



INVITATION TO NEGOTIATE
002-18
EMPLOYEE BENEFITS INSURANCE PLANS

ATTACHMENT 2

MEDICAL CLAIMS EXPERIENCE

Monitoring by Utilization and Enrollment

Company: SW FL WATER MGMT DISTRICT

Group: 78159

Current Paid Period: From 01/2016 to 1/2018

Paid Year Month	Plan	Enrollment		Premium			Capitation			Fee for Service Claims					Grand Total	
		Contracts	Members	ASO/MPP Fee	Stoploss Premium	Total Premium	PCP	Specialty	Total Capitation	Inpatient	Outpatient	Physician	Other	Total Medical		Pharmacy
201601	BLUECHOICE COPAY PLAN 725-R9	81	187	\$4,981.50	\$9,866.70	\$14,848.20	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$20.61	\$190.00	\$210.61	\$17,225.41	\$17,436.02
	BLUEOPT COPAY PLAN 3559-R6	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	BLUEOPT COPAY PLAN 3559-R8	445	1,048	\$27,367.50	\$53,968.37	\$81,335.87	\$0.00	\$1,434.39	\$1,434.39	\$0.00	\$0.00	\$180.63	\$0.00	\$180.63	\$92,140.79	\$93,755.81
	BLUEOPT FM HLTH PL 05181-R4	13	40	\$799.50	\$2,048.93	\$2,848.43	\$0.00	\$29.60	\$29.60	\$0.00	\$0.00	\$745.83	\$184.52	\$930.35	\$56.47	\$1,016.42
	BLUEOPT SN HLTH PL 05180-R4	12	12	\$1,320.12	\$836.88	\$2,157.00	\$0.00	\$8.88	\$8.88	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$16.60	\$25.48
	Total	551	1,287	\$34,468.62	\$66,720.88	\$101,189.50	\$0.00	\$1,472.87	\$1,472.87	\$0.00	\$0.00	\$947.07	\$374.52	\$1,321.59	\$109,439.27	\$112,233.73
	Avg	110	257	\$6,893.72	\$13,344.18	\$20,237.90	\$0.00	\$294.57	\$294.57	\$0.00	\$0.00	\$189.41	\$74.90	\$264.32	\$21,887.85	\$22,446.75
201602	BLUECHOICE COPAY PLAN 725-R9	80	184	\$4,783.10	\$9,709.09	\$14,492.19	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$23,542.99	\$23,542.99
	BLUEOPT COPAY PLAN 3559-R6	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	BLUEOPT COPAY PLAN 3559-R8	439	1,026	\$31,191.25	\$53,022.71	\$84,213.96	\$0.00	\$1,401.51	\$1,401.51	\$63,107.23	\$151,883.66	\$99,707.92	\$32,326.31	\$347,025.12	\$76,886.40	\$425,313.03
	BLUEOPT FM HLTH PL 05181-R4	14	45	\$861.00	\$2,206.54	\$3,067.54	\$0.00	\$33.30	\$33.30	\$0.00	\$0.00	\$438.94	\$0.00	\$438.94	\$38.76	\$511.00
	BLUEOPT SN HLTH PL 05180-R4	13	13	\$738.00	\$836.88	\$1,574.88	\$0.00	\$8.88	\$8.88	\$0.00	\$0.00	\$119.73	\$23.53	\$143.26	\$16.60	\$168.74
	Total	546	1,268	\$37,573.35	\$65,775.22	\$103,348.57	\$0.00	\$1,443.69	\$1,443.69	\$63,107.23	\$151,883.66	\$100,266.59	\$32,349.84	\$347,607.32	\$100,484.75	\$449,535.76
	Avg	109	254	\$7,514.67	\$13,155.04	\$20,669.71	\$0.00	\$288.74	\$288.74	\$12,621.45	\$30,376.73	\$20,053.32	\$6,469.97	\$69,521.46	\$20,096.95	\$89,907.15
201603	BLUECHOICE COPAY PLAN 725-R9	80	184	\$4,981.50	\$9,866.70	\$14,848.20	\$0.00	\$0.00	\$0.00	\$2,757.77	\$20,084.03	\$71,010.81	\$23,033.73	\$116,886.34	\$31,891.97	\$148,778.31
	BLUEOPT COPAY PLAN 3559-R8	434	1,018	\$26,850.39	\$53,022.71	\$79,873.10	\$0.00	\$1,380.96	\$1,380.96	\$85,936.31	\$102,099.31	\$63,053.85	\$32,783.46	\$283,872.93	\$140,345.02	\$425,598.91
	BLUEOPT FM HLTH PL 05181-R4	16	52	\$861.00	\$2,206.54	\$3,067.54	\$0.00	\$33.30	\$33.30	\$0.00	\$849.48	\$657.80	\$227.96	\$1,735.24	\$11.76	\$1,780.30
	BLUEOPT SN HLTH PL 05180-R4	13	13	\$861.00	\$976.36	\$1,837.36	\$0.00	\$10.36	\$10.36	\$1,572.26	\$3,824.55	\$2,554.21	\$415.80	\$8,366.82	\$16.60	\$8,393.78
	Total	543	1,267	\$33,553.89	\$66,072.31	\$99,626.20	\$0.00	\$1,424.62	\$1,424.62	\$90,266.34	\$126,857.37	\$137,276.67	\$56,460.95	\$410,861.33	\$172,265.35	\$584,551.30
	Avg	136	317	\$8,388.47	\$16,518.08	\$24,906.55	\$0.00	\$356.16	\$356.16	\$22,566.59	\$31,714.34	\$34,319.17	\$14,115.24	\$102,715.33	\$43,066.34	\$146,137.83

		Enrollment		Premium			Capitation			Fee for Service Claims						
Paid Year Month	Plan	Contracts	Members	ASO/MPP Fee	Stoploss Premium	Total Premium	PCP	Specialty	Total Capitation	Inpatient	Outpatient	Physician	Other	Total Medical	Pharmacy	Grand Total
201604	BLUECHOICE COPAY PLAN 725-R9	78	181	\$4,920.00	\$9,796.96	\$14,716.96	\$0.00	\$0.00	\$0.00	\$118,255.58	\$11,828.90	\$32,541.07	\$4,236.95	\$166,862.50	\$23,091.20	\$189,953.70
	BLUEOPT COPAY PLAN 3559-R8	433	1,013	\$26,691.00	\$52,322.53	\$79,013.53	\$0.00	\$1,383.70	\$1,383.70	\$97,502.37	\$105,392.78	\$81,977.29	\$28,148.43	\$313,020.87	\$86,884.31	\$401,288.88
	BLUEOPT FM HLTH PL 05181-R4	16	52	\$984.00	\$2,521.76	\$3,505.76	\$0.00	\$40.70	\$40.70	\$0.00	\$194.75	\$686.17	\$151.72	\$1,032.64	\$2,124.56	\$3,197.90
	BLUEOPT SN HLTH PL 05180-R4	13	13	\$799.50	\$906.62	\$1,706.12	\$0.00	\$9.62	\$9.62	\$0.00	\$254.88	\$1,720.53	\$282.20	\$2,257.61	\$19.29	\$2,286.52
	Total	540	1,259	\$33,394.50	\$65,547.87	\$98,942.37	\$0.00	\$1,434.02	\$1,434.02	\$215,757.95	\$117,671.31	\$116,925.06	\$32,819.30	\$483,173.62	\$112,119.36	\$596,727.00
	Avg	135	315	\$8,348.63	\$16,386.97	\$24,735.59	\$0.00	\$358.51	\$358.51	\$53,939.49	\$29,417.83	\$29,231.27	\$8,204.83	\$120,793.41	\$28,029.84	\$149,181.75
201605	BLUECHOICE COPAY PLAN 725-R9	79	181	\$4,797.00	\$9,657.48	\$14,454.48	\$0.00	\$0.00	\$0.00	\$0.00	\$8,458.48	\$40,827.66	\$14,532.69	\$63,818.83	\$20,305.13	\$84,123.96
	BLUEOPT COPAY PLAN 3559-R8	429	1,002	\$26,445.00	\$52,081.64	\$78,526.64	\$0.00	\$1,365.89	\$1,365.89	\$115,298.02	\$103,495.64	\$66,550.46	\$23,184.12	\$308,528.24	\$95,886.85	\$405,780.98
	BLUEOPT FM HLTH PL 05181-R4	17	55	\$922.50	\$2,364.15	\$3,286.65	\$0.00	\$39.96	\$39.96	\$0.00	\$298.69	\$353.23	\$206.57	\$858.49	\$68.36	\$966.81
	BLUEOPT SN HLTH PL 05180-R4	12	12	\$738.00	\$836.88	\$1,574.88	\$0.00	\$8.88	\$8.88	\$0.00	\$0.00	\$139.12	\$13.80	\$152.92	\$19.29	\$181.09
	Total	537	1,250	\$32,902.50	\$64,940.15	\$97,842.65	\$0.00	\$1,414.73	\$1,414.73	\$115,298.02	\$112,252.81	\$107,870.47	\$37,937.18	\$373,358.48	\$116,279.63	\$491,052.84
	Avg	134	313	\$8,225.63	\$16,235.04	\$24,460.66	\$0.00	\$353.68	\$353.68	\$28,824.51	\$28,063.20	\$26,967.62	\$9,484.30	\$93,339.62	\$29,069.91	\$122,763.21
201606	BLUECHOICE COPAY PLAN 725-R9	80	183	\$4,796.97	\$9,218.16	\$14,015.13	\$0.00	\$0.00	\$0.00	\$24,487.98	\$13,944.73	\$38,711.95	\$9,160.47	\$86,305.13	\$29,386.25	\$115,691.38
	BLUEOPT COPAY PLAN 3559-R8	430	1,007	\$26,123.15	\$51,502.86	\$77,626.01	\$0.00	\$1,380.96	\$1,380.96	\$109,602.07	\$82,443.70	\$82,368.63	\$31,454.19	\$305,868.59	\$128,796.04	\$436,045.59
	BLUEOPT FM HLTH PL 05181-R4	17	55	\$1,244.35	\$3,188.98	\$4,433.33	\$0.00	\$42.92	\$42.92	\$0.00	\$0.00	\$287.16	\$0.00	\$287.16	\$180.21	\$510.29
	BLUEOPT SN HLTH PL 05180-R4	12	12	\$738.00	\$836.88	\$1,574.88	\$0.00	\$8.88	\$8.88	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$18.69	\$27.57
	Total	539	1,257	\$32,902.47	\$64,746.88	\$97,649.35	\$0.00	\$1,432.76	\$1,432.76	\$134,090.05	\$96,388.43	\$121,367.74	\$40,614.66	\$392,460.88	\$158,381.19	\$552,274.83
	Avg	135	314	\$8,225.62	\$16,186.72	\$24,412.34	\$0.00	\$358.19	\$358.19	\$33,522.51	\$24,097.11	\$30,341.94	\$10,153.67	\$98,115.22	\$39,595.30	\$138,068.71
201607	BLUECHOICE COPAY PLAN 725-R9	76	176	\$4,735.50	\$9,324.13	\$14,059.63	\$0.00	\$0.00	\$0.00	\$14,387.53	\$2,663.96	\$29,076.67	\$10,342.60	\$56,470.76	\$21,265.60	\$77,736.36
	BLUEOPT COPAY PLAN 3559-R8	432	1,009	\$26,568.00	\$52,095.18	\$78,663.18	\$0.00	\$1,308.22	\$1,308.22	\$115,025.69	\$116,950.62	\$87,846.97	\$27,828.75	\$347,652.03	\$86,591.76	\$435,552.01
	BLUEOPT FM HLTH PL 05181-R4	17	55	\$1,045.50	\$2,679.37	\$3,724.87	\$0.00	\$36.85	\$36.85	\$0.00	\$0.00	\$360.71	\$29.91	\$390.62	\$350.95	\$778.42

		Enrollment		Premium			Capitation			Fee for Service Claims						
Paid Year Month	Plan	Contracts	Members	ASO/MPP Fee	Stoploss Premium	Total Premium	PCP	Specialty	Total Capitation	Inpatient	Outpatient	Physician	Other	Total Medical	Pharmacy	Grand Total
	BLUEOPT SN HLTH PL 05180-R4	11	11	\$676.50	\$767.14	\$1,443.64	\$0.00	\$7.37	\$7.37	\$0.00	\$0.00	\$1,028.38	\$141.65	\$1,170.03	\$18.69	\$1,196.09
	Total	536	1,251	\$33,025.50	\$64,865.82	\$97,891.32	\$0.00	\$1,352.44	\$1,352.44	\$129,413.22	\$119,614.58	\$118,312.73	\$38,342.91	\$405,683.44	\$108,227.00	\$515,262.88
	Avg	134	313	\$8,256.38	\$16,216.46	\$24,472.83	\$0.00	\$338.11	\$338.11	\$32,353.31	\$29,903.65	\$29,578.18	\$9,585.73	\$101,420.86	\$27,056.75	\$128,815.72
201608	BLUECHOICE COPAY PLAN 725-R9	77	180	\$4,612.50	\$9,096.78	\$13,709.28	\$0.00	\$0.00	\$0.00	\$24,463.68	\$57,702.55	\$51,261.80	\$8,193.40	\$141,621.43	\$14,146.49	\$155,767.92
	BLUEOPT COPAY PLAN 3559-R8	428	998	\$26,629.50	\$52,164.92	\$78,794.42	\$0.00	\$1,317.78	\$1,317.78	\$93,060.06	\$47,301.96	\$79,047.31	\$28,412.82	\$247,822.15	\$133,886.29	\$383,026.22
	BLUEOPT FM HLTH PL 05181-R4	17	55	\$1,045.50	\$2,679.37	\$3,724.87	\$0.00	\$36.85	\$36.85	\$0.00	\$0.00	\$2,411.03	\$0.00	\$2,411.03	\$63.47	\$2,511.35
	BLUEOPT SN HLTH PL 05180-R4	12	12	\$738.00	\$836.88	\$1,574.88	\$0.00	\$8.04	\$8.04	\$0.00	\$0.00	\$1,036.87	\$54.56	\$1,091.43	\$20.78	\$1,120.25
	Total	534	1,245	\$33,025.50	\$64,777.95	\$97,803.45	\$0.00	\$1,362.67	\$1,362.67	\$117,523.74	\$105,004.51	\$133,757.01	\$36,660.78	\$392,946.04	\$148,117.03	\$542,425.74
	Avg	134	311	\$8,256.38	\$16,194.49	\$24,450.86	\$0.00	\$340.67	\$340.67	\$29,380.94	\$26,251.13	\$33,439.25	\$9,165.20	\$98,236.51	\$37,029.26	\$135,606.44
201609	BLUECHOICE COPAY PLAN 725-R9	77	182	\$4,797.00	\$9,481.74	\$14,278.74	\$0.00	\$0.00	\$0.00	\$0.00	\$44,386.31	\$17,299.67	\$3,683.55	\$65,369.53	\$19,295.42	\$84,664.95
	BLUEOPT COPAY PLAN 3559-R8	428	990	\$26,260.50	\$51,359.86	\$77,620.36	\$0.00	\$1,302.14	\$1,302.14	\$80,807.80	\$184,113.66	\$83,562.59	\$48,911.90	\$397,395.95	\$76,455.05	\$475,153.14
	BLUEOPT FM HLTH PL 05181-R4	19	59	\$1,045.50	\$2,679.37	\$3,724.87	\$0.00	\$36.85	\$36.85	\$0.00	\$3,608.54	\$1,738.82	\$10.60	\$5,357.96	\$60.61	\$5,455.42
	BLUEOPT SN HLTH PL 05180-R4	11	11	\$738.00	\$836.88	\$1,574.88	\$0.00	\$8.04	\$8.04	\$0.00	\$5,349.02	\$510.64	\$440.00	\$6,299.66	\$16.94	\$6,324.64
	Total	535	1,242	\$32,841.00	\$64,357.85	\$97,198.85	\$0.00	\$1,347.03	\$1,347.03	\$80,807.80	\$237,457.53	\$103,111.72	\$53,046.05	\$474,423.10	\$95,828.02	\$571,598.15
	Avg	134	311	\$8,210.25	\$16,089.46	\$24,299.71	\$0.00	\$336.76	\$336.76	\$20,201.95	\$59,364.38	\$25,777.93	\$13,261.51	\$118,605.78	\$23,957.01	\$142,899.54
201610	BLUECHOICE COPAY PLAN 725-R9	78	182	\$4,735.48	\$9,412.02	\$14,147.50	\$0.00	\$0.00	\$0.00	\$0.00	\$36,104.80	\$18,376.46	\$4,898.95	\$59,380.21	\$13,868.05	\$73,248.26
	BLUEOPT COPAY PLAN 3559-R8	425	984	\$26,053.53	\$50,856.77	\$76,910.30	\$0.00	\$1,291.66	\$1,291.66	\$49,984.53	\$72,531.03	\$78,804.76	\$22,882.53	\$224,202.85	\$83,336.02	\$308,830.53
	BLUEOPT FM HLTH PL 05181-R4	19	59	\$1,045.50	\$2,679.37	\$3,724.87	\$0.00	\$36.85	\$36.85	\$0.00	\$1,849.92	\$6,314.75	\$665.00	\$8,829.67	\$2,986.06	\$11,852.58
	BLUEOPT SN HLTH PL 05180-R4	12	12	\$799.50	\$906.62	\$1,706.12	\$0.00	\$8.71	\$8.71	\$0.00	\$0.00	\$69.60	\$0.00	\$69.60	\$21.04	\$99.35
	Total	534	1,237	\$32,634.01	\$63,854.78	\$96,488.79	\$0.00	\$1,337.22	\$1,337.22	\$49,984.53	\$110,485.75	\$103,565.57	\$28,446.48	\$292,482.33	\$100,211.17	\$394,030.72
	Avg	134	309	\$8,158.50	\$15,963.70	\$24,122.20	\$0.00	\$334.31	\$334.31	\$12,496.13	\$27,621.44	\$25,891.39	\$7,111.62	\$73,120.58	\$25,052.79	\$98,507.68
201611	BLUECHOICE COPAY PLAN 725-R9	76	176	\$4,797.00	\$9,393.87	\$14,190.87	\$0.00	\$0.00	\$0.00	\$20,897.88	\$33,343.88	\$14,570.33	\$7,639.70	\$76,451.79	\$20,332.26	\$96,784.05

		Enrollment		Premium			Capitation			Fee for Service Claims						
Paid Year Month	Plan	Contracts	Members	ASO/MPP Fee	Stoploss Premium	Total Premium	PCP	Specialty	Total Capitation	Inpatient	Outpatient	Physician	Other	Total Medical	Pharmacy	Grand Total
	BLUEOPT COPAY PLAN 3559-R8	426	996	\$26,322.00	\$51,113.26	\$77,435.26	\$0.00	\$1,282.49	\$1,282.49	\$166,365.67	\$63,849.68	\$48,989.53	\$31,013.18	\$310,218.06	\$107,723.88	\$419,224.43
	BLUEOPT FM HLTH PL 05181-R4	19	59	\$1,195.15	\$3,062.89	\$4,258.04	\$0.00	\$39.53	\$39.53	\$0.00	\$0.00	\$1,334.99	\$618.64	\$1,953.63	\$551.62	\$2,544.78
	BLUEOPT SN HLTH PL 05180-R4	12	12	\$799.50	\$906.62	\$1,706.12	\$0.00	\$8.71	\$8.71	\$0.00	\$0.00	\$726.11	\$101.93	\$828.04	\$171.09	\$1,007.84
	Total	533	1,243	\$33,113.65	\$64,476.64	\$97,590.29	\$0.00	\$1,330.73	\$1,330.73	\$187,263.55	\$97,193.56	\$65,620.96	\$39,373.45	\$389,451.52	\$128,778.85	\$519,561.10
	Avg	133	311	\$8,278.41	\$16,119.16	\$24,397.57	\$0.00	\$332.68	\$332.68	\$46,815.89	\$24,298.39	\$16,405.24	\$9,843.36	\$97,362.88	\$32,194.71	\$129,890.28
201612	BLUECHOICE COPAY PLAN 725-R9	75	175	\$4,551.00	\$9,114.91	\$13,665.91	\$0.00	\$0.00	\$0.00	\$48,756.29	\$29,489.81	\$19,312.66	\$8,398.75	\$105,957.51	\$15,464.44	\$121,421.95
	BLUEOPT COPAY PLAN 3559-R8	429	1,000	\$26,322.00	\$51,289.00	\$77,611.00	\$0.00	\$1,304.76	\$1,304.76	\$31,898.35	\$99,063.53	\$71,417.18	\$31,667.96	\$234,047.02	\$135,160.94	\$370,512.72
	BLUEOPT FM HLTH PL 05181-R4	19	59	\$1,107.00	\$2,836.98	\$3,943.98	\$0.00	\$40.20	\$40.20	\$0.00	\$653.73	\$1,304.39	\$198.08	\$2,156.20	\$817.05	\$3,013.45
	BLUEOPT SN HLTH PL 05180-R4	12	12	\$799.50	\$906.62	\$1,706.12	\$0.00	\$8.71	\$8.71	\$0.00	\$1,426.27	\$150.43	\$223.64	\$1,800.34	\$173.66	\$1,982.71
	Total	535	1,246	\$32,779.50	\$64,147.51	\$96,927.01	\$0.00	\$1,353.67	\$1,353.67	\$80,654.64	\$130,633.34	\$92,184.66	\$40,488.43	\$343,961.07	\$151,616.09	\$496,930.83
	Avg	134	312	\$8,194.88	\$16,036.88	\$24,231.75	\$0.00	\$338.42	\$338.42	\$20,163.66	\$32,658.34	\$23,046.17	\$10,122.11	\$85,990.27	\$37,904.02	\$124,232.71
201701	BLUECHOICE COPAY PLAN 725-R9	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,966.48	\$9,214.12	\$6,261.17	\$21,441.77	\$3,932.51	\$25,374.28
	BLUEOPT COPAY PLAN 3559-R8	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$5.24	\$5.24	\$8,504.69	\$35,954.34	\$27,048.99	\$9,866.05	\$81,374.07	\$21,311.27	\$102,690.58
	BLUEOPT COPAY PLAN 3559-RA	499	1,141	\$30,836.10	\$51,707.91	\$82,544.01	\$0.00	\$1,510.43	\$1,510.43	\$0.00	\$17,660.56	\$290.44	\$0.00	\$17,951.00	\$92,875.30	\$112,336.73
	BLUEOPT FM HLTH PL 05181-R4	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$2.01	\$2.01	\$0.00	\$0.00	\$632.01	\$36.06	\$668.07	\$174.02	\$844.10
	BLUEOPT FM HLTH PL 05181-R6	22	73	\$1,414.50	\$3,089.59	\$4,504.09	\$0.00	\$52.26	\$52.26	\$0.00	\$0.00	\$1,151.87	\$1,147.88	\$2,299.75	\$248.53	\$2,600.54
	BLUEOPT SN HLTH PL 05180-R4	0	0	\$0.00	\$0.00	\$0.00	\$0.00	(\$2.01)	(\$2.01)	\$0.00	\$0.00	\$361.84	\$0.00	\$361.84	\$21.16	\$380.99
	BLUEOPT SN HLTH PL 05180-R6	17	17	\$1,045.50	\$998.41	\$2,043.91	\$0.00	\$10.72	\$10.72	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$10.72
	Total	538	1,231	\$33,296.10	\$55,795.91	\$89,092.01	\$0.00	\$1,578.65	\$1,578.65	\$8,504.69	\$59,581.38	\$38,699.27	\$17,311.16	\$124,096.50	\$118,562.79	\$244,237.94
	Avg	77	176	\$4,756.59	\$7,970.84	\$12,727.43	\$0.00	\$225.52	\$225.52	\$1,214.96	\$8,511.63	\$5,528.47	\$2,473.02	\$17,728.07	\$16,937.54	\$34,891.13
201702	BLUECHOICE COPAY PLAN 725-R9	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$8,342.64	(\$383.03)	\$10.53	\$7,970.14	\$0.00	\$7,970.14

		Enrollment		Premium			Capitation			Fee for Service Claims						
Paid Year Month	Plan	Contracts	Members	ASO/MPP Fee	Stoploss Premium	Total Premium	PCP	Specialty	Total Capitation	Inpatient	Outpatient	Physician	Other	Total Medical	Pharmacy	Grand Total
	BLUEOPT COPAY PLAN 3559-R8	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$13,134.90	\$5,888.24	\$3,431.58	\$22,454.72	\$0.00	\$22,454.72
	BLUEOPT COPAY PLAN 3559-RA	499	1,140	\$30,258.00	\$50,819.16	\$81,077.16	\$0.00	\$1,492.09	\$1,492.09	\$25,607.63	\$136,746.60	\$135,012.92	\$48,875.84	\$346,242.99	\$104,008.05	\$451,743.13
	BLUEOPT FM HLTH PL 05181-R4	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$187.14)	\$0.00	(\$187.14)	\$0.00	(\$187.14)
	BLUEOPT FM HLTH PL 05181-R6	23	76	\$1,414.50	\$3,089.59	\$4,504.09	\$0.00	\$52.93	\$52.93	\$0.00	\$2,095.91	\$1,311.09	\$513.95	\$3,920.95	\$76.54	\$4,050.42
	BLUEOPT SN HLTH PL 05180-R6	17	17	\$1,045.50	\$998.41	\$2,043.91	\$0.00	\$12.06	\$12.06	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$35.83	\$47.89
	Total	539	1,233	\$32,718.00	\$54,907.16	\$87,625.16	\$0.00	\$1,557.08	\$1,557.08	\$25,607.63	\$160,320.05	\$141,642.08	\$52,831.90	\$380,401.66	\$104,120.42	\$486,079.16
	Avg	90	206	\$5,453.00	\$9,151.19	\$14,604.19	\$0.00	\$259.51	\$259.51	\$4,267.94	\$26,720.01	\$23,607.01	\$8,805.32	\$63,400.28	\$17,353.40	\$81,013.19
201703	BLUECHOICE COPAY PLAN 725-R9	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$282.69	\$0.00	\$282.69	\$0.00	\$282.69
	BLUEOPT COPAY PLAN 3559-R8	0	0	\$0.00	\$0.00	\$0.00	\$0.00	(\$1.31)	(\$1.31)	\$330,762.87	\$195.51	\$754.33	\$181.09	\$331,893.80	\$0.00	\$331,892.49
	BLUEOPT COPAY PLAN 3559-RA	498	1,138	\$30,504.00	\$50,146.88	\$80,650.88	\$0.00	\$1,463.27	\$1,463.27	\$148,437.94	\$94,923.20	\$130,335.96	\$29,675.03	\$403,372.13	\$134,307.94	\$539,143.34
	BLUEOPT FM HLTH PL 05181-R4	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$41.40	\$0.00	\$41.40	\$0.00	\$41.40
	BLUEOPT FM HLTH PL 05181-R6	22	70	\$1,414.50	\$3,089.59	\$4,504.09	\$0.00	\$44.22	\$44.22	\$0.00	\$24,643.45	\$1,406.60	\$895.80	\$26,945.85	\$104.30	\$27,094.37
	BLUEOPT SN HLTH PL 05180-R6	17	17	\$1,107.00	\$1,057.14	\$2,164.14	\$0.00	\$12.06	\$12.06	\$0.00	\$0.00	\$316.72	\$84.20	\$400.92	\$15.94	\$428.92
	Total	537	1,225	\$33,025.50	\$54,293.61	\$87,319.11	\$0.00	\$1,518.24	\$1,518.24	\$479,200.81	\$119,762.16	\$133,137.70	\$30,836.12	\$762,936.79	\$134,428.18	\$898,883.21
	Avg	90	204	\$5,504.25	\$9,048.94	\$14,553.19	\$0.00	\$253.04	\$253.04	\$79,866.80	\$19,960.36	\$22,189.62	\$5,139.35	\$127,156.13	\$22,404.70	\$149,813.87
201704	BLUECHOICE COPAY PLAN 725-R9	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$127.30	(\$161.19)	(\$33.89)	\$0.00	(\$33.89)
	BLUEOPT COPAY PLAN 3559-R8	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$15,839.41)	\$243.01	\$932.00	(\$14,664.40)	\$0.00	(\$14,664.40)
	BLUEOPT COPAY PLAN 3559-RA	497	1,147	\$30,996.00	\$51,145.92	\$82,141.92	\$0.00	\$1,505.19	\$1,505.19	\$210,067.12	\$101,676.46	\$92,166.62	\$21,565.93	\$425,476.13	\$111,720.57	\$538,701.89
	BLUEOPT FM HLTH PL 05181-R6	22	70	\$1,168.50	\$2,552.27	\$3,720.77	\$0.00	\$44.22	\$44.22	\$0.00	\$0.00	\$635.28	\$501.99	\$1,137.27	\$536.28	\$1,717.77
	BLUEOPT SN HLTH PL 05180-R6	19	19	\$1,045.50	\$998.41	\$2,043.91	\$0.00	\$10.72	\$10.72	\$0.00	\$0.00	\$432.67	\$184.72	\$617.39	\$15.94	\$644.05
	Total	538	1,236	\$33,210.00	\$54,696.60	\$87,906.60	\$0.00	\$1,560.13	\$1,560.13	\$210,067.12	\$85,837.05	\$93,604.88	\$23,023.45	\$412,532.50	\$112,272.79	\$526,365.42

		Enrollment		Premium			Capitation			Fee for Service Claims						
Paid Year Month	Plan	Contracts	Members	ASO/MPP Fee	Stoploss Premium	Total Premium	PCP	Specialty	Total Capitation	Inpatient	Outpatient	Physician	Other	Total Medical	Pharmacy	Grand Total
	Avg	108	247	\$6,642.00	\$10,939.32	\$17,581.32	\$0.00	\$312.03	\$312.03	\$42,013.42	\$17,167.41	\$18,720.98	\$4,604.69	\$82,506.50	\$22,454.56	\$105,273.08
201705	BLUECHOICE COPAY PLAN 725-R9	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$7.40	\$2,115.38	\$0.00	\$2,122.78	\$0.00	\$2,122.78
	BLUEOPT COPAY PLAN 3559-R8	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$15,474.84	\$995.99	\$555.46	\$17,026.29	\$0.00	\$17,026.29
	BLUEOPT COPAY PLAN 3559-RA	496	1,146	\$30,504.00	\$50,751.68	\$81,255.68	\$0.00	\$1,494.71	\$1,494.71	\$263,056.00	\$113,361.98	\$145,383.21	\$28,905.30	\$550,706.49	\$101,696.36	\$653,897.56
	BLUEOPT FM HLTH PL 05181-R6	22	70	\$1,353.00	\$2,955.26	\$4,308.26	\$0.00	\$46.90	\$46.90	\$0.00	\$27,365.92	\$3,761.79	\$1,393.19	\$32,520.90	\$617.71	\$33,185.51
	BLUEOPT SN HLTH PL 05180-R6	19	19	\$1,291.50	\$1,233.33	\$2,524.83	\$0.00	\$14.07	\$14.07	\$0.00	\$0.00	\$112.23	\$72.78	\$185.01	\$56.05	\$255.13
	Total	537	1,235	\$33,148.50	\$54,940.27	\$88,088.77	\$0.00	\$1,555.68	\$1,555.68	\$263,056.00	\$156,210.14	\$152,368.60	\$30,926.73	\$602,561.47	\$102,370.12	\$706,487.27
	Avg	107	247	\$6,629.70	\$10,988.05	\$17,617.75	\$0.00	\$311.14	\$311.14	\$52,611.20	\$31,242.03	\$30,473.72	\$6,185.35	\$120,512.29	\$20,474.02	\$141,297.45
201706	BLUECHOICE COPAY PLAN 725-R9	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$57.22	\$0.00	\$57.22	(\$709.44)	(\$652.22)
	BLUEOPT COPAY PLAN 3559-R8	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$2,230.51)	\$86.27	\$13,973.15	\$220.29	\$12,049.20	\$39.77	\$12,088.97
	BLUEOPT COPAY PLAN 3559-RA	497	1,147	\$30,504.00	\$51,240.56	\$81,744.56	\$0.00	\$1,502.57	\$1,502.57	\$15,643.63	\$97,564.51	\$110,186.26	\$28,504.75	\$251,899.15	\$91,156.82	\$344,558.54
	BLUEOPT FM HLTH PL 05181-R4	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$187.14	\$0.00	\$187.14	\$0.00	\$187.14
	BLUEOPT FM HLTH PL 05181-R6	21	68	\$1,291.50	\$2,820.93	\$4,112.43	\$0.00	\$42.88	\$42.88	\$0.00	\$415.01	\$3,464.43	\$179.92	\$4,059.36	\$2,960.13	\$7,062.37
	BLUEOPT SN HLTH PL 05180-R6	19	19	\$1,168.50	\$1,115.87	\$2,284.37	\$0.00	\$12.73	\$12.73	\$0.00	\$0.00	\$1,264.53	\$186.25	\$1,450.78	\$16.57	\$1,480.08
	Total	537	1,234	\$32,964.00	\$55,177.36	\$88,141.36	\$0.00	\$1,558.18	\$1,558.18	\$13,413.12	\$98,065.79	\$129,132.73	\$29,091.21	\$269,702.85	\$93,463.85	\$364,724.88
	Avg	90	206	\$5,494.00	\$9,196.23	\$14,690.23	\$0.00	\$259.70	\$259.70	\$2,235.52	\$16,344.30	\$21,522.12	\$4,848.54	\$44,950.48	\$15,577.31	\$60,787.48
201707	BLUECHOICE COPAY PLAN 725-R9	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	BLUEOPT COPAY PLAN 3559-R6	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	BLUEOPT COPAY PLAN 3559-R8	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$43.90)	\$344.40	\$0.00	\$300.50	\$0.00	\$300.50
	BLUEOPT COPAY PLAN 3559-RA	496	1,147	\$30,688.50	\$51,333.59	\$82,022.09	\$0.00	\$1,489.47	\$1,489.47	\$15,009.17	\$64,803.84	\$91,109.06	\$29,620.80	\$200,542.87	\$129,889.27	\$331,921.61
	BLUEOPT FM HLTH PL 05181-R6	21	68	\$1,291.50	\$2,820.93	\$4,112.43	\$0.00	\$48.24	\$48.24	\$0.00	\$7,729.79	\$1,689.22	\$1,103.67	\$10,522.68	\$1,082.98	\$11,653.90

		Enrollment		Premium			Capitation			Fee for Service Claims						
Paid Year Month	Plan	Contracts	Members	ASO/MPP Fee	Stoploss Premium	Total Premium	PCP	Specialty	Total Capitation	Inpatient	Outpatient	Physician	Other	Total Medical	Pharmacy	Grand Total
	BLUEOPT SN HLTH PL 05180-R6	20	20	\$1,168.50	\$1,115.87	\$2,284.37	\$0.00	\$12.73	\$12.73	\$0.00	\$0.00	\$280.97	\$131.17	\$412.14	\$15.94	\$440.81
	Total	537	1,235	\$33,148.50	\$55,270.39	\$88,418.89	\$0.00	\$1,550.44	\$1,550.44	\$15,009.17	\$72,489.73	\$93,423.65	\$30,855.64	\$211,778.19	\$130,988.19	\$344,316.82
	Avg	90	206	\$5,524.75	\$9,211.73	\$14,736.48	\$0.00	\$258.41	\$258.41	\$2,501.53	\$12,081.62	\$15,570.61	\$5,142.61	\$35,296.37	\$21,831.37	\$57,386.14
201708	BLUEOPT COPAY PLAN 3559-R8	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$798.00	(\$897.42)	\$533.35	\$0.00	\$433.93	\$0.00	\$433.93
	BLUEOPT COPAY PLAN 3559-RA	497	1,143	\$30,258.00	\$50,667.96	\$80,925.96	\$0.00	\$1,492.09	\$1,492.09	\$70,313.81	\$86,924.04	\$129,983.06	\$36,287.26	\$323,508.17	\$120,223.66	\$445,223.92
	BLUEOPT FM HLTH PL 05181-R6	21	68	\$1,291.50	\$2,820.93	\$4,112.43	\$0.00	\$45.56	\$45.56	\$0.00	\$1,705.46	\$3,321.35	\$1,653.45	\$6,680.26	\$649.19	\$7,375.01
	BLUEOPT SN HLTH PL 05180-R6	20	20	\$1,291.50	\$1,233.33	\$2,524.83	\$0.00	\$14.07	\$14.07	\$0.00	\$0.00	\$306.27	\$131.17	\$437.44	\$31.88	\$483.39
	Total	538	1,231	\$32,841.00	\$54,722.22	\$87,563.22	\$0.00	\$1,551.72	\$1,551.72	\$71,111.81	\$87,732.08	\$134,144.03	\$38,071.88	\$331,059.80	\$120,904.73	\$453,516.25
	Avg	135	308	\$8,210.25	\$13,680.56	\$21,890.81	\$0.00	\$387.93	\$387.93	\$17,777.95	\$21,933.02	\$33,536.01	\$9,517.97	\$82,764.95	\$30,226.18	\$113,379.06
201709	BLUECHOICE COPAY PLAN 725-R9	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	BLUEOPT COPAY PLAN 3559-R8	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2.90	\$582.05	\$0.00	\$584.95	\$0.00	\$584.95
	BLUEOPT COPAY PLAN 3559-RA	496	1,140	\$30,862.75	\$51,676.39	\$82,539.14	\$0.00	\$1,497.30	\$1,497.30	\$13,477.87	\$152,482.70	\$80,881.31	\$24,710.58	\$271,552.46	\$121,097.79	\$394,147.55
	BLUEOPT FM HLTH PL 05181-R6	23	73	\$1,291.50	\$2,820.93	\$4,112.43	\$0.00	\$48.91	\$48.91	\$0.00	\$290.19	\$1,649.03	\$1,100.05	\$3,039.27	\$274.12	\$3,362.30
	BLUEOPT SN HLTH PL 05180-R6	20	20	\$1,168.50	\$1,115.87	\$2,284.37	\$0.00	\$13.40	\$13.40	\$0.00	\$0.00	\$64.94	\$246.76	\$311.70	\$72.40	\$397.50
	Total	539	1,233	\$33,322.75	\$55,613.19	\$88,935.94	\$0.00	\$1,559.61	\$1,559.61	\$13,477.87	\$152,775.79	\$83,177.33	\$26,057.39	\$275,488.38	\$121,444.31	\$398,492.30
	Avg	108	247	\$6,664.55	\$11,122.64	\$17,787.19	\$0.00	\$311.92	\$311.92	\$2,695.57	\$30,555.16	\$16,635.47	\$5,211.48	\$55,097.68	\$24,288.86	\$79,698.46
201710	BLUEOPT COPAY PLAN 3559-R8	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$758.77)	\$0.00	(\$758.77)	\$0.00	(\$758.77)
	BLUEOPT COPAY PLAN 3559-RA	492	1,138	\$29,958.70	\$48,124.22	\$78,082.92	\$0.00	\$1,473.11	\$1,473.11	\$40,855.99	\$74,303.33	\$93,424.45	\$36,317.74	\$244,901.51	\$129,052.96	\$375,427.58
	BLUEOPT FM HLTH PL 05181-R4	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$138.05	\$0.00	\$138.05	\$0.00	\$138.05
	BLUEOPT FM HLTH PL 05181-R6	24	75	\$1,599.00	\$3,492.58	\$5,091.58	\$0.00	\$50.25	\$50.25	\$0.00	\$1,321.55	\$2,333.00	\$1,517.53	\$5,172.08	\$1,077.51	\$6,299.84
	BLUEOPT SN HLTH PL 05180-R6	20	20	\$1,291.50	\$1,233.33	\$2,524.83	\$0.00	\$13.40	\$13.40	\$0.00	\$0.00	\$153.92	\$195.75	\$349.67	\$469.03	\$832.10
	Total	536	1,233	\$32,849.20	\$52,850.13	\$85,699.33	\$0.00	\$1,536.76	\$1,536.76	\$40,855.99	\$75,624.88	\$95,290.65	\$38,031.02	\$249,802.54	\$130,599.50	\$381,938.80

		Enrollment		Premium			Capitation			Fee for Service Claims						
Paid Year Month	Plan	Contracts	Members	ASO/MPP Fee	Stoploss Premium	Total Premium	PCP	Specialty	Total Capitation	Inpatient	Outpatient	Physician	Other	Total Medical	Pharmacy	Grand Total
	Avg	107	247	\$6,569.84	\$10,570.03	\$17,139.87	\$0.00	\$307.35	\$307.35	\$8,171.20	\$15,124.98	\$19,058.13	\$7,606.20	\$49,960.51	\$26,119.90	\$76,387.76
201711	BLUECHOICE COPAY PLAN 725-R9	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	BLUEOPT COPAY PLAN 3559-R8	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$513.41	\$306.29	\$0.00	\$819.70	\$0.00	\$819.70
	BLUEOPT COPAY PLAN 3559-RA	492	1,139	\$30,442.50	\$50,995.35	\$81,437.85	\$0.00	\$1,498.64	\$1,498.64	\$115,466.63	\$226,605.73	\$89,780.34	\$31,943.85	\$463,796.55	\$148,455.81	\$613,751.00
	BLUEOPT FM HLTH PL 05181-R6	24	74	\$1,476.00	\$3,223.92	\$4,699.92	\$0.00	\$50.25	\$50.25	\$23,524.51	\$4,104.24	\$5,511.13	\$29.73	\$33,169.61	\$485.25	\$33,705.11
	BLUEOPT SN HLTH PL 05180-R6	20	20	\$1,230.00	\$1,174.60	\$2,404.60	\$0.00	\$13.40	\$13.40	\$0.00	\$0.00	\$373.91	\$0.00	\$373.91	\$174.74	\$562.05
	Total	536	1,233	\$33,148.50	\$55,393.87	\$88,542.37	\$0.00	\$1,562.29	\$1,562.29	\$138,991.14	\$231,223.38	\$95,971.67	\$31,973.58	\$498,159.77	\$149,115.80	\$648,837.86
	Avg	107	247	\$6,629.70	\$11,078.77	\$17,708.47	\$0.00	\$312.46	\$312.46	\$27,798.23	\$46,244.68	\$19,194.33	\$6,394.72	\$99,631.95	\$29,823.16	\$129,767.57
201712	BLUEOPT COPAY PLAN 3559-R8	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$60.00)	\$0.00	\$0.00	(\$60.00)	\$0.00	(\$60.00)
	BLUEOPT COPAY PLAN 3559-RA	488	1,133	\$30,288.75	\$50,848.52	\$81,137.27	\$0.00	\$1,480.91	\$1,480.91	\$140,254.20	\$97,187.86	\$81,688.29	\$38,324.41	\$357,454.76	\$107,554.28	\$466,489.95
	BLUEOPT FM HLTH PL 05181-R6	24	74	\$1,476.00	\$3,223.92	\$4,699.92	\$0.00	\$50.92	\$50.92	\$26,114.43	\$177.66	\$4,024.32	\$3,181.34	\$33,497.75	\$70.46	\$33,619.13
	BLUEOPT SN HLTH PL 05180-R6	20	20	\$1,230.00	\$1,174.60	\$2,404.60	\$0.00	\$13.40	\$13.40	\$0.00	\$0.00	\$397.73	\$340.63	\$738.36	\$21.18	\$772.94
	Total	532	1,227	\$32,994.75	\$55,247.04	\$88,241.79	\$0.00	\$1,545.23	\$1,545.23	\$166,368.63	\$97,305.52	\$86,110.34	\$41,846.38	\$391,630.87	\$107,645.92	\$500,822.02
	Avg	133	307	\$8,248.69	\$13,811.76	\$22,060.45	\$0.00	\$386.31	\$386.31	\$41,592.16	\$24,326.38	\$21,527.59	\$10,461.60	\$97,907.72	\$26,911.48	\$125,205.51
201801	BLUECHOICE COPAY PLAN 725-R9	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$220.70)	\$0.00	\$0.00	(\$220.70)	\$0.00	(\$220.70)
	BLUEOPT COPAY PLAN 3559-R7	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$709.44)	\$0.00	\$0.00	(\$709.44)	\$0.00	(\$709.44)
	BLUEOPT COPAY PLAN 3559-R8	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$53.27	\$0.00	\$53.27	\$0.00	\$53.27
	BLUEOPT COPAY PLAN 3559-RA	0	0	\$0.00	\$0.00	\$0.00	\$0.00	(\$1.28)	(\$1.28)	\$242,746.16	\$89,080.24	\$36,171.02	\$10,977.64	\$378,975.06	\$26,033.10	\$405,006.88
	BLUEOPT COPAY PLAN 3559-RB	475	1,093	\$30,043.50	\$50,580.06	\$80,623.56	\$0.00	\$13,165.32	\$13,165.32	\$49,204.23	\$57,139.88	\$52,503.77	\$20,979.29	\$179,827.17	\$109,109.05	\$302,101.54
	BLUEOPT FM HLTH PL 05181-R6	0	0	\$0.00	\$0.00	\$0.00	\$0.00	(\$2.68)	(\$2.68)	\$0.00	\$629.91	\$345.68	\$268.16	\$1,243.75	\$196.02	\$1,437.09
	BLUEOPT FM HLTH PL 05181-R7	34	104	\$1,905.00	\$4,211.70	\$6,116.70	\$0.00	\$1,086.40	\$1,086.40	\$0.00	\$0.00	\$1,927.32	\$273.09	\$2,200.41	\$222.92	\$3,509.73

Paid Year Month	Plan	Enrollment		Premium			Capitation			Fee for Service Claims					Grand Total	
		Contracts	Members	ASO/MPP Fee	Stoploss Premium	Total Premium	PCP	Specialty	Total Capitation	Inpatient	Outpatient	Physician	Other	Total Medical		Pharmacy
	BLUEOPT SN HLTH PL 05180- R6	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$41.40	\$0.00	\$41.40	\$181.76	\$223.16
	BLUEOPT SN HLTH PL 05180- R7	24	24	\$1,778.00	\$1,678.32	\$3,456.32	\$0.00	\$303.07	\$303.07	\$0.00	\$0.00	\$386.75	\$17.17	\$403.92	\$14.53	\$721.52
	Total	533	1,221	\$33,726.50	\$56,470.08	\$90,196.58	\$0.00	\$14,550.83	\$14,550.83	\$291,950.39	\$145,919.89	\$91,429.21	\$32,515.35	\$561,814.84	\$135,757.38	\$712,123.05
	Avg	59	136	\$3,747.39	\$6,274.45	\$10,021.84	\$0.00	\$1,616.76	\$1,616.76	\$32,438.93	\$16,213.32	\$10,158.80	\$3,612.82	\$62,423.87	\$15,084.15	\$79,124.78

Notes:

- Grand Total includes Medical FFS, Pharmacy FFS and Capitation.
- Enrollment is recast to reflect retroactive adjustments.
- Grouping Avg – Average of the distinct groupings chosen by the user.
- Monthly Avg – Average of a measure over Service/Paid time period.
- FFS = Fee For Service.
- MLR = Medical Loss Ratio.