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GERINA D. WHETHERS
SECRETARY

August 31, 2020

Interim Joint Committee on Appropriations and Revenue
Capitol Annex
702 Capital Avenue
Frankfort, Kentucky 40601

Re: Second Quarter KEHP Trust Fund Status Report period ending June 30, 2020

Dear members of the Interim Committee on Appropriations and Revenue:

Kentucky Revised Statute (KRS) 18A.2254 directs the Public Employee Health Insurance Program to submit quarterly reports on the status of the Kentucky Employees' Health Plan (KEHP) Trust Fund to the Governor, Interim Joint Committee on Appropriations and Revenue, Kentucky Group Health Insurance Board, and the Advisory Committee of State Health Insurance Subscribers.

The attached report includes, as of June 30, 2020:

1. The current balance of the trust fund;
2. A detailed description of all income to the trust fund;
3. A detailed description of all receipts due to the trust fund;
4. The total amount of payments made for claims from the trust fund;
5. A detailed description of all payments made to program administrators;
6. Current enrollment data;
7. Other information provided by the Secretary; and
8. Other information requested by the Interim Joint Committee on Appropriations and Revenue.
9. Additional reports provided for Second and Fourth quarter reports:
 - a. A projection of medical claims incurred but not yet reported that are considered liabilities to the trust fund;

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- b. A statement of any other trust fund liabilities;
- c. A detailed calculation of premium rates, including base claims, trend assumptions, administrative fees, and any benefit and plan changes;
- d. A detailed description of the current in-state and out-of-state networks provided under the plan; and
- e. Specific data regarding the TPA's performance, including:
 - i. Results or outcomes of disease management and wellness programs;
 - ii. Results of case management audits, educational and communication efforts; and
 - iii. Comparison of actual measurable results to contract performance guarantees.

If you have any questions or need additional information, please feel free to contact my office at 564-0358.

Sincerely,



Gerina D. Whethers
Secretary

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1. Current Trust Fund Balance:

As of June 30, 2020, the balance of the self-insurance trust fund was \$354,558,008.18, which includes accounting for the 2006–2020 plan years, including reserves for Healthcare Reimbursement Arrangements (HRA) and Flexible Spending Accounts (FSA). Along with the detailed transactions, summary reports for each plan year, as well as a combined summary, have been provided.

2-5. Detailed Description of Trust Fund Transactions:

Detailed transactions of the trust fund are contained in **Attachment A**. Monthly detailed transaction reports have been provided to the Legislative Research Commission. A month-by-month summary of the trust fund accounting by premiums, interest income, drug rebates, claims, and ASO fees is included as **Attachment B**.

6. Current Enrollment Data:

Charts detailing the number of employees and the number of covered lives under the plan are included as **Attachment C**. The totals shown reflect the same information as provided in the previous report, updated to include the most recent quarter's data.

7. Additional Information Provided by the Secretary of the Personnel Cabinet:

No additional information has been requested for inclusion in this report.

8. Additional Information as Requested by the Committee:

No additional information has been requested by the Committee for inclusion in this report.

9. Additional reports provided for Second and Fourth quarter reports:

a. A projection of medical claims incurred but not reported that are considered liabilities to the trust fund:

KEHP's actuarial consultant, Aon has compiled a statement of medical claims incurred but not yet reported (IBNR). This report is included as **Attachment D**.

b. A statement of any other trust fund liabilities:

A statement of other trust fund liabilities for the fiscal year ending June 30, 2020 has not been finalized as of the date of this report and will be filed with the annual financial statement for the Kentucky Employees' Health Plan.

c. A detailed calculation of premium rates including base claims, trend assumptions, administrative fees and any benefit and plan changes:

As required by KRS 18A.2254(1)(a), premium rates for the 2021 Plan Year will be set forth in the 2021 KEHP Benefits Selection Guide, which is to be filed as a part of and appended to 101 KAR 2:210 on September 15, 2020.

d. A detailed description of the current in-state and out-of-state networks provided under the plan:

Due to the addition of new providers and termination of established providers, provider networks change on a continuous basis and printed directories are often obsolete. As a result, KEHP's Medical Third Party Administrator (TPA) Anthem advocates the use of their on-line provider directories, and updates them at least weekly. The link to Anthem's [Find A Doctor](#) provides the capability to search for a provider based on provider type and location. Anthem's dedicated KEHP Customer Service Center can provide additional assistance in locating a participating provider by calling 1-844-402-KEHP (5347). As of the date of this report, notwithstanding normal provider contracting activities, there are no proposed network changes.

e. Specific data regarding the TPA and program administrator performance, including:

i. Results or outcomes of disease management and wellness programs, case management audits, and member communication and education:

Attachment E contains results and outcomes based on engagement in the numerous disease management and wellness programs offered by KEHP. Our disease management provider, Anthem, and our wellness program administrator, StayWell, aggregate the information for this report.

ii. Attachment E also details the education, engagement, and communications efforts undertaken by the Department of Employee Insurance in administering the KEHP on behalf of the Personnel Cabinet.

iii. Comparison of actual measurable results to contract performance guarantees:

A listing of operational performance guarantees of KEHP's Third Party Administrator, Anthem, are included as **Attachment F**. All of Anthem's guarantees are applied on an annual basis. Performance results will be detailed in the 4th Quarter Trust Fund Report.

Contract performance results of KEHP's Pharmacy Benefits Manager (PBM), CVS Caremark, are included in this report as **Attachment G**. CVS met all performance guarantees for the quarter.

Contract performance results of KEHP's HRA/FSA/COBRA Benefits Manager, HealthEquity, (formerly known as WageWorks) are included in this report as **Attachment H**. HealthEquity met all performance guarantees for the quarter.

A listing of operational performance guarantees of KEHP's Wellness Benefits Manager, StayWell, are included in this report as **Attachment I**. All of StayWell's guarantees are applied on an annual basis. Performance results will be detailed in the 4th Quarter Trust Fund Report.

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Attachment A – Transaction Report
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APRIL 2020 COMBINED TRANSACTION REPORT

Date	Description	Amount	LRC Code	LRC Description	Plan Year
	<u>Beginning Balance</u>	<u>\$498,743,520.16</u>			
4/6/2020	MEDICAL CLAIMS- ANTHEM	92.60	210	Medical Claims - Anthem	2016
4/13/2020	MEDICAL CLAIMS- ANTHEM	(963.10)	210	Medical Claims - Anthem	2016
4/20/2020	MEDICAL CLAIMS- ANTHEM	676.87	210	Medical Claims - Anthem	2016
4/28/2020	MEDICAL CLAIMS- ANTHEM	785.88	210	Medical Claims - Anthem	2016
4/16/2020	CAREMARK CLAIMS	(394.28)	310	Pharmacy Claims - CVS	2016
4/27/2020	4TH QUARTER 2019 CVS/CAREMARK REBATES	15,864.78	121	Drug Rebates - CVS	2017
3/9/2020	MEDICAL CLAIMS- ANTHEM	(73,599.22)	210	Medical Claims - Anthem	2017
4/6/2020	MEDICAL CLAIMS- ANTHEM	12,976.42	210	Medical Claims - Anthem	2017
4/13/2020	MEDICAL CLAIMS- ANTHEM	11,572.83	210	Medical Claims - Anthem	2017
4/20/2020	MEDICAL CLAIMS- ANTHEM	2,068.54	210	Medical Claims - Anthem	2017
4/28/2020	MEDICAL CLAIMS- ANTHEM	(10,057.21)	210	Medical Claims - Anthem	2017
4/1/2020	CAREMARK CLAIMS	(45.78)	310	Pharmacy Claims - CVS	2017
4/8/2020	CAREMARK CLAIMS	(173.31)	310	Pharmacy Claims - CVS	2017
4/16/2020	CAREMARK CLAIMS	(274.49)	310	Pharmacy Claims - CVS	2017
3/9/2020	MEDICAL CLAIMS- ANTHEM	(40,538.02)	210	Medical Claims - Anthem	2018
4/6/2020	MEDICAL CLAIMS- ANTHEM	33,804.84	210	Medical Claims - Anthem	2018
4/13/2020	MEDICAL CLAIMS- ANTHEM	36,622.37	210	Medical Claims - Anthem	2018
4/20/2020	MEDICAL CLAIMS- ANTHEM	52,659.60	210	Medical Claims - Anthem	2018
4/28/2020	MEDICAL CLAIMS- ANTHEM	(37,849.14)	210	Medical Claims - Anthem	2018
4/1/2020	CAREMARK CLAIMS	(261.97)	310	Pharmacy Claims - CVS	2018
4/8/2020	CAREMARK CLAIMS	(1,447.19)	310	Pharmacy Claims - CVS	2018
4/28/2020	CAREMARK CLAIMS	(0.50)	310	Pharmacy Claims - CVS	2018
4/2/2020	HEALTH PREMIUMS 2020	304.11	101	Premiums	2019
4/9/2020	HLTH INS REFUND	(59.53)	101	Premiums	2019
4/27/2020	4TH QUARTER 2019 CVS/CAREMARK REBATES	44,029,550.10	121	Drug Rebates - CVS	2019
3/9/2020	MEDICAL CLAIMS- ANTHEM	(2,354,667.06)	210	Medical Claims - Anthem	2019
4/6/2020	MEDICAL CLAIMS- ANTHEM	(616,726.20)	210	Medical Claims - Anthem	2019
4/13/2020	MEDICAL CLAIMS- ANTHEM	(870,952.51)	210	Medical Claims - Anthem	2019
4/20/2020	MEDICAL CLAIMS- ANTHEM	(940,252.56)	210	Medical Claims - Anthem	2019
4/28/2020	MEDICAL CLAIMS- ANTHEM	(1,021,868.40)	210	Medical Claims - Anthem	2019
3/31/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(11,756.13)	213	HRA Embedded Claims - Wage Works	2019
4/1/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(24,821.11)	213	HRA Embedded Claims - Wage Works	2019
4/2/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(15,322.81)	213	HRA Embedded Claims - Wage Works	2019
4/3/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(14,993.97)	213	HRA Embedded Claims - Wage Works	2019
4/6/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(21,440.77)	213	HRA Embedded Claims - Wage Works	2019
4/7/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(16,671.40)	213	HRA Embedded Claims - Wage Works	2019
4/8/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(34,577.62)	213	HRA Embedded Claims - Wage Works	2019
4/9/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(13,987.69)	213	HRA Embedded Claims - Wage Works	2019
4/10/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(8,330.03)	213	HRA Embedded Claims - Wage Works	2019
4/13/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(9,942.85)	213	HRA Embedded Claims - Wage Works	2019
4/14/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(4,090.22)	213	HRA Embedded Claims - Wage Works	2019
4/15/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(3,416.66)	213	HRA Embedded Claims - Wage Works	2019
4/16/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(3,301.37)	213	HRA Embedded Claims - Wage Works	2019
4/17/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(7,114.02)	213	HRA Embedded Claims - Wage Works	2019
4/20/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(2,672.71)	213	HRA Embedded Claims - Wage Works	2019
4/21/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(2,135.97)	213	HRA Embedded Claims - Wage Works	2019
4/22/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(13,529.83)	213	HRA Embedded Claims - Wage Works	2019
4/23/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(3,183.44)	213	HRA Embedded Claims - Wage Works	2019
4/27/2020	HRA Embedded Claims - Wage Works	(5,972.76)	213	HRA Embedded Claims - Wage Works	2019
4/27/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(6,247.03)	213	HRA Embedded Claims - Wage Works	2019
4/28/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(6,067.08)	213	HRA Embedded Claims - Wage Works	2019
4/29/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(18,562.62)	213	HRA Embedded Claims - Wage Works	2019

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Date	Description	Amount	LRC Code	LRC Description	Plan Year
3/31/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(1,068.84)	214	HRA Waiver Claims - Wage Works	2019
3/31/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(11,869.22)	214	HRA Waiver Claims - Wage Works	2019
4/1/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(13,805.70)	214	HRA Waiver Claims - Wage Works	2019
4/1/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(276.07)	214	HRA Waiver Claims - Wage Works	2019
4/2/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(12,613.18)	214	HRA Waiver Claims - Wage Works	2019
4/3/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(7,755.29)	214	HRA Waiver Claims - Wage Works	2019
4/3/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(5,365.28)	214	HRA Waiver Claims - Wage Works	2019
4/6/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(13,123.92)	214	HRA Waiver Claims - Wage Works	2019
4/6/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(412.50)	214	HRA Waiver Claims - Wage Works	2019
4/7/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(13,307.72)	214	HRA Waiver Claims - Wage Works	2019
4/7/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(1,050.00)	214	HRA Waiver Claims - Wage Works	2019
4/8/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(23,271.23)	214	HRA Waiver Claims - Wage Works	2019
4/8/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(1,204.65)	214	HRA Waiver Claims - Wage Works	2019
4/9/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(2,234.64)	214	HRA Waiver Claims - Wage Works	2019
4/9/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(544.00)	214	HRA Waiver Claims - Wage Works	2019
4/10/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(7,183.08)	214	HRA Waiver Claims - Wage Works	2019
4/10/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(57.95)	214	HRA Waiver Claims - Wage Works	2019
4/13/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(695.90)	214	HRA Waiver Claims - Wage Works	2019
4/13/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(6,095.57)	214	HRA Waiver Claims - Wage Works	2019
4/14/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(3,979.38)	214	HRA Waiver Claims - Wage Works	2019
4/15/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(5,927.35)	214	HRA Waiver Claims - Wage Works	2019
4/16/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(223.38)	214	HRA Waiver Claims - Wage Works	2019
4/16/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(1,144.88)	214	HRA Waiver Claims - Wage Works	2019
4/17/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(1,450.00)	214	HRA Waiver Claims - Wage Works	2019
4/17/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(3,976.45)	214	HRA Waiver Claims - Wage Works	2019
4/20/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(2,579.89)	214	HRA Waiver Claims - Wage Works	2019
4/20/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(148.37)	214	HRA Waiver Claims - Wage Works	2019
4/21/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(1,110.63)	214	HRA Waiver Claims - Wage Works	2019
4/21/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(774.55)	214	HRA Waiver Claims - Wage Works	2019
4/22/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(3,604.42)	214	HRA Waiver Claims - Wage Works	2019
4/22/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(684.00)	214	HRA Waiver Claims - Wage Works	2019
4/23/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(2,723.31)	214	HRA Waiver Claims - Wage Works	2019
4/27/2020	HRA Waiver Claims - Wage Works	(2,649.03)	214	HRA Waiver Claims - Wage Works	2019
4/27/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(4,701.51)	214	HRA Waiver Claims - Wage Works	2019
4/28/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(2,100.00)	214	HRA Waiver Claims - Wage Works	2019
4/28/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(5,567.44)	214	HRA Waiver Claims - Wage Works	2019
4/29/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(5,277.52)	214	HRA Waiver Claims - Wage Works	2019
4/29/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(4,181.11)	214	HRA Waiver Claims - Wage Works	2019
4/8/2020	ADMIN FEE 03/2020-WW,HCDC FSA	(103.60)	216	Wage Works Admin	2019
4/8/2020	ADMIN FEE 03/2020-WW,HC FSA	(3,617.60)	216	Wage Works Admin	2019
4/8/2020	ADMIN FEE 03/2020-WW,DC FSA	(893.20)	216	Wage Works Admin	2019
4/1/2020	CAREMARK CLAIMS	(1,656.07)	310	Pharmacy Claims - CVS	2019
4/8/2020	CAREMARK CLAIMS	(6,802.33)	310	Pharmacy Claims - CVS	2019
4/16/2020	CAREMARK CLAIMS	174.85	310	Pharmacy Claims - CVS	2019
4/28/2020	CAREMARK CLAIMS	2,198.74	310	Pharmacy Claims - CVS	2019
4/9/2020	UPPS PAYROLL	12,673,508.92	101	Premiums	2020
4/27/2020	UPPS PAYROLL	12,748,780.28	101	Premiums	2020
4/14/2020	UPPS PAYROLL	841.92	101	Premiums	2020
4/16/2020	UPPS PAYROLL	(645.91)	101	Premiums	2020
4/22/2020	UPPS PAYROLL	(10.44)	101	Premiums	2020
4/29/2020	UPPS PAYROLL	4,891.75	101	Premiums	2020
3/31/2020	EPAY-HEALTH PREMIUMS 2020	66,145.62	101	Premiums	2020
4/1/2020	EPAY-HEALTH PREMIUMS 2020	1,728,231.08	101	Premiums	2020
4/2/2020	EPAY-HEALTH PREMIUMS 2020	2,274,003.73	101	Premiums	2020

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Date	Description	Amount	LRC Code	LRC Description	Plan Year
4/2/2020	HEALTH PREMIUMS 2020	125,812.68	101	Premiums	2020
4/3/2020	EPAY-HEALTH PREMIUMS 2020	697,694.27	101	Premiums	2020
4/6/2020	EPAY-HEALTH PREMIUMS 2020	430,446.64	101	Premiums	2020
4/6/2020	EPAY-HEALTH PREMIUMS 2020	455,435.30	101	Premiums	2020
4/7/2020	KCTCS PREMIUM PAYMENT MAR 2020	117,449.56	101	Premiums	2020
4/7/2020	KCTCS PREMIUM PAYMENT MAR 2020	3,214,248.15	101	Premiums	2020
4/7/2020	EPAY-HEALTH PREMIUMS 2020	12,341.36	101	Premiums	2020
4/8/2020	EPAY-HEALTH PREMIUMS 2020	319,981.63	101	Premiums	2020
4/8/2020	HEALTH PREMIUMS 2020	1,081.56	101	Premiums	2020
4/9/2020	EPAY-HEALTH PREMIUMS 2020	461,705.09	101	Premiums	2020
4/9/2020	HEALTH PREMIUMS 2020	52,409.46	101	Premiums	2020
4/10/2020	EPAY-HEALTH PREMIUMS 2020	220,014.04	101	Premiums	2020
4/13/2020	EPAY-HEALTH PREMIUMS 2020	261,485.84	101	Premiums	2020
4/13/2020	EPAY-HEALTH PREMIUMS 2020	21,859.36	101	Premiums	2020
4/15/2020	EPAY-HEALTH PREMIUMS 2020	319,793.83	101	Premiums	2020
4/23/2020	EPAY - HRA 2020	443.13	101	Premiums	2020
4/16/2020	EPAY-HEALTH PREMIUMS 2020	1,189,920.45	101	Premiums	2020
4/17/2020	EPAY-HEALTH PREMIUMS 2020	214,198.32	101	Premiums	2020
4/20/2020	EPAY-HEALTH PREMIUMS 2020	679,318.88	101	Premiums	2020
4/20/2020	EPAY-HEALTH PREMIUMS 2020	227,319.94	101	Premiums	2020
4/21/2020	EPAY-HEALTH PREMIUMS 2020	8,676.50	101	Premiums	2020
4/22/2020	EPAY-HEALTH PREMIUMS 2020	241,235.86	101	Premiums	2020
4/23/2020	EPAY-HEALTH PREMIUMS 2020	435,058.93	101	Premiums	2020
4/24/2020	HEALTH PREMIUMS 2020	3,051.16	101	Premiums	2020
4/24/2020	EPAY-HEALTH PREMIUMS 2020	515,929.80	101	Premiums	2020
4/27/2020	EPAY-HEALTH PREMIUMS 2020	709,931.85	101	Premiums	2020
4/27/2020	EPAY-HEALTH PREMIUMS 2020	297,625.14	101	Premiums	2020
4/27/2020	EPAY-HEALTH PREMIUMS 2020	55,465.27	101	Premiums	2020
4/28/2020	EPAY-HEALTH PREMIUMS 2020	710.94	101	Premiums	2020
4/28/2020	JUDICIAL RETIREMENT 4/20	4,389.92	101	Premiums	2020
4/28/2020	JUDICIAL RETIREMENT 4/20	81,418.82	101	Premiums	2020
4/28/2020	LEGISLATIVE RETIREMENT 4/20	3,799.07	101	Premiums	2020
4/28/2020	LEGISLATIVE RETIREMENT 4/20	27,233.73	101	Premiums	2020
4/28/2020	JEFFERSON CO BOE APR 2020 HEALTH INS PREM	1,783,527.09	101	Premiums	2020
4/29/2020	EPAY-HEALTH PREMIUMS 2020	800,363.18	101	Premiums	2020
4/30/2020	EPAY-HEALTH PREMIUMS 2020	1,364,472.76	101	Premiums	2020
4/9/2020	HLTH INS REFUND	(130.46)	101	Premiums	2020
4/27/2020	HLTH INS REFUND	(15.74)	101	Premiums	2020
4/9/2020	HLTH INS REFUND	(1,094.01)	101	Premiums	2020
4/9/2020	HLTH INS REFUND	(224.43)	101	Premiums	2020
4/9/2020	HLTH INS REFUND	(42.43)	101	Premiums	2020
4/22/2020	KDE PREMIUMS MAR 2020	60,015,551.35	101	Premiums	2020
4/7/2020	KRS 4/20 HEALTH PREMIUMS	23,124,106.89	101	Premiums	2020
4/23/2020	KTRS 4/20 PREMIUMS	8,455,498.50	101	Premiums	2020
4/9/2020	UPPS PAYROLL	495,972.49	102	HRA Waiver Contribution	2020
4/27/2020	UPPS PAYROLL	496,663.25	102	HRA Waiver Contribution	2020
4/14/2020	UPPS PAYROLL	83.33	102	HRA Waiver Contribution	2020
4/29/2020	UPPS PAYROLL	41.66	102	HRA Waiver Contribution	2020
4/1/2020	EPAY-HRA WAIVER PREMIUMS 2020	2,800.00	102	HRA Waiver Contribution	2020
4/1/2020	EPAY-HRA D&V PREMIUMS 2020	350.00	102	HRA Waiver Contribution	2020
4/2/2020	EPAY-HRA D&V PREMIUMS 2020	875.00	102	HRA Waiver Contribution	2020
4/2/2020	EPAY-HRA WAIVER PREMIUMS 2020	2,625.00	102	HRA Waiver Contribution	2020
4/3/2020	EPAY-HRA WAIVER PREMIUMS 2020	3,500.00	102	HRA Waiver Contribution	2020
4/3/2020	EPAY-HRA D&V PREMIUMS 2020	1,050.00	102	HRA Waiver Contribution	2020

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Date	Description	Amount	LRC Code	LRC Description	Plan Year
4/6/2020	EPAY-HRA WAIVER PREMIUMS 2020	175.00	102	HRA Waiver Contribution	2020
4/6/2020	EPAY-HRA WAIVER PREMIUMS 2020	175.00	102	HRA Waiver Contribution	2020
4/7/2020	EPAY-HRA D&V PREMIUMS 2020	525.00	102	HRA Waiver Contribution	2020
4/7/2020	EPAY-HRA WAIVER PREMIUMS 2020	700.00	102	HRA Waiver Contribution	2020
4/8/2020	EPAY-HRA D&V PREMIUMS 2020	1,050.00	102	HRA Waiver Contribution	2020
4/8/2020	EPAY-HRA WAIVER PREMIUMS 2020	3,500.00	102	HRA Waiver Contribution	2020
4/15/2020	EPAY-HRA D&V PREMIUMS 2020	175.00	102	HRA Waiver Contribution	2020
4/15/2020	EPAY-HRA WAIVER PREMIUMS 2020	525.00	102	HRA Waiver Contribution	2020
4/16/2020	EPAY-HRA WAIVER PREMIUMS 2020	2,450.00	102	HRA Waiver Contribution	2020
4/16/2020	EPAY-HRA D&V PREMIUMS 2020	525.00	102	HRA Waiver Contribution	2020
4/20/2020	EPAY-HRA D&V PREMIUMS 2020	525.00	102	HRA Waiver Contribution	2020
4/20/2020	EPAY-HRA WAIVER PREMIUMS 2020	700.00	102	HRA Waiver Contribution	2020
4/20/2020	EPAY-HRA WAIVER PREMIUMS 2020	175.00	102	HRA Waiver Contribution	2020
4/24/2020	EPAY-HRA WAIVER PREMIUMS 2020	175.00	102	HRA Waiver Contribution	2020
4/27/2020	EPAY-HRA D&V PREMIUMS 2020	2,275.00	102	HRA Waiver Contribution	2020
4/27/2020	EPAY-HRA WAIVER PREMIUMS 2020	3,500.00	102	HRA Waiver Contribution	2020
4/29/2020	EPAY-HRA WAIVER PREMIUMS 2020	350.00	102	HRA Waiver Contribution	2020
4/29/2020	EPAY-HRA D&V PREMIUMS 2020	350.00	102	HRA Waiver Contribution	2020
4/30/2020	EPAY-HRA WAIVER PREMIUMS 2020	4,550.00	102	HRA Waiver Contribution	2020
4/30/2020	EPAY-HRA D&V PREMIUMS 2020	787.50	102	HRA Waiver Contribution	2020
4/22/2020	KDE HRA WAIVER MAR 2020	2,330,682.16	102	HRA Waiver Contribution	2020
4/22/2020	KDE HRA D&V MAR 2020	1,119,487.42	102	HRA Waiver Contribution	2020
4/30/2020	KDE HRA D&V APR 2020	1,134,433.36	102	HRA Waiver Contribution	2020
4/30/2020	KDE HRA WAIVER APR 2020	2,342,368.40	102	HRA Waiver Contribution	2020
5/4/2020	EARNED INTEREST INCOME APRIL	80,430.02	110	Interest Income	2020
4/3/2020	PREMISE HEALTH - 2/2020	(117,460.39)	210	Medical Claims - Anthem	2020
4/9/2020	PREMISE HEALTH - 3/2020	(114,200.93)	210	Medical Claims - Anthem	2020
3/9/2020	MEDICAL CLAIMS- ANTHEM	(19,205,516.46)	210	Medical Claims - Anthem	2020
4/6/2020	MEDICAL CLAIMS- ANTHEM	(16,402,088.55)	210	Medical Claims - Anthem	2020
4/13/2020	MEDICAL CLAIMS- ANTHEM	(14,920,978.80)	210	Medical Claims - Anthem	2020
4/20/2020	MEDICAL CLAIMS- ANTHEM	(15,536,464.97)	210	Medical Claims - Anthem	2020
4/28/2020	MDX/COMPASS INCENTIVES 3-2020	(41,920.00)	210	Medical Claims - Anthem	2020
4/28/2020	MEDICAL CLAIMS- ANTHEM	(14,363,283.82)	210	Medical Claims - Anthem	2020
3/31/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(60,566.71)	213	HRA Embedded Claims - Wage Works	2020
4/1/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(179,711.09)	213	HRA Embedded Claims - Wage Works	2020
4/2/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(198,326.17)	213	HRA Embedded Claims - Wage Works	2020
4/3/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(199,548.54)	213	HRA Embedded Claims - Wage Works	2020
4/6/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(406,224.37)	213	HRA Embedded Claims - Wage Works	2020
4/7/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(67,297.80)	213	HRA Embedded Claims - Wage Works	2020
4/8/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(182,140.94)	213	HRA Embedded Claims - Wage Works	2020
4/9/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(199,984.10)	213	HRA Embedded Claims - Wage Works	2020
4/10/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(179,315.93)	213	HRA Embedded Claims - Wage Works	2020
4/13/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(367,842.63)	213	HRA Embedded Claims - Wage Works	2020
4/14/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(47,124.04)	213	HRA Embedded Claims - Wage Works	2020
4/15/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(162,396.21)	213	HRA Embedded Claims - Wage Works	2020
4/16/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(205,075.85)	213	HRA Embedded Claims - Wage Works	2020
4/17/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(195,906.01)	213	HRA Embedded Claims - Wage Works	2020
4/20/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(421,921.02)	213	HRA Embedded Claims - Wage Works	2020
4/21/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(68,311.64)	213	HRA Embedded Claims - Wage Works	2020
4/22/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(178,881.74)	213	HRA Embedded Claims - Wage Works	2020
4/23/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(196,083.06)	213	HRA Embedded Claims - Wage Works	2020
4/27/2020	HRA Embedded Claims - Wage Works	(156,437.83)	213	HRA Embedded Claims - Wage Works	2020
4/27/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(346,126.56)	213	HRA Embedded Claims - Wage Works	2020
4/28/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(56,772.99)	213	HRA Embedded Claims - Wage Works	2020

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Date	Description	Amount	LRC Code	LRC Description	Plan Year
4/29/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(172,231.56)	213	HRA Embedded Claims - Wage Works	2020
3/31/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(28,378.02)	214	HRA Waiver Claims - Wage Works	2020
3/31/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(1,622.66)	214	HRA Waiver Claims - Wage Works	2020
4/1/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(6,318.86)	214	HRA Waiver Claims - Wage Works	2020
4/1/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(72,801.17)	214	HRA Waiver Claims - Wage Works	2020
4/2/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(74,964.60)	214	HRA Waiver Claims - Wage Works	2020
4/2/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(5,819.94)	214	HRA Waiver Claims - Wage Works	2020
4/3/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(68,681.56)	214	HRA Waiver Claims - Wage Works	2020
4/3/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(7,580.14)	214	HRA Waiver Claims - Wage Works	2020
4/6/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(14,079.79)	214	HRA Waiver Claims - Wage Works	2020
4/6/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(144,539.84)	214	HRA Waiver Claims - Wage Works	2020
4/7/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(20,208.67)	214	HRA Waiver Claims - Wage Works	2020
4/7/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(4,588.19)	214	HRA Waiver Claims - Wage Works	2020
4/8/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(4,124.79)	214	HRA Waiver Claims - Wage Works	2020
4/8/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(66,200.12)	214	HRA Waiver Claims - Wage Works	2020
4/9/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(4,229.39)	214	HRA Waiver Claims - Wage Works	2020
4/9/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(61,320.56)	214	HRA Waiver Claims - Wage Works	2020
4/10/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(53,743.33)	214	HRA Waiver Claims - Wage Works	2020
4/10/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(2,324.19)	214	HRA Waiver Claims - Wage Works	2020
4/13/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(124,612.48)	214	HRA Waiver Claims - Wage Works	2020
4/13/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(5,097.85)	214	HRA Waiver Claims - Wage Works	2020
4/14/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(16,077.08)	214	HRA Waiver Claims - Wage Works	2020
4/14/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(499.00)	214	HRA Waiver Claims - Wage Works	2020
4/15/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(62,898.63)	214	HRA Waiver Claims - Wage Works	2020
4/15/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(2,818.63)	214	HRA Waiver Claims - Wage Works	2020
4/16/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(72,595.53)	214	HRA Waiver Claims - Wage Works	2020
4/16/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(10,600.77)	214	HRA Waiver Claims - Wage Works	2020
4/17/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(63,460.28)	214	HRA Waiver Claims - Wage Works	2020
4/17/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(8,775.38)	214	HRA Waiver Claims - Wage Works	2020
4/20/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(135,835.03)	214	HRA Waiver Claims - Wage Works	2020
4/20/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(10,590.24)	214	HRA Waiver Claims - Wage Works	2020
4/21/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(576.57)	214	HRA Waiver Claims - Wage Works	2020
4/21/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(16,893.34)	214	HRA Waiver Claims - Wage Works	2020
4/22/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(59,305.90)	214	HRA Waiver Claims - Wage Works	2020
4/22/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(6,180.05)	214	HRA Waiver Claims - Wage Works	2020
4/23/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(57,013.78)	214	HRA Waiver Claims - Wage Works	2020
4/23/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(3,397.12)	214	HRA Waiver Claims - Wage Works	2020
4/27/2020	HRA Waiver Claims - Wage Works	(52,401.19)	214	HRA Waiver Claims - Wage Works	2020
4/27/2020	HRA D&V Claims - Wage Works	(3,685.22)	214	HRA Waiver Claims - Wage Works	2020
4/27/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(10,767.30)	214	HRA Waiver Claims - Wage Works	2020
4/27/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(127,512.82)	214	HRA Waiver Claims - Wage Works	2020
4/28/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(22,203.11)	214	HRA Waiver Claims - Wage Works	2020
4/28/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(2,032.80)	214	HRA Waiver Claims - Wage Works	2020
4/29/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(5,850.12)	214	HRA Waiver Claims - Wage Works	2020
4/29/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(55,297.85)	214	HRA Waiver Claims - Wage Works	2020
4/2/2020	ANTHEM OUT OF STATE FEES NY HCRA 02/2020	(62.68)	215	Anthem Admin	2020
4/8/2020	ANTHEM ASO FEES 04/2020	(3,718,390.50)	215	Anthem Admin	2020
4/17/2020	ANTHEM ASO FEES - COBRA 03/2020	(3,242.25)	215	Anthem Admin	2020
4/16/2020	KDE MAR 2020 ASO FEE PMT	52,021.20	216	Wage Works Admin	2020
4/8/2020	ADMIN FEE 03/2020-WW,HCDC FSA	(3,096.80)	216	Wage Works Admin	2020
4/8/2020	ADMIN FEE 03/2020-WW,HC FSA	(71,489.60)	216	Wage Works Admin	2020
4/8/2020	ADMIN FEE 03/2020-WW,DC FSA	(1,876.00)	216	Wage Works Admin	2020
4/8/2020	ADMIN FEE 03/2020-WW, HRA 2020	(364,106.40)	216	Wage Works Admin	2020
4/17/2020	COBRA ADMIN FEES 03/2020 - WW	(45,500.00)	216	Wage Works Admin	2020

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Date	Description	Amount	LRC Code	LRC Description	Plan Year
4/14/2020	MDX SAPPHIRE - MEG ADMIN FEES 4-2020	(26,648.60)	217	MDX Medical Admin - Compass Choice	2020
4/14/2020	MDX SAPPHIRE - SMARTSHOPPER ADMIN FEES 4-2020	(78,724.80)	217	MDX Medical Admin - Compass Choice	2020
4/28/2020	MDX/COMPASS MEG PER INTERACTION FEES 3-2020	(2,400.00)	217	MDX Medical Admin - Compass Choice	2020
4/21/2020	RETHINK 5/2020	(88,184.00)	218	Rethink BH Services	2020
4/30/2020	ALIGHT MAR 2020 - DEP ELIGIBILITY ONGOING AUDIT	(4,251.25)	219	Ongoing Dependent Eligibility	2020
4/3/2020	Staywell Custom Communication Fee - 3/2020	(86.80)	221	Staywell Admin	2020
4/3/2020	STAYWELL TELEPHONE/VIRTUAL COACHING 2/2020	(30,100.00)	221	Staywell Admin	2020
4/3/2020	STAYWELL PARTICIPANT ENGAGEMENT PKG - 3/2020	(23,610.73)	221	Staywell Admin	2020
4/3/2020	STAYWELL (HD) SCREENINGS 2/2020	(693,220.00)	221	Staywell Admin	2020
4/3/2020	STAYWELL ONSITE SCREENINGS 2/2020	(11,400.00)	221	Staywell Admin	2020
4/3/2020	STAYWELL LAB OPTIONS 2/2020	(2,300.00)	221	Staywell Admin	2020
4/3/2020	STAYWELL PHYSICIAN FORMS 2/2020	(4,990.00)	221	Staywell Admin	2020
4/3/2020	STAYWELL INCENTIVE FULFILLMENT 3/2020	(69,015.98)	221	Staywell Admin	2020
4/3/2020	STAYWELL WELLNESS, CORE - 3/2020	(217,945.20)	221	Staywell Admin	2020
4/3/2020	STAYWELL INCENTIVES (FOND) 2/2020	(107,691.94)	222	Staywell Claims Reimbursement	2020
4/18/2020	STAYWELL INCENTIVES (FOND) 3/2020	(125,518.94)	222	Staywell Claims Reimbursement	2020
4/1/2020	CAREMARK CLAIMS	(11,196,698.29)	310	Pharmacy Claims - CVS	2020
4/8/2020	CAREMARK CLAIMS	(9,800,567.01)	310	Pharmacy Claims - CVS	2020
4/16/2020	CAREMARK CLAIMS	(11,711,738.44)	310	Pharmacy Claims - CVS	2020
4/28/2020	CAREMARK CLAIMS	(11,543,724.58)	310	Pharmacy Claims - CVS	2020
4/15/2020	CVS CAREMARK 02/2020 PHARM COUNSELING	(159,703.80)	311	CVS Admin	2020
4/15/2020	CVS CAREMARK PER DIEM FEE 03/2020	(300.00)	311	CVS Admin	2020
4/15/2020	CVS CAREMARK RX AUDIT ADJUSTMENT 03/24/2020-03/23/2020	1,671.15	311	CVS Admin	2020
4/15/2020	CVS CAREMARK 02/2020 APPEALS	(37,470.00)	311	CVS Admin	2020
4/15/2020	CVS CAREMARK 03/24/2020-03/31/2020	(96,559.70)	311	CVS Admin	2020
4/15/2020	CVS CAREMARK 02/2020 DRUG SAVING REVIEW	(58,585.17)	311	CVS Admin	2020
4/15/2020	CVS CAREMARK02/2020 ENHANCED SFTY MONITORING	(10,646.92)	311	CVS Admin	2020
4/15/2020	CVS CAREMARK 02/2020 PRIOR AUTHORIZATION	(75,360.00)	311	CVS Admin	2020
4/15/2020	CVS CAREMARK NURSING SERVICES 03/2020	(2,670.00)	311	CVS Admin	2020
4/17/2020	CVS CAREMARK 04/1/2020-04/7/2020	(82,950.85)	311	CVS Admin	2020
4/17/2020	CVS CAREMARK 04/8/2020-04/15/2020	(99,763.80)	311	CVS Admin	2020
1/22/2020	4th Quarter FY20 DEI TRANSFER FROM 2500 FUND to 13CG	(2,061,136.98)	501	Operating Transfer/Exp & Adj	2020
4/1/2020	ISS FACILITY SERVICES CLINIC JANITORIAL SERVICES ANNEX, CHR, 300 BLDG, & 500 MERO 2/2020	(1,022.08)	502	Transfer for Clinic Services	2020
4/1/2020	ISS FACILITY SERVICES CLINIC JANITORIAL SERVICES L&N BLDG 2/2020	(255.52)	502	Transfer for Clinic Services	2020
April		43,165,111.07			
Ending Balance		<u>\$541,908,631.23</u>			

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April Account Summary		
101	Premiums	136,445,490.71
102	HRA Waiver Contribution	7,954,119.57
110	Interest Income	80,430.02
121	Drug Rebates - CVS	44,045,414.88
130	Transfers From other plan year(s)	0.00
210	Medical Claims - Anthem	(86,518,127.39)
213	HRA Embedded Claims - Wage Works	(4,496,364.88)
214	HRA Waiver Claims - Wage Works	(1,753,241.85)
215	Anthem Admin	(3,721,695.43)
216	Wage Works Admin	(438,662.00)
217	MDX Medical Admin - Compass Choice	(107,773.40)
218	Rethink BH Services	(88,184.00)
219	Ongoing Dependent Eligibility Audit	(4,251.25)
220	Printing & Postage Services	0.00
221	Staywell Admin	(1,052,668.71)
222	Staywell Claims	(233,210.88)
310	Pharmacy Claims - CVS	(44,261,410.65)
311	CVS Admin	(622,339.09)
500	Transfers To other plan year(s)	0.00
501	Operating Transfer/ Exp & Adj	(2,061,136.98)
502	Transfer for Clinic Cleaning Services	(1,277.60)
503	Voided/NSF/Cancelled Check Fees	0.00
April Activity		\$43,165,111.07

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MAY 2020 COMBINED TRANSACTION REPORT

Date	Description	Amount	LRC Code	LRC Description	Plan Year
	Beginning Balance	\$541,908,631.23			
5/5/2020	HUMANA MED CLAIM RECOVERY1ST QUARTER-2020	20,318.08	210	Medical Claims - Anthem	2016
5/5/2020	MEDICAL CLAIMS- ANTHEM	127,688.82	210	Medical Claims - Anthem	2016
5/18/2020	MEDICAL CLAIMS- ANTHEM	1,654.01	210	Medical Claims - Anthem	2016
5/26/2020	CAREMARK CLAIMS	(2,592.68)	310	Pharmacy Claims - CVS	2016
5/5/2020	MEDICAL CLAIMS- ANTHEM	8,279.63	210	Medical Claims - Anthem	2017
5/12/2020	MEDICAL CLAIMS- ANTHEM	2,589.47	210	Medical Claims - Anthem	2017
5/18/2020	MEDICAL CLAIMS- ANTHEM	(6,388.02)	210	Medical Claims - Anthem	2017
5/27/2020	MEDICAL CLAIMS- ANTHEM	(111,474.01)	210	Medical Claims - Anthem	2017
5/4/2020	CAREMARK CLAIMS	(1.29)	310	Pharmacy Claims - CVS	2017
5/11/2020	CAREMARK CLAIMS	(13.20)	310	Pharmacy Claims - CVS	2017
5/26/2020	CAREMARK CLAIMS	(126.99)	310	Pharmacy Claims - CVS	2017
5/5/2020	MEDICAL CLAIMS- ANTHEM	44,470.31	210	Medical Claims - Anthem	2018
5/12/2020	MEDICAL CLAIMS- ANTHEM	17,484.65	210	Medical Claims - Anthem	2018
5/18/2020	MEDICAL CLAIMS- ANTHEM	(121,799.54)	210	Medical Claims - Anthem	2018
5/27/2020	MEDICAL CLAIMS- ANTHEM	(119,407.40)	210	Medical Claims - Anthem	2018
5/4/2020	CAREMARK CLAIMS	(2,995.91)	310	Pharmacy Claims - CVS	2018
5/11/2020	CAREMARK CLAIMS	(5,347.00)	310	Pharmacy Claims - CVS	2018
5/19/2020	CAREMARK CLAIMS	(10.65)	310	Pharmacy Claims - CVS	2018
5/18/2020	HLTH INS REFUND	(26.39)	101	Premiums	2019
5/5/2020	MEDICAL CLAIMS- ANTHEM	(729,033.64)	210	Medical Claims - Anthem	2019
5/12/2020	MEDICAL CLAIMS- ANTHEM	(1,096,936.39)	210	Medical Claims - Anthem	2019
5/18/2020	MEDICAL CLAIMS- ANTHEM	(1,571,653.07)	210	Medical Claims - Anthem	2019
5/27/2020	MEDICAL CLAIMS- ANTHEM	(771,115.11)	210	Medical Claims - Anthem	2019
4/30/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(7,302.18)	213	HRA Embedded Claims - Wage Works	2019
5/1/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(7,217.34)	213	HRA Embedded Claims - Wage Works	2019
5/4/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(11,170.78)	213	HRA Embedded Claims - Wage Works	2019
5/5/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(10,220.28)	213	HRA Embedded Claims - Wage Works	2019
5/6/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(28,580.93)	213	HRA Embedded Claims - Wage Works	2019
5/7/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(2,391.65)	213	HRA Embedded Claims - Wage Works	2019
5/8/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(795.85)	213	HRA Embedded Claims - Wage Works	2019
5/11/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(1,201.61)	213	HRA Embedded Claims - Wage Works	2019
5/12/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(202.92)	213	HRA Embedded Claims - Wage Works	2019
5/13/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(2,586.98)	213	HRA Embedded Claims - Wage Works	2019
5/15/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(1,120.27)	213	HRA Embedded Claims - Wage Works	2019
5/19/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(501.72)	213	HRA Embedded Claims - Wage Works	2019
5/21/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(35.66)	213	HRA Embedded Claims - Wage Works	2019
4/30/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(6,481.04)	214	HRA Waiver Claims - Wage Works	2019
4/30/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(383.00)	214	HRA Waiver Claims - Wage Works	2019
5/1/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(3,628.60)	214	HRA Waiver Claims - Wage Works	2019
5/1/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(6,279.20)	214	HRA Waiver Claims - Wage Works	2019
5/4/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(1,724.23)	214	HRA Waiver Claims - Wage Works	2019
5/5/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(805.90)	214	HRA Waiver Claims - Wage Works	2019
5/5/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(6,205.43)	214	HRA Waiver Claims - Wage Works	2019

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Date	Description	Amount	LRC Code	LRC Description	Plan Year
5/6/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(17,236.29)	214	HRA Waiver Claims - Wage Works	2019
5/7/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(3,816.12)	214	HRA Waiver Claims - Wage Works	2019
5/8/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(6,007.80)	214	HRA Waiver Claims - Wage Works	2019
5/8/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(258.74)	214	HRA Waiver Claims - Wage Works	2019
5/11/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(381.34)	214	HRA Waiver Claims - Wage Works	2019
5/12/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(289.83)	214	HRA Waiver Claims - Wage Works	2019
5/13/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(47.86)	214	HRA Waiver Claims - Wage Works	2019
5/15/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(50.00)	214	HRA Waiver Claims - Wage Works	2019
5/18/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(100.00)	214	HRA Waiver Claims - Wage Works	2019
5/19/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(76.13)	214	HRA Waiver Claims - Wage Works	2019
5/20/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(55.57)	214	HRA Waiver Claims - Wage Works	2019
5/21/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(531.39)	214	HRA Waiver Claims - Wage Works	2019
5/15/2020	ADMIN FEE 04/2020-WW,HC FSA	(3,589.60)	216	Wage Works Admin	2019
5/15/2020	ADMIN FEE 04/2020-WW,DC FSA	(854.00)	216	Wage Works Admin	2019
5/15/2020	ADMIN FEE 04/2020-WW,HCDC FSA	(100.80)	216	Wage Works Admin	2019
5/4/2020	CAREMARK CLAIMS	(2,244.44)	310	Pharmacy Claims - CVS	2019
5/11/2020	CAREMARK CLAIMS	(2.54)	310	Pharmacy Claims - CVS	2019
5/19/2020	CAREMARK CLAIMS	3,681.21	310	Pharmacy Claims - CVS	2019
5/26/2020	CAREMARK CLAIMS	(84.71)	310	Pharmacy Claims - CVS	2019
5/11/2020	UPPS PAYROLL	12,881,029.91	101	Premiums	2020
5/26/2020	UPPS PAYROLL	12,948,916.93	101	Premiums	2020
5/1/2020	UPPS PAYROLL	477.47	101	Premiums	2020
5/6/2020	UPPS PAYROLL	802.48	101	Premiums	2020
5/14/2020	UPPS PAYROLL	1,392.77	101	Premiums	2020
5/18/2020	UPPS PAYROLL	125.23	101	Premiums	2020
5/28/2020	UPPS PAYROLL	5,672.65	101	Premiums	2020
4/30/2020	HEALTH PREMIUMS 2020	7,753.15	101	Premiums	2020
5/1/2020	EPAY-HEALTH PREMIUMS 2020	1,473,058.05	101	Premiums	2020
5/4/2020	EPAY-HEALTH PREMIUMS 2020	1,901,964.71	101	Premiums	2020
5/4/2020	EPAY-HEALTH PREMIUMS 2020	689,779.42	101	Premiums	2020
5/5/2020	KCTCS PREMIUM PAYMENT APR 2020	118,462.82	101	Premiums	2020
5/5/2020	KCTCS PREMIUM PAYMENT APR 2020	3,212,057.73	101	Premiums	2020
5/5/2020	EPAY-HEALTH PREMIUMS 2020	18,233.20	101	Premiums	2020
5/6/2020	HEALTH PREMIUMS 2020	169,212.41	101	Premiums	2020
5/6/2020	EPAY-HEALTH PREMIUMS 2020	1,535,522.10	101	Premiums	2020
5/6/2020	COBRA PREMIUMS FEB 2020- WW	128,310.33	101	Premiums	2020
5/7/2020	EPAY-HEALTH PREMIUMS 2020	730,214.65	101	Premiums	2020
5/8/2020	HEALTH PREMIUMS 2020	52,693.74	101	Premiums	2020
5/11/2020	EPAY-HEALTH PREMIUMS 2020	335,070.26	101	Premiums	2020
5/11/2020	EPAY-HEALTH PREMIUMS 2020	316,858.81	101	Premiums	2020
5/11/2020	EPAY-HEALTH PREMIUMS 2020	187,574.30	101	Premiums	2020
5/14/2020	COBRA PREMIUMSMAR 2020- WW	160,493.80	101	Premiums	2020
5/18/2020	HEALTH PREMIUMS 2020	1,469.20	101	Premiums	2020
5/14/2020	EPAY-HEALTH PREMIUMS 2020	372,775.03	101	Premiums	2020
5/14/2020	EPAY-HEALTH PREMIUMS 2020	225,878.12	101	Premiums	2020
5/15/2020	EPAY-HEALTH PREMIUMS 2020	978,867.92	101	Premiums	2020
5/18/2020	EPAY-HEALTH PREMIUMS 2020	411,691.64	101	Premiums	2020
5/18/2020	EPAY-HEALTH PREMIUMS 2020	384,403.76	101	Premiums	2020
5/19/2020	EPAY-HEALTH PREMIUMS 2020	8,676.50	101	Premiums	2020
5/20/2020	EPAY-HEALTH PREMIUMS 2020	310,514.35	101	Premiums	2020
5/20/2020	JUDICIAL RETIREMENT 5/20	4,389.92	101	Premiums	2020
5/20/2020	JUDICIAL RETIREMENT 5/20	79,200.32	101	Premiums	2020
5/20/2020	LEGISLATIVE RETIREMENT 5/20	3,527.22	101	Premiums	2020
5/20/2020	LEGISLATIVE RETIREMENT 5/20	26,794.64	101	Premiums	2020

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5/21/2020	EPAY-HEALTH PREMIUMS 2020	204,185.58	101	Premiums	2020
5/22/2020	EPAY-HEALTH PREMIUMS 2020	568,854.28	101	Premiums	2020
5/22/2020	HEALTH PREMIUMS 2020	5,770.26	101	Premiums	2020
5/26/2020	EPAY-HEALTH PREMIUMS 2020	507,543.52	101	Premiums	2020
5/26/2020	EPAY-HEALTH PREMIUMS 2020	591,808.45	101	Premiums	2020
5/28/2020	EPAY-HEALTH PREMIUMS 2020	830,696.77	101	Premiums	2020
5/29/2020	EPAY-HEALTH PREMIUMS 2020	938,947.54	101	Premiums	2020
5/8/2020	HLTH INS REFUND	(165.60)	101	Premiums	2020
5/8/2020	HLTH INS REFUND	(41.19)	101	Premiums	2020
5/18/2020	HLTH INS REFUND	(368.86)	101	Premiums	2020
5/26/2020	HLTH INS REFUND	(65.23)	101	Premiums	2020
5/8/2020	HLTH INS REFUND	(82.38)	101	Premiums	2020
5/26/2020	HLTH INS REFUND	(25.40)	101	Premiums	2020
5/8/2020	HLTH INS REFUND	(83.33)	101	Premiums	2020
5/18/2020	HLTH INS REFUND	(152.44)	101	Premiums	2020
5/26/2020	HLTH INS REFUND	(79.56)	101	Premiums	2020
5/8/2020	HLTH INS REFUND	(304.62)	101	Premiums	2020
5/18/2020	HLTH INS REFUND	(126.05)	101	Premiums	2020
5/26/2020	HLTH INS REFUND	(6.00)	101	Premiums	2020
5/18/2020	HLTH INS REFUND	(25.45)	101	Premiums	2020
5/8/2020	HLTH INS REFUND	(105.23)	101	Premiums	2020
5/18/2020	HLTH INS REFUND	(25.45)	101	Premiums	2020
5/8/2020	HLTH INS REFUND	(24.71)	101	Premiums	2020
5/18/2020	HLTH INS REFUND	(55,782.93)	101	Premiums	2020
5/8/2020	HLTH INS REFUND	(122.38)	101	Premiums	2020
5/8/2020	HLTH INS REFUND	(24.71)	101	Premiums	2020
5/1/2020	KDE PREMIUMS APR 2020	60,147,338.96	101	Premiums	2020
5/13/2020	KRS 5/20 HEALTH PREMIUMS	22,995,727.13	101	Premiums	2020
5/22/2020	KTRS 5/20 PREMIUMS	8,366,644.87	101	Premiums	2020
5/11/2020	UPPS PAYROLL	318,062.50	102	HRA Waiver Contribution	2020
5/26/2020	UPPS PAYROLL	321,037.80	102	HRA Waiver Contribution	2020
5/28/2020	UPPS PAYROLL	525.00	102	HRA Waiver Contribution	2020
5/1/2020	EPAY-HRA WAIVER PREMIUMS 2020	700.00	102	HRA Waiver Contribution	2020
5/4/2020	EPAY-HRA D&V PREMIUMS 2020	1,575.00	102	HRA Waiver Contribution	2020
5/4/2020	EPAY-HRA WAIVER PREMIUMS 2020	6,387.50	102	HRA Waiver Contribution	2020
5/4/2020	EPAY-HRA D&V PREMIUMS 2020	175.00	102	HRA Waiver Contribution	2020
5/4/2020	EPAY-HRA WAIVER PREMIUMS 2020	175.00	102	HRA Waiver Contribution	2020
5/6/2020	EPAY-HRA WAIVER PREMIUMS 2020	875.00	102	HRA Waiver Contribution	2020
5/6/2020	EPAY-HRA D&V PREMIUMS 2020	700.00	102	HRA Waiver Contribution	2020
5/7/2020	EPAY-HRA D&V PREMIUMS 2020	175.00	102	HRA Waiver Contribution	2020
5/7/2020	EPAY-HRA WAIVER PREMIUMS 2020	350.00	102	HRA Waiver Contribution	2020
5/14/2020	EPAY-HRA WAIVER PREMIUMS 2020	175.00	102	HRA Waiver Contribution	2020
5/14/2020	EPAY-HRA WAIVER PREMIUMS 2020	350.00	102	HRA Waiver Contribution	2020
5/14/2020	EPAY-HRA D&V PREMIUMS 2020	175.00	102	HRA Waiver Contribution	2020
5/18/2020	EPAY-HRA WAIVER PREMIUMS 2020	4,375.00	102	HRA Waiver Contribution	2020
5/18/2020	EPAY-HRA D&V PREMIUMS 2020	2,800.00	102	HRA Waiver Contribution	2020
5/18/2020	EPAY-HRA D&V PREMIUMS 2020	525.00	102	HRA Waiver Contribution	2020
5/18/2020	EPAY-HRA WAIVER PREMIUMS 2020	2,100.00	102	HRA Waiver Contribution	2020
5/20/2020	EPAY-HRA WAIVER PREMIUMS 2020	700.00	102	HRA Waiver Contribution	2020
5/20/2020	EPAY-HRA D&V PREMIUMS 2020	350.00	102	HRA Waiver Contribution	2020
5/26/2020	EPAY-HRA D&V PREMIUMS 2020	1,400.00	102	HRA Waiver Contribution	2020
5/26/2020	EPAY-HRA WAIVER PREMIUMS 2020	4,025.00	102	HRA Waiver Contribution	2020
5/28/2020	EPAY-HRA D&V PREMIUMS 2020	525.00	102	HRA Waiver Contribution	2020
5/28/2020	EPAY-HRA WAIVER PREMIUMS 2020	1,050.00	102	HRA Waiver Contribution	2020

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5/29/2020	EPAY-HRA D&V PREMIUMS 2020	350.00	102	HRA Waiver Contribution	2020
5/29/2020	EPAY-HRA WAIVER PREMIUMS 2020	350.00	102	HRA Waiver Contribution	2020
5/28/2020	KDE HRA WAIVER MAY 2020	2,333,366.64	102	HRA Waiver Contribution	2020
5/28/2020	KDE HRA D&V MAY 2020	1,136,270.86	102	HRA Waiver Contribution	2020
6/2/2020	EARNED INTEREST INCOME APRIL	31,069.63	110	Interest Income	2020
6/2/2020	EARNED INTEREST INCOME APRIL	(38,404.72)	110	Interest Income	2020
5/14/2020	PREMISE HEALTH - 4/2020	(99,573.29)	210	Medical Claims - Anthem	2020
5/5/2020	MEDICAL CLAIMS- ANTHEM	(14,204,772.83)	210	Medical Claims - Anthem	2020
5/12/2020	MEDICAL CLAIMS- ANTHEM	(14,494,284.21)	210	Medical Claims - Anthem	2020
5/13/2020	UK ACUPUNCTURE 02/2020	(838.06)	210	Medical Claims - Anthem	2020
5/13/2020	UK ACUPUNCTURE 03/2020	(5,531.68)	210	Medical Claims - Anthem	2020
5/18/2020	MEDICAL CLAIMS- ANTHEM	(13,218,326.59)	210	Medical Claims - Anthem	2020
5/21/2020	UK ACUPUNCTURE 04/2020	(762.74)	210	Medical Claims - Anthem	2020
5/21/2020	MDX/COMPASS INCENTIVES 4-2020	(29,695.00)	210	Medical Claims - Anthem	2020
5/27/2020	MEDICAL CLAIMS- ANTHEM	(13,510,685.94)	210	Medical Claims - Anthem	2020
4/30/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(183,929.17)	213	HRA Embedded Claims - Wage Works	2020
5/1/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(189,809.78)	213	HRA Embedded Claims - Wage Works	2020
5/4/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(385,629.92)	213	HRA Embedded Claims - Wage Works	2020
5/5/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(53,253.32)	213	HRA Embedded Claims - Wage Works	2020
5/6/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(169,342.25)	213	HRA Embedded Claims - Wage Works	2020
5/7/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(201,996.70)	213	HRA Embedded Claims - Wage Works	2020
5/8/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(185,947.73)	213	HRA Embedded Claims - Wage Works	2020
5/11/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(352,086.28)	213	HRA Embedded Claims - Wage Works	2020
5/12/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(50,517.63)	213	HRA Embedded Claims - Wage Works	2020
5/13/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(182,365.45)	213	HRA Embedded Claims - Wage Works	2020
5/14/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(188,979.93)	213	HRA Embedded Claims - Wage Works	2020
5/15/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(176,989.24)	213	HRA Embedded Claims - Wage Works	2020
5/18/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(408,691.03)	213	HRA Embedded Claims - Wage Works	2020
5/19/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(50,447.02)	213	HRA Embedded Claims - Wage Works	2020
5/20/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(174,250.23)	213	HRA Embedded Claims - Wage Works	2020
5/21/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(204,341.59)	213	HRA Embedded Claims - Wage Works	2020
5/22/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(198,696.47)	213	HRA Embedded Claims - Wage Works	2020
5/26/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(431,266.52)	213	HRA Embedded Claims - Wage Works	2020
5/27/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(24,845.95)	213	HRA Embedded Claims - Wage Works	2020
5/28/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(187,281.03)	213	HRA Embedded Claims - Wage Works	2020
4/30/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(11,416.50)	214	HRA Waiver Claims - Wage Works	2020
4/30/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(65,637.64)	214	HRA Waiver Claims - Wage Works	2020
5/1/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(64,604.57)	214	HRA Waiver Claims - Wage Works	2020
5/1/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(8,953.82)	214	HRA Waiver Claims - Wage Works	2020
5/4/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(152,018.30)	214	HRA Waiver Claims - Wage Works	2020
5/4/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(20,705.32)	214	HRA Waiver Claims - Wage Works	2020

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5/5/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(27,377.92)	214	HRA Waiver Claims - Wage Works	2020
5/5/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(5,422.90)	214	HRA Waiver Claims - Wage Works	2020
5/6/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(9,503.08)	214	HRA Waiver Claims - Wage Works	2020
5/6/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(64,323.97)	214	HRA Waiver Claims - Wage Works	2020
5/7/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(20,884.98)	214	HRA Waiver Claims - Wage Works	2020
5/7/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(72,485.88)	214	HRA Waiver Claims - Wage Works	2020
5/8/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(27,261.17)	214	HRA Waiver Claims - Wage Works	2020
5/8/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(64,340.34)	214	HRA Waiver Claims - Wage Works	2020
5/11/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(30,373.98)	214	HRA Waiver Claims - Wage Works	2020
5/11/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(135,051.54)	214	HRA Waiver Claims - Wage Works	2020
5/12/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(23,002.61)	214	HRA Waiver Claims - Wage Works	2020
5/12/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(2,720.89)	214	HRA Waiver Claims - Wage Works	2020
5/13/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(16,629.58)	214	HRA Waiver Claims - Wage Works	2020
5/13/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(69,806.66)	214	HRA Waiver Claims - Wage Works	2020
5/14/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(15,759.56)	214	HRA Waiver Claims - Wage Works	2020
5/14/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(84,971.11)	214	HRA Waiver Claims - Wage Works	2020
5/15/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(27,244.82)	214	HRA Waiver Claims - Wage Works	2020
5/15/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(75,072.05)	214	HRA Waiver Claims - Wage Works	2020
5/18/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(44,200.32)	214	HRA Waiver Claims - Wage Works	2020
5/18/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(147,117.09)	214	HRA Waiver Claims - Wage Works	2020
5/19/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(6,848.05)	214	HRA Waiver Claims - Wage Works	2020
5/19/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(24,269.50)	214	HRA Waiver Claims - Wage Works	2020
5/20/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(19,956.77)	214	HRA Waiver Claims - Wage Works	2020
5/20/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(69,180.51)	214	HRA Waiver Claims - Wage Works	2020
5/21/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(21,818.82)	214	HRA Waiver Claims - Wage Works	2020
5/21/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(87,142.20)	214	HRA Waiver Claims - Wage Works	2020
5/22/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(23,393.63)	214	HRA Waiver Claims - Wage Works	2020
5/22/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(93,683.90)	214	HRA Waiver Claims - Wage Works	2020
5/26/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(155,515.78)	214	HRA Waiver Claims - Wage Works	2020
5/26/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(49,826.95)	214	HRA Waiver Claims - Wage Works	2020
5/27/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(15,445.70)	214	HRA Waiver Claims - Wage Works	2020
5/27/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(828.81)	214	HRA Waiver Claims - Wage Works	2020
5/28/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(85,270.88)	214	HRA Waiver Claims - Wage Works	2020
5/28/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(18,570.79)	214	HRA Waiver Claims - Wage Works	2020
5/4/2020	ANTHEM OUT OF STATE FEES MGARA ME Vaccine NY HCRA 03/2020	(113.90)	215	Anthem Admin	2020
5/4/2020	ANTHEM ASO FEES 05/2020	(3,715,247.25)	215	Anthem Admin	2020
5/19/2020	ANTHEM OUT OF STATE FEES AK, RI VACCINE 1st QTR 2020	(15.26)	215	Anthem Admin	2020
5/21/2020	ANTHEM ASO FEES - COBRA 04/2020	(3,267.00)	215	Anthem Admin	2020
5/12/2020	COBRA ADMIN FEES 04/2020 - WW	(45,500.00)	216	Wage Works Admin	2020
5/15/2020	ADMIN FEE 04/2020-WW,HCDC FSA	(3,105.20)	216	Wage Works Admin	2020
5/15/2020	ADMIN FEE 04/2020-WW,HCDC FSA	(71,780.80)	216	Wage Works Admin	2020
5/15/2020	ADMIN FEE 04/2020-WW, HRA 2020	(366,189.60)	216	Wage Works Admin	2020
5/15/2020	ADMIN FEE 04/2020-WW,DC FSA	(1,892.80)	216	Wage Works Admin	2020
5/19/2020	MDX SAPPHIRE - SMARTSHOPPER ADMIN FEES 5-2020	(78,649.45)	217	MDX Medical Admin - Compass Choice	2020
5/19/2020	MDX SAPPHIRE - MEG ADMIN FEES 5-2020	(26,594.60)	217	MDX Medical Admin - Compass Choice	2020
5/21/2020	RETHINK 6/2020	(88,184.00)	218	Rethink BH Services	2020
5/8/2020	STAYWELL INCENTIVE FULFILLMENT 4/2020	(69,092.74)	221	Staywell Admin	2020
5/8/2020	STAYWELL TELEPHONE/VIRTUAL COACHING 3/2020	(66,675.00)	221	Staywell Admin	2020
5/8/2020	STAYWELL (HD) SCREENINGS 3/2020	(417,780.00)	221	Staywell Admin	2020
5/8/2020	STAYWELL SCREENINGS CANCELLATION FEE 3/2020	(425.00)	221	Staywell Admin	2020

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5/8/2020	STAYWELL WELLNESS, CORE - 4/2020	(218,187.60)	221	Staywell Admin	2020
5/8/2020	STAYWELL PHYSICIAN FORMS 3/2020	(5,260.00)	221	Staywell Admin	2020
5/8/2020	STAYWELL LAB OPTIONS 3/2020	(750.00)	221	Staywell Admin	2020
5/8/2020	Staywell Communication Fee - 4/2020	(23,453.39)	221	Staywell Admin	2020
5/8/2020	STAYWELL ONSITE SCREENINGS 3/2020	(25,150.00)	221	Staywell Admin	2020
5/8/2020	STAYWELL SCREENINGS TRUE UP 3/2020	(2,000.00)	221	Staywell Admin	2020
5/4/2020	CAREMARK CLAIMS	(9,792,817.72)	310	Pharmacy Claims - CVS	2020
5/11/2020	CAREMARK CLAIMS	(9,459,707.80)	310	Pharmacy Claims - CVS	2020
5/19/2020	CAREMARK CLAIMS	(11,648,096.70)	310	Pharmacy Claims - CVS	2020
5/26/2020	CAREMARK CLAIMS	(10,719,521.75)	310	Pharmacy Claims - CVS	2020
5/1/2020	CVS CAREMARK 04/16/2020-04/23/2020	(96,644.80)	311	CVS Admin	2020
5/12/2020	KNOW YOUR RX COALITION 1ST QTR 2020	(112,500.00)	311	CVS Admin	2020
5/12/2020	CVS CAREMARK BRIDGE SUPPLY 12/19/2019-03/31/2020	(6.54)	311	CVS Admin	2020
5/12/2020	CVS CAREMARK 03/2020 ENHANCED SFTY MONITORING	(10,664.68)	311	CVS Admin	2020
5/12/2020	CVS CAREMARK RX AUDIT ADJUSTMENT 04/24/2020-04/20/2020	7,382.71	311	CVS Admin	2020
5/12/2020	CVS CAREMARK NURSING SERVICES 04/2020	(7,885.00)	311	CVS Admin	2020
5/12/2020	CVS CAREMARK 03/2020 PRIOR AUTHORIZATION	(86,070.00)	311	CVS Admin	2020
5/12/2020	CVS CAREMARK 03/2020 PHARM COUNSELING	103.80	311	CVS Admin	2020
5/12/2020	CVS CAREMARK 03/2020 DRUG SAVING REVIEW	(79,985.10)	311	CVS Admin	2020
5/12/2020	CVS CAREMARK 03/2020 APPEALS	(39,540.00)	311	CVS Admin	2020
5/12/2020	CVS CAREMARK 04/24/2020-04/30/2020	(81,774.45)	311	CVS Admin	2020
5/14/2020	CVS CAREMARK 05/1/2020-05/7/2020	(82,768.90)	311	CVS Admin	2020
5/13/2020	CORRECTION - PRC 20*9535 TAKE OUT FUNCTION HA02	(32,960.00)	501	Operating Transfer/Exp & Adj	2020
5/13/2020	CORRECTION - PRC 20*9535 TAKE OUT FUNCTION HA02	32,960.00	501	Operating Transfer/Exp & Adj	2020
	May	25,505,156.76			
	Ending Balance	\$567,413,787.99			

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May Account Summary		
101	Premiums	134,783,744.99
102	HRA Waiver Contribution	4,139,625.30
110	Interest Income	(7,335.09)
121	Drug Rebates - CVS	0.00
130	Transfers From other plan year(s)	0.00
210	Medical Claims - Anthem	(59,869,792.55)
213	HRA Embedded Claims - Wage Works	(4,073,995.41)
214	HRA Waiver Claims - Wage Works	(2,012,997.36)
215	Anthem Admin	(3,718,643.41)
216	Wage Works Admin	(493,012.80)
217	MDX Medical Admin - Compass Choice	(105,244.05)
218	Rethink BH Services	(88,184.00)
219	Ongoing Dependent Eligibility Audit	0.00
220	Printing & Postage Services	0.00
221	Staywell Admin	(828,773.73)
222	Staywell Claims	0.00
310	Pharmacy Claims - CVS	(41,629,882.17)
311	CVS Admin	(590,352.96)
500	Transfers To other plan year(s)	0.00
501	Operating Transfer/ Exp & Adj	0.00
502	Transfer for Clinic Cleaning Services	0.00
503	Voided/NSF/Cancelled Check Fees	0.00
May Activity		\$25,505,156.76

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JUNE 2020 COMBINED TRANSACTION REPORT

Date	Description	Amount	LRC Code	LRC Description	Plan Year
	Beginning Balance	\$567,413,787.99			
6/1/2020	MEDICAL CLAIMS- ANTHEM	\$5,096.62	210	Medical Claims - Anthem	2016
6/22/2020	MEDICAL CLAIMS- ANTHEM	\$23.76	210	Medical Claims - Anthem	2016
6/30/2020	MEDICAL CLAIMS- ANTHEM	\$8,978.50	210	Medical Claims - Anthem	2016
6/30/2020	FY20-HB200 TRANSFER OUT	(\$87,713,558.61)	501	Operating Transfer/Exp & Adj	2016
6/1/2020	MEDICAL CLAIMS- ANTHEM	\$22,417.33	210	Medical Claims - Anthem	2017
6/9/2020	MEDICAL CLAIMS- ANTHEM	(\$56,079.28)	210	Medical Claims - Anthem	2017
6/9/2020	CAREMARK CLAIMS	(\$2,918.45)	310	Pharmacy Claims - CVS	2017
6/15/2020	MEDICAL CLAIMS- ANTHEM	(\$44,446.13)	210	Medical Claims - Anthem	2017
6/22/2020	MEDICAL CLAIMS- ANTHEM	\$11,578.63	210	Medical Claims - Anthem	2017
6/24/2020	CAREMARK CLAIMS	(\$161.95)	310	Pharmacy Claims - CVS	2017
6/30/2020	MEDICAL CLAIMS- ANTHEM	\$2,495.73	210	Medical Claims - Anthem	2017
6/30/2020	FY20-HB200 TRANSFER OUT	(\$87,650,841.39)	501	Operating Transfer/Exp & Adj	2017
6/1/2020	MEDICAL CLAIMS- ANTHEM	\$44,872.84	210	Medical Claims - Anthem	2018
6/2/2020	CAREMARK CLAIMS	(\$14.98)	310	Pharmacy Claims - CVS	2018
6/9/2020	CAREMARK CLAIMS	(\$2,979.88)	310	Pharmacy Claims - CVS	2018
6/9/2020	MEDICAL CLAIMS- ANTHEM	(\$238,528.41)	210	Medical Claims - Anthem	2018
6/15/2020	MEDICAL CLAIMS- ANTHEM	\$85,509.19	210	Medical Claims - Anthem	2018
6/22/2020	MEDICAL CLAIMS- ANTHEM	\$65,739.29	210	Medical Claims - Anthem	2018
6/24/2020	CAREMARK CLAIMS	(\$112.10)	310	Pharmacy Claims - CVS	2018
6/30/2020	MEDICAL CLAIMS- ANTHEM	(\$40,811.94)	210	Medical Claims - Anthem	2018
6/1/2020	MEDICAL CLAIMS- ANTHEM	(\$722,222.32)	210	Medical Claims - Anthem	2019
6/2/2020	CAREMARK CLAIMS	\$5,206.12	310	Pharmacy Claims - CVS	2019
6/3/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$406.00)	214	HRA Waiver Claims - Wage Works	2019
6/9/2020	CAREMARK CLAIMS	(\$2,652.13)	310	Pharmacy Claims - CVS	2019
6/9/2020	MEDICAL CLAIMS- ANTHEM	(\$3,065,454.22)	210	Medical Claims - Anthem	2019
6/10/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$60.00)	214	HRA Waiver Claims - Wage Works	2019
6/15/2020	MEDICAL CLAIMS- ANTHEM	(\$402,879.92)	210	Medical Claims - Anthem	2019
6/16/2020	CAREMARK CLAIMS	\$1,341.85	310	Pharmacy Claims - CVS	2019
6/18/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$754.23)	213	HRA Embedded Claims - Wage Works	2019
6/22/2020	MEDICAL CLAIMS- ANTHEM	(\$947,343.48)	210	Medical Claims - Anthem	2019
6/22/2020	PCORI FEE FOR 2019	(\$618,527.00)	501	Operating Transfer/Exp & Adj	2019
6/24/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$55.37)	213	HRA Embedded Claims - Wage Works	2019
6/24/2020	CAREMARK CLAIMS	(\$11,883.64)	310	Pharmacy Claims - CVS	2019
6/26/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$425.00)	214	HRA Waiver Claims - Wage Works	2019
6/30/2020	MEDICAL CLAIMS- ANTHEM	(\$300,899.16)	210	Medical Claims - Anthem	2019
5/27/2020	JEFFERSON CO BOE MAY 2020 HEALTH INS PREM	\$1,791,894.20	101	Premiums	2020
5/28/2020	HEALTH PREMIUMS 2020	\$1,788.02	101	Premiums	2020
5/29/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$25,028.21)	214	HRA Waiver Claims - Wage Works	2020
5/29/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$81,832.02)	214	HRA Waiver Claims - Wage Works	2020
5/29/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$201,613.33)	213	HRA Embedded Claims - Wage Works	2020
6/1/2020	EPAY-HEALTH PREMIUMS 2020	\$39,984.14	101	Premiums	2020
6/1/2020	EPAY-HRA D&V PREMIUMS 2020	\$2,975.00	102	HRA Waiver Contribution	2020
6/1/2020	EPAY-HEALTH PREMIUMS 2020	\$1,721,174.34	101	Premiums	2020
6/1/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$5,775.00	102	HRA Waiver Contribution	2020
6/1/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$34,402.14)	214	HRA Waiver Claims - Wage Works	2020
6/1/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$4,375.00	102	HRA Waiver Contribution	2020
6/1/2020	EPAY-HEALTH PREMIUMS 2020	\$2,163,851.75	101	Premiums	2020
6/1/2020	MEDICAL CLAIMS- ANTHEM	(\$14,840,606.84)	210	Medical Claims - Anthem	2020
6/1/2020	EPAY-HRA D&V PREMIUMS 2020	\$1,400.00	102	HRA Waiver Contribution	2020
6/1/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$449,980.92)	213	HRA Embedded Claims - Wage Works	2020
6/1/2020	UPPS PAYROLL	(\$87.50)	101	Premiums	2020

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6/1/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$1,225.00	102	HRA Waiver Contribution	2020
6/1/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$198,132.12)	214	HRA Waiver Claims - Wage Works	2020
6/2/2020	EPAY-HEALTH PREMIUMS 2020	\$177,106.15	101	Premiums	2020
6/2/2020	CAREMARK CLAIMS	(\$9,611,022.90)	310	Pharmacy Claims - CVS	2020
6/2/2020	ISS FACILITY SERVICES CLINIC JANITORIAL SERVICES ANNEX, CHR, 300 BLDG, & 500 MERO 3/2020	(\$1,022.08)	502	Transfer for Clinic Services	2020
6/2/2020	ISS FACILITY SERVICES CLINIC JANITORIAL SERVICES L&N BLDG 3/2020	(\$255.52)	502	Transfer for Clinic Services	2020
6/2/2020	EPAY-HRA D&V PREMIUMS 2020	\$875.00	102	HRA Waiver Contribution	2020
6/2/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$60,157.40)	213	HRA Embedded Claims - Wage Works	2020
6/2/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$3,150.00	102	HRA Waiver Contribution	2020
6/2/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$3,911.31)	214	HRA Waiver Claims - Wage Works	2020
6/2/2020	CVS CAREMARK 05/16/2020-05/23/2020	(\$92,695.70)	311	CVS Admin	2020
6/2/2020	KDE PREMIUMS MAY 2020	\$56,331,201.08	101	Premiums	2020
6/2/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$37,672.99)	214	HRA Waiver Claims - Wage Works	2020
6/3/2020	CVS CAREMARK 05/8/2020-05/15/2020	(\$98,905.60)	311	CVS Admin	2020
6/3/2020	STAYWELL WELLNESS, CORE - 5/2020	(\$217,849.20)	221	Staywell Admin	2020
6/3/2020	STAYWELL LAB OPTIONS 4/2020	(\$400.00)	221	Staywell Admin	2020
6/3/2020	STAYWELL PHYSICIAN FORMS 4/2020	(\$1,440.00)	221	Staywell Admin	2020
6/3/2020	Staywell Communication Fee - 5/2020	(\$23,600.33)	221	Staywell Admin	2020
6/3/2020	STAYWELL (HD) SCREENINGS 4/2020	(\$5,775.00)	221	Staywell Admin	2020
6/3/2020	ANTHEM ASO FEES 06/2020	(\$3,707,723.25)	215	Anthem Admin	2020
6/3/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$700.00	102	HRA Waiver Contribution	2020
6/3/2020	STAYWELL INCENTIVE FULFILLMENT 5/2020	(\$68,985.58)	221	Staywell Admin	2020
6/3/2020	EPAY-HEALTH PREMIUMS 2020	\$1,705,544.46	101	Premiums	2020
6/3/2020	EPAY-HRA D&V PREMIUMS 2020	\$350.00	102	HRA Waiver Contribution	2020
6/3/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$17,470.15)	214	HRA Waiver Claims - Wage Works	2020
6/3/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$84,098.97)	214	HRA Waiver Claims - Wage Works	2020
6/3/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$182,137.02)	213	HRA Embedded Claims - Wage Works	2020
6/3/2020	STAYWELL TELEPHONE/VIRTUAL COACHING 4/2020	(\$91,000.00)	221	Staywell Admin	2020
6/4/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$525.00	102	HRA Waiver Contribution	2020
6/4/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$188,245.46)	213	HRA Embedded Claims - Wage Works	2020
6/4/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$75,259.97)	214	HRA Waiver Claims - Wage Works	2020
6/4/2020	EPAY-HEALTH PREMIUMS 2020	\$725,694.63	101	Premiums	2020
6/4/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$31,586.20)	214	HRA Waiver Claims - Wage Works	2020
6/4/2020	KNOW YOUR RX COALITION 2ND QTR 2020	(\$112,500.00)	311	CVS Admin	2020
6/5/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$67,455.08)	214	HRA Waiver Claims - Wage Works	2020
6/5/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$175.00	102	HRA Waiver Contribution	2020
6/5/2020	ISS FACILITY SERVICES CLINIC JANITORIAL SERVICES ANNEX, CHR, 300 BLDG, & 500 MERO 4/2020	(\$1,022.08)	502	Transfer for Clinic Services	2020
6/5/2020	KCTCS PREMIUM PAYMENT MAY 2020	\$3,228,369.19	101	Premiums	2020
6/5/2020	KCTCS PREMIUM PAYMENT MAY 2020	\$117,732.84	101	Premiums	2020
6/5/2020	HEALTH PREMIUMS 2020	\$179,210.78	101	Premiums	2020
6/5/2020	EPAY-HRA D&V PREMIUMS 2020	\$175.00	102	HRA Waiver Contribution	2020
6/5/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$38,003.34)	214	HRA Waiver Claims - Wage Works	2020
6/5/2020	ADMIN FEE05/2020-WW,HC FSA	(\$71,864.80)	216	Wage Works Admin	2020
6/5/2020	ADMIN FEE 05/2020-WW,DC FSA	(\$1,892.80)	216	Wage Works Admin	2020
6/5/2020	ADMIN FEE 05/2020-WW, HRA 2020	(\$324,041.20)	216	Wage Works Admin	2020
6/5/2020	ADMIN FEE 05/2020-WW,HCDC FSA	(\$3,113.60)	216	Wage Works Admin	2020
6/5/2020	HLTH INS REFUND	(\$165.30)	101	Premiums	2020
6/5/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$200,215.58)	213	HRA Embedded Claims - Wage Works	2020
6/5/2020	HLTH INS REFUND	(\$238.68)	101	Premiums	2020
6/5/2020	UPPS PAYROLL	(\$973.56)	101	Premiums	2020

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6/5/2020	EPAY-HEALTH PREMIUMS 2020	\$671,845.10	101	Premiums	2020
6/5/2020	MDX SAPPHIRE - MEG ADMIN FEES 6-2020	(\$26,658.60)	217	MDX Medical Admin - Compass Choice	2020
6/5/2020	MDX SAPPHIRE - SMARTSHOPPER ADMIN FEES 6-2020	(\$78,496.55)	217	MDX Medical Admin - Compass Choice	2020
6/8/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$410,094.81)	213	HRA Embedded Claims - Wage Works	2020
6/8/2020	KRS 6/20 HEALTH PREMIUMS	\$22,959,928.01	101	Premiums	2020
6/8/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$55,365.64)	214	HRA Waiver Claims - Wage Works	2020
6/8/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$178,511.16)	214	HRA Waiver Claims - Wage Works	2020
6/8/2020	EPAY-HEALTH PREMIUMS 2020	\$781,816.24	101	Premiums	2020
6/8/2020	EPAY-HEALTH PREMIUMS 2020	\$234,266.74	101	Premiums	2020
6/9/2020	MEDICAL CLAIMS- ANTHEM	(\$18,484,161.76)	210	Medical Claims - Anthem	2020
6/9/2020	CAREMARK CLAIMS	(\$10,173,914.02)	310	Pharmacy Claims - CVS	2020
6/9/2020	HEALTH PREMIUMS 2020	\$2,626.75	101	Premiums	2020
6/9/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$21,985.97)	214	HRA Waiver Claims - Wage Works	2020
6/9/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$63,763.16)	213	HRA Embedded Claims - Wage Works	2020
6/9/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$4,185.72)	214	HRA Waiver Claims - Wage Works	2020
6/10/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$700.00	102	HRA Waiver Contribution	2020
6/10/2020	UPPS PAYROLL	\$315,962.50	102	HRA Waiver Contribution	2020
6/10/2020	UPPS PAYROLL	\$1,616,571.88	101	Premiums	2020
6/10/2020	EPAY-HEALTH PREMIUMS 2020	\$218,904.70	101	Premiums	2020
6/10/2020	EPAY-HRA D&V PREMIUMS 2020	\$700.00	102	HRA Waiver Contribution	2020
6/10/2020	COBRA ADMIN FEES 05/2020 - WW	(\$45,500.00)	216	Wage Works Admin	2020
6/10/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$161,083.21)	213	HRA Embedded Claims - Wage Works	2020
6/10/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$28,412.85)	214	HRA Waiver Claims - Wage Works	2020
6/10/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$75,056.08)	214	HRA Waiver Claims - Wage Works	2020
6/11/2020	EPAY-HEALTH PREMIUMS 2020	\$1,003,041.79	101	Premiums	2020
6/11/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$78,614.15)	214	HRA Waiver Claims - Wage Works	2020
6/11/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$28,065.19)	214	HRA Waiver Claims - Wage Works	2020
6/11/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$216,134.66)	213	HRA Embedded Claims - Wage Works	2020
6/11/2020	PREMISE HEALTH - 5/2020	(\$96,653.41)	210	Medical Claims - Anthem	2020
6/12/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$208,041.41)	213	HRA Embedded Claims - Wage Works	2020
6/12/2020	EPAY-HEALTH PREMIUMS 2020	\$282,700.24	101	Premiums	2020
6/12/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$175.00	102	HRA Waiver Contribution	2020
6/12/2020	KDE FEB & APR 2020 ASO FEE PMT	\$103,994.80	216	Wage Works Admin	2020
6/12/2020	UPPS PAYROLL	(\$87.50)	102	HRA Waiver Contribution	2020
6/12/2020	UPPS PAYROLL	\$464.49	101	Premiums	2020
6/12/2020	ANTHEM ASO FEES - COBRA 05/2020	(\$3,737.25)	215	Anthem Admin	2020
6/12/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$20,794.99)	214	HRA Waiver Claims - Wage Works	2020
6/12/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$79,952.44)	214	HRA Waiver Claims - Wage Works	2020
6/15/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$47,589.63)	214	HRA Waiver Claims - Wage Works	2020
6/15/2020	EPAY-HEALTH PREMIUMS 2020	\$412,029.78	101	Premiums	2020
6/15/2020	MEDICAL CLAIMS- ANTHEM	(\$17,935,498.24)	210	Medical Claims - Anthem	2020
6/15/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$149,768.14)	214	HRA Waiver Claims - Wage Works	2020
6/15/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$381,896.08)	213	HRA Embedded Claims - Wage Works	2020
6/15/2020	EPAY-HRA D&V PREMIUMS 2020	\$175.00	102	HRA Waiver Contribution	2020
6/15/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$1,837.50	102	HRA Waiver Contribution	2020
6/15/2020	HLTH INS REFUND	(\$105.23)	101	Premiums	2020
6/15/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$175.00	102	HRA Waiver Contribution	2020
6/15/2020	EPAY-HEALTH PREMIUMS 2020	\$44,017.84	101	Premiums	2020
6/15/2020	EPAY-HRA D&V PREMIUMS 2020	\$525.00	102	HRA Waiver Contribution	2020
6/16/2020	UPPS PAYROLL	\$126.35	101	Premiums	2020
6/16/2020	CAREMARK CLAIMS	(\$13,030,066.51)	310	Pharmacy Claims - CVS	2020
6/16/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$48,937.92)	213	HRA Embedded Claims - Wage Works	2020
6/16/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$25,899.43)	214	HRA Waiver Claims - Wage Works	2020

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6/16/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$6,976.14)	214	HRA Waiver Claims - Wage Works	2020
6/17/2020	CVS CAREMARK 06/01/2020-06/07/2020	(\$88,357.85)	311	CVS Admin	2020
6/17/2020	EPAY-HRA D&V PREMIUMS 2020	\$350.00	102	HRA Waiver Contribution	2020
6/17/2020	EPAY-HEALTH PREMIUMS 2020	\$526,866.47	101	Premiums	2020
6/17/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$875.00	102	HRA Waiver Contribution	2020
6/18/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$18,187.39)	214	HRA Waiver Claims - Wage Works	2020
6/18/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$155,873.01)	213	HRA Embedded Claims - Wage Works	2020
6/18/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$97,235.22)	214	HRA Waiver Claims - Wage Works	2020
6/18/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$21,551.63)	214	HRA Waiver Claims - Wage Works	2020
6/18/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$78,985.74)	214	HRA Waiver Claims - Wage Works	2020
6/18/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$175.00	102	HRA Waiver Contribution	2020
6/18/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$218,582.11)	213	HRA Embedded Claims - Wage Works	2020
6/18/2020	EPAY-HEALTH PREMIUMS 2020	\$223,633.84	101	Premiums	2020
6/19/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$205,571.00)	213	HRA Embedded Claims - Wage Works	2020
6/19/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$80,581.59)	214	HRA Waiver Claims - Wage Works	2020
6/19/2020	EPAY-HEALTH PREMIUMS 2020	\$435,874.40	101	Premiums	2020
6/19/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$525.00	102	HRA Waiver Contribution	2020
6/19/2020	HEALTH PREMIUMS 2020	\$14,840.05	101	Premiums	2020
6/19/2020	MDX/COMPASS INCENTIVES 5-2020	(\$42,535.00)	210	Medical Claims - Anthem	2020
6/19/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$23,438.55)	214	HRA Waiver Claims - Wage Works	2020
6/22/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$147,820.64)	214	HRA Waiver Claims - Wage Works	2020
6/22/2020	EPAY-HEALTH PREMIUMS 2020	\$458,108.20	101	Premiums	2020
6/22/2020	LEGISLATIVE RETIREMENT 6/20	\$3,527.22	101	Premiums	2020
6/22/2020	JUDICIAL RETIREMENT 6/20	\$3,952.86	101	Premiums	2020
6/22/2020	JUDICIAL RETIREMENT 6/20	\$77,044.74	101	Premiums	2020
6/22/2020	MEDICAL CLAIMS- ANTHEM	(\$15,392,581.71)	210	Medical Claims - Anthem	2020
6/22/2020	EPAY-HRA D&V PREMIUMS 2020	\$700.00	102	HRA Waiver Contribution	2020
6/22/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$63,748.18)	214	HRA Waiver Claims - Wage Works	2020
6/22/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$435,695.67)	213	HRA Embedded Claims - Wage Works	2020
6/22/2020	EPAY-HEALTH PREMIUMS 2020	\$450,309.61	101	Premiums	2020
6/22/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$175.00	102	HRA Waiver Contribution	2020
6/22/2020	LEGISLATIVE RETIREMENT 6/20	\$26,794.64	101	Premiums	2020
6/23/2020	ISS FACILITY SERVICES CLINIC JANITORIAL SERVICES ANNEX, CHR, 300 BLDG, & 500 MERO 5/2020	(\$1,022.08)	502	Transfer for Clinic Services	2020
6/23/2020	STAYWELL INCENTIVE FULFILLMENT 6/2020	(\$68,925.16)	221	Staywell Admin	2020
6/23/2020	Staywell Communication Fee - 6/2020	(\$23,579.66)	221	Staywell Admin	2020
6/23/2020	ISS FACILITY SERVICES CLINIC JANITORIAL SERVICES L&N BLDG 5/2020	(\$255.52)	502	Transfer for Clinic Services	2020
6/23/2020	ISS FACILITY SERVICES CLINIC JANITORIAL SERVICES L&N BLDG 4/2020	(\$255.52)	502	Transfer for Clinic Services	2020
6/23/2020	CVS CAREMARK 06/08/2020-06/15/2020	(\$109,537.50)	311	CVS Admin	2020
6/23/2020	STAYWELL WELLNESS, CORE - 6/2020	(\$217,658.40)	221	Staywell Admin	2020
6/23/2020	CVS CAREMARK 04/2020 ENHANCED SFTY MONITORING	(\$10,690.20)	311	CVS Admin	2020
6/23/2020	STAYWELL PHYSICIAN FORMS 5/2020	(\$2,910.00)	221	Staywell Admin	2020
6/23/2020	CVS CAREMARK PER DIEM FEE 05/2020	(\$300.00)	311	CVS Admin	2020
6/23/2020	CVS CAREMARK 05/24/2020-05/31/2020	(\$85,538.30)	311	CVS Admin	2020
6/23/2020	CVS CAREMARK 04/2020 APPEALS	(\$21,820.00)	311	CVS Admin	2020
6/23/2020	CVS CAREMARK 04/2020 DRUG SAVING REVIEW	(\$80,176.50)	311	CVS Admin	2020
6/23/2020	CVS CAREMARK 04/2020 PRIOR AUTHORIZATION	(\$64,530.00)	311	CVS Admin	2020
6/23/2020	CVS CAREMARK RX AUDIT ADJUSTMENT 05/24/2020-05/31/2020	\$20,032.77	311	CVS Admin	2020
6/23/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	\$5,834.18	214	HRA Waiver Claims - Wage Works	2020
6/23/2020	STAYWELL LAB OPTIONS 5/2020	(\$1,400.00)	221	Staywell Admin	2020
6/23/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$25,249.68)	214	HRA Waiver Claims - Wage Works	2020

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Date	Description	Amount	LRC Code	LRC Description	Plan Year
6/23/2020	STAYWELL (HD) SCREENINGS 5/2020	(\$8,140.00)	221	Staywell Admin	2020
6/23/2020	KTRS 6/20 PREMIUMS	\$8,407,854.19	101	Premiums	2020
6/23/2020	CVS CAREMARK 04/2020 PHARM COUNSELING	(\$160,353.00)	311	CVS Admin	2020
6/23/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$45,950.69)	213	HRA Embedded Claims - Wage Works	2020
6/23/2020	CVS CAREMARK NURSING SERVICES 05/2020	(\$6,450.00)	311	CVS Admin	2020
6/23/2020	STAYWELL TELEPHONE/VIRTUAL COACHING 5/2020	(\$37,625.00)	221	Staywell Admin	2020
6/24/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$20,220.36)	214	HRA Waiver Claims - Wage Works	2020
6/24/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$165,630.61)	213	HRA Embedded Claims - Wage Works	2020
6/24/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$73,986.06)	214	HRA Waiver Claims - Wage Works	2020
6/24/2020	UPPS PAYROLL	\$1,575.00	102	HRA Waiver Contribution	2020
6/24/2020	CAREMARK CLAIMS	(\$12,409,891.39)	310	Pharmacy Claims - CVS	2020
6/24/2020	UPPS PAYROLL	\$83,914.81	101	Premiums	2020
6/24/2020	EPAY-HRA D&V PREMIUMS 2020	\$350.00	102	HRA Waiver Contribution	2020
6/24/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$175.00	102	HRA Waiver Contribution	2020
6/24/2020	EPAY-HEALTH PREMIUMS 2020	\$367,603.46	101	Premiums	2020
6/25/2020	HEALTH PREMIUMS 2020	\$9,198.07	101	Premiums	2020
6/25/2020	ALIGHT APR 2020 - DEP ELIGIBILITY ONGOING AUDIT	(\$5,320.00)	219	Ongoing Dependent Eligibility	2020
6/25/2020	EPAY-HRA D&V PREMIUMS 2020	\$1,575.00	102	HRA Waiver Contribution	2020
6/25/2020	COBRA PREMIUMS APR 2020- WW	\$162,594.56	101	Premiums	2020
6/25/2020	JEFFERSON CO BOE JUNE 2020 HEALTH INS PREM	\$1,802,821.11	101	Premiums	2020
6/25/2020	CVS CAREMARK 06/16/2020-06/23/2020	(\$102,701.40)	311	CVS Admin	2020
6/25/2020	EPAY-HEALTH PREMIUMS 2020	\$672,797.21	101	Premiums	2020
6/25/2020	ALIGHT MAY 2020 - DEP ELIGIBILITY ONGOING AUDIT	(\$3,842.75)	219	Ongoing Dependent Eligibility	2020
6/25/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$3,325.00	102	HRA Waiver Contribution	2020
6/26/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$175.00	102	HRA Waiver Contribution	2020
6/26/2020	EPAY-HEALTH PREMIUMS 2020	\$660,099.14	101	Premiums	2020
6/26/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$25,130.92)	214	HRA Waiver Claims - Wage Works	2020
6/26/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$72,191.63)	214	HRA Waiver Claims - Wage Works	2020
6/26/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$198,990.96)	213	HRA Embedded Claims - Wage Works	2020
6/26/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$211,340.64)	213	HRA Embedded Claims - Wage Works	2020
6/26/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$27,861.00)	214	HRA Waiver Claims - Wage Works	2020
6/26/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$73,878.84)	214	HRA Waiver Claims - Wage Works	2020
6/29/2020	EPAY-HEALTH PREMIUMS 2020	\$1,401,653.57	101	Premiums	2020
6/29/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$1,225.00	102	HRA Waiver Contribution	2020
6/29/2020	EPAY-HRA WAIVER PREMIUMS 2020	\$2,975.00	102	HRA Waiver Contribution	2020
6/29/2020	HRA CLAIM PAYMENTS (HRA EMBEDDED) - WW	(\$391,572.00)	213	HRA Embedded Claims - Wage Works	2020
6/29/2020	HRA CLAIM PAYMENTS (HRA D&V)- WW	(\$40,115.62)	214	HRA Waiver Claims - Wage Works	2020
6/29/2020	EPAY-HRA D&V PREMIUMS 2020	\$525.00	102	HRA Waiver Contribution	2020
6/29/2020	EPAY-HEALTH PREMIUMS 2020	\$1,229,806.61	101	Premiums	2020
6/29/2020	EPAY-HRA D&V PREMIUMS 2020	\$875.00	102	HRA Waiver Contribution	2020
6/29/2020	EPAY-HEALTH PREMIUMS 2020	\$68,752.16	101	Premiums	2020
6/29/2020	UK ACUPUNCTURE 05/2020	(\$2,224.86)	210	Medical Claims - Anthem	2020
6/29/2020	HRA CLAIM PAYMENTS (HRA WAIVER)- WW	(\$150,290.97)	214	HRA Waiver Claims - Wage Works	2020
6/30/2020	MEDICAL CLAIMS- ANTHEM	(\$19,689,140.02)	210	Medical Claims - Anthem	2020
6/30/2020	UPPS PAYROLL	\$179,922.49	101	Premiums	2020
6/30/2020	SHI/THOMAS REUTERS REPORTING AND PRINTING 2017	(\$177,515.57)	501	Operating Transfer/Exp & Adj	2020
6/30/2020	UPPS PAYROLL	(\$176,413.25)	102	HRA Waiver Contribution	2020
6/30/2020	UPPS PAYROLL	(\$179,922.49)	102	HRA Waiver Contribution	2020
6/30/2020	UPPS PAYROLL	\$176,413.25	101	Premiums	2020
6/30/2020	ANTHEM OUT OF STATE FEES MGARA NY HCRA 04/2020 -5/2020 ME Vaccine 4/2020	(\$219.84)	215	Anthem Admin	2020

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Date	Description	Amount	LRC Code	LRC Description	Plan Year
7/2/2020	EARNED INTEREST INCOME JUNE	\$33,220.28	110	Interest Income	2020
	June	(212,855,779.81)			
	Ending Balance	<u>\$354,558,008.18</u>			

June Account Summary		
101	Premiums	113,854,703.88
102	HRA Waiver Contribution	1,101.76
110	Interest Income	33,220.28
120	Drug Rebates - Express Scripts	0.00
121	Drug Rebates - CVS	0.00
130	Transfers From other plan year(s)	0.00
201	Medical Claims - Humana	0.00
202	Humana Admin	0.00
203	HRA Embedded Claims - Humana	0.00
204	HRA Waiver Claims - Humana	0.00
210	Medical Claims - Anthem	(92,055,354.81)
213	HRA Embedded Claims - Wage Works	(4,802,317.25)
214	HRA Waiver Claims - Wage Works	(2,531,560.87)
215	Anthem Admin	(3,711,680.34)
216	Wage Works Admin	(342,417.60)
217	MDX Medical Admin - Compass Choice	(105,155.15)
218	Rethink BH Services	0.00
219	Ongoing Dependent Eligibility Audit	(9,162.75)
220	Printing & Postage Services	0.00
221	Staywell Admin	(769,288.33)
222	Staywell Claims	0.00
301	Pharmacy Claims - Express Scripts	0.00
302	Express Scripts Admin	0.00
310	Pharmacy Claims - CVS	(45,239,069.98)
311	CVS Admin	(1,014,523.28)
500	Transfers To other plan year(s)	0.00
501	Operating Transfer/ Exp & Adj	(176,160,442.57)
502	Transfer for Clinic Cleaning Services	(3,832.80)
503	Voided/NSF/Cancelled Check Fees	0.00
June Activity		<u>(\$212,855,779.81)</u>

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		Plan Year 2016												Plan Year Transactions to Date	
2019	2018 Balance Forward	January-19	February-19	March-19	April-19	May-19	June-19	July-19	August-19	September-19	October-19	November-19	December-19	Date	
101	\$1,632,967,051.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,632,967,051.25	
102	\$47,516,224.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47,516,224.39	
110	\$7,627,758.07	469,113.46	451,511.62	426,947.56	(1,371,572.64)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,627,758.07	
120	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
121	\$72,017,116.58	100,020.35	0.00	0.00	17,776.88	0.00	0.00	5,932.40	0.00	0.00	11,516.47	0.00	0.00	72,152,362.68	
130	\$13,478.00	0.00	0.00	0.00	0.00	171,020.08	0.00	44,020.38	0.00	0.00	0.00	0.00	0.00	13,478.00	
201	\$362,255.47	0.00	116,169.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	693,465.51	
208	\$1,289.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(13,652,574.51)	
204	\$2,756.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,289.81	
210	\$966,440,697.90	47,966.71	(3,217.72)	(17,426.02)	122,870.25	80,861.25	4,402.72	30,657.75	34,561.12	23,494.52	135,817.87	124,606.43	(89,313.48)	2,756.85	
213	\$43,353,232.57	198.18	1,432.32	(5.80)	0.00	0.00	0.00	0.00	(618.61)	0.00	(2,311.30)	0.00	0.00	(965,945,316.59)	
214	\$40,096,274.28	(0.01)	0.00	0.00	0.00	(4.80)	0.00	0.00	(2,018.58)	0.00	(834.96)	0.00	0.00	(43,354,337.78)	
215	\$46,512,941.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(40,101,132.63)	
216	\$4,430,107.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(46,512,941.38)	
217	\$937,280.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(4,430,107.57)	
218	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(937,280.09)	
219	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
220	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
221	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
222	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
301	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
302	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
310	\$362,534,567.83	(9,256.86)	(3,840.14)	(17,111)	(270,127)	(5,621.99)	(19,001.95)	(3,228.51)	(935.13)	(18,707)	152.72	(756.52)	1,455.02	(362,575,907.12)	
311	\$9,339,176.00	(435.80)	(334.85)	(4.50)	(56.30)	(1.50)	(271.85)	0.00	(20.20)	0.00	0.00	0.00	0.00	(9,340,301.00)	
500	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
501	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
502	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(186,796,027.57)	
503	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Total Cash Transactions		\$221,553,550.72	\$631,606.03	\$561,720.81	\$409,484.13	(\$1,231,151.93)	\$246,253.04	(\$135,155,371.08)	\$77,380.02	\$30,988.60	\$23,475.82	\$144,340.80	\$123,849.91	(\$87,858.46)	\$87,328,260.41

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2018	Plan Year 2016												Plan Year Transactions to Date														
	2017 Balance Forward	January-18	February-18	March-18	April-18	May-18	June-18	July-18	August-18	September-18	October-18	November-18		December-18													
101	\$1,632,967,051.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$1,632,967,051.25													
102	\$47,516,224.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$47,516,224.39													
110	\$3,472,903.18	(5,132.63)	297,494.59	340,342.81	376,403.98	375,130.85	424,543.44	299,301.17	409,147.68	424,572.11	367,523.98	0.00	0.00	\$7,627,758.07													
120	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00													
121	\$71,648,779.82	51,467.15	0.00	0.00	0.00	146,793.54	0.00	95,704.18	0.00	74,371.89	0.00	0.00	0.00	\$72,017,116.98													
130	\$0.00	0.00	0.00	0.00	0.00	0.00	13,478.00	0.00	0.00	0.00	0.00	0.00	0.00	\$13,478.00													
201	\$566.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	238,285.73	0.00	123,413.29	0.00	0.00	\$362,255.47													
202	(\$13,652,574.51)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(\$13,652,574.51)													
203	\$1,289.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$1,289.81													
204	\$2,756.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$2,756.85													
210	(\$967,774,871.70)	(77,709.55)	185,077.74	(70,939.34)	(108,055.71)	847,932.96	(16,268.32)	222,594.09	154,273.10	174,948.34	(20,515.39)	58,235.37	(15,409.59)	(\$966,440,897.90)													
213	(\$43,343,274.73)	(403.53)	0.00	1,999.09	(4.43)	(2.61)	0.00	(4.34)	(4,489.31)	213.00	(6,865.71)	12.84	(105.30)	(\$43,353,232.57)													
214	(\$40,080,554.35)	(7.56)	0.00	1,998.40	0.00	0.00	0.00	0.00	(11,824.69)	1,106.43	(8,900.05)	0.00	0.00	(\$40,098,274.28)													
215	(\$4,430,107.57)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(\$4,430,107.57)													
216	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00													
217	(\$937,280.09)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(\$937,280.09)													
218	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00													
219	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00													
220	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00													
221	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00													
222	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00													
301	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00													
302	(\$362,486,937.56)	41.84	(1,706.48)	(1,831.50)	0.79	(1,171.23)	(37.97)	(4,220.58)	16,113.60	(779.60)	(28,349.11)	(640.48)	(2,822.34)	(\$362,534,567.85)													
311	(\$9,338,717.09)	(7.95)	(53.55)	(4.85)	(52.65)	(37.50)	1.70	(51.70)	(23.30)	(179.30)	(49.85)	0.00	0.00	(\$9,339,176.00)													
500	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00													
502	(\$16,651,795.32)	0.00	0.00	0.00	0.00	0.00	(35,003,732.25)	0.00	0.00	0.00	0.00	0.00	0.00	(\$51,655,527.57)													
503	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00													
503	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00													
Total Cash Transactions														\$250,400,107.49	(\$31,752.23)	\$480,812.29	\$270,674.71	\$415,085.52	\$1,221,852.47	(\$35,006,558.84)	\$1,159,948.56	\$794,651.37	\$474,610.04	\$542,752.75	\$482,179.84	\$349,186.75	\$221,553,550.72

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		Plan Year 2016												Plan Year Transactions to Date	
		2016 Balance Forward	January-17	February-17	March-17	April-17	May-17	June-17	July-17	August-17	September-17	October-17	November-17	December-17	Transactions to Date
101	PREMIUMS	\$1,563,042,999.66	69,596,501.85	337,851.06	820.14	143.00	642.98	0.00	47.00	0.00	0.00	168.99	39.99	(2,163.42)	\$1,632,967,051.25
102	HRA WAIVER CONTRIBUTION	\$ 47,496,797.29	16,627.10	2,800.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$47,516,224.39
110	INTEREST INCOME	\$ 768,140.88	149,863.37	162,056.19	170,239.55	188,438.88	174,910.86	188,295.77	207,187.54	235,469.42	221,931.54	244,084.66	367,099.86	396,810.66	\$3,472,503.18
120	DRUG REBATES- ESCRIPTS	\$ -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
121	DRUG REBATES- CVS	\$ 20,636,029.69	15,006,634.62	0.00	0.00	0.00	25,159,775.68	0.00	10,811,711.59	0.00	0.00	34,628.24	0.00	0.00	\$71,648,779.82
130	TRANSFERS FROM OTHER PLAN YEAR(S)	\$ -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
201	MEDICAL CLAIMS HUMANA	\$ 556.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$556.45
202	HUMANA ADMIN FEES	\$ (11,541,572.45)	(702,786.77)	(1,438,215.29)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(\$13,652,574.51)
203	HRA EMBEDDED CLAIMS HUMANA	\$ 990.53	0.00	0.00	299.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$1,289.81
204	HRA WAIVER CLAIMS HUMANA	\$ 1,059.76	0.00	0.00	1,697.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$2,756.85
210	MEDICAL CLAIMS- ANTHEM	\$ (857,969,173.35)	(71,466,059.78)	(20,205,751.55)	(6,901,128.41)	(3,601,472.40)	(3,678,016.02)	(897,631.49)	(786,988.49)	(1,241,329.63)	(893,605.14)	(155,511.99)	(208,289.26)	233,085.81	(\$96,774,871.70)
213	HRA EMBEDDED CLAIMS- WW	\$ (41,742,517.41)	(965,701.44)	(293,881.08)	(248,325.58)	(115,294.21)	(733.00)	(739.30)	(867.06)	(4.89)	(8.87)	0.00	603.03	(4.92)	(\$43,343,274.73)
214	HRA WAIVER CLAIMS- WW	\$ (37,792,068.26)	(1,252,279.80)	(379,355.50)	(340,163.20)	(274,011.58)	(4.60)	(4,078.20)	(38,347.65)	(192.27)	(22.21)	(618.13)	487.06	0.00	(\$40,080,554.35)
215	ANTHEM ADMIN	\$ (46,487,719.38)	(25,222.00)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(\$46,512,941.38)
216	WAGE WORKS ADMIN	\$ (4,070,237.77)	(359,869.80)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(\$4,430,107.57)
217	MDX MEDICAL ADMIN- COMPASS	\$ (987,280.09)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(\$987,280.09)
218	Rethink- BH Services	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
219	Dependent Eligibility Audit	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
220	Printing & Postage	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
221	Staywell Admin	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
222	Staywell Claims	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
301	PHARMACY CLAIMS- ESI	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
302	EXPRESS SCRIPTS ADMIN FEES	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
310	PHARMACY CLAIMS- CVS	\$ (333,641,302.53)	(8,547,317.41)	(57,263.69)	(37,189.24)	(131,061.60)	(32,130.46)	(5,970.94)	(4,300.79)	(8,418.93)	(18,944.27)	11,133.18	(944.05)	(11,156.85)	(\$362,486,937.56)
311	CVS ADMIN	\$ (8,297,056.74)	(678,472.18)	(370,055.43)	(1,790.75)	9,639.00	(25.50)	(757.75)	(5.55)	(10.05)	(195.05)	72.00	(59.05)	(59,338,717.05)	(\$9,338,717.05)
500	TRANSFERS TO OTHER PLAN YEAR(S)	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
501	OPERATING TRANSFER/EXP & ADJ	\$ (310,125,407.32)	(5,975,454.00)	0.00	0.00	0.00	(550,954.00)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(\$316,651,795.32)
502	Transfer for Clinic Cleaning Services	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
503	Voided/NSF/Cancelled Check Fees	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
Total Cash Transactions		\$259,342,238.96	(\$5,236,536.34)	(\$22,167,635.29)	(\$7,355,541.12)	(\$3,925,648.91)	\$21,071,485.94	(\$720,820.91)	\$10,188,479.58	(\$1,014,476.28)	(\$690,659.00)	\$133,689.90	\$159,018.63	\$616,512.23	\$20,400,107.49

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2016	Plan Year 2016												Plan Year Transactions to Date	
	2015 Balance Forward	January-16	February-16	March-16	April-16	May-16	June-16	July-16	August-16	September-16	October-16	November-16		December-16
101	\$0.00	67,984,756.89	134,594,774.92	142,188,142.48	134,881,589.51	131,979,539.41	116,187,664.25	159,709,809.20	133,905,187.73	137,584,818.27	132,475,740.90	132,461,644.50	139,109,831.60	1,563,042,999.66
102	\$0.00	712,775.00	3,929,355.16	7,227,392.13	4,006,700.08	3,992,186.55	3,626,163.99	1,070,656.34	7,032,550.31	707,525.00	7,063,072.82	4,042,261.39	4,086,158.52	47,496,797.29
110	\$0.00	0.00	9,243.43	30,487.24	49,998.27	46,641.30	59,920.04	70,874.48	87,364.39	85,941.08	89,349.92	118,687.78	119,722.95	768,140.88
120	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
121	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,681,772.41	0.00	0.00	12,954,257.28	0.00	0.00	20,636,029.69
130	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
130	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
201	\$0.00	(653,824.36)	(975,052.95)	(715,466.34)	0.00	(3,301,530.91)	(1,235,917.50)	125,917.50	0.00	556.45	(708,229.47)	(1,091,492.43)	(844,601.95)	(11,541,572.49)
202	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	782.94	0.00	0.00	0.00	207.59	990.53
203	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	543.12	159.30	304.74	0.00	52.60	1,059.76
204	\$0.00	(8,167,090.27)	(40,136,597.04)	(76,430,066.31)	(61,192,852.13)	(68,535,810.60)	(83,544,773.66)	(79,874,166.05)	(96,389,790.50)	(77,760,071.82)	(77,318,373.40)	(97,635,529.43)	(86,993,852.14)	(857,969,173.35)
210	\$0.00	(3,020,253.34)	(4,485,078.03)	(5,344,698.28)	(4,494,395.49)	(4,239,304.57)	(3,855,384.09)	(3,335,224.04)	(3,162,194.77)	(2,480,156.11)	(2,483,314.38)	(2,453,164.24)	(2,489,350.07)	(41,742,517.41)
213	\$0.00	(2,781,851.94)	(3,151,157.59)	(3,520,291.61)	(2,938,089.92)	(2,661,065.87)	(2,546,527.12)	(4,676,707.01)	(3,363,895.12)	(2,967,812.68)	(2,833,696.19)	(2,800,082.87)	(3,031,090.34)	(37,792,068.26)
214	\$0.00	(3,913,383.52)	(3,916,910.86)	(3,913,585.20)	(3,939,695.76)	(3,904,817.14)	(3,884,975.56)	(3,851,515.77)	(3,838,259.34)	(3,753,544.88)	(3,856,141.14)	(3,845,361.12)	(3,849,429.15)	(46,487,719.38)
215	\$0.00	0.00	(402,051.40)	(340,661.40)	(14,229.00)	(373,782.60)	(15,144.60)	(384,875.54)	(981,349.00)	(320,666.20)	(382,826.60)	(563,566.60)	(490,774.83)	(4,070,237.77)
216	\$0.00	(78,776.55)	(78,586.81)	(78,461.73)	(79,166.10)	(78,146.91)	(78,962.54)	(159,062.54)	(76,944.87)	0.00	(153,515.03)	(77,293.61)	(77,325.94)	(937,280.09)
217	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
218	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
219	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
220	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
221	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
222	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
301	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
302	\$0.00	(16,880,537.46)	(25,655,914.79)	(26,090,009.72)	(28,886,150.30)	(28,471,339.43)	(31,481,904.31)	(30,107,694.38)	(32,328,426.34)	(32,438,117.47)	(31,577,455.87)	(35,192,481.03)	(34,531,771.43)	(353,641,302.53)
310	\$0.00	(307,900.85)	(323,110.40)	(848,337.47)	(975,275.77)	(801,602.95)	(226,558.60)	(762,171.70)	(1,151,607.75)	(734,409.01)	(332,860.95)	(1,196,254.08)	(636,867.21)	(8,297,056.74)
311	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
501	\$0.00	(2,353,700.00)	(1,500,010.00)	(750,000.00)	(2,276,805.00)	(257.00)	(215,894.00)	(3,697,408.00)	702,602.00	1,327,766.20	(1,385,322.00)	176,575.00	(152,954.52)	(10,125,407.32)
502	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
503	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Cash Transactions	\$0.00	\$30,540,213.60	\$57,908,903.70	\$31,494,423.79	\$32,101,338.39	\$23,650,709.28	(\$6,023,331.16)	\$40,590,257.40	(\$4,194,843.74)	\$19,351,965.13	\$31,550,190.63	(\$7,846,846.74)	\$10,218,455.68	\$259,342,238.96

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2019	Plan Year 2017												Plan Year Transactions to Date		
	2018 Balance Forward	January-19	February-19	March-19	April-19	May-19	June-19	July-19	August-19	September-19	October-19	November-19		December-19	
101 PREMIUMS	1,627,272,143.61	287.98	0.00	0.00	0.00	0.00	40.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,627,272,471.75
102 HRA WAIVER CONTRIBUTION	47,274,598.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47,274,598.99
110 INTEREST INCOME	5,171,264.91	455,366.04	414,768.00	392,966.58	(1,263,100.62)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,171,264.91
120 DRUG REBATES- ESCRIPTS	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
121 DRUG REBATES- CVS	95,892,128.51	39,379.67	0.00	0.00	44,751.07	0.00	6,506.73	0.00	0.00	0.00	9,198.51	0.00	0.00	0.00	95,991,964.49
130 TRANSFERS FROM OTHER PLAN YEAR(S)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
201 MEDICAL CLAIMS HUMANA	2,906.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,906.12
202 HUMANA ADMIN FEES	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
203 HRA EMBEDDED CLAIMS HUMANA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
204 HRA WAIVER CLAIMS HUMANA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
210 MEDICAL CLAIMS- ANTHEM	(997,048,208.70)	(964,201.41)	497,671.26	214,397.32	894,343.88	418,082.12	218,547.84	244,910.58	220,423.37	399,183.37	334,391.44	(116,775.19)	67,966.63	(994,619,267.49)	
213 HRA EMBEDDED CLAIMS- WW	(47,481,443.45)	(7.13)	6,357.34	(0.65)	0.00	0.00	1,231.18	0.00	956.31	(574.19)	(2,054.54)	0.00	0.00	(47,475,538.33)	
214 HRA WAIVER CLAIMS- WW	(40,356,353.32)	(4.00)	0.00	(0.99)	0.00	0.00	3,803.71	0.00	(211.89)	(452.58)	(3,449.92)	0.00	0.00	(40,356,668.99)	
215 ANTHEM ADMIN	(46,125,128.78)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(46,125,128.78)	
216 WAGE WORKS ADMIN	(4,411,465.60)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(4,411,465.60)	
217 MDX MEDICAL ADMIN- COMPASS	(924,137.15)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(924,137.15)	
218 Rethink - BH Services	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
219 Dependent Eligibility Audit	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
220 Printing & Postage	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
221 Staywell Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
222 Staywell Claims	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
301 PHARMACY CLAIMS - ESI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
302 EXPRESS SCRIPTS ADMIN FEES	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
310 PHARMACY CLAIMS- CVS	(399,347,610.23)	(20,534.77)	(4,080.23)	(224.45)	(1,246.37)	(2,352.58)	(3,168.19)	(7,174.80)	(1,610.88)	1,506.84	157.51	(15,618.35)	(708.39)	(399,402,664.89)	
311 CVS ADMIN	(8,800,395.19)	(174.70)	(303.25)	(40.50)	(690.65)	(49.50)	(353.55)	0.00	(63.35)	0.00	0.00	0.00	0.00	(8,802,020.69)	
500 TRANSFERS TO OTHER PLAN YEAR(S)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
501 OPERATING TRANSFER/EXP & ADJ	(11,101,996.80)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(11,101,996.80)	
502 Transfer for Clinic Cleaning Services	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
503 Voided/NSF/Cancelled Check Fees	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Total Cash Transactions	\$204,593,813.82	(\$489,888.32)	\$914,413.12	\$607,097.31	(\$325,332.69)	\$415,680.04	\$220,101.15	\$244,238.31	\$219,493.56	\$399,664.44	\$398,243.00	(\$132,393.54)	\$67,258.24	\$207,071,788.44	

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		Plan Year 2017												Plan Year	
		2017 Balance Forward	January-18	February-18	March-18	April-18	May-18	June-18	July-18	August-18	September-18	October-18	November-18	December-18	Transactions to Date
101	PREMIUMS	\$1,554,087,822.44	73,018,271.95	159,872.58	(195.20)	(390.48)	0.00	26.20	0.00	5,780.32	125.74	890.06	0.00	0.00	1,627,272,143.61
102	HRA WAIVER CONTRIBUTION	\$47,259,198.99	14,350.00	1,050.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47,274,598.99
110	INTEREST INCOME	\$1,509,926.30	877.81	246,993.59	258,011.80	273,923.90	308,023.20	0.00	791,973.00	985,289.07	277,252.91	377,498.52	392,319.69	339,165.12	5,171,264.91
120	DRUG REBATES- ESCRIPTS	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
121	DRUG REBATES- CVS	\$41,678,512.17	24,619,304.10	0.00	0.00	27,576,464.95	0.00	0.00	1,567,653.52	0.00	0.00	448,193.77	0.00	0.00	95,897,128.51
130	TRANSFERS FROM OTHER PLAN YEAR(S)	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
201	MEDICAL CLAIMS HUMANA	\$2,906.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,906.12
202	HUMANA ADMIN FEES	(\$12,849,515.24)	(826,227.96)	(1,746,785.98)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(15,422,529.10)
203	HRA EMBEDDED CLAIMS HUMANA	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
204	HRA WAIVER CLAIMS HUMANA	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
210	MEDICAL CLAIMS- ANTHEM	(\$883,256,085.57)	(81,357,124.82)	(15,167,046.17)	(7,127,898.73)	(3,775,742.25)	(840,001.25)	(1,453,645.37)	(2,347,350.06)	(690,551.88)	(647,691.77)	(13,884.86)	(234,251.06)	(137,134.91)	(997,046,208.70)
213	HRA EMBEDDED CLAIMS- WW	(\$45,515,900.90)	(1,231,403.36)	(315,679.86)	(279,562.97)	(139,052.19)	(1,481.38)	(427.96)	(84.94)	(2.71)	(654.95)	(101.89)	909.66	0.00	(47,481,463.45)
214	HRA WAIVER CLAIMS- WW	(\$38,118,751.19)	(1,422,355.72)	(315,922.56)	(289,448.71)	(175,657.35)	(1,432.13)	(45.87)	(37,100.66)	(619.82)	88.37	0.00	4,892.32	0.00	(40,356,353.32)
215	ANTHEM ADMIN	(\$46,113,658.08)	(11,470.70)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(46,125,128.78)
216	WAGE WORKS ADMIN	(\$4,041,384.60)	(370,081.00)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(4,411,465.60)
217	MDX MEDICAL ADMIN- COMPASS	(\$847,265.95)	(76,871.20)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(924,137.15)
218	Rethink- BH Services	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
219	Dependent Eligibility Audit	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
220	Printing & Postage	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
221	Steywell Admin	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
222	Steywell Claims	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
301	PHARMACY CLAIMS- ESI	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
302	EXPRESS SCRIPTS ADMIN FEES	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
310	PHARMACY CLAIMS- CVS	(\$391,628,512.59)	(7,952,694.19)	11,578.40	14,450.17	(11,049.76)	(524.58)	(20,886.85)	(10,848.62)	(15,339.23)	(1,528.51)	(5,036.50)	16,800.41	255,981.62	(399,347,610.23)
311	CVS ADMIN	(\$7,738,440.06)	(668,388.11)	(429,603.47)	(224.85)	37,281.50	(53.90)	(21.35)	(635.25)	(14.75)	(174.55)	(70.40)	0.00	0.00	(8,800,355.19)
500	TRANSFERS TO OTHER PLAN YEAR(S)	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
501	OPERATING TRANSFER/EXP & ADJ	(\$10,299,793.02)	0.00	(137,100.00)	0.00	0.00	(665,103.78)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(11,101,996.80)
502	Transfer for Clinic Cleaning Services	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
503	Voided/NSF/Cancelled Check Fees	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Cash Transactions		\$204,131,058.82	\$3,736,176.80	(\$17,692,643.39)	(\$7,424,858.49)	\$23,787,778.32	(\$1,200,573.82)	(\$1,475,001.20)	(\$36,393.01)	(\$305,459.00)	(\$372,382.76)	\$807,428.70	\$180,671.02	\$458,011.89	\$204,593,813.82

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2017	2016 Balance Forward	Plan Year 2017												Plan Year Transactions to Date
		January-17	February-17	March-17	April-17	May-17	June-17	July-17	August-17	September-17	October-17	November-17	December-17	
101	\$0.00	63,487,153.25	136,115,845.31	139,689,927.78	130,779,529.36	143,280,024.72	105,522,574.30	164,946,580.62	131,168,229.95	134,268,063.77	134,220,067.63	134,611,429.47	135,998,396.28	1,554,087,822.44
102	\$0.00	3,862,325.04	3,898,447.63	3,921,256.38	706,300.00	7,257,285.08	370,650.00	4,307,673.88	7,026,047.48	3,769,167.44	3,998,166.92	706,562.50	7,435,316.64	47,259,198.99
110	\$0.00	0.00	15,064.99	41,102.23	75,949.22	86,224.67	100,009.88	95,696.21	164,300.67	143,253.18	178,910.99	285,584.39	323,829.87	1,509,926.30
120	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
121	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,853,102.72	0.00	0.00	20,825,409.45	0.00	0.00	41,678,512.17
130	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
201	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,906.12	0.00	0.00	0.00	2,906.12
202	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
203	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
204	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
210	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
213	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
214	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
215	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
216	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
217	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
218	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
219	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
220	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
221	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
222	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
301	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
302	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
310	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
311	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
500	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
501	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
502	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
503	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	\$0.00	\$23,624,963.57	\$32,373,608.69	\$34,522,943.50	\$19,512,454.52	\$18,352,941.01	\$17,069,942.07	\$63,956,954.94	\$13,785,928.34	\$21,385,593.66	\$11,321,104.31	\$9,648,994.38	\$287,270.65	\$704,131,058.82

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		Plan Year 2018												Plan Year	
		2018 Balance Forward	January-19	February-19	March-19	April-19	May-19	June-19	July-19	August-19	September-19	October-19	November-19	December-19	Transactions to Date
2019															
101	PREMIUMS	\$1,572,638,030.66	73,644,247.53	658.13	751.43	(812.12)	1,164.70	24.71	0.00	0.00	0.00	0.00	0.00	0.00	1,646,284,065.04
102	HRA WAIVER CONTRIBUTION	\$46,559,195.61	15,137.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	46,574,333.11
110	INTEREST INCOME	\$2,071,729.18	321,465.04	303,127.79	249,221.65	(873,814.48)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,071,729.18
120	DRUG REBATES- ESCRIPTS	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
121	DRUG REBATES- CVS	\$56,876,176.78	30,606,358.28	0.00	0.00	36,253,007.99	0.00	0.00	375,786.58	0.00	0.00	34,181.97	0.00	0.00	124,145,411.60
130	TRANSFERS FROM OTHER PLAN YEAR(S)	\$0.00	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
201	MEDICAL CLAIMS HUMANA	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
202	HUMANA ADMIN FEES	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
203	HRA EMBEDDED CLAIMS HUMANA	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
204	HRA WAIVER CLAIMS HUMANA	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
210	MEDICAL CLAIMS- ANTHEM	\$5938,488,590.76	(84,522,833.36)	(18,621,060.70)	(8,307,866.49)	(3,876,734.00)	(374,103.10)	386,636.49	(397,650.23)	(1,121,957.32)	262,516.33	584,145.87	(385,843.12)	(223,247.05)	(1,055,094,787.44)
213	HRA EMBEDDED CLAIMS- WW	\$49,165,671.44	(1,229,786.61)	(241,073.53)	(247,033.01)	(148,913.20)	(4.04)	(1,734.53)	(740.47)	0.00	(6.73)	(366.26)	0.00	0.00	(51,035,337.82)
214	HRA WAIVER CLAIMS- WW	\$36,800,327.07	(1,103,371.34)	(257,485.46)	(242,690.00)	(194,010.54)	(1,291.38)	(3,840.69)	(39,063.27)	(3.00)	(2,455.09)	(4.01)	(57.60)	(40.00)	(38,644,639.45)
215	ANTHEM ADMIN	\$46,741,571.47	(12,363.15)	(148.36)	(8.29)	(75.88)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(46,754,167.15)
216	WAGE WORKS ADMIN	\$4,240,995.33	(376,575.20)	0.00	0.00	0.00	0.00	(134,440.80)	0.00	0.00	0.00	0.00	0.00	(4,497.35)	(4,756,508.68)
217	MDX MEDICAL ADMIN- COMPASS	\$922,594.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(922,594.85)
218	Rethink- BH Services	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
219	Dependent Eligibility Audit	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
220	Printing & Postage	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
221	Staywell Admin	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
222	Staywell Claims	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
301	PHARMACY CLAIMS- ESI	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
302	EXPRESS SCRIPTS ADMIN FEES	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
310	PHARMACY CLAIMS- CVS	\$427,678,663.12	(10,484,265.75)	(13,351.22)	14,436.33	(112,760.25)	15,181.59	51,437.64	(34,368.63)	11,984.64	11,924.09	752.79	(3,835.16)	(1,175.33)	(438,096,613.55)
311	CVS ADMIN	(57,899,140.02)	(975,287.95)	(313,551.34)	(116,148.65)	(116,148.65)	(203.45)	1,729,558.52	(126.95)	0.00	0.00	0.00	0.00	0.00	(7,687,660.09)
500	TRANSFERS TO OTHER PLAN YEAR(S)	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
501	OPERATING TRANSFER/EXP & ADJ	\$8,476,380.16	22,882.42	0.00	(5.00)	(81,791.23)	0.00	(594,906.00)	0.00	0.00	0.00	0.00	0.00	0.00	(9,130,196.97)
502	Transfer for Clinic Cleaning Services	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
503	Voided/NSF/Cancelled Check Fees	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total Cash Transactions	\$144,432,727.79	\$4,733,964.13	(\$19,147,890.69)	(\$8,645,963.63)	\$30,973,036.47	(\$358,235.68)	\$1,434,735.34	(\$96,236.02)	(\$1,110,102.63)	\$271,976.60	\$618,710.36	(\$388,735.88)	(\$228,559.73)	\$152,493,006.43

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	Balance Forward	January-18	February-18	March-18	April-18	May-18	June-18	July-18	August-18	September-18	October-18	November-18	December-18	Transactions to Date
101	PREMIUMS	\$0.00	134,478,893.50	139,017,958.34	138,872,737.53	137,018,292.60	105,778,700.26	169,023,229.14	137,455,968.90	133,853,260.69	134,612,881.62	137,671,061.76	136,554,778.51	1,572,638,090.66
102	HRA WAIVER CONTRIBUTION	\$0.00	3,946,331.36	3,986,434.52	4,045,286.95	4,099,353.86	367,889.96	7,557,677.76	3,845,509.64	3,387,037.50	3,727,970.62	637,254.22	6,877,232.06	46,559,195.61
110	INTEREST INCOME	\$0.00	0.00	20,376.82	75,185.50	137,170.00	192,919.86	339,454.97	299,050.46	193,940.27	266,163.10	293,685.76	253,882.44	2,071,729.18
120	DRUG REBATES- ESCRIPTS	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
121	DRUG REBATES- CVS	\$0.00	0.00	0.00	0.00	0.00	0.00	27,091,590.20	0.00	0.00	29,784,586.58	0.00	0.00	56,876,176.78
130	TRANSFERS FROM OTHER PLAN YEAR(S)	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
121	MEDICAL CLAIMS HUMANA	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
201	MEDICAL CLAIMS HUMANA	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
202	HUMANA ADMIN FEES	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
203	HRA EMBEDDED CLAIMS HUMANA	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
204	HRA WAIVER CLAIMS HUMANA	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
210	MEDICAL CLAIMS- ANTHEM	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
213	HRA EMBEDDED CLAIMS- WW	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
214	HRA WAIVER CLAIMS- WW	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
215	ANTHEM ADMIN	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
216	WAGE WORKS ADMIN	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
217	MIX MEDICAL ADMIN- COMPASS	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
218	Rethink - BH Services	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
219	Dependent Eligibility Audit	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
220	Printing & Postage	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
221	Seywell Admin	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
222	Seywell Claims	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
301	PHARMACY CLAIMS - ESI	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
302	EXPRESS SCRIPTS ADMIN FEES	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
310	PHARMACY CLAIMS- CVS	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
311	CVS ADMIN	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
500	TRANSFERS TO OTHER PLAN YEAR(S)	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
501	OPERATING TRANSFER/EXP & ADJ	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
502	Transfer for Clinic Cleaning Services	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
503	Voided/NSF/Cancelled Check Fees	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total Cash Transactions	\$0.00	\$17,148,923.02	\$38,266,442.08	\$36,098,903.67	\$37,844,083.38	(\$21,536,719.79)	\$66,822,208.77	(\$11,911,126.97)	\$949,212.04	\$9,444,864.88	\$127,755.43	(\$6,373,361.61)	\$144,482,727.79

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2020	Plan Year 2019													
	2019 Balance Forward	January-20	February-20	March-20	April-20	May-20	June-20	July-20	August-20	September-20	October-20	November-20	December-20	Plan Year Transactions to Date
101	\$1,568,885,156.90	67,825,408.38	278,794.56	(325.74)	244.58		(26.39)	0.00	0.00	0.00	0.00	0.00	0.00	\$1,636,992,249.29
102	\$44,416,315.57	3,470,916.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$47,887,232.45
110	\$12,628,314.74	0.00	0.00	0.00	0.00	0.00	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$12,628,314.74
120	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
121	\$67,758,803.71	35,397,343.46	0.00	0.00	44,029,550.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$147,185,697.27
130	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
201	\$0.00	0.00	0.00	(3,780,115.00)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(\$21,533,414.30)
202	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
203	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
204	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
210	\$1,024,634,960.91	(75,087,214.38)	(24,340,025.67)	(6,860,568.25)	(5,804,466.73)	(4,168,738.21)	(5,438,799.10)	0.00	0.00	0.00	0.00	0.00	0.00	(\$1,146,394,775.25)
213	\$53,944,979.42	(1,207,284.19)	(375,652.56)	(257,239.62)	(248,138.09)	(73,328.17)	(809.60)	0.00	0.00	0.00	0.00	0.00	0.00	(\$56,107,431.65)
214	\$36,218,531.53	(943,160.60)	(236,610.49)	(184,172.91)	(174,737.96)	(54,358.47)	(881.00)	0.00	0.00	0.00	0.00	0.00	0.00	(\$37,812,462.96)
215	\$47,474,030.56	(4,455.68)	(56.86)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(\$47,478,543.10)
216	\$4,381,088.50	(460,672.80)	42,375.20	(4,692.80)	(4,614.40)	(4,544.40)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(\$5,013,247.70)
217	\$946,179.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(\$946,179.95)
218	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
219	\$0.00	0.00	(3,961.50)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(\$3,961.50)
220	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
221	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
222	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
301	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
302	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
310	\$479,330,356.24	(9,763,918.93)	(46,874.41)	(23,909.19)	(6,084.81)	1,349.52	(7,987.80)	0.00	0.00	0.00	0.00	0.00	0.00	(\$489,177,781.86)
311	\$48,454,556.65	(541,999.98)	(437,782.33)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(\$49,044,338.96)
500	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
501	\$6,262,933.68	0.00	88,184.00	0.00	0.00	0.00	(618,527.00)	0.00	0.00	0.00	0.00	0.00	0.00	(\$6,793,276.68)
502	\$0.00	0.00	(1,747.08)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(\$1,747.08)
503	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
Total Cash Transactions:														\$22,057,334.76

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		Plan Year 2019												Plan Year	
		2018 Balance Forward	January-19	February-19	March-19	April-19	May-19	June-19	July-19	August-19	September-19	October-19	November-19	December-19	Transactions to Date
101	PREMIUMS	\$0.00	63,839,206.68	137,315,232.35	137,105,702.38	137,654,759.26	136,667,873.70	103,096,945.23	173,716,439.48	132,068,605.08	133,573,041.06	135,850,302.90	134,827,553.80	143,169,494.98	1,568,885,156.90
102	HRA WAIVER CONTRIBUTION	\$0.00	3,944,275.54	3,965,180.74	4,020,824.09	4,037,312.90	4,034,554.06	345,883.36	7,604,987.42	3,857,520.86	3,814,737.50	4,036,287.50	4,099,201.60	655,550.00	44,416,315.57
110	INTEREST INCOME	\$0.00	0.00	26,696.30	83,033.74	4,301,912.75	1,387,267.36	1,058,463.85	944,172.78	1,144,515.76	851,828.49	817,970.18	696,539.10	715,914.43	12,628,314.74
120	DRUG REBATES- ESCRIPTS	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
121	DRUG REBATES- CVS	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	33,676,387.63	0.00	0.00	34,082,416.08	0.00	0.00	67,758,803.71
130	TRANSFERS FROM OTHER PLAN YEAR(S)	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
201	MEDICAL CLAIMS HUMANA	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
202	HUMANA ADMIN FEES	\$0.00	0.00	(2,852,371.71)	(1,293,286.73)	(1,981,143.96)	(1,859,573.73)	(1,466,107.19)	(1,309,066.71)	(1,440,713.50)	(1,025,799.00)	(978,815.99)	(1,773,035.33)	(2,173,385.44)	(17,753,299.30)
203	HRA EMBEDDED CLAIMS HUMANA	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
204	HRA WAIVER CLAIMS HUMANA	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
210	MEDICAL CLAIMS- ANTHEM	\$0.00	(14,715,590.72)	(54,974,494.49)	(73,193,110.09)	(92,329,780.61)	(80,074,628.25)	(84,036,842.14)	(110,369,191.54)	(92,207,948.49)	(87,203,032.31)	(118,084,677.63)	(97,111,897.38)	(120,334,767.32)	(1,024,634,960.91)
213	HRA EMBEDDED CLAIMS- WW	\$0.00	(4,873,288.94)	(5,559,177.20)	(6,159,032.41)	(4,965,688.16)	(4,978,662.88)	(4,525,955.61)	(3,808,384.76)	(2,989,484.51)	(3,426,361.26)	(2,937,457.99)	(2,937,457.99)	(3,545,826.74)	(53,944,979.42)
214	HRA WAIVER CLAIMS- WW	\$0.00	(3,229,011.29)	(3,004,428.78)	(2,995,573.51)	(2,443,596.76)	(2,265,062.58)	(2,443,596.76)	(4,676,215.54)	(3,570,390.27)	(2,631,360.13)	(2,851,360.13)	(2,438,358.62)	(3,239,867.76)	(96,218,531.53)
215	ANTHEM ADMIN	\$0.00	(3,984,671.25)	(3,974,234.00)	(3,979,290.00)	(3,991,674.02)	(3,960,084.19)	(3,944,514.00)	(3,940,514.00)	(3,905,806.44)	(3,887,709.63)	(3,958,311.16)	(3,947,003.55)	(3,950,349.38)	(47,474,030.56)
216	WAGE WORKS ADMIN	\$0.00	0.00	(428,890.00)	(429,018.80)	(432,597.20)	(387,870.00)	(436,445.90)	(343,338.80)	(392,918.40)	(391,957.20)	(397,275.20)	(362,087.60)	(578,699.40)	(4,581,098.50)
217	MDX MEDICAL ADMIN- COMPASS	\$0.00	(79,543.75)	(79,206.60)	(79,339.50)	(79,244.55)	(79,064.50)	(78,871.65)	(78,488.85)	(77,867.70)	(77,380.05)	(78,653.30)	(78,700.60)	(78,758.90)	(945,179.95)
218	Rethink - BH Services	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
219	Dependent Eligibility Audit	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
220	Printing & Postage	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
221	Staywell Admin	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
222	Staywell Claims	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
301	PHARMACY CLAIMS - ESI	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
302	EXPRESS SCRIPTS ADMIN FEES	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
310	PHARMACY CLAIMS- CVS	\$0.00	(27,345,668.16)	(38,703,025.74)	(37,082,126.05)	(40,965,331.13)	(40,526,836.13)	(39,192,266.51)	(40,470,514.97)	(42,099,662.87)	(32,220,535.89)	(51,381,296.15)	(43,348,072.25)	(45,395,620.39)	(479,330,356.24)
311	CVS ADMIN	\$0.00	(330,493.15)	(329,337.15)	(795,492.65)	(780,576.26)	(428,167.90)	(1,347,242.47)	(721,928.14)	(840,827.55)	(432,818.54)	(937,065.56)	(854,408.11)	(736,199.17)	(8,454,556.65)
500	TRANSFERS TO OTHER PLAN YEAR(S)	\$0.00	(88,184.00)	(1,218,655.09)	(51,015.75)	(91,682.00)	(958,586.20)	(189,293.42)	(3,523,538.40)	(302,555.08)	(95,750.75)	(95,510.16)	(90,452.95)	(1,557,689.88)	(8,262,933.68)
501	OPERATING TRANSFER/EXP & ADJ	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
502	Transfer for Clinic Cleaning Services	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
503	Voided/NSF/Cancelled Check Fees	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Cash Transactions		\$0.00	\$13,137,051.56	\$30,185,288.63	\$15,212,254.78	(\$2,684,993.46)	\$6,552,525.65	(\$33,628,120.66)	\$45,979,213.75	(\$12,175,853.36)	\$7,284,554.04	(\$7,402,849.88)	(\$13,318,179.90)	(\$37,050,204.97)	\$12,088,664.18

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		Combined 2016, 2017, 2018, 2019 Plan Years												Plan Year Transactions to Date	
2019	2018 Balance Forward	January-19	February-19	March-19	April-19	May-19	June-19	July-19	August-19	September-19	October-19	November-19	December-19		
101	\$14,391,827,497.61	137,483,742.19	137,315,890.48	137,106,453.81	137,653,347.14	136,689,098.40	103,097,010.10	173,716,439.48	132,068,605.08	133,573,041.06	135,850,302.90	134,827,553.80	143,169,494.98	16,094,359,017.03	
102	\$423,194,307.30	3,959,413.04	3,965,180.74	4,020,824.09	4,037,312.90	4,034,554.06	345,883.36	7,604,987.42	3,857,520.86	3,814,737.50	4,036,287.50	4,099,201.60	655,550.00	473,625,960.37	
110	\$23,963,825.23	1,269,944.54	1,196,103.71	1,152,169.53	1,393,425.01	1,387,267.36	1,058,463.85	944,172.78	1,144,515.76	851,828.49	817,970.18	696,539.10	715,914.43	36,592,139.97	
120	\$181,706,379.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	181,706,379.55	
121	\$283,219,635.49	30,745,658.30	30,745,658.30	0.00	36,315,335.94	0.00	0.00	34,064,613.34	0.00	0.00	34,137,315.03	0.00	0.00	418,482,756.10	
130	\$139,510,624.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	139,510,624.46	
201	(\$5,701,455,908.38)	(1,171,543.28)	(2,852,371.71)	(1,293,286.73)	(1,581,143.96)	(1,859,573.73)	(1,466,107.18)	(1,309,066.71)	(1,440,713.50)	(1,025,799.00)	(978,815.99)	(1,773,035.35)	(2,173,385.44)	(488,223,583.02)	
202	(\$109,981,865.31)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(109,981,865.31)	
204	(\$213,364,798.53)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(213,364,798.53)	
210	(\$3,822,949,445.44)	(100,154,658.78)	(73,101,101.65)	(81,304,005.22)	(95,189,200.48)	(79,949,787.98)	(83,425,255.09)	(110,491,473.44)	(93,074,921.32)	(86,516,838.09)	(117,030,322.45)	(97,489,909.26)	(120,579,361.22)	(4,961,556,286.42)	
213	(\$180,054,177.21)	(6,102,863.90)	(5,792,467.07)	(6,406,071.87)	(6,324,672.79)	(4,965,692.20)	(4,979,166.23)	(4,536,700.38)	(3,808,047.06)	(2,990,066.43)	(3,430,993.36)	(2,937,457.99)	(3,545,826.74)	(235,864,223.10)	
214	(\$157,501,440.49)	(4,332,366.64)	(3,261,914.24)	(3,238,264.50)	(3,057,090.70)	(2,966,358.76)	(2,443,633.74)	(4,715,279.81)	(3,572,623.74)	(2,634,492.80)	(2,855,649.02)	(2,438,416.22)	(3,239,307.76)	(195,567,458.42)	
215	(\$186,485,978.85)	(3,997,034.40)	(3,974,382.36)	(3,979,296.29)	(3,989,858.82)	(3,991,674.02)	(3,960,084.19)	(3,944,514.00)	(3,905,806.44)	(3,887,709.63)	(3,958,911.16)	(3,947,003.55)	(3,950,349.38)	(233,972,606.09)	
216	(\$17,510,956.99)	(376,575.20)	(438,890.00)	(429,018.80)	(432,597.20)	(387,870.00)	(570,886.70)	(343,338.80)	(392,918.40)	(391,857.20)	(397,275.20)	(362,087.60)	(583,136.75)	(22,807,570.84)	
217	(\$3,728,444.53)	(79,543.75)	(79,206.60)	(79,339.50)	(79,344.55)	(79,094.50)	(78,871.65)	(78,498.85)	(77,887.70)	(77,380.05)	(78,653.30)	(78,700.60)	(78,758.90)	(4,673,624.48)	
218	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
219	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
220	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
221	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
222	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
301	(\$1,687,614,318.99)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(1,687,614,318.99)	
302	(\$51,308,710.59)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(51,308,710.59)	
310	(\$1,512,921,032.47)	(37,859,725.54)	(38,724,297.33)	(37,057,941.28)	(40,954,519.04)	(40,318,629.11)	(39,162,999.01)	(40,515,286.31)	(42,689,624.24)	(32,207,123.66)	(51,380,322.13)	(43,368,282.28)	(45,396,049.09)	(2,002,765,743.09)	
311	(\$32,025,474.36)	(1,306,391.60)	(643,526.59)	(848,297.50)	(877,461.86)	(428,422.35)	381,690.65	(721,938.14)	(841,038.05)	(432,818.54)	(937,065.56)	(854,408.11)	(736,199.17)	(40,271,341.59)	
500	(\$110,211,028.06)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(110,211,028.06)	
501	(\$675,430,054.67)	(65,301.58)	(1,218,655.09)	(51,020.75)	(173,473.23)	(958,586.20)	(135,924,699.42)	(3,524,558.40)	(302,555.08)	(95,750.75)	(95,510.16)	(90,452.95)	(1,557,689.88)	(819,487,306.16)	
502	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
503	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Total Cash Transactions		\$570,580,092.33	\$18,012,713.40	\$12,516,531.87	\$7,582,882.59	\$26,730,958.39	\$6,856,201.05	(\$167,128,655.25)	\$46,204,598.06	(\$13,035,483.83)	\$7,979,670.90	(\$6,301,555.72)	(\$13,716,459.41)	(\$37,259,764.92)	\$458,981,719.46

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2018	2017 Balance Forward	Combined 2016, 2017, 2018 Plan Years												Plan Year Transactions to Date
		January-18	February-18	March-18	April-18	May-18	June-18	July-18	August-18	September-18	October-18	November-18	December-18	
101	\$12,746,005,145.78	141,318,538.96	134,638,766.48	139,017,763.14	138,872,347.05	137,018,292.60	105,778,726.46	169,023,229.14	137,461,749.22	133,853,386.43	134,613,711.68	137,671,061.76	136,554,778.91	14,391,827,497.61
102	\$382,619,811.69	3,960,681.36	3,967,484.52	4,045,266.95	4,041,237.16	4,039,353.86	367,889.96	7,557,677.76	3,845,509.64	3,387,037.50	3,727,970.62	637,254.22	6,977,232.06	429,194,307.30
110	\$11,720,295.51	822,159.88	892,083.97	1,047,883.13	1,201,486.79	1,288,894.35	0.00	1,977,354.88	1,118,882.97	770,394.35	1,052,809.30	1,110,577.56	960,571.54	23,963,825.23
120	\$181,696,181.48	0.00	0.00	26,881.46	0.00	43,316.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	381,706,379.55
121	\$174,496,317.23	24,803,134.51	0.00	0.00	27,918,083.61	0.00	0.00	28,754,947.90	0.00	0.00	30,307,152.24	0.00	0.00	283,219,635.49
130	\$133,497,146.46	0.00	0.00	0.00	0.00	0.00	13,478.00	0.00	0.00	0.00	0.00	0.00	0.00	133,510,624.46
201	\$5,702,189,411.26	390,334.90	0.00	0.00	0.00	81,077.72	0.00	(37,066.17)	238,285.73	0.00	123,413.29	0.00	0.00	(5,701,455,908.38)
202	\$403,427,246.36	(826,227.96)	0.00	(2,542.59)	0.00	(2,586,441.88)	0.00	(4,785,810.59)	0.00	(942,308.15)	(872,940.66)	(1,111,103.20)	(825,446.53)	(419,298,740.44)
203	\$100,981,865.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(100,981,865.31)
204	\$213,364,798.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(213,364,798.53)
210	\$2,772,376,206.64	(98,296,032.41)	(68,831,907.32)	(69,256,281.23)	(76,150,334.31)	(96,311,547.79)	(75,310,906.28)	(81,412,716.52)	(103,672,451.73)	(88,565,132.24)	(106,133,203.15)	(86,483,686.70)	(100,149,039.12)	(3,822,968,445.44)
213	\$118,445,933.31	(5,417,256.78)	(5,465,282.98)	(6,058,991.89)	(5,274,292.24)	(4,787,405.60)	(6,546,044.62)	(2,402,528.11)	(3,489,459.24)	(2,681,617.48)	(3,204,464.76)	(2,948,755.54)	(2,884,926.96)	(180,054,177.21)
214	\$139,732,936.68	(3,546,908.18)	(3,931,418.42)	(3,919,277.57)	(3,950,333.18)	(3,925,017.64)	(3,894,421.03)	(3,890,815.21)	(3,851,098.53)	(3,814,672.23)	(3,876,141.20)	(3,873,307.62)	(3,879,631.36)	(157,501,440.48)
215	\$12,899,882.66	(507,185.99)	(396,508.00)	(400,843.20)	(403,693.60)	(354,847.60)	(396,223.20)	(317,168.00)	(359,644.00)	(360,530.40)	(403,410.80)	(332,985.20)	(376,046.40)	(186,485,978.85)
216	\$2,728,978.48	(76,871.20)	(77,557.55)	(77,207.22)	(77,153.69)	(153,995.21)	(76,667.68)	(80,096.78)	(75,708.38)	(75,291.80)	(76,302.51)	0.00	(152,614.03)	(17,510,958.99)
217	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(3,728,444.53)
218	Dependent Eligibility Audit	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
219	Printing & Postage	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
220	Steywell Admin	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
221	Steywell Claims	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
222	PHARMACY CLAIMS - ESI	\$1,687,614,318.99	1,454.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(1,687,614,318.99)
301	EXPRESS SCRIPTS ADMIN FEES	(551,310,145.07)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(51,306,710.59)
302	PHARMACY CLAIMS - CVS	(51,077,476,257.14)	(32,123,837.14)	(32,418,820.20)	(30,606,965.96)	(15,770,588.79)	(15,770,588.07)	(37,334,178.03)	(36,117,652.76)	(38,665,888.66)	(40,318,392.87)	(40,790,744.27)	(40,685,359.25)	(1,512,921,032.47)
310	CVS ADMIN	(523,063,881.61)	(787,662.91)	(851,049.16)	(646,351.35)	(838,298.12)	(1,005,571.55)	(639,114.08)	(1,068,488.39)	(203,186.90)	(738,191.85)	(461,785.70)	(523,718.20)	(32,025,474.36)
500	TRANSFERS TO OTHER PLAN YEAR(S)	(510,197,550.06)	(2,464,200.00)	(137,100.00)	(217,622.00)	(1,295,893.71)	(618,029.19)	(312,540,092.46)	(4,007,193.00)	(1,698.04)	(219,398.00)	(152,673.00)	(88,787.00)	(110,211,028.06)
501	OPERATING TRANSFER/EP & ADI	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(675,430,054.67)
502	Transfer for Clinic Cleaning Services	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
503	Voided/NSF/Canceled Check Fees	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Cash Transactions		\$728,507,215.77	\$22,424,727.66	\$29,384,745.07	\$62,658,894.06	\$30,825,939.68	\$334,419,685.90	\$67,945,765.32	(\$11,421,934.60)	\$1,045,439.32	\$10,795,046.33	\$790,006.29	(\$7,546,163.03)	\$570,580,092.33

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2017	2016 Balance Forward	Combined 2016, 2017 Plan Years												Plan Year Transactions to Date
		January-17	February-17	March-17	April-17	May-17	June-17	July-17	August-17	September-17	October-17	November-17	December-17	
101	\$11,121,993,271.75	133,073,655.10	136,453,696.37	138,690,747.92	130,779,672.36	143,380,667.70	105,522,954.87	164,946,247.05	131,169,229.95	134,268,063.77	134,220,236.62	134,611,469.46	135,996,232.86	12,746,005,145.78
102	\$395,341,885.60	3,878,952.14	3,901,247.63	3,921,256.38	706,300.00	7,257,285.08	3,702,550.00	4,307,673.88	7,026,047.48	3,769,167.44	3,998,166.92	706,562.50	7,435,316.64	382,619,911.69
110	\$4,516,542.24	412,665.91	467,883.90	546,699.59	648,006.95	617,749.00	645,818.91	536,496.08	654,751.74	607,784.90	689,894.40	654,488.60	722,664.29	11,720,265.51
120	\$181,567,782.77	0.00	0.00	0.00	0.00	0.00	31,288.67	0.00	0.00	28,880.21	0.00	0.00	8,229.83	181,636,181.48
121	\$77,005,881.94	15,785,528.21	0.00	0.00	0.00	25,989,072.04	0.00	31,706,971.97	0.00	0.00	20,968,863.07	0.00	0.00	171,436,317.23
130	\$133,497,146.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	133,497,146.46
201	(\$5,703,833,197.68)	259,699.39	0.00	(1,237.13)	0.00	50,972.74	(7,003.91)	78.78	657,925.50	(3,546.39)	68,930.65	1,110.54	606,856.25	(5,702,189,411.26)
202	(\$100,987,919.45)	2,613.19	0.00	1,254,113.18	(3,779,635.99)	0.00	(1,034,725.52)	(920,251.40)	(1,708,648.01)	(766,572.64)	(721,011.76)	(1,130,149.60)	(908,048.52)	(403,427,246.36)
203	(\$213,375,087.17)	5,217.61	0.00	1,697.09	0.00	0.00	3,373.94	0.00	1,483.28	0.00	(630.41)	0.00	0.00	(100,981,865.31)
204	(\$1,779,605,042.36)	(80,668,444.00)	(82,366,259.16)	(71,413,013.64)	(67,004,707.74)	(90,405,556.66)	(75,782,072.93)	(77,254,514.14)	(103,433,450.99)	(73,744,629.12)	(98,992,754.26)	(77,650,464.49)	(94,654,797.15)	(213,364,798.53)
210	(\$81,800,631.70)	(4,402,862.90)	(4,739,396.25)	(5,721,387.18)	(4,576,684.50)	(4,634,356.68)	(4,280,742.27)	(3,768,862.22)	(3,471,334.31)	(2,643,903.22)	(3,023,896.10)	(2,760,831.85)	(2,916,861.83)	(128,912,151.01)
213	(\$78,045,774.15)	(4,402,306.92)	(3,451,625.38)	(3,708,864.49)	(2,949,200.47)	(2,677,018.94)	(2,703,120.69)	(4,796,663.06)	(3,890,205.25)	(2,697,168.65)	(3,152,817.01)	(2,635,165.27)	(3,345,793.03)	(118,445,923.31)
214	(\$93,594,056.60)	(3,891,961.16)	(3,890,944.27)	(3,893,788.25)	(3,846,996.12)	(3,851,038.00)	(3,873,626.03)	(3,816,613.61)	(3,834,238.41)	(3,768,861.41)	(3,824,237.37)	(3,855,844.97)	(3,824,850.48)	(139,732,936.69)
215	(\$8,498,626.26)	(359,869.80)	(441,307.40)	(388,030.60)	(400,886.60)	(312,121.00)	(348,462.20)	(349,386.20)	(365,486.60)	(44,189.00)	(731,827.00)	(261,847.00)	(367,841.00)	(12,899,882.66)
216	(\$1,881,712.53)	(77,830.50)	(77,381.40)	(77,540.59)	(77,412.86)	(77,303.15)	(77,067.30)	0.00	(152,390.33)	0.00	(75,754.49)	(76,860.07)	(76,925.26)	(2,728,978.48)
218	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
219	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
220	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
221	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
222	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
301	(\$1,687,614,318.99)	0.00	0.00	0.00	0.00	351.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(1,687,614,318.99)
302	(\$51,311,511.23)	0.00	0.00	1,014.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(51,311,511.23)
310	(\$676,963,382.07)	(30,318,606.27)	(31,755,701.22)	(29,510,648.10)	(31,652,176.61)	(33,665,125.74)	(34,785,577.83)	(32,038,067.70)	(35,635,363.47)	(34,308,382.45)	(34,151,712.29)	(36,310,686.57)	(36,400,806.82)	(1,077,976,257.14)
311	(\$14,282,377.59)	(776,167.18)	(959,695.23)	(709,018.88)	(616,631.23)	(263,217.10)	(1,104,474.17)	(488,997.99)	(915,075.06)	(95,899.20)	(955,143.03)	(1,250,554.10)	(646,630.85)	(23,863,881.61)
500	(\$110,197,150.06)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(110,197,150.06)
501	(\$148,360,679.25)	(18,623,650.33)	(6,984.00)	(13,538.00)	(1,240,490.00)	(533,894.00)	(187,595,010.95)	(3,652,963.02)	889.00	(158.00)	(2,464,200.00)	(186,231.72)	(10.00)	(353,886,860.27)
502	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
508	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Cash Transactions		\$714,113,312.61	\$19,623,825.72	\$11,098,279.68	\$27,503,915.21	\$15,989,217.19	\$40,736,466.46	\$74,411,128.42	(\$13,916,895.07)	\$20,610,266.24	\$11,850,624.66	\$9,854,995.46	\$1,626,734.93	\$78,507,215.77

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		Combined Plan Year 2016												Plan Year Transactions to Date	
	2015 Balance Forward	January-16	February-16	March-16	April-16	May-16	June-16	July-16	August-16	September-16	October-16	November-16	December-16		
101	PREMIUMS	\$9,490,918,324.17	135,657,461.38	134,883,195.14	142,174,351.19	134,883,195.14	131,979,950.39	116,181,138.89	159,709,809.20	133,905,187.73	137,584,818.27	132,475,240.90	132,461,644.50	139,109,831.60	11,121,993,771.75
102	HRA WAIVER CONTRIBUTION	\$284,814,378.66	3,740,609.65	3,931,280.16	7,227,392.13	4,005,700.08	3,992,186.55	3,626,313.99	1,070,656.34	707,525.00	7,063,072.82	4,042,261.39	4,086,158.52	335,341,885.60	
110	INTEREST INCOME	\$1,586,561.64	115,082.57	172,712.56	208,858.86	260,043.71	204,247.08	234,632.50	256,851.26	273,275.23	273,363.50	267,369.52	330,331.36	4,516,242.24	
120	DRUG REBATES- ESCRIPTS	\$181,567,782.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	181,567,782.77	
130	DRUG REBATES- CVS	\$13,759,520.29	14,922,632.55	0.00	0.00	14,823,893.88	0.00	10,885,902.42	39,892.86	1,454,620.60	249,636.96	187,268.77	204,670.52	77,005,881.94	
130	TRANSFERS FROM OTHER PLAN YEAR(S)	\$133,497,146.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	133,497,146.46	
201	MEDICAL CLAIMS HUMANA	\$5,706,141,104.98	3,511,521.19	6,745.12	(1,022,988.99)	(1,503,333.34)	(227,467.07)	(573,331.71)	39,892.86	1,454,620.60	249,636.96	187,268.77	204,670.52	(9,307.61)	
202	HUMANA ADMIN FEES	\$376,025,217.73	(1,540,291.88)	(985,005.34)	(717,076.34)	0.00	(3,303,133.02)	0.00	(1,220,069.11)	(2,031,482.14)	(129.65)	(708,229.47)	(1,091,492.43)	(844,601.95)	
203	HRA EMBEDDED CLAIMS HUMANA	\$101,066,873.41	86,069.10	0.00	0.00	0.00	0.00	(978.24)	(1,389.17)	0.00	0.00	(355.77)	0.00	(100,967,919.45)	
204	HRA WAIVER CLAIMS HUMANA	\$213,412,905.53	87,216.69	(1,582.85)	(87,437,473.59)	0.00	525.45	(11,092.28)	(14,719.02)	(351.68)	173.67	0.00	0.00	(21,351.62)	
210	MEDICAL CLAIMS- ANTHEM	\$813,836,997.58	(69,499,595.36)	(62,379,231.42)	(87,437,473.59)	(67,516,286.77)	(69,938,419.14)	(86,323,838.17)	(80,776,430.97)	(99,247,734.98)	(78,397,184.36)	(78,051,962.90)	(96,874,139.28)	(1,779,605,042.36)	
213	HRA EMBEDDED CLAIMS- WW	\$38,483,138.08	(4,024,890.41)	(4,723,494.06)	(5,444,695.03)	(4,624,768.31)	(4,239,390.85)	(3,856,574.07)	(3,335,228.79)	(3,161,942.54)	(2,480,667.36)	(2,463,322.01)	(2,453,168.84)	(81,800,631.70)	
214	HRA WAIVER CLAIMS- WW	\$37,530,094.24	(4,203,261.19)	(3,662,447.36)	(3,954,358.20)	(3,276,405.11)	(2,664,801.28)	(2,546,877.12)	(4,710,085.41)	(3,964,513.01)	(2,868,054.57)	(2,833,699.68)	(2,800,086.64)	(78,045,774.15)	
215	ANTHEM ADMIN	\$47,098,533.40	(3,521,085.38)	(3,916,911.64)	(3,913,586.04)	(3,959,976.04)	(3,904,817.14)	(3,884,975.56)	(3,851,515.77)	(3,838,259.34)	(3,753,544.88)	(3,856,141.14)	(3,845,261.12)	(93,594,056.60)	
215	WAGE WORKS ADMIN	\$3,892,571.10	(535,813.39)	(402,051.40)	(340,661.40)	(14,229.00)	(373,782.60)	(384,875.54)	(981,349.00)	(320,686.20)	(362,826.60)	(363,856.60)	(490,774.83)	(8,496,628.26)	
217	MDX MEDICAL ADMIN- COMPASS	\$944,432.44	(78,776.55)	(78,586.81)	(78,461.73)	(79,166.10)	(78,146.91)	(15,144.60)	(159,062.54)	(76,944.87)	0.00	(153,515.03)	(77,293.61)	(1,881,712.53)	
218	Rethink- BH Services	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
219	Dependent Eligibility Audit	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
220	Printing & Postage	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
221	Steywell Admin	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
222	Steywell Claims	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
301	PHARMACY CLAIMS- ESI	\$1,687,629,190.60	3,978.63	0.00	0.00	0.00	0.00	10,892.98	0.00	0.00	0.00	0.00	0.00	0.00	
302	EXPRESS SCRIPTS ADMIN FEES	\$51,324,514.93	12,765.70	0.00	0.00	0.00	0.00	240.00	0.00	0.00	0.00	0.00	0.00	0.00	
310	PHARMACY CLAIMS- CVS	\$314,917,026.70	(24,794,354.38)	(25,646,865.12)	(26,083,311.86)	(28,884,175.50)	(28,483,331.72)	(31,462,833.16)	(30,248,914.98)	(32,130,653.86)	(32,511,701.31)	(31,764,086.52)	(35,192,589.60)	(1,687,614,318.99)	
311	CVS ADMIN	\$6,856,444.88	(575,378.67)	(469,251.22)	(848,365.27)	(975,290.72)	(801,384.10)	(765,180.80)	144,008.22	(796,098.36)	(332,960.95)	(1,201,767.28)	(637,028.86)	(51,311,511.23)	
500	TRANSFERS TO OTHER PLAN YEAR(S)	\$110,197,550.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
501	OPERATING TRANSFER/EXP & ADJ	\$65,415,687.10	0.00	0.00	0.00	0.00	0.00	0.00	702,602.00	1,327,766.20	(1,386,322.00)	(2,270,463.00)	(152,954.52)	(110,197,550.06)	
502	Transfer for Clinic Cleaning Services	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
503	Voided/NSF/Cancelled Check Fees	\$0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Total Cash Transactions		\$51,371,411.23	\$39,289,066.25	\$35,297,619.01	\$19,019,623.73	\$40,863,376.92	\$22,161,386.81	\$73,084,345.73	\$42,802,269.65	\$19,074,691.56	\$40,654,636.41	\$11,131,210.63	\$10,046,529.24	\$74,113,312.61	

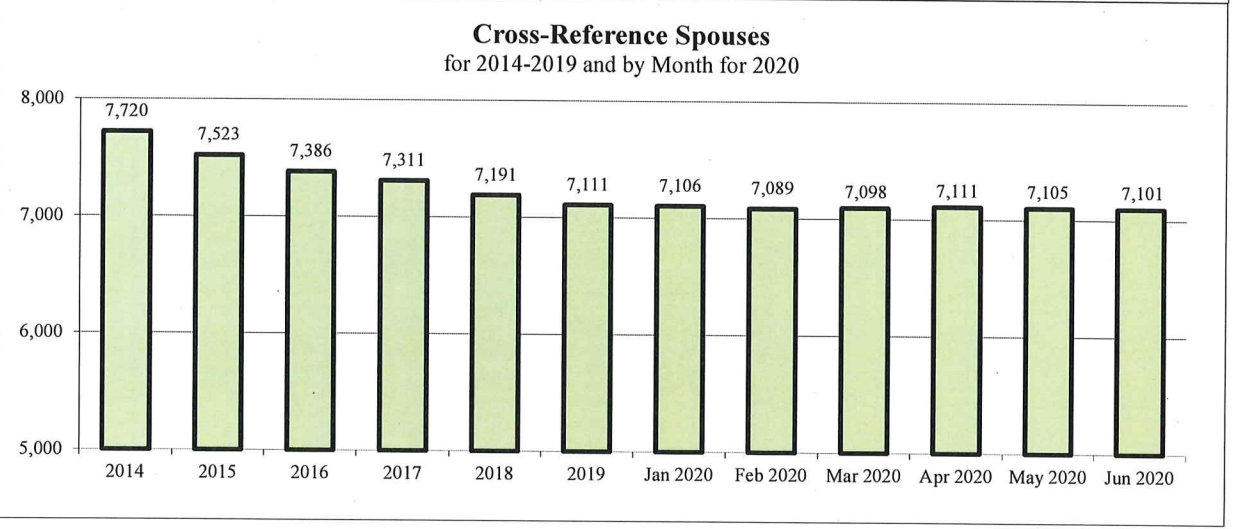
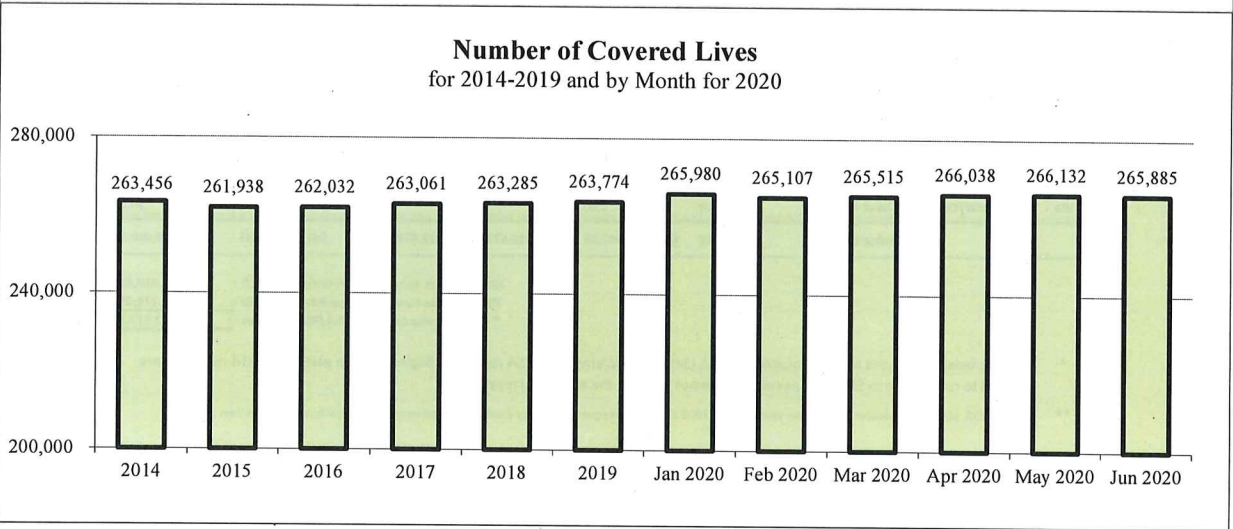
Kentucky Employees' Health Plan – Status Report
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Plan Year Ending Balances as of June 30, 2020						
	**2016	2017	2018	2019	2020	**Ending Balance
101 Premiums	1,632,967,051.25	1,627,272,471.75	1,646,284,065.04	1,636,992,249.29	727,913,218.34	\$7,271,429,055.67
102 HRA Waiver Contribution	47,516,224.39	47,283,372.29	46,574,333.11	47,887,232.45	20,309,249.42	\$209,570,411.66
110 Interest Income	7,627,758.07	5,171,264.91	2,071,729.18	12,628,314.74	1,763,643.77	\$29,262,710.67
120 Drus Rebates Escripts	0.00	0.00	0.00	0.00	0.00	\$0.00
121 Drug Rebates CVS	72,152,362.68	96,199,335.78	123,260,185.54	147,185,697.27	0.00	\$438,797,581.27
130 Transfer <u>FROM</u> Other Plan Year(s)	13,478.00	0.00	0.00	0.00	0.00	\$13,478.00
201 Medical Claims Humana	846,483.64	2,906.12	0.00	0.00	0.00	\$849,389.76
202 Humana Admin Fees	(13,652,574.51)	(15,422,529.10)	(14,470,023.50)	(21,533,414.30)	0.00	(\$65,078,541.41)
203 HRA Select Claims Humana	1,289.81	0.00	0.00	0.00	0.00	\$1,289.81
204 HRA Waiver Claims Humana	2,756.85	0.00	0.00	0.00	0.00	\$2,756.85
210 Medical Claims Anthem	(965,690,834.67)	(994,594,256.19)	(1,054,114,708.15)	(1,146,334,773.25)	(359,976,900.70)	(\$4,520,711,472.96)
213 HRA Embedded Claims Wage Works	(43,354,537.78)	(47,475,538.33)	(52,579,446.06)	(56,107,431.65)	(29,848,490.27)	(\$229,365,444.09)
214 HRA Waiver Claims Wage Works	(40,101,132.63)	(40,356,668.99)	(38,644,639.45)	(37,812,462.96)	(15,266,145.38)	(\$172,181,049.41)
215 Anthem Admin	(46,512,941.38)	(46,125,128.78)	(46,754,167.15)	(47,478,543.10)	(22,320,598.53)	(\$209,191,378.94)
216 Wage Works Admin	(4,430,107.57)	(4,411,465.60)	(4,756,508.68)	(5,013,247.70)	(2,179,822.40)	(\$20,791,151.95)
217 MDX Medical Admin Compass	(937,280.09)	(924,137.15)	(922,594.85)	(945,179.95)	(635,073.90)	(\$4,364,265.94)
218 Rethink - BH Services	0.00	0.00	0.00	0.00	(352,736.00)	(\$352,736.00)
219 Dependent Eligibility Audit	0.00	0.00	0.00	(3,961.50)	(37,589.20)	(\$41,550.70)
220 Printing & Postage	0.00	0.00	0.00	0.00	0.00	\$0.00
221 Staywell Admin	0.00	0.00	0.00	0.00	(2,986,712.42)	(\$2,986,712.42)
222 Staywell Claims	0.00	0.00	0.00	0.00	(908,605.01)	(\$908,605.01)
301 Pharmacy Claims Express Scripts	0.00	0.00	0.00	0.00	0.00	\$0.00
302 Express Scripts Admin Fees	0.00	0.00	0.00	0.00	0.00	\$0.00
310 Pharmacy Claims-CVS	(362,578,889.62)	(399,411,145.99)	(438,110,736.99)	(489,177,781.86)	(244,195,323.51)	(\$1,933,473,877.97)
311 CVS ADMIN	(9,340,301.00)	(8,803,545.20)	(7,687,660.09)	(9,434,338.96)	(3,790,708.06)	(\$39,056,553.31)
500 Transfer <u>TO</u> Other Plan Year(s)	0.00	0.00	0.00	0.00	0.00	\$0.00
501 Operating Transfer Exp & Adj	(274,509,586.18)	(98,752,838.19)	(9,130,199.97)	(8,793,276.68)	(5,670,819.83)	(\$396,856,720.85)
502 Transfer for Clinic Cleaning Services	0.00	0.00	0.00	(1,747.08)	(6,857.47)	(\$8,604.55)
503 Voided/NSF/Cancelled Check Fees	0.00	0.00	0.00	0.00	0.00	\$0.00
Ending Balance:	\$19,219.26	\$119,652,097.33	\$151,019,627.98	\$22,057,334.76	\$61,809,728.85	\$354,558,008.18

HRA Reserves Fund as of December 31, 2019 : (\$120,039,638)
 FSA Reserves Fund as of December 31, 2019 : (\$1,176,053)
 * Ending Balance Net of HRA/FSA Reserves : \$233,342,317.18

- * - Ending balance includes assets allocated for HRA (Select and Waiver) and FSA reserves. Beginning with plan year 2016 members are allowed to rollover up to \$500 of unused FSA balance creating the additional reserve.
- ** - Per HB200, plan year balances for all plan years before 2016 and all subsequent balances from those plan years were transferred to Plan Year 2016.

Kentucky Employees' Health Plan – Status Report
2nd Quarter, 2020
Attachment C – Current Enrollment Data
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Commonwealth of Kentucky

Kentucky Employees' Health Plan

Actuarial Reserve Study
June 30, 2020

Three Alliance Center
3550 Lenox Road NE
Suite 1700
Atlanta, GA 30326

August 2020

Commonwealth of Kentucky

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EXECUTIVE SUMMARY

Aon has conducted an actuarial valuation of the incurred, but not paid, claims as of June 30, 2020, for the medical and prescription drug benefits provided by Kentucky Employees' Health Plan (KEHP) and administered through Humana and Express Scripts (ESD) prior to 2015. Beginning from 2015, medical and prescription drug benefits are administered through Anthem and Caremark.

The results show a projected total reserve of approximately \$82.2 million. This figure includes \$4.0 million as an explicit provision for adverse experience. Claims that have been processed and paid, and invoiced to KEHP but not yet paid are excluded from these actuarial estimates, though this may represent an additional liability outside the scope of this actuarial review. The estimates provided also exclude unallocated amounts, which are believed to be immaterial to the Plan.

The details of the Unpaid Claim Reserve are shown in separate exhibits for Medical, Pharmacy, CDHP Health Reimbursement Arrangement (HRA) and the Waiver Credit HRA.

The traditional actuarial loss developmental method and Bornhuetter-Ferguson method were the basis of our calculation. The loss development uses historical paid claims information by incurred date. This method is consistent with reserve calculations within the industry, and best reflects the impact on claim payment patterns and accounts for the cyclical nature of the Plan's claims.

Also included in this report are the actual Rx rebates paid from January 1, 2018 to December 31, 2019 and the estimated Rx rebate from January 1, 2020 to June 30, 2020.

The results mentioned above are contingent upon future events. Consequently, actual results will differ from projected results. These deviations may be material. KEHP staff should monitor emerging experience and take appropriate actions as required.

**ACTUARIAL CERTIFICATION
STATEMENT OF OPINION**

Aon has been retained by the Commonwealth of Kentucky to study the actuarial reserves for incurred but not paid claims as of June 30, 2020, for the medical and prescription drug benefits provided by Kentucky Employees' Health Plan. I am employed by Aon. I am a Member of the Society of Actuaries and am qualified by education and experience to make the statements of actuarial opinion contained herein.

In performing our reserve study, we have relied upon reports and information provided by Truven, the carriers and The Commonwealth of Kentucky. We have not audited this data beyond general tests for reasonableness. The results are our best estimate of incurred but unpaid claims with explicit margins for adverse deviation. The techniques and methodology used are reasonable and in accordance with generally accepted actuarial principles and practice.



LinXia Xiong, FSA, MAAA
Vice President

August 24, 2020

Date



Colleen M. Huber, FSA, MAAA
Senior Vice President

August 24, 2020

Date

DATA AND ASSUMPTIONS

Commonwealth of Kentucky Medical and Pharmacy benefits are administered through Anthem and Caremark beginning from 2015. Below is all data source we have used:

- Monthly enrollment provided by Truven.
- Transactional and eligibility data was provided by KEHP.
- Medical and Pharmacy claims incurred and paid from July 1, 2016 to June 30, 2020 provided by Anthem and Caremark.

No adjustment for interest was used in this analysis. Anthem and Caremark don't charge administrative fees for processing run-out claims so no administrative fee reserve is required.

The COVID-19 pandemic has greatly impacted the United States health care landscape over the last few months. The number of COVID-19 cases in the U. S. has increased rapidly and it is unclear when the rate of infection will diminish. There are many uncertainties associated with the impact of COVID-19 on employer health care claims costs and as a result our IBNP estimate may exhibit more volatility than in a typical year. In addition to direct COVID-19 expenditures due to testing and treatment of members with COVID-19, elective procedures and nonemergency visits are being deferred, resulting in significant changes to the types and frequency of claims incurred by members of employer-sponsored plans. At this point in time there is no consistent emerging data across carriers of a change in payment speed, but there is clear evidence of a change in the types and level of claims incurred during the COVID-19 pandemic. Payment speed pattern changes may also emerge as more data becomes available.

Aon has developed a model to estimate COVID-19 claims impacts which incorporates two offsetting cost factors – direct COVID-19 claims costs and cost reductions due to deferral of unnecessary services. In the immediate term, the savings due to the deferral of services has generally exceeded the additional direct claims costs due to COVID-19 for most employers. This may result in a temporary reduction in IBNP reserves required, though the impact to a particular employer can vary based on related industry, geography, and demographic considerations. While COVID-19 impacts may result in a reduction to the IBNP in the short term, it is very likely that many deferred services will return later in the year. As a result, many employers may experience greater increases in their IBNP later in the year than typical amounts due only to seasonality.

METHODOLOGY

The unpaid claim liability (UCL), also called the incurred but not reported (IBNR) reserve, at a specified date is essentially the estimated claims incurred up to that date less the claims that have been (incurred and) paid to that date. Since the incurred and paid claims are known, the UCL is easily determined once the incurred claims have been estimated.

The traditional loss development method uses historical claim payment patterns to develop completion factors that are used to estimate incurred claims. The claims incurred in a given month and paid by the end of the experience period are divided by the completion factor to estimate the incurred claims for that month. The UCL for that month is subsequently determined by subtracting the known incurred and paid claims from the estimated incurred claims. The total UCL is merely the sum of all the appropriate monthly UCL estimates.

This method is relatively easy to understand and is effective when the historical claim payment patterns are deemed to be stable enough to estimate current/future claim payment patterns and when several months of claim payments (run-out) after the incurred month are available. When the run-out for any month is limited, this month is called immature and the associated completion factor is significantly less than one. The resulting incurred claim estimate is unstable. Consequently, a secondary method has traditionally been used to estimate the immature months.

The secondary method for health claims is often an average of historical incurred claims adjusted for claim trend and enrollment between the historical period and the time of interest. One of the shortcomings of this secondary method is that the available claim payment information for the month being estimated is not used. Another problem is that the line of demarcation between mature months and immature months is as much art as science.

The Bornhuetter-Ferguson Method (BFM) addresses both of these issues by blending the loss development method and the secondary method. The BFM uses the available incurred and paid data and the expected UCL developed from the secondary method to estimate incurred claims. This method generally provides a more stable estimate than the pure loss development method, a more responsive estimate than the secondary method, and a reasonable technique for blending the results of both methods.

Using the BFM with claims paid through June 30, 2020, the resulting UCL for June 30, 2020 was approximately \$78.2 million. In addition, an explicit margin for adverse deviation of 5.0% of claims unpaid at June 30, 2020 has been used.

RESULTS

The result of our reserve analysis shows the following components of our June 30, 2020 reserve for the Kentucky Employees' Health Plan.

Exhibit 1

Kentucky Employees' Health Plan Terminal Liability Calculation as of June 30, 2020				
	Unpaid Claims Liability as of June 30, 2020	Margin (5%)	Administrative Fees for Processing Runout Claims	Total IBNR Reserve (Rounded to Nearest \$1,000)
Medical	\$76,898,538	\$3,844,927	\$0	\$80,743,000
Pharmacy	(\$895,708)	\$0	\$0	(\$896,000)
CDHP HRA	\$1,306,650	\$65,332	\$0	\$1,372,000
Waiver HRA	\$928,195	\$46,410	\$0	\$975,000
Grand Total	\$78,237,675	\$3,956,669	\$0	\$82,194,000

* Claims that have been processed and paid, and invoiced to KEHP but not yet paid are excluded from these actuarial estimates, though this may represent an additional liability outside the scope of this actuarial review. The estimates provided also exclude unallocated amounts, which are believed to be immaterial to the Plan.

*No administrative fees are required from Anthem or Caremark for processing runout claims.

Exhibit 2a

Kentucky Employees' Health Plan
 Medical and Pharmacy
 Terminal Liability Calculation as of June 30, 2020

Month	Enrollment	Estimated Incurred Claims	Completion Factor	Actual Paid	Unpaid Claim Reserve
Jul-17	144,752	\$117,380,052	1.000	\$117,380,052	\$0
Aug-17	144,079	\$122,749,185	1.000	\$122,749,185	\$0
Sep-17	143,220	\$114,295,810	1.000	\$114,295,810	\$0
Oct-17	145,255	\$125,523,623	1.000	\$125,523,623	\$0
Nov-17	145,297	\$124,332,557	1.000	\$124,332,557	\$0
Dec-17	145,192	\$140,860,032	1.000	\$140,860,032	\$0
Jan-18	146,368	\$99,096,850	1.000	\$99,096,850	\$0
Feb-18	145,669	\$97,582,839	1.000	\$97,582,839	\$0
Mar-18	145,703	\$110,786,805	1.000	\$110,786,805	\$0
Apr-18	145,445	\$112,631,365	1.000	\$112,631,365	\$0
May-18	145,233	\$121,079,803	1.000	\$121,079,803	\$0
Jun-18	144,819	\$123,535,642	1.000	\$123,535,642	\$0
Jul-18	144,002	\$128,932,073	1.000	\$128,932,073	\$0
Aug-18	143,327	\$126,719,458	1.000	\$126,736,291	(\$16,833)
Sep-18	142,396	\$119,576,345	1.000	\$119,602,095	(\$25,750)
Oct-18	144,178	\$136,752,440	1.000	\$136,801,625	(\$49,185)
Nov-18	144,119	\$134,726,784	1.001	\$134,886,970	(\$160,186)
Dec-18	144,005	\$146,437,997	1.001	\$146,634,339	(\$196,342)
Jan-19	144,518	\$112,535,385	1.001	\$112,686,068	(\$150,684)
Feb-19	143,950	\$110,241,120	1.002	\$110,454,796	(\$213,676)
Mar-19	144,284	\$125,489,355	1.002	\$125,755,324	(\$265,969)
Apr-19	144,086	\$130,965,500	1.003	\$131,298,903	(\$333,404)
May-19	143,816	\$130,158,135	1.003	\$130,539,559	(\$381,424)
Jun-19	143,380	\$133,327,027	1.003	\$133,729,847	(\$402,820)
Jul-19	142,737	\$144,435,974	1.003	\$144,888,808	(\$452,833)
Aug-19	141,670	\$138,322,704	1.002	\$138,663,914	(\$341,210)
Sep-19	141,025	\$133,609,636	1.002	\$133,884,034	(\$274,398)
Oct-19	143,179	\$149,996,340	1.002	\$150,226,524	(\$230,184)
Nov-19	143,173	\$142,349,550	1.001	\$142,487,668	(\$138,118)
Dec-19	143,272	\$163,284,272	0.999	\$163,160,969	\$123,304
Jan-20	143,187	\$113,710,479	0.996	\$113,301,673	\$408,807
Feb-20	142,952	\$118,123,953	0.989	\$116,864,748	\$1,259,206
Mar-20	142,956	\$118,837,400	0.976	\$115,980,753	\$2,856,647
Apr-20	143,166	\$95,743,403	0.953	\$91,255,570	\$4,487,832
May-20	143,064	\$112,077,220	0.883	\$98,932,448	\$13,144,772
Jun-20	142,800	\$130,230,326	0.560	\$72,875,048	\$57,355,278
Total		\$4,506,437,440		\$4,430,434,610	\$76,002,830

Kentucky Employees' Health Plan – Status Report
 2nd Quarter, 2020
 Attachment D – IBNR
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Exhibit 2b
Kentucky Employees' Health Plan
Medical
Terminal Liability Calculation as of June 30, 2020

Month	Enrollment	Estimated Incurred Claims	Completion Factor	Actual Paid	Total Unpaid Claim Reserve
Jul-17	144,752	\$83,832,884	1.000	\$83,832,884	\$0
Aug-17	144,079	\$87,664,618	1.000	\$87,664,618	\$0
Sep-17	143,220	\$81,006,126	1.000	\$81,006,126	\$0
Oct-17	145,255	\$89,973,318	1.000	\$89,973,318	\$0
Nov-17	145,297	\$89,590,146	1.000	\$89,590,146	\$0
Dec-17	145,192	\$103,822,639	1.000	\$103,822,639	\$0
Jan-18	146,368	\$68,562,069	1.000	\$68,562,069	\$0
Feb-18	145,669	\$69,558,436	1.000	\$69,558,436	\$0
Mar-18	145,703	\$78,451,642	1.000	\$78,451,642	\$0
Apr-18	145,445	\$79,885,312	1.000	\$79,885,312	\$0
May-18	145,233	\$86,002,625	1.000	\$86,002,625	\$0
Jun-18	144,819	\$89,512,201	1.000	\$89,512,201	\$0
Jul-18	144,002	\$92,382,648	1.000	\$92,382,648	\$0
Aug-18	143,327	\$90,377,633	1.000	\$90,394,490	(\$16,856)
Sep-18	142,396	\$84,178,410	1.000	\$84,204,187	(\$25,777)
Oct-18	144,178	\$96,919,772	1.001	\$96,969,335	(\$49,563)
Nov-18	144,119	\$96,093,214	1.002	\$96,254,090	(\$160,875)
Dec-18	144,005	\$105,530,713	1.002	\$105,727,840	(\$197,127)
Jan-19	144,518	\$75,995,128	1.002	\$76,146,526	(\$151,398)
Feb-19	143,950	\$74,790,321	1.003	\$75,004,777	(\$214,457)
Mar-19	144,284	\$85,751,808	1.003	\$86,018,725	(\$266,917)
Apr-19	144,086	\$90,141,932	1.004	\$90,476,362	(\$334,430)
May-19	143,816	\$88,921,394	1.004	\$89,304,251	(\$382,857)
Jun-19	143,380	\$94,529,123	1.004	\$94,933,369	(\$404,246)
Jul-19	142,737	\$102,033,674	1.004	\$102,488,084	(\$454,410)
Aug-19	141,670	\$97,449,791	1.004	\$97,791,755	(\$341,964)
Sep-19	141,025	\$92,752,706	1.003	\$93,027,926	(\$275,219)
Oct-19	143,179	\$105,778,025	1.002	\$106,009,265	(\$231,240)
Nov-19	143,173	\$100,552,372	1.001	\$100,691,722	(\$139,350)
Dec-19	143,272	\$116,747,622	0.999	\$116,625,743	\$121,879
Jan-20	143,187	\$75,059,735	0.995	\$74,652,116	\$407,619
Feb-20	142,952	\$79,868,201	0.984	\$78,611,048	\$1,257,153
Mar-20	142,956	\$72,311,854	0.961	\$69,459,903	\$2,851,950
Apr-20	143,166	\$52,704,050	0.915	\$48,229,268	\$4,474,782
May-20	143,064	\$70,626,804	0.814	\$57,509,237	\$13,117,567
Jun-20	142,800	\$84,356,758	0.309	\$26,042,483	\$58,314,275
Total		\$3,133,715,705		\$3,056,817,167	\$76,898,538

Exhibit 2c
Kentucky Employees' Health Plan
Pharmacy
Terminal Liability Calculation as of June 30, 2020

Month	Enrollment	Estimated Incurred Claims	Completion Factor	Actual Paid	Total Unpaid Claim Reserve
Jul-17	144,752	\$33,547,169	1.000	\$33,547,169	\$0
Aug-17	144,079	\$35,084,567	1.000	\$35,084,567	\$0
Sep-17	143,220	\$33,289,684	1.000	\$33,289,684	\$0
Oct-17	145,255	\$35,550,305	1.000	\$35,550,305	\$0
Nov-17	145,297	\$34,742,410	1.000	\$34,742,410	\$0
Dec-17	145,192	\$37,037,394	1.000	\$37,037,394	\$0
Jan-18	146,368	\$30,534,781	1.000	\$30,534,781	\$0
Feb-18	145,669	\$28,024,403	1.000	\$28,024,403	\$0
Mar-18	145,703	\$32,335,163	1.000	\$32,335,163	\$0
Apr-18	145,445	\$32,746,053	1.000	\$32,746,053	\$0
May-18	145,233	\$35,077,178	1.000	\$35,077,178	\$0
Jun-18	144,819	\$34,023,441	1.000	\$34,023,441	\$0
Jul-18	144,002	\$36,549,425	1.000	\$36,549,425	\$0
Aug-18	143,327	\$36,341,825	1.000	\$36,341,802	\$23
Sep-18	142,396	\$35,397,935	1.000	\$35,397,908	\$27
Oct-18	144,178	\$39,832,668	1.000	\$39,832,289	\$379
Nov-18	144,119	\$38,633,569	1.000	\$38,632,880	\$689
Dec-18	144,005	\$40,907,285	1.000	\$40,906,500	\$785
Jan-19	144,518	\$36,540,256	1.000	\$36,539,542	\$715
Feb-19	143,950	\$35,450,799	1.000	\$35,450,019	\$780
Mar-19	144,284	\$39,737,547	1.000	\$39,736,599	\$948
Apr-19	144,086	\$40,823,568	1.000	\$40,822,541	\$1,027
May-19	143,816	\$41,236,740	1.000	\$41,235,308	\$1,433
Jun-19	143,380	\$38,797,903	1.000	\$38,796,477	\$1,426
Jul-19	142,737	\$42,402,300	1.000	\$42,400,723	\$1,576
Aug-19	141,670	\$40,872,913	1.000	\$40,872,159	\$754
Sep-19	141,025	\$40,856,930	1.000	\$40,856,109	\$821
Oct-19	143,179	\$44,218,315	1.000	\$44,217,258	\$1,056
Nov-19	143,173	\$41,797,178	1.000	\$41,795,945	\$1,233
Dec-19	143,272	\$46,536,650	1.000	\$46,535,226	\$1,425
Jan-20	143,187	\$38,650,745	1.000	\$38,649,557	\$1,188
Feb-20	142,952	\$38,255,752	1.000	\$38,253,700	\$2,052
Mar-20	142,956	\$46,525,547	1.000	\$46,520,850	\$4,697
Apr-20	143,166	\$43,039,353	1.000	\$43,026,303	\$13,050
May-20	143,064	\$41,450,416	0.999	\$41,423,211	\$27,205
Jun-20	142,800	\$45,873,568	1.021	\$46,832,565	(\$958,997)
Total		\$1,372,721,735		\$1,373,617,444	(\$895,708)

Exhibit 3

**Kentucky Employees' Health Plan
 Terminal Liability Calculation as of June 30, 2020
 Health Reimbursement Arrangements**

CDHP HRA				
Period	Paid To Date	Completion Factor	Total Incurred	Unpaid Claim Reserve
Jan-Mar 2018	\$17,219,842	100.0%	\$17,219,842	\$0
Apr-Jun 2018	\$14,902,748	100.0%	\$14,902,748	\$0
Jul-Sep 2018	\$10,738,297	100.0%	\$10,738,297	\$0
Oct-Dec 2018	\$9,718,560	100.0%	\$9,718,560	\$0
Jan-Mar 2019	\$18,473,457	100.1%	\$18,454,818	(\$18,638)
Apr-Jun 2019	\$15,894,747	100.0%	\$15,887,484	(\$7,263)
Jul-Sep 2019	\$11,496,705	99.8%	\$11,521,066	\$24,361
Oct-Dec 2019	\$10,242,523	99.3%	\$10,316,411	\$73,889
Jan-Mar 2020	\$17,629,694	97.5%	\$18,083,192	\$453,498
Apr-Jun 2020	\$12,218,796	94.0%	\$12,999,599	\$780,803
Total	\$138,535,368		\$139,842,018	\$1,306,650

Waiver HRA				
Plan Year	Paid To Date	Completion Factor	Total Incurred	Unpaid Claim Reserve
2018	\$38,644,639	100.0%	\$38,644,639	\$0
2019	\$37,812,463	99.9%	\$37,848,346	\$35,883
2020	\$15,266,145	94.5%	\$16,158,457	\$892,312
Total	\$91,723,248		\$92,651,443	\$928,195

Exhibit 4

**Kentucky Employees' Health Plan
 Rx Rebates as of June 30, 2020**

Plan Year	Rebate Amount		
	Accounting	Incurred	
Q1 2018	\$27,091,590	\$27,791,512	Actual/Actual
Q2 2018	\$29,784,587	\$30,241,988	Actual/Actual
Q3 2018	\$30,606,258	\$31,110,146	Actual/Actual
Q4 2018	\$35,777,750	\$35,983,805	Actual/Actual
Q1 2019	\$33,676,388	\$35,562,269	Actual/Actual
Q2 2019	\$34,082,416	\$38,224,411	Actual/Actual
Q3 2019	\$35,397,343	\$39,534,225	Actual/Actual
Q4 2019	\$44,029,550	\$41,163,976	Actual/Estimate
Q1 2020	\$35,062,495	\$45,273,729	Estimate/Estimate
Q2 2020	\$38,875,888	\$45,745,953	Estimate/Estimate

Anthem clinical update Integrated Health Model (IHM)



Kentucky Employees' Health Plan (KEHP) Report for: January 1, 2020 – June 30, 2020

This report provides an overview of the KEHP's key demographic data elements, IHM participant engagement, Utilization Management, and MyHealth Advantage activity during the reporting period.

Demographics	Current
Average number of members	266,850
Average population age	37

Clinical programs	Total identified	Engaged	% Engaged
IHM	32,404	5,341	16.5% ¹
Behavioral Health	593	246	41.4%
Future Moms	77	44	57.1%

¹ Members identified for outreach/engaged.

	During period
Why Weight KY	97

	At Risk Qualified	Enrollments
Diabetes Prevention Program (DPP) ²	8,543	2,329

² Effective 9/12/19, the KEHP engaged with Anthem's preferred DPP vendor, Solera. Digital capabilities and targeted marketing campaigns have positively impacted member participation.

Utilization Management	Authorization requests	Approval rate
Inpatient	4,711	92.72%
Outpatient	34,194	90.34%
Total	38,905	90.63%

MyHealth Advantage	Total eligible	Notes generated	Total alerts	Gaps in care alerts	Preventive alerts
Total	266,076	41,544	161,905	104,769	57,136

- o **Anthem Blue Cross and Blue Shield (Anthem)** works with the KEHP to integrate health by innovation. This holistic model offers care which focuses on improving health and promoting physical, emotional, mental and financial well-being of the KEHP membership.
- o **Behavioral Health Clinical Care Management programs:** Provide outreach, support and guidance for members with complex behavioral health conditions. The Behavioral team may also collaborate with Personal Health Consultants to ensure continuity of medical and mental health needs.
- o **Diabetes Prevention Program (DPP):** DPP is a lifestyle change program available to members and their dependents identified with pre-diabetes or with a high risk of developing diabetes.
- o **Future Moms:** Program which helps expectant women to maintain healthy pregnancies by offering early-risk assessment, providing obstetrical nursing support, and following the pregnancy from the first trimester through delivery.
- o **IHM:** Better health, better outcomes promoted by identifying, engaging members and creating cases with Registered Nurses, referred to as Personal Health Consultants. Through innovative, smart triggers, the program finds members at risk for serious and costly medical conditions and directs them to specialized programs.
- o **MyHealth Advantage:** An early risk management program that is designed to help improve members' compliance with evidence-based care recommendations. The program provides personalized information via MyHealth Note which empowers members to take greater control of their health and health care decision-making.
- o **Utilization Management:** Preauthorization is required for nonemergency hospital admissions, inpatient services and select outpatient services. This chart shows the requested authorizations and percentage approved.
- o **Why Weight KY:** The weight management program is designed to help members improve their health and achieve safe weight loss goals through support and guidance of a Personal Health Consultant.

KEHP Living Well Promise Weekly Program Update

Week of July 27, 2020

Communications

- Sending an updated PIN letter to medically enrolled employees who have not completed the Promise. The letter is expected to hit homes around 8/6/2020.
- Worked with the KEHP team to finalize and distribute a troubleshooting guide that will assist various KEHP staff in getting participants into the site.
- Except for communications promoting the Promise, all other communications have been paused in order to limit any confusion and to focus in on the goal.

Platform & Technology

- Investigated and resolved an issue with text messages not being received. Moved to sending texts from long codes which has resulted in a 99% delivery rate.
- Continue to work through the scope of the knowledge-based authentication tool that will be deployed in the future and will assist in getting participants safely authenticated into the site.
- Will continue to collect participant feedback on the process so that we can better refine the participant experience.

Call Center & Dedicated Wellbeing Staff

- Ongoing meetings internally to prepare for how we will continue to ramp up to support the higher than expected influx of requests into HelpLine. Meeting with KEHP on Monday, August 3, to review our go forward plan.
- Identified and corrected the issue that was impacting participants not receiving a call-back from HelpLine.
- Account team continues to work through and document what the appeals process will look like for the group of participants who do not complete the Promise by the deadline.

Key Program YTD Metrics

Health Assessment Completions	96,292 <i>(increase of 4,402 from last week)</i>
Screening Completions	30,285 <i>(increase of 1,095 from last week)</i>
Living Well Promise Completions	70.0% <i>(2.5% increase from last week)</i>
Total Portal Registrations	102,777

Kentucky Employees' Health Plan – Status Report
2nd Quarter, 2020
Attachment F – Anthem Performance Guarantees
Page F-1

Performance Category	Guarantee	1Q	2Q	3Q	4Q
Claims Timeliness (14 Calendar Days)	A minimum of 90% of Non-investigated medical Claims will be processed timely. Non-investigated Claims are defined as medical Claims that process through the system without the need to obtain additional information from the Provider, Subscriber or other external sources. Processed Timely is defined as Non-investigated medical Claims that have been adjudicated within 14 calendar days of receipt. This Guarantee will be calculated based on the number of Non-investigated Claims that Processed Timely divided by the total number of Non-investigated Claims. The calculation of this Guarantee does not include Claim adjustments. The calculation of this Guarantee also excludes in any quarter, Claims for the Kentucky Employees' Health Plan for requested changes to Plan benefits, until all such changes have been implemented. This will be measured with the Kentucky Employees' Health Plan's specific data.	Annual	Annual	Annual	Annual
Claim Timeliness (30 Calendar Days)	A minimum of 98% of Non-investigated medical Claims will be processed timely. Non-investigated medical Claims are defined as Claims that process through the system without the need to obtain additional information from the Provider, Subscriber, or other external sources. Processed Timely is defined as Non-investigated medical Claims that have been adjudicated within 30 calendar days of receipt. This Guarantee will be calculated based on the number of Non-investigated Claims that Processed Timely divided by the total number of Non-investigated Claims. The calculation of this Guarantee does not include Claim adjustments. The calculation of this Guarantee also excludes in any quarter, Claims for the Kentucky Employees' Health Plan for requested changes to Plan benefits, until all such changes have been implemented. This will be measured with the Kentucky Employees' Health Plan's specific data.	Annual	Annual	Annual	Annual
Claims Financial Accuracy	A minimum of 99% of medical Claim dollars will be processed accurately. This Guarantee will be calculated based on the total dollar amount of audited medical Claims paid correctly divided by the total dollar amount of audited medical Paid Claims. The calculation of this Guarantee does not include Claim adjustments. The calculation of this Guarantee also excludes in any quarter Claims for the Kentucky Employees' Health Plan for requested changes to Plan benefits, until all such changes have been implemented. This will be measured with the Kentucky Employees' Health Plan's specific data.	Annual	Annual	Annual	Annual

Kentucky Employees' Health Plan – Status Report
2nd Quarter, 2020
Attachment F – Anthem Performance Guarantees
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Performance Category	Guarantee	1Q	2Q	3Q	4Q
Claims Accuracy	A minimum of 97% of medical Claims will be paid or denied correctly. This Guarantee will be calculated based on the number of audited medical Claims paid and denied correctly divided by the total number of audited medical Claims paid and denied. The calculation of this Guarantee also excludes in any quarter Claims for the Kentucky Employees' Health Plan for requested changes to Plan benefits, until all such changes have been implemented. This will be measured with the Kentucky Employees' Health Plan's specific data.	Annual	Annual	Annual	Annual
Adjustments	The percent of adjustments aged greater than 30 days shall be 5% or less. The measure is based on the percentage of claim adjustments entered into the system that are unresolved within 30 days of company receipt date. This includes adjustments routed to other plans/departments (excluding adjustments resulting from client / plan sponsored benefit changes).	Annual	Annual	Annual	Annual
Processing of Ongoing Eligibility Information	100% of the Kentucky Employees' Health Plan's ongoing electronic eligibility files will be processed timely. Timely Processing is defined as electronic eligibility files processed and updated on the eligibility database within 5 business days of receipt of an eligibility file. This Guarantee only applies to the processing of eligibility files submitted by the Kentucky Employees' Health Plan outside of an open enrollment period. This Guarantee does not apply to a defective eligibility file. Defective Eligibility File is defined as an eligibility file that has issues that prevent Contractor's processing of the file. Contractor's payment of this Guarantee is conditioned upon receipt of eligibility files in a format mutually agreed upon by the Parties. This Guarantee will be calculated by (1) dividing total number of eligibility files processed within the timeframe set forth above by (2) the number of the Kentucky Employees' Health Plan's eligibility files processed. This will be measured with the Kentucky Emplth Plan specific data if there are	Annual	Annual	Annual	Annual
Ongoing ID Cards Issuance	A minimum of 99% of Subscriber digital ID cards will be available or Member physical Id cards will be mailed to members, depending on a member's preference, within 10 business days of Contractor's processing of an accurate eligibility file. An Accurate Eligibility File is defined as : (1)an eligibility file formatted in a mutually agreed upon manner; (2) received by Contractor outside of an open enrollment period; and, (3) contains an error rate of less than 1%. This Guarantee will be calculated based on the total number of ongoing ID cards available to Subscribers or mailed to Members within the timeframe set forth above divided by the total number of Members eligible to receive ongoing ID cards. This will be measured with the Kentucky Employees' Health Plan's specific data.	Annual	Annual	Annual	Annual

Kentucky Employees' Health Plan – Status Report
2nd Quarter, 2020
Attachment F – Anthem Performance Guarantees
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Performance Category	Guarantee	1Q	2Q	3Q	4Q
Average Speed to Answer	The average speed to answer (ASA) will be 30 seconds or less. ASA is defined as the average number of whole seconds Members wait and/or are in the telephone system before receiving a response from a customer care representative (CCR) or an interactive voice response unit (IVR). This Guarantee will be calculated based on the total number of calls received in the customer service telephone system. This will be measured with the Kentucky Employees' Health Plan's specific data.	Annual	Annual	Annual	Annual
Call Abandonment Rate	A maximum of 2% of Member calls will be abandoned. Abandoned Calls are defined as Member calls that are waiting for a customer care representative (CCR), but are abandoned before connecting with a CCR. This Guarantee will be calculated based on the number of calls abandoned divided by the total number of calls received in the customer service telephone system. Calls that are abandoned in less than five seconds will not be included in this calculation. This will be measured with the Kentucky Employees' Health Plan's specific data.	Annual	Annual	Annual	Annual
First Call Resolution	A minimum of 85% of Member calls will be resolved during the initial contact with no further follow up required. First Call Resolution is defined as Member callers receiving a response to their inquiry during an initial contact with no further follow-up required. This Guarantee will be calculated based on the total number of Members who receive a First Call Resolution divided by the total number of calls received into the customer service telephone system. This will be measured with the Kentucky Employees' Health Plan's specific data.	Annual	Annual	Annual	Annual

Kentucky Employees' Health Plan – Status Report
2nd Quarter, 2020
Attachment F – Anthem Performance Guarantees
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Performance Category	Guarantee	1Q	2Q	3Q	4Q
Member Satisfaction – NPS	<p>This Guarantee establishes a Quality Benchmark transactional Net Promoter Score (NPS) of 40. Anthem will either: (i) meet or exceed the Quality Benchmark; or, (ii) there will be an improvement in the Net Promoter Score from the Baseline Period. The survey is conducted after a member contacts a customer service representative (CSR). Each member who completes a transaction with Anthem will be asked to provide a rating on a scale from 0 (Not at All Likely) to 10 (Extremely Likely) to a question that asks how likely the member would recommend Anthem to a friend or colleague based on the member's most recent transaction. The transactional Net Promoter Score will be calculated by subtracting the percentage of Detractors (members who provide a rating from 0 to 6) from the percentage of Promoters (members who provide a rating of 9 or 10). To determine the results for (i), Anthem shall compare the Net Promoter Score in the Measurement Period to the Quality Benchmark. The improvement for (ii) will be determined by cith Plan specific data if there are at least 100 Identified Members. If there are fewer than 100 Identified Members, Contractor will use the enterprise commercial membership (non-Medicare) results to determine if this Guarantee is met.asurement Period, shall be considered f</p>	Annual	Annual	Annual	Annual
Account Management Satisfaction	<p>A minimum average score of 3 will be attained on the Account Management Satisfaction Survey (AMSS). A minimum of 3 responses per the Kentucky Employees' Health Plan to the AMSS is required to base the score on Kentucky Employees' Health Plan specific responses only. If 3 responses are received from the Kentucky Employees' Health Plan, an average score is calculated by adding the scores from each respondent divided by the total number of the Kentucky Employees' Health Plan respondents. If fewer than 3 responses are received, the score will be calculated as follows: 2 Kentucky Employees' Health Plan responses: 2/3 of the score will be based on the Kentucky Employees' Health Plan specific AMSS results and 1/3 of the score will be based on the aggregate score of all AMSS results received by the Account Management Team. 1 Kentucky Employees' Health Plan responses: 1/3 of the score will be based on the Kentucky Employees' Health Plan specific AMSS results and 2/3 of the score will be based on the aggregate score. cith Plan specific data if there are at least 100 Identified Members. If there are fewer than 100 Identified Members, Contractor will use the enterprise commercial membership (non-Medicare) results to determine if t</p>	Annual	Annual	Annual	Annual

Kentucky Employees' Health Plan – Status Report
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Attachment F – Anthem Performance Guarantees
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Performance Category	Guarantee	1Q	2Q	3Q	4Q
Heart Failure Identified Participants	<p>There will be either (i) a minimum Compliance Rate of 50%; or (ii) a minimum improvement of 2.5% in the difference between the 50% Compliance Rate and the result from the prior Measurement Period (the Performance Gap) in the percentage of Identified Members with heart failure who are prescribed one or more ACE inhibitors or ARB's in the current Measurement Period; as shown by Contractor Claims Data. The minimum Compliance Rate will be calculated based on the total number of Identified Members with heart failure who are prescribed one or more ACE inhibitors or other appropriate Prescription Drugs during the Measurement Period as shown by Contractor's Claims data divided by the total number of Identified Members. The improvement percentage will be calculated by subtracting the Compliance Rate for the prior Measurement Period from the Compliance Rate for the current Measurement Period and dividing the difference by the Performance Gap for the prior Measurement Period. This will be measured with Kentucky Employee Health Plan specific data if the</p>	Annual	Annual	Annual	Annual
Asthma Identified Participants	<p>There will be either (i) a minimum Compliance Rate of 80%; or (ii) a minimum improvement of 2.5% in the difference between the 80% Compliance Rate and the result from the prior Measurement Period (the Performance Gap) in the percentage of Identified Members with persistent asthma who are prescribed one or more appropriate Prescription Drugs in the current Measurement Period; as shown by Contractor Claims data. The minimum Compliance Rate will be calculated based on the total number of Identified Members with persistent asthma who are prescribed one or more appropriate Prescription Drugs during the Measurement Period as shown by Contractor's Claims data divided by the total number of Identified Members. The improvement percentage will be calculated by subtracting the Compliance Rate for the prior Measurement Period from the Compliance Rate for the current Measurement Period and dividing the difference by the Performance Gap for the prior Measurement Period. This will be measured with Kentucky Employees' Health Plan specific data if there are at least 100 Identified Members. If there are fewer than 100 Identified Members, Contractor will use the enterprise commercial membership (non-Medicare) results to determine if this Guarantee is met.</p>	Annual	Annual	Annual	Annual

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Performance Category	Guarantee	1Q	2Q	3Q	4Q
Comprehensive Diabetes Care-Medical Attention for Nephropathy (kidney disease)	<p>There will be either (i) a minimum Compliance Rate of 70%; or (ii) a minimum improvement of 2.5% in the difference between the 70% Compliance Rate and the result from the prior Measurement Period (the Performance Gap) in the percentage of Identified Members with diabetes (Type 1 and Type 2) who have received medical attention for nephropathy through a screening test; as shown by Contractor Claims data. The minimum Compliance Rate will be calculated based on the total number of Identified Members with diabetes (Type 1 and Type 2) who received at least one nephropathy screening test or evidence of nephropathy during the measurement period as shown by Contractor's Claims data divided by the total number of Identified Members. The improvement percentage will be calculated by subtracting the Compliance Rate for the prior Measurement Period from the Compliance Rate for the current Measurement Period and dividing the difference by the Performance Gap for the prior Measurement. This will be measured with Kentucky Employees' Health Plan specific data.</p>	Annual	Annual	Annual	Annual
Diabetes Identified Participants	<p>There will be either (i) a minimum Compliance Rate of 75%; or (ii) a minimum improvement of 2.5% in the difference between the 75% Compliance Rate and the result from the prior Measurement Period (the Performance Gap) in the percentage of Identified Members with diabetes who received at least one HbA1c test in the current Measurement Period; as shown by Contractor Claims data. The minimum Compliance Rate will be calculated based on the total number of Identified Members with diabetes who received at least one HbA1c test during the Measurement Period as shown by Contractor's Claims divided by the total number of Identified Members. The improvement percentage will be calculated by subtracting the Compliance Rate for the prior Measurement Period from the Compliance Rate for the current Measurement Period and dividing the difference by the Performance Gap for the prior Measurement Period. This will be measured with Kentucky Employees' Health Plan specific data.</p>	Annual	Annual	Annual	Annual
COPD	<p>The HEDIS measure that assesses the percentage of COPD exacerbations for Members 40 years of age and older who had an acute inpatient discharge or ED encounter on or between January 1–November 30 of the measurement year and who were dispensed appropriate medications (bronchodilator). Gap Closure Goal: 2.5% Target/Ceiling: 70% This will be calculated using Kentucky Employees' Health Plan specific data.</p>	Annual	Annual	Annual	Annual

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Performance Category	Guarantee	1Q	2Q	3Q	4Q
Utilization Rates - Emergency Room	<p>In the Performance Period there will either be (i) maintenance of or a reduction in the number of Avoidable Emergency Room Visits per 1,000 Members (the Avoidable ER Visit Rate) from the Measurement Period compared to the Baseline Period that is Statistically Significant; or (ii) an Avoidable ER Visit Rate of 120 or less during the Measurement Period. The Baseline Period shall be the twelve months prior to the Measurement Period. In later Performance Periods there will either be (i) maintenance of or a reduction in the Avoidable ER Visit Rate from the prior Measurement Period that is Statistically Significant; or (ii) an Avoidable ER Visit Rate of 120 or less during the Measurement Period. Avoidable Emergency Room Visits are defined as low intensity emergency room visits as determined according to Contractor's criteria. Avoidable Emergency Room Visits do not include any emergency room visits that result in an inpatient admission. Statistically Significant is defined as Contractor's use of standard statistical tests that indicate at least a 95% confidence level that any change from the prior Measurement Period is not likely due to random chance alone. Only Members for whom Contractor has at least six months of eligibility information in a Measurement Period, shall be considered for purposes of this Guarantee. In the first Performance Period the change in the Avoidable ER Visit Rate shall be calculated by subtracting the Avoidable ER Visit Rate in the current Measurement Period by the Avoidable ER Visit Rate in the Baseline Period. This result shall then be divided by the Avoidable ER Visit Rate in the Baseline Period. In later Performance Periods the change in Avoidable ER Visit Rate shall be calculated by subtracting the Avoidable ER Visit Rate in the current Measurement Period by the Avoidable ER Visit Rate in the prior Measurement Period. This result shall then be divided by the Avoidable ER Visit Rate in the prior Measurement Period. This will be measured with Kentucky Employees' Health Plan specific data.</p>	Annual	Annual	Annual	Annual

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Performance Category	Guarantee	1Q	2Q	3Q	4Q
Utilization Rates - Hospital	<p>In the Performance Period there will either be (i) maintenance of or a reduction in the number of Admissions per 1,000 Members (Admission Rate) from the Measurement Period compared to the Baseline Period; or (ii) an Admission Rate of 65 or less during the Measurement Period. The Baseline Period shall be the twelve months prior to the Measurement Period. In later Performance Periods there will either be (i) maintenance of or a reduction in the Admission Rate from the prior Measurement Period; or (ii) an Admission Rate of 65 or less during the Measurement Period. Admissions are defined as admissions with Type of Service categories of Medical, Surgical and Behavioral Health. Admissions do not include admissions related to Type Of Service categories of Maternity, NICU or Rehabilitation. Only Members for whom Contractor has at least six months of eligibility information in a Measurement Period, shall be considered for purposes of this Guarantee. In the first Performance Period this Guarantee shall be calculated by subtracting the Admission Rate in the first Measurement Period from the Admission Rate in the Baseline Period. This result shall then be divided by the Admission Rate in the Baseline Period. In later Performance Periods the change in the Admission Rate shall be calculated by subtracting the Admission Rate in the current Measurement Period from the Admission Rate in the prior Measurement Period. This result shall then be divided by the Admission Rate in the prior Measurement Period. This will be measured with Kentucky Employees' Health Plan specific data.</p>	Annual	Annual	Annual	Annual
Enrollment	<p>A minimum of 40% of Members in Year 1 will enroll into the IHM program. Member enrollment is defined as: (a) 1 or more successful telephonic contacts with a Contractor IHM coach or enrollment specialist; and (b) verbal permission to participate in the program. This Guarantee will be calculated based on the number of Members who have enrolled divided by the total number of Members outreached by the program. This will be measured with Kentucky Employees' Health Plan specific data.</p>	Annual	Annual	Annual	Annual
Post Discharge Outreach	<p>A minimum of 90% of Identified Members will receive successful contact from an Contractor health coach or receive at least two attempted outreach telephone calls from an Contractor health coach within three business days of notification of discharge, excluding the day of discharge, from a medical or surgical inpatient stay to the home setting where the Identified Member had a length of stay of three days or greater. This Guarantee does not include admissions related to maternity or behavioral health services. This guarantee only includes Members discharged to the home setting and not to Members discharged to an inpatient rehabilitation center or a skilled nursing facility.</p>	Annual	Annual	Annual	Annual

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Performance Category	Guarantee	1Q	2Q	3Q	4Q
Engagement	At least 1.5% of the Client's population will be engaged in case management at some point during the year. Engagement will be defined as contact with the Member or their designee and establishment of a care plan.	Annual	Annual	Annual	Annual
Data Analysis and Reporting	IHM standard monthly and quarterly reports as determined by Contractor will be submitted to the Kentucky Employees' Health Plan no later than 55 calendar days following the last day of the month/quarter. If the 55 th calendar day is a Saturday or Sunday the report will be submitted on the following Monday. Annual reports are made available 180 days post end of Plan year. The 180 days allows Contractor to include three months of Claims run out to support utilization and clinical (claims based) outcomes. This will be measured with Kentucky Employees' Health Plan specific data.	Met	Met	Annual	Annual
Participant Satisfaction	A minimum average score of 80% will be attained on Contractor's Integrated Health Model (IHM) Member satisfaction survey question. Each Member is asked to rate their satisfaction with Contractor's IHM program using a five point scale. The response is scored by dividing (i) the total number of Members who responded positively by (ii) the total number of Members who responded to the IHM Member satisfaction question. The survey will be given to a random sample of Kentucky Employees' Health Plan Members enrolled in an IHM product. This Guarantee will be based on all Kentucky Employees' Health Plan Members; a minimum of 400 surveys must be completed within a Measurement Period for the score to be valid.	Annual	Annual	Annual	Annual
Program Integrity Aligned Incentive - Aggregate Annual Cap	Employer's maximum liability for the fee for Overpayment Identification and Claims Prepayment Analysis Activities is capped at \$5.00 per Employee per month (PEPM) per each year of the Agreement Period. Excludes Subrogation services.	Annual	Annual	Annual	Annual
Program Integrity Aligned Incentive - Claim Level Cap	The fee for each Overpayment Identification and/or Claims Prepayment Analysis activity will not exceed \$25,000 per claim. Excludes Subrogation services.	Annual	Annual	Annual	Annual
Program Integrity Aligned Incentive - Savings Guarantee	Savings attributable to Recovery and Payment Analysis Services will meet or exceed \$9.76 per Employee per month (PEPM) (Guaranteed Savings Amount) during the measurement period. Recovery and Prepayment Analysis Services include Subrogation Services and Overpayment Identification and Claims Prepayment Analysis Activities. Anthem shall determine results by comparing the actual savings amount for the Measurement Period to the Guaranteed Savings Amount. The Guarantee will be measured with Employer-specific Data.	Annual	Annual	Annual	Annual

Kentucky Employees' Health Plan – Status Report
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 Attachment G – CVS Performance Guarantees
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CVS Health **Performance Guarantees Tracking & Reporting**
 Commonwealth of Kentucky

For period ending: 6/30/2020

Guarantees	Target	Thrsh	Q1: Jan - Mar	Q2: Apr - Jun	Q3: Jul - Sep	Q4: Oct - Dec	Year	Penalty Unit	Actual Penalty
01 - Retail Network Pharmacy Access - Nationwide c	Greater Than or Equal To 5.0 Mile(s)	95	F1	F1	F1	F1		15,000.	
02 - Paper Claims Turnaround Time - Clean c	Less than or Equal to 5 Business Day(s)	95	3	2			F2	Dollar Per PG 11,250.	
03 - Mail Turnaround Time - Clean c	Greater Than or Equal To 2 Business Day(s)	95	98	99			F2	Dollar Per PG 11,250.	
04 - Mail TAT c							F2	Dollar Per PG 11,250.	
04a - Mail Turnaround Time - Non Clean c	Greater Than or Equal To 5 Business Day(s)	97	99	99			F2	Dollar Per PG	
04b - Mail Turnaround Time - Non Clean - 2 c	Less than or Equal to 5 Business Day(s)	100	1	1			F2	Dollar Per PG	
05 - Mail Service Accuracy - Non Std c	Greater Than or Equal To 99.99%		100.00	100.00			F2	Dollar Per PG 11,250.	
06 - Electronic Claims Processing Accuracy (PBM) c	Greater Than or Equal To 99.95%		100.00	100.00			F2	Dollar Per PG 11,250.	
07 - Telephone Speed of Answer c							F2	Dollar Per PG 37,500.	
07a - Telephone Average Live Voice Answer c	Less than or Equal to 25 Sec(s)		5	1			F2	Dollar Per PG	
07b - Telephone Speed of Answer - T5F c	Greater Than or Equal To 30 Sec(s)	85	95	99			F2	Dollar Per PG	
08 - Telephone Abandonment Rate - Live Voice c	Less than or Equal to 3%	15	1	1			F2	Dollar Per PG 18,750.	
09 - First Call Resolution c	Greater Than or Equal To 95%		99	98			F2	Dollar Per PG 37,500.	
10a - Written Inquiry - 1 c	Less than or Equal to 5 Business Day(s)	97	100	100			F2	Dollar Per PG 5,625.	

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 Attachment G – CVS Performance Guarantees
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Performance Guarantees Tracking & Reporting

Commonwealth of Kentucky

For period ending: 6/30/2020

Guarantees	Target	Thresh	Q1: Jan - Mar	Q2: Apr - Jun	Q3: Jul - Sep	Q4: Oct - Dec	Year	Penalty Unit	Actual Penalty
10b - Written Inquiry - 2 c	Less than or Equal to 10 Business Day(s)	100	100	100			F2	5,625. Dollar Per PG	
11 - Customer Satisfaction c	Greater Than or Equal To 93 %		F1	F1	F1	F1		150,000. Dollar Per PG	
12 - Plan Design Update c	Equal to 100 %		F1	F1	F1	F1		75,000. Dollar Per PG	
13 - Annual Reviews c	Equal to 100 %		F1	F1	F1	F1		45,000. Dollar Per PG	
14 - Account Management Satisfaction c	Greater Than or Equal To 4 Rating		F1	F1	F1	F1		150,000. Dollar Per PG	
15 - Standard Reporting c	Less than or Equal to 30 Day(s)		Met	Met			F2	11,250. Dollar Per PG	
16 - Eligibility Load Accuracy c	Greater Than or Equal To 98 %		Met	Met			F2	37,500. Dollar Per PG	
17 - Eligibility Updates c	Equal to 2 Business Day(s)	100	100	100			F2	15,000. Dollar Per PG	
18 - Account Management - Meetings c	Equal to 100 %		Met	Met			F2	18,750. Dollar Per PG	
19 - ID Cards - Ongoing c	Greater Than or Equal To 4 Business Day(s)	98	100	100			F2	11,250. Dollar Per PG	

Kentucky Employees' Health Plan – Status Report
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 Attachment G – CVS Performance Guarantees
 Page G-3



Performance Guarantees Tracking & Reporting

Commonwealth of Kentucky

For period ending: 6/30/2020

Guarantees	Target	Thrsh	Q1: Jan - Mar	Q2: Apr - Jun	Q3: Jul - Sep	Q4: Oct - Dec	Year	Penalty Unit	Actual Penalty
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Penalty Sum:
 Paid Sum:
 Net Due:

Footnotes:

- F1: Quarterly stat not applicable to specific guarantee
- F2: Annual stat not applicable to specific guarantee
- F3: Stat not applicable to contract years 2 and beyond
- c = Client Specific Guarantee
- cl = Coalition Specific Guarantee (also indicates TPA or healthplan specific guarantee)
- L = Guarantee covers all lines of business
- t = Tiered Penalty

NOTE: Met = Performance Guarantee Achieved

NOTE: Payment due by Thirty (30) days after End of Cnt. Yr Rpt Crd Sub

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 Monthly, Quarterly and Semi-annual data are unaudited statistics and are subject to change at year end.

**Kentucky Employees' Health Plan – Status Report
2nd Quarter, 2020
Attachment H – HealthEquity Performance Guarantees
Page H-1**

PG #	Reporting Frequency	Administrative Fees or Dollars at Risk	Guarantee	Q1 2020 DATA	Q1 2020 Met / Missed	Q2 2020 DATA	Q2 2020 Met / Missed
1	Quarterly	1.00%	Satisfaction: Measure satisfaction with overall process using mutually agreeable scorecard	92.50%	Met	93.60%	Met
2	Quarterly	2.00%	Account Management: Measuring satisfaction using a mutually agreeable scorecard.		Met		n/a
3	Quarterly	1.50%	Debit Cards: All Health FSA Participants will receive a separate debit card package within ten (10) Business Days of the posting of a clean enrollment and eligibility file except during the annual Open Enrollment (OE) period. During OE, Participants will receive a separate debit card package within fifteen (15) Business Days of the posting of a clean enrollment and Eligibility file.	100.00%	Met	100.00%	Met
4	Quarterly	1.50%	Eligibility File: Load 99% of eligibility files within two business days.	100%	Met	100%	Met
5	Quarterly	1.50%	Eligibility Report: Produce an error report on eligibility files or updates within two business days.	100%	Met	100%	Met
6	Quarterly	1.50%	Contribution File: Producing a contribution file report	100%	Met	100%	Met

**Kentucky Employees' Health Plan – Status Report
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Attachment H – HealthEquity Performance Guarantees
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PG #	Reporting Frequency	Administrative Fees or Dollars at Risk	Guarantee	Q1 2020 DATA	Q1 2020 Met / Missed	Q2 2020 DATA	Q2 2020 Met / Missed
7	Quarterly	2.00%	Financial Accuracy: Reimbursing FSA claims with a financial accuracy of 99%.	99.39%	Met	99%	Met
8	Quarterly	1.50%	Member Service - Abandonment Rate: Answering calls to customer service line with an abandonment rate of 3% or less.	0.98%	Met	0.97%	Met
9	Quarterly	1.50%	Average Speed to Answer: Answering calls to customer service line with an average time of 30 seconds or less	84.51%	Met	94.5%	Met
10	Quarterly	1.50%	Reporting: Producing standard quarterly reports with thirty days of the end of the quarter		Met		Met
11	Quarterly	3.00%	Account Management: Measuring satisfaction using a mutually agreeable scorecard.		Met		n/a
12	Quarterly	1.50%	Debit Cards: All Health HRA Participants will receive a separate debit card package within ten (10) Business Days of the posting of a clean enrollment and eligibility file except during the annual Open Enrollment (OE) period. During OE, Participants will receive a separate debit card package within fifteen (15) Business Days of the posting of a clean enrollment and Eligibility file.	100.00%	Met	100.00%	Met

Kentucky Employees' Health Plan – Status Report
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 Attachment H – HealthEquity Performance Guarantees
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PG #	Reporting Frequency	Administrative Fees or Dollars at Risk	Guarantee	Q1 2020 DATA	Q1 2020 Met / Missed	Q2 2020 DATA	Q2 2020 Met / Missed
13	Quarterly	1.50%	Eligibility File: Load 99% of eligibility files within two business days.	100%	Met	100%	Met
14	Quarterly	1.50%	Eligibility Report: Produce an error report on eligibility files or updates within two business days.	100%	Met	100%	Met
15	Quarterly	2.00%	Financial Accuracy: Reimbursing HRA claims with a financial accuracy of 99%.	99.39%	Met	99%	Met
16	Quarterly	1.50%	Member Service - Abandonment Rate: Answering calls to customer service line with an abandonment rate of 3% or less.	0.98%	Met	0.97%	Met
17	Quarterly	2.00%	Average Speed to Answer: Answering calls to customer service line with an average time of 30 seconds or less	84.51%	Met	94.5%	Met
18	Quarterly	2.00%	Reporting: Producing standard quarterly reports with thirty days of the end of the quarter		Met		Met
19	Quarterly	1.50%	Account Management: Measuring satisfaction using a mutually agreeable scorecard.		Met		n/a
20	Quarterly	3.00%	Account Management: Sending 98% of all applications and notices within seven business days.	100.00%	Met	100.00%	Met
21	Quarterly	2.00%	Billing Turnaround: Posting 90% of payments within seven business days		Met		Met

**Kentucky Employees' Health Plan – Status Report
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Attachment H – HealthEquity Performance Guarantees
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PG #	Reporting Frequency	Administrative Fees or Dollars at Risk	Guarantee	Q1 2020 DATA	Q1 2020 Met / Missed	Q2 2020 DATA	Q2 2020 Met / Missed
22	Quarterly	1.50%	Collection: Providing accurate premium distribution and reporting by the fifteenth of each month.	Met	Met	Met	Met
23	Quarterly	1.50%	Eligibility File: Load 99% of qualifying event files within two business days.	100.00%	Met	100%	Met
24	Quarterly	1.50%	Eligibility Report: Producing an error report on eligibility files or updates within two business days.	100.00%	Met	100.00%	Met
25	Quarterly	1.50%	Election Packages: Mailing all COBRA election packages within seven business days.	100.00%	Met	100.00%	Met
26	Quarterly	2.00%	Reporting: Producing standard monthly reports within thirty days after the end of the month or quarter.		Met		Met

StayWell Performance Guarantees

PG Category	Detailed Description of PG	Percent of Fees at Risk	Frequency	Actual	Met/Unmet
Implementation	Achieve a 90% or better on a survey completed by client assessing Vendor's performance for program implementation timeframes and processes	Year 1 = 1.0% Year 2 = 0.0%	Annual		
Account Management	Achieve a 90% or better on a survey completed by the Commonwealth assessing account management performance, including but not limited to the following criteria: satisfaction, knowledge, capabilities, problem resolution, responsiveness, ability to meet deadlines, professionalism, and flexibility	0.50%	Annual		
Satisfaction Participant	A minimum of 90% of respondents to a member satisfaction survey report satisfaction with the wellbeing program. The performance should be based on Commonwealth-specific member results and sent to all participants.	0.50%	Annual		
Program Engagement	A minimum of 30% of eligible participants will participate in a program aspect related to at least two of the four wellbeing components (physical, social, emotional and financial). Participant completion of the Vendor's Health Risk Questionnaire (HRQ) or getting a biometric screening will not count toward meeting this performance guarantee	0.50%	Annual		

Kentucky Employees' Health Plan – Status Report
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 Attachment I – StayWell Performance Guarantees
 Page I-2

PG Category	Detailed Description of PG	Percent of Fees at Risk	Frequency	Actual	Met/Unmet
Risk Profile Improvement	<p>Achieve at least 1 % net reduction in average number of health risks of all employee repeat HRQ completers. Assumptions: This PG will be void if any of the following criteria are not met:</p> <p>(1) Customer implementation of a proposed comprehensive program model, including HRQ, targeted lifestyle interventions (including telephonic delivery mode and other modes of Customer's choice), and Population-based health education opportunities in each program year;</p> <p>(2) Employee HRQ completion rate of at least 50% and an employee lifestyle management registration rate of at least 30% in each program year;</p> <p>(3) at least 50% of employee HRQ completers are invited to participate in targeted lifestyle management interventions;</p> <p>(4) consistency with intervention program criteria as detailed in scope of work in each program year;</p> <p>(5) Customer implementation of a follow-up HRQ at the end of each program year;</p> <p>(6) Average time between HRQs for all repeat HRQ completers included in the measurement will be at least 0.9 years but no greater than 1.1 years. (If another HRQ is offered to eligible employees less than 12 months from the initial HRQ, the targeted</p>	<p>Program Year 1 = 7% potentially at risk, as follows: if a 0.75-0.99% net reduction is achieved = 3.5% at risk if a 0.50-0.74% net reduction is achieved = 5.25% at risk if less than a 0.50% net reduction is achieved = 7% at risk</p> <p>Program Year 2 Fees at Risk = 8% potentially at risk, as follows: if a 0.75-</p>	Annual		

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 Attachment I – StayWell Performance Guarantees
 Page I-3

PG Category	Detailed Description of PG	Percent of Fees at Risk	Frequency	Actual	Met/Unmet
	<p>net improvement in number of health risks will be adjusted.);</p> <p>(7) Customer implementation of a mutually agreed promotion/communication/incentive strategy;</p> <p>(8) Customer implements StayWell's standard engagement strategy for coaching, programs; and,</p> <p>(9) Consistency of HRQ version.</p> <p>Measurement: Analysis of population-level behavior change is based on repeat employee HRQ completion, comparing an employee's first HRQ completed within the program year being evaluated by the PG to the HRQ completed in the following program year. Calculation compares the average number of risks in the baseline program year to the average number of risks in the HRQ follow-up program year and determines the percentage change. Measurement requires that a follow-up HRQ be implemented in the program year following the assessed program year.</p>	<p>0.99% net reduction is achieved = 4.0% fees at risk</p> <p>If a 0.50-0.74% net reduction is achieved = 6.0% fees at risk</p> <p>If less than a 0.50% net reduction is achieved = 8.0% fees at risk</p> <p>Program Year 3 Fees at Risk = 8% potentially at risk, as follows:</p> <p>If a 0.75-0.99% net reduction is achieved = 4.0% fees at</p>			

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PG Category	Detailed Description of PG	Percent of Fees at Risk	Frequency	Actual	Met/Unmet
		risk If a 0.50-0.74% net reduction is achieved = 6.0% fees at risk If less than a 0.50% net reduction is achieved = 8.0% fees at risk			

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PG Category	Detailed Description of PG	Percent of Fees at Risk	Frequency	Actual	Met/Unmet
Files, Analysis, and Reporting	Vendor's data files, data analysis, and reports shall be 98% accurate and timely, provided on a schedule agreed to by the Vendor and the Commonwealth, and shall include at least an annual review report.	0.50%	Annual		
Customer Service	80% or more of inbound calls will be answered within 30 seconds. Less than 5% of inbound calls will be abandoned prior to reaching a customer service representative	0.50%	Annual		
Enrollment	Upon receipt of a clean enrollment file from the Commonwealth, the Vendor will process enrollment within 48 hours.	0.50%	Annual		
Web Portal	The vendor's web portal will be available 99.5% of the time, excluding maintenance hours.	0.50%	Annual		
Employer Portal	The Vendor's employer portal will be available 99.5% of the time.	0.50%	Annual		
Incentive Management	Incentives and rewards provided to participants in the wellbeing program will be 100% accurate.	0.50%	Annual		
	99% of self-reported incentivized activity will be captured and awarded within 24 hours of the participant's online submission of the activity.	0.50%	Annual		
Trend Guarantee	99% of HRQs and biometric screening will be captured and incentivized accurately.	0.50%	Annual		
	StayWell will conduct claims trend analysis that compares program participants to non-participants after Program Year 2. Fees at risk do not apply after Program Year 3 due to redundancy with ROI guarantee.	1.00%	Annual		

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PG Category	Detailed Description of PG	Percent of Fees at Risk	Frequency	Actual	Met/Unmet
ROI Guarantee	<p>Achieve an Integrated ROI of \$1.50:\$1 measured after program year 3.</p> <p>This PG will be voided if any of the following criteria are not met:</p> <ul style="list-style-type: none"> (1) Commonwealth implementation of a proposed comprehensive program model without delays including health assessment (HA), targeted coaching interventions, and population-based health education opportunities in each Program Year; (2) Commonwealth implementation of an engagement/promotion/recruitment strategy that achieves an employee/ spouse HA completion rate of at least 60%, an employee/spouse health coaching intervention program registration rate of at least 30% (Of eligible employee and spouses in each Program Year); (3) consistency with Intervention program criteria as detailed in pre-Implementation scope of work in each Program Year; (4) provision by Commonwealth of accurate telephone numbers for targeted intervention delivery; (5) Commonwealth permission for standard outreach activities for targeted individuals; (6) provision by the Commonwealth or the Commonwealth's vendors of complete and timely eligibility and claims data (both medical and pharmacy) and the total evaluation sample; (7) a total evaluation sample size of at least 7,000 individuals (i.e. the evaluation population); 	1.00%	Annual		

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PG Category	Detailed Description of PG	Percent of Fees at Risk	Frequency	Actual	Met/Unmet
	<p>(8) execution of the ROI analysis by StayWell or Supplier affiliated researchers, based on at least one (1) year of medical claims data prior to program launch.</p> <p>ROI calculations will be based on an integrated claims-based analysis that includes program eligible active employees and spouses (in the defined baseline and program year periods) on sponsor-provided eligibility files for Supplier, excluding retirees and individuals who opt to waive medical plan coverage. The analysis will be limited to active employees and spouses aged 18-84 years of age and individuals enrolled in the benefit plan for at least 6 months during both the baseline and the applicable Program Year. "Rolling" baseline period will be used such that there is at most a four-year lag between the measurement year and the baseline year. A shorter period may be used if significant events within the Commonwealth create a fundamentally different environment that demands a modified analysis using a shorter time horizon. To the extent that a shorter time horizon is necessary, the relevant target for this Performance Guarantee will be modified proportionally to reflect the reduced savings that are possible.</p> <p>Data analysis will rely on a participation- and claims-integrated, person-centric database, multivariate regression procedures, and a "differences in differences" method that compares participant trend and nonparticipant medical and pharmacy</p>				

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PG Category	Detailed Description of PG	Percent of Fees at Risk	Frequency	Actual	Met/Unmet
	claims trend. Based on the Commonwealth's data available for that year's ROI analysis, an appropriate statistical methodology based on best-in-class alternative models (e.g., propensity weighting, calipers matching, I multiple-groups models, separate cost modeling) will be designed to address the many issues common to ROI analyses in general and the Commonwealth data in particular (e.g., selection bias, small nonparticipant sample size, statistical interaction effects).	15%	Annual		
	Total Percentage of Fees at Risk	15%	Annual		

Notes:

1. Fees at Risk are expressed as a percentage of applicable billings in any Program Year related to that Program Year. Applicable billings are solely those related to the underlying program supported by the PGs, as outlined above. Fees at risk exclude goods and services provided by a third party or subcontractor. In the event that any PG is not able to be calculated due to unmet assumption criteria, that PG will be void and the Fees at Risk associated with that PG will not be reallocated to any other PG. The total Fees at Risk for any year shall be 15%.
2. Measurement for all PGs will be based upon Customer's active employee population only.
3. Customer termination during an active Program Year will void all PGs associated with that year.
4. Fees at risk exclude devices, postage, onsite staff fees, if applicable.
5. Any undisputed fees not paid in full within thirty (30) days of the invoice due date shall void all Performance Guarantees, in their entirety, related to the applicable Program Year of such fees.