

AFSCME Council 77

Elaine Harris

International Representative

Elaine a. Harris

Communications Workers of America

mlie Delauder

Randall Moore

Legislative Coordinator

andall I. Moore

United Steel Workers,

District 8

William 6. Mila

William Milam Executive Director

Assoc. of Retired School Employees

Gary Zuckett
Executive Director
West Virginia Citizens Action Group

Judy Hale

Tem 15 mg

Perry Bryant
Executive Director
WV for Affordable Health Care

Judy Hale President

AFT- West Virginia

Kannieh M Feeder

Kenneth Perdue President West Virginia AFL-CIO

Allan Karlin President

Consumer Protection Alliance

accon M. Kaile

cc: The Honorable Joe Manchin, III, Governor, The Honorable Betty Ireland, Secretary of State, Members of the West Virginia Pharmaceutical Cost Management Council



RECEIVED

MAY 2 5 2007

Pharmaceutical Advocate Office

May 25, 2007

The Honorable Shana Kay Phares,
Pharmaceutical Advocate & Chair,
West Virginia Pharmaceutical Cost Management Council
Building 1, Room M-146
1900 Kanawha Boulevard, East
Charleston, West Virginia 25305

Subject:

Proposed Legislative Rule Title Number 206: West Virginia

Pharmaceutical Cost Management Council Series 1
Pharmaceutical Advertising Expense Reporting

Dear Ms. Phares:

The Biotechnology Industry Organization (BIO) respectfully submits for consideration by you and the West Virginia Pharmaceutical Cost Management Council ("the Council") the following comments on the proposed legislative rule recently filed by the Department of Administration and the Council entitled "Pharmaceutical Advertising Expense Reporting." The proposed legislative rule imposes reporting requirements with respect to advertising expenses for all manufacturers and labelers of prescription drugs dispensed in West Virginia that employ, direct, or utilize marketing representatives.

BIO represents more than 1,100 biotechnology companies, academic institutions, state biotechnology centers and related organizations across the United States and 31 other nations. BIO members are involved in the research and development of healthcare, agricultural, industrial and environmental biotechnology products.

BIO is committed to efforts that meaningfully identify ways to improve the affordability and accessibility of prescription drugs, and will continue to work with your Office, the Council, and the West Virginia Legislature to develop workable reporting requirements for aggregate advertising expenses, as required by the Legislature in the Pharmaceutical Availability and Affordability Act of 2004 ("the Act").

BIO is grateful to the Council for the revisions it has, to date, seen fit to make. However, for the reasons described in detail in BIO's previous submissions to the West Virginia Secretary of State and your Office, and briefly revisited below, the proposed legislative rule (including the Appendix A reporting form) continues to exceed, in certain respects, the statutory authority granted by the Legislature under the Act, by requiring information beyond the "advertising costs for prescription drugs, based on aggregate national data" specified by Section 5A-3C-13 of the Act.

Accordingly, the proposed rule should be modified to bring the scope of the reporting requirements into better alignment with the statutory purpose and language by limiting all of the requested data submissions to <u>aggregate expenses</u> for the advertising and direct promotion of prescription drugs to West Virginia prescribers and residents.

Clarification of the Proposed Rule and Reporting Form

As described in detail below, there are several key provisions of the proposed legislative rule, and in particular, the Appendix A reporting form, that should be





modified or clarified to ensure consistency with applicable law, ease practical implementation, and reduce confusion among the regulated community and others about the scope of these requirements.

Protection of Confidential Information and Trade Secrets

General Comment

The previous version of the proposed rule (issued June 28, 2006) contained language at the end of each section of the Appendix A reporting form stating that the data submitted by companies will be a public record. Consistent with BIO's previous comments, this language has been removed from the current revised version of the proposed rule. But as currently written the proposed rule does not explicitly incorporate the statutory requirement regarding confidentiality and, thus, may cause confusion about public access to reported information. The Act expressly protects from public disclosure the information that is required to be reported to the Council, recognizing the proprietary nature of such information. Section 13(e) clearly states that, notwithstanding any other provision of law, "information submitted to the council pursuant to this section is confidential and is not a public record and is not available for release pursuant to the West Virginia freedom of information act." This section further provides that only the "[d]ata compiled in aggregate form by the council for the purposes of reporting" to the Legislature shall be a public record, and even then, only to the extent that it "does not reveal trade information that is protected by state or federal law" (Section 5A-3C-13(e)).

General Recommendation

The proposed rules should be modified to include language that references the protections of confidential information mandated by Section 13(e) as follows:

Section 206-1-4. Confidential Information and Trade Secrets.

- 4.1 Notwithstanding any other provision of law, all information submitted to the Council pursuant to this rule is confidential and is not a public record and is not available for release pursuant to the West Virginia freedom of information act.
- 4.2 A manufacturer or labeler subject to reporting required by W. Va. Code §5A-3C-13 may, as part of its annual report, identify any information that it claims as a trade secret and, if so identified, shall certify in writing the reasons for its claim that the information is a trade secret.
- 4.3 Data compiled in aggregate form by the Council for the purposes of reporting to the Legislature are a public record provided it does not reveal trade information that is protected by state or federal law.

Section 206-1-2 Definitions

Section 2.1 "Aggregate" or "Aggregate Data": Comment

The proposed definition of "aggregate" or "aggregate data" appropriately protects the identity of "specific individuals or companies." However, identification of specific products obviously can reveal company-specific information, in violation of both the proposed rule and the Act.



Section 2.1 "Aggregate" or "Aggregate Data": Recommendation

The proposed definition of "aggregate" or "aggregate data" should be modified to read as follows (new language underlined):

"Aggregate" or "aggregate data" includes information collected by the Council which does not disclose personally-identifiable information about specific West Virginia Prescribers or which does not otherwise identify specific individuals, <u>products</u> or companies.

Section 206-1-3 Required Reporting

Section 3.1: Comment

Proposed Section 3.1 requires an initial reporting of data pertaining to activities that occur between July 1, 2007, and December 1, 2007, on or before March 1, 2008. Subsequent to the initial report, companies are required to submit reports to the Council on the first of April beginning in April of 2009. The proposed rule presupposes that the legislative rulemaking process will be completed by July 1, 2007, necessitating the collection of data as required under the rule. It is possible that the Council will have a revised proposed legislative rule completed to file with the Legislative Rulemaking Review Committee ("the Committee") by July 1, 2007; however, the Committee may have modifications necessitating additional time for the Council to re-file the rules in the state register. Additionally, the scope and content of the final rule may contain reporting requirements that are different than those contained in the proposed rule. Furthermore, the Committee may not introduce legislation authorizing the Council to promulgate the legislative rule until January of 2008 when the next legislative session begins.

Section 3.1: Recommendation

Revise proposed Section 3.1 to no longer require companies to submit Appendix A for the reporting period July 1, 2007, to December 31, 2007. Companies should not be required to begin collecting reportable data until a specified date that occurs after the effective date of the rules. This date should provide companies with a reasonable time frame to develop and institute internal programs to collect, analyze and disseminate the required reportable data, particularly data for which the reporting requirements may have changed from the proposed rule.

Section 3.4.1: Comment

Proposed Section 3.4.1 and the corresponding table in Appendix A require companies to report the total number of West Virginia prescribers to whom they provided directly or indirectly, gifts, grants or payments of any kind totaling \$100 or more for the purpose of advertising prescription drugs.

Section 3.4.1: Recommendation

BIO believes that, given the *de minimus* nature of many gifts and the intent of the Legislature to "determine the scope of prescription drug advertising costs," a reasonable application of the rules would exclude the aggregation of individual items valued at less than \$25. A proper application of the rule would only require the reporting of individual events or transactions valued at more than \$25 each, totaling \$100 or more during the reporting period. Other states such as Vermont, Maine and the District of Columbia have specifically excluded a requirement to report gifts, grants and payments to prescribers that are valued at less than \$25. Additionally, it would be an undue burden on companies to be required to track nominal expenses below \$25.



Section 3.4.2: Comment

Proposed Section 3.4.2 and the corresponding table in Appendix A require companies to complete a table listing "the name of any prescription drugs advertised using direct-to-consumer (DTC) advertising reaching or targeting West Virginia." The reporting table has three columns, only one of which – the "Total Expenditure on Advertising" – is authorized under Section 13. Columns one and two require the reporting of the name of the drug and the type of DTC advertising reaching West Virginia. Nothing in Section 13 authorizes the Council to require the reporting of expenses broken down by drug or type of advertising. The statute clearly requires that all data reported to the Council be aggregate expense data only.

Section 3.4.2: Recommendation

Revise Section 3.4.2 to no longer require the completion of a table and instead require that manufacturers and labelers provide the Council an aggregate total of their advertising expenditures for DTC prescription drug advertisements targeting West Virginia.

Section 3.4.3: Comment

Proposed Section 3.4.3 and the corresponding table in Appendix A require reporting of "the name of any disease-specific patient support or advocacy group, to which you made, directly or indirectly, gifts grants or payments of any kind totaling \$10,000 or more for the purpose of advertising prescription drugs and the total amount contributed to each named support group." Virtually all, if not all, gifts, grants, or payments to such groups are wholly unrelated to product advertising as that term is defined in the statute (See Section 5A-3C-3(1)) and commonly understood; furthermore, these groups make independent decisions about their education, outreach and advocacy activities. The Council appears to equate the concept of legitimate advocacy by disease-specific groups with product advertising paid for by manufacturers. Nothing in Section 13 gives the Council the authority to require the listing of the names of advocacy groups or the contributions made by manufacturers or labelers to them (particularly in nonaggregated form), unless such payments are for product advertising that meets the statutory test set forth in the Act.

Moreover, as a practical matter, manufacturers and labelers most likely would not even know whether to list a particular organization since a company may not know whether a national or regional organization has a West Virginia affiliate, whether the company's funds or support has been provided to such an affiliate indirectly either through the national or regional organization or another entity, or whether the organization or its affiliate lobbies or otherwise appears before the West Virginia Legislature or State agencies.

Section 3.4.3: Recommendation

In light of the reasons set forth above, Section 3.4.3 and the corresponding table in Appendix A should be deleted in their entirety. If the section and table are maintained in some form, they should be limited to aggregate expenses incurred by manufacturers for the advertising or direct promotion of prescription drugs to or by such organizations in West Virginia.



Section 3.4.4: Comment

While proposed Section 3.4.4 and the corresponding table in Appendix A require the reporting of expenses related to advertising, other aspects of this provision require clarification and modification. Section 3.4.4 requires manufacturers to report the names of pharmacies with whom they have advertising programs, a description of the type of advertising, and the total amount contributed to each named pharmacy. Section 13 does not grant the Council the authority to require any of this information, particularly on a non-aggregated basis, but rather only permits the collection of "advertising costs for prescription drugs, based on aggregate national data" (Section 5A-3C-13(a)) and "aggregate expenses associated with advertising" (Section 5A-3C-13(b)). In addition, to the extent that this provision would require reporting of the terms of business relationships with national pharmacy chains – as opposed to individual West Virginia pharmacies – it would exceed the authority granted by the Act under Sections 5A-3C-13(a) and 5A-3C-13(b), and assumes that manufacturers would have detailed information as to the terms of agreements between national pharmacy chains and their state franchises.

Section 3.4.4: Recommendation

Section 3.4.4 and the corresponding table in Appendix A ought to be clarified and modified to bring the requirements in line with Section 13. Section 3.4.4 should be revised to require that manufacturers report only their aggregate expenses associated with advertising prescription drugs to and by pharmacies licensed and operating in West Virginia. In order to reduce confusion and misleading reporting, this Section should also clarify that costs captured by this section should be excluded from costs reported elsewhere in the reporting form (such as under proposed Section 3.4.2), and should include only West Virginia-specific expenditures (as opposed to general advertising programs with national pharmacy chains).

Section 3.4.5: Comment

Section 3.4.5 – which voluntarily requests information relating to costs that the Legislature expressly determined "shall be exempt from disclosure requirements" under the Act (Section 5A-3C-13(c)) – is contrary to both the purpose and plain language of the statute. The collection of such information, even if voluntarily provided, is unauthorized. For example, nothing in Section 13 authorizes the reporting of any clinical trials, regardless of whether they meet the rule's definition of "Bona Fide Clinical Trial," because such activities cannot be considered product advertising in any reasonable sense of the term. Moreover, encouraging manufacturers to submit such expenditures could actually make it more difficult for the State to obtain an accurate view of prescription drug advertising expenses – which is the purpose of the statutory provision – by creating confusion as to what is properly considered advertising (particularly, when expenditures are aggregated and publicly reported by the Council).

Section 3.4.5: Recommendation

For the reasons set forth above, Section 3.4.5 should be struck in its entirety.

Certification Recommendation

Given the vagueness and sweeping nature of some of the required information, the signature certification provision at the end of the proposed Appendix A reporting form should be modified to clarify that the submission is "true, correct and complete" based on the "reasonable knowledge and belief" of the signatory, in order to avoid strict liability for inadvertent mistakes or omissions. The required notarization should be stricken in its entirety.



Thank you for your consideration of these comments. We would welcome the opportunity to further discuss these issues with you or your staff. Please contact me at (202) 962-9200, or at tdilenge@bio.org, if you have any questions regarding these comments.

Sincerely,

Tom DiLenge Vice President and General Counsel

(Speaker Thompson presides)

AGENDA JOINT COMMITTEE ON GOVERNMENT AND FINANCE June 5, 2007

3:00 - 4:00 p,m.

Senate Finance Room

- 1. Approval of May 8, 2007, minutes
- 2. Committee Reports/Requests:

Legislative Intern Committee (Senator Prezioso and Delegate Varner, Chairs) Approval of annual budget-Sara Jones

MOVE the proposed FY 2008 budget for the Legislative Intern Committee be approved.

- 3. Monthly/Quarterly Reports Distribution: Status Reports on the Lottery Commission, Unemployment Compensation Trust Fund,
 - and General Revenue Fund
- Monthly/Quarterly Reports Distribution: 4. PEIA, BRIM, CHIP and Leases & Contracts Report - Robert Ferguson, Jr., Secretary, Dept. of Administration
- 5. Monthly/Quarterly Report Distribution from Department of Health and Human Resources: Medicaid Report - Martha Walker, Cabinet Secretary, DHHR
- 6. Monthly Report on the Pharmaceutical Cost Management Council: Robert Ferguson. Jr., Secretary, Dept. of Administration
- 7. Lottery Commission: John Musgrave, Director
- 8. Other Business
- 9. Scheduled Interim Dates: July 8 - 10

August 19 - 21

September 9 - 11

October 7 - 9

November 16 - 18 (Friday, Saturday and Sunday)

December 9 - 11

January 6 - 8, 2008

10. Adjournment Subject: 08 Intern Budget/ Joint Committee From: "Sara Jones" <sara@mail.wvnet.edu>

Date: Wed, 23 May 2007 15:01:01 -0400

To: "Anne Landgrebe'" <alandgre@mail.wvnet.edu>

Committee Requests:

Legislative Intern Committee (Senator Prezioso and Delegate Varner (Co-chairs), - Sara Jones, staff

a. Request for approval of '08 Intern Budget MOVE the request be approved.

Sara Jones, Research Analyst

West Virginia House of Delegates Building One, Room 200-A, East Wing Charleston, WV 25305

Phone: (304) 340-3386 Fax: (304) 340-3377

Legislative Intern Committee

Budget FY 2008

Recommended			
Administrative	FY 2007	FY 2008	Line Explanation
Director's Salaries and staff recruiting travel			
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Dr. Mary Beth Beller, Graduate Intern Program			
Director	\$6,500	\$6,500	
Dr. Stephen Cupps, Herndon Fellows Program			
Director	\$6,500	\$6,500	
Frasure-Singleton Program Director (Jason	a =		
Wazelle)*	\$7,100	\$7,100	Includes Workers Comp and SS matching
Travel expenses for directors and staff	\$12,000	\$12,000	
Total	\$32,100	\$32,100	
Intern Stipend			
Rollins Scholars	\$11,200	\$11,200	2 positions at \$5,600 each
Robert Burk Graduate Interns	\$22,400	\$22,400	4 positions at \$5,600 each
Herndon Fellows	\$52,000	\$52,000	10 positions at \$5,200 each
Legislative Information Interns	\$20,800	\$20,800	4 positions at \$5,200 each
Frasure-Singleton Interns	\$0	\$0	51 positions (no stipend)
Total	\$106,400	\$106,400	
Operational			
Intern travel and training*	\$23,049	\$23,049	Frasure food, lodging, bus fare & training
Publications*	\$5,000	\$5,000	Brochures, applications and advertising
Miscellaneous expenses*	\$1,600	\$1,600	Postage, name tags & other miscellaneous
•	•		program expenditures
Total	\$29,649	\$29,649	· . · · · · · · · · · · · · · · · · · ·
Budget Total	\$168,149	\$168,149	