

**“Health Benefits Plan Program for the County of El Paso RFP Number 13-031”
Questions and Answers #1**

1. The questionnaire instructions state that all responses must be made within the designated cell(s) of the worksheet provided. Is it acceptable to attach additional response documents for responses that cannot fit into the limited cell format provided (for example, General Information Question #27 regarding subcontractors may require a response that is too long for the cell provided)?

Yes. Reference the Questionnaire Tab and Question number with the additional supplemental response

2. Please provide a census with zip codes.

An updated census file has been provided

3. Please provide a detailed utilization file for RX for the most recent 12 months

An updated Rx claims file has been and will be provided to Proposers who have returned a properly executed Use and Disclosure Agreement

4. Please provide detail on the top utilized IP and OP facilities and the utilization at each reporting on the billed charges vs allowed charges.

Please refer to additional reports provided.

5. Electronic copies of the proposal have been requested on flash drives. Is it acceptable to provide these copies on CD?

Yes, although flash drives are preferred.

6. Please verify in the questions the number of pre and post 65 retirees

Refer to the additional claims data and enrollment reports already provided (Exhibit 4).

7. In the Online Enrollment and Eligibility section, Pg. 12 of the RFP, it states that The County of El Paso uses Inroll to manage enrollment and eligibility. What format does Inroll use to transmit eligibility to vendors?

Inroll has several capabilities and flexibility in the frequency to transmit either change files or full files in industry standard HIPAA compliant record layouts.

8. Please confirm what type of programs you currently have in place (i.e. Disease Management, Maternity Management, Online Health Records, etc)?

Employees have access to an online portal for Health Risk Assessments and medical records. There are no structured Disease Management programs in place at this time.

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9. Please indicate if any benefit plan changes were made in the last 24 months. If changes were made, please detail the benefit changes made along with the effective date of the change.

There have been no plan changes in the last 24 months to any of the plans offered, Medical, Dental, or EAP.

10. Do Retirees pay the entire premium?

Yes.

11. Please confirm if the current dental plan is Indemnity.

Yes. It is currently an indemnity plan.

12. Have there been any plan changes in the past 12 months? If so, please explain.

No.

13. Please confirm if the current dental plan is Indemnity.

Yes. It is currently an indemnity plan.

14. What is the current U&P percentile used?

90th Percentile

15. Please provide EAP utilization data for the last 3 years.

Refer to additional provided reports.

16. Please supply current EAP pricing.

\$1.55 PEPM

17. Please detail the current EAP plan, including the number of face-to-face sessions, on-site training hours, and on-site crisis response hours.

The EAP Agreement has been provided following this list of questions and answers.

18. For EAP, please advise which session model(s) to quote.

Please duplicate the current plans as closely as possible.

19. For EAP, please provide the number of on-site training hours we should include in our pricing.

EAP training requirements are described in the attached contract amendment and are provided on-site three to five times a year.

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20. Please provide the total number of employees to quote for EAP as the census only includes medical enrollees.

In addition to medical enrollees and their dependents, the County provides EAP service to 429 Non Plan Participants and their dependants.

21. Please indicate the coordination method used with Medicare.

Standard COB rules as defined in the SPD apply.

22. Please break out the medical and Rx rates for the retiree population, if possible.

Please refer to the provided rate sheet for all employee groups. Medical and Rx rates are combined for all classes and are not broken out.

23. The SPDs on in the RFP don't show the triple tier benefits with UMC being tier 1. Do you have anything that shows that design ?

The benefit summary grid in the SPD illustrates the two tiers of in-network hospital providers along with the benefits provided to non-network providers.

24. Member Satisfaction Survey: What has been the County's historical response rate for the last three complete plan years?

The County has conducted one Survey in the last three years and the response was less than 10%.

25. Claims Adjudication Turnaround: Please clarify how the daily penalty is \$7,500 per day yet the monthly maximum penalty is \$5,000. (Is there a typo?)

This is a typo. The daily penalty should read \$500 per day.

26. Bid bond: Is the cashier's check due upon filing our response refundable? Is there a specific format for the 5% bid bond? (This is Proposal Condition #10)

The Bid bond has been waived for this RFP.

27. Ad Hoc Report Requests: Can examples of previously requested information be made available? (This is in Technical Information #18)

Ad hoc reports, would be customized requests, such as a special report showing certain demographic criteria, or utilization specifics, i.e. member specific listings of members utilizing a certain provider for a certain service.

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28. What type of reports do you consider “Standard Reports”?

Please see the sample current “standard reports” provided with this Addendum.

29. Which bank does the County use for its Benefit Plans? What is their dual signature policy? Will the TPA have view only access to their banking system to research lost checks? Please explain the current funding process.

The County’s current depository bank is Inter National Bank.

All of the County’s bank accounts require two signatures on all checks.

The TPA will not have access to the banking system. The TPA will forward the information to the treasury division of the El Paso County Auditor’s Office and the treasury division will do the research.

Every pay period the corresponding employer and employees contributions are transferred to the benefits plan bank account.

30. Financial Information: Will points be deducted if a bidder is not rated? Will the Hospital District’s rating be acceptable?

The county will consider the overall financial stability of the proposer in the absence of financial ratings. Please provide audited financial statements.

31. Please clarify the following question under COBRA. What happens to fees with increases/decreases in the population? What fees are you referring to?

COBRA administrative fees.

32. Subrogation: Does the County Attorney handle their own subrogation or will they want the TPA to handle it?

The County Attorney’s Office is currently involved in subrogation efforts but will consider allowing the TPA to handle subrogation.

33. General Tab #27: Do we only list material sub-contractors?

Please identify any subcontractors utilized in the administration of the plans.

34. Could we see a sample of the form for “Parking Conversion or Reimbursement Plan form to the administrator”?

The form follows these Questions and Answers

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35. Election changes – Could you describe how changes are communicated and what formats are being used by Inroll?

Inroll has several capabilities and flexibility in the frequency to transmit either change files or full files in industry standard HIPAA compliant record layouts.

36. For Wellness Lunch & Learn, we are assuming that these would be delivered at the courthouse. Would there be space for these to occur there? Do you have an expectation that we would deliver these in other county locations? If so, do they have space at these other locations? Our thought is that we would offer at minimum a monthly lunch & learn at the courthouse but if we need to change our way of thinking on this, please let me know.

The County Courthouse is the primary location for Lunch & Learn events. However, occasionally we would like to provide events at the El Paso County Sheriff’s Department and the Juvenile Probation Department both of which have available space.

37. In terms of a gym for the associates - does the county have space that they could allocate to us in order for us to provide Wellness classes (e.g., Zumba, Tai-Chi, etc...) there?

Yes, the County will provide the location for gym and related activities.

38. Does the RFP include an occupational health component that we need to address?

No

39. Can you provide a breakdown of where the County associates are physically located?

The majority of our members are located in the Downtown area surrounding the Courthouse at 500 East San Antonio, Sheriff’s Department 3850 Justice Road, and the Juvenile Probation Department 6400 Delta Drive.

40. Would the County of El Paso be able to sign a non-disclosure agreement with our Pharmacy Benefit Manager in order to receive the MAC information requested?

The County is a political subdivision of the State of Texas and is governed by the Texas Public Information Act, Chapter 552, Texas Government Code (the “Act”). If your response to the RFP contains material that you consider Confidential Information, you must indicate prominently on your response which sections are considered confidential. In the event the County receives a request under the Public Information Act for information you have deemed Confidential Information, it shall promptly notify you pursuant to the requirements of the Act, which places on you the burden of establishing the confidentiality of information pursuant to the Act, see section 552.305. It is expressly agreed that the County may request a determination from the Attorney General of the State of Texas in regard to the application of the Public Information Act to the requested information and whether the information is to be made available to the public. It is further agreed that County, its officers and employees shall have the right to rely on the determinations of the Texas Attorney General, and that County, its officers and employees shall have no liability to Vendor for disclosure to the public in reliance

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on a decision by the Attorney General. Nothing in this agreement shall require Vendor or County to violate the terms of the Public Information Act. You may request that the County’s consultant sign a non-disclosure agreement, but as an agent of the County the Consultant is also governed by this Code.

41. What do you mean by "Privacy Procedures Plan"?

HIPAA Privacy Procedures

42. Can we adopt the current definitions on your benefit plan?

Yes

43. Will there be an extension to the submission deadline?

Yes, the deadline has been extended to June 5, 2013. Please review the formal Purchasing amendment for location and time details.

44. Can the County provide us with the total medical cost (billed and paid amounts) for inpatient and outpatient procedures at in network hospitals for dependent care?

All claims data to be used for preparing responses has already been provided in Exhibit 4, and through the process described for the claims repricing process. It is important to return the claims repricing file as instructed along with the network indicator for each line item provider identified.

45. Can the County grant us access to three years of historical medical claims data incurred by the County’s medical plan in order to ask a stop loss carrier(s) to provide us a quote for stop loss coverage based on the data provided?

All claims data to be used for preparing responses has already been provided in Exhibit 4, and through the process described for the claims repricing process. It is important to return the claims repricing file as instructed along with the network indicator for each line item provider identified.

46. What is the current fee structure for your EAP? Is it per-employee-per-month (PEPM)?

\$1.55 PEPM

47. What is current cost/price for your EAP?

\$1.55 PEPM

48. How many employees are to be covered?

All employees are covered.

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49. What, if any, elements or factors would you like to improve?

Proposers should duplicate the existing programs and may offer alternative programs or services for consideration.

50. When is the last time you competitively procured this program?

The last procurement was conducted in 2008 with a January 1, 2009 effective date.

51. How many face-to-face counseling sessions, per issue, does your current EAP provide? Would the County like to consider 3 & 6 face-to-face sessions, per issue, per participant, per year?

Our current agreement requires the Contractor to provide, or arrange for the provision of, telephonic and face-to-face mental health counseling to Employees and/or Dependants. Coverage includes up to eight (8) sessions per Employees and/or Dependants, per problem, per year. There is no limit to the number of problems a covered person may present each year. An EAP network provider may provide more than eight (8) sessions per problem per year, if the EAP network Provider determines it is necessary. Assessments for homebound Employee or Dependants are available through the EAP.

52. Are you interested in considering a variety of innovative options, in addition to the specifications you have provided, including Work-Life and Wellness services?

Proposers should duplicate the existing programs and may offer alternative programs or services for consideration.

53. How many onsite training hours per year are bundled, currently, and how many onsite training hours does the County want for its new program?

The County would like to provide three to five on-site group training sessions per year. Other training requirements are described in the contract agreement.

54. What are current charges for onsite training hours beyond what is bundled?

There are no separate charges for training.

55. What is your current utilization rate?

Please refer to the provided reports accompanying this Addendum.

56. May we please have a copy of your last annual EAP utilization report?

Please refer to the provided reports accompanying this Addendum.

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57. Can you please provide the number of US DOT, SAP referrals for positive drug/alcohol tests the County made in the last 12 months?

This information is not available at this time.

58. Regarding the 125 Pre-Tax Plan Administration and the 132 Pre-Tax Parking Administration: Can you please provide us with the current number of eligible participants and also the current number of participants in the plans?

Plan	Eligible	Participating
Section 125 Pre Tax	2,800	2,200
Section 132 Parking	2,800	1,319

59. How many employees are eligible for the Employee Assistance Program? This should be the number on which pricing will be based.

All employees are eligible: All employees are eligible for EAP. The County currently has approximately 2,800 employees.

60. Please provide an employee zip code census in excel via email so we may run a GeoAccess network coverage report.

A census file with zip codes has been made available with this Addendum.

61. How long has Choice Consulting been the County’s EAP vendor?

Five Years

62. What is the current pricing for the EAP? Please provide a rate history throughout the contract term.

\$1.55 PEPM

63. What is the counseling visit model being requested for the EAP i.e. 3, 4, 6 visit model?

Please refer to the attached contract which follows these Questions and Answers.

64. Please provide copies of 2012 and 2011 utilization reports.

Please refer to the provided reports accompanying this Addendum.

65. Please clarify the total number of hours of training/orientation/wellness lunch & learns/health fair participation included in the EAP contract.

The County would like to provide three to five on-site group training sessions per year which would include supervisor training or lunch and learns. The County has two to three health fairs per year which includes an information table for the EAP provider. The County also has

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new employee orientation every two weeks where information on EAP is distributed but the EAP provider is only required to attend periodically.

66. Are DOT Substance Abuse Professional (SAP) Evaluations included in the County’s current contract? Are these provided on a fee-for-service basis or included within the PEPM? Is there a limit per year?

Please refer to the attached contract which follows these Questions and Answers. There are no additional fees to the \$1.55 PEPM agreement.

67. How many hours of training were utilized in 2012? 2011?

This information is not available at this time.

68. How many face-to-face sessions were provided in 2012? 2011?

Please refer to the provided reports accompanying this Addendum.

69. How many DOT SAP Evaluations were provided in 2012? 2011?

This information is not available at this time.

70. Where in the proposal should our rate schedule be included?

There is no requirement on where the rate schedule needs to be inserted into your proposal. Please just properly indicate where the rate schedule is provided in the Table of Contents.

71. Please confirm that if responding only to the EAP component, vendors need to complete only the General Information, Financial Information, References, Implementation Information, and Employee Assistance Program questionnaire.

Correct. And return all required forms.

72. Page 35 in the Local Business Preference Policy, states that the bidder may not subcontract the award, or any part of the award and that doing so will be grounds for termination. Most EAPs utilize subcontractors for the provision of after-hours call center operations and work/life services such as legal and financial. Will this disqualify us from consideration or does this clause only pertain to those vendors seeking local business preference? If it pertains to all vendors, please explain your reasoning behind this provision.

Local preference doesn’t apply here, it is only good for the purchase of goods and tangible items, not services.

73. Please clarify if the performance bond requirement pertains to non-construction contracts.

The performance bond requirement has been waived for this solicitation.

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74. Please confirm that Medical Plan Performance Guarantees are not applicable to those vendors bidding only on EAP.

Correct.

75. Does the eligibility data requirement pertain to the Employee Assistance Program? Most EAPs utilize an assumed eligibility standard and do not require eligibility data. Does the current EAP receive this information?

Yes

76. Instead of submitting electronic copies on flash drives, may we submit them on CDs?

Flash drives are preferred, however CD's are permissible.

77. Is the County open to considering a carve-out approach for Medicare-eligible retirees, in which there would be a defined contribution provided in the form of an HRA (Health Reimbursement Arrangement)?

The County can consider this approach, however the proposer needs to provide specific rate and benefit information for consideration. If 2014 rate and benefit information is not available, the 2013 information may be used as an illustration.

78. If so, what is the approximate number of retirees and eligible dependents?

Demographic and claim data has been provided in Exhibit 4

79. Can you please confirm the bidding prerequisites and target dates?

May 15 – Deadline for questions

May 22 – Use & Disclosure deadline

May 31 – Due date for proposals

Aside from these are there any others?

Confirmed. The due date has been extended to June 5, 2013. Refer to the formal Addendum for details regarding the location and time for delivery.

80. Census – please provide a current census document with all eligible employees along with their home zip codes included.

An updated census file has been provided with this Addendum

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81. Large claims information – dollar amount and diagnosis, for claims over \$50k for both the current and prior plan periods

All claims data to be used for preparing responses has already been provided in Exhibit 4, and through the process described for the claims repricing process. It is important to return the claims repricing file as instructed along with the network indicator for each line item provider identified.

82. Carrier History (5 years)

The County of El Paso has been with the same claims administrator for over 5 years

83. Employment Waiting Period

90 days

84. Admin fees

The County is not releasing current administrative fees at this time. Proposers are encouraged to submit their best offers.

85. RX – Average Script Price:

Pharmacy claims data (12-24 months) with the following information included:

Fill Date

NDC (11-digit)

GCN (5-digit)

NCPDP/NABP Number (Pharmacy ID)(7-digit)

Quantity Dispensed

Days Supply

AWP (Total AWP Cost or AWP per Unit Cost)

Ingredient Cost

Dispensing Fee

Brand/Generic Indicator

Pharmacy Type Code (Mail/Retail/90-Day @ Retail/Specialty/Long-term Care)

Upon submission of the properly executed Use & Disclosure agreement, Medical and Rx Data is provided through secure e-mail transmissions to approved Proposers.

86. Census – please provide a current census document with all eligible employees along with their home zip codes included.

An updated census file has been provided with this Addendum

87. What is the current individual/family deductible amounts?

The plan does not have a deductible at this time.

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88. Is the deductible waived on preventive services with the current plan?

There is no deductible currently.

89. Are you requesting estimated claims cost?

Proposers are welcome to provide estimated claims costs.

90. On page 6, disease management is referenced. Does the County wish to have disease management as part of the wellness program?

The County can consider disease management programs incorporated into the wellness program.

91. Please describe the top three things the County hopes to accomplish by implementing a wellness program.

**Lower overall claims cost
Reduced absenteeism
Improved productivity**

92. May H2U answer additional tabs as well feel necessary (e.g., HIPAA, Customer Service, etc.)?

Yes

93. Please describe the geographic distribution of the County’s workforce (i.e., how many physical sites do the majority of employees work at).

The majority of our members are located in the Downtown area surrounding the Courthouse at 500 East San Antonio, Sheriff’s Department 3850 Justice Road, and the Juvenile Probation Department 6400 Delta Drive.

94. Are you currently providing biometric screenings to all employees? If so, are these conducted on an individual basis in the clinic or via group screening events, and what is your participation rate?

Not at this time.

95. Do you provide incentives for employees who complete biometric screenings?

Not at this time

96. Please describe your current wellness program.

**Targeted disease state mailings
Lunch and Learns
Fit to Grow Nutrition Program (9 sessions each program)**

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97. What is the participation level for the current wellness programs?

120 employees have participated in the Fit to Grow Program. Other participation figures are not available.

98. Do you plan to integrate your wellness program into the county’s current employee health clinic? Please describe, along with your goals of doing so.

Based upon the capabilities of the awarded vendors and final analysis, the capabilities of the current clinic provider, integration with the clinic could be considered, however no definite plans are in effect at this time.

99. Are you currently providing outreach to high risk individuals? If so, please describe the current method?

Not at this time, other than through case management.

100. What are your wellness participation expectations (e.g., do you have a particular goal in mind for screening and HRA participation)?

No goals have been established at this time.

101. What is your annual budget for this project?

No budget has been established. The resources of the plan are adequate at this time.

102. Does the County currently provide any incentives for its wellness program, or plan to provide incentives for its wellness program beginning in 2014? If so, please describe. What is your annual budget for the incentive program?

There is no established program or incentives at this time.

103. Has this initiative been approved by the board/committee?

The Risk Pool Board has been briefed and trained on various wellness program and concepts. All decisions are subject to approval by the County Commissioners Court, regardless of the recommendation from any party working under the direction of the Court.

104. There is information on pages 14-16 of the RFP related to performance guarantees. Do these performance guarantees pertain to all services requested? If not, is the County interested in other performance guarantees related to wellness services?

The reference guarantees only apply to the medical plan administration. The County will entertain performance guarantees related to wellness services.

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105. On page 21 of the RFP, there is reference to a bid bond required for public works construction contracts. Will all vendors regardless of their services be required to submit a bid bond if proposals are in excess of \$100,000?

The Bid Bond requirements for this solicitation have been waived.

106. Please provide monthly medical subscriber data *by plan* for the experience period provided.

In the original provided Exhibit 4 monthly subscriber information is provided by plan and by division with medical and Rx expense combined. Medical and Rx expense by division, month and plan is not readily available.

107. Please provide monthly subscriber and member data for the Rx plan for the experience periods provided.

In the original provided Exhibit 4 monthly subscriber information is provided by plan and by division with medical and Rx expense combined. Medical and Rx expense by division, month and plan is not readily available.

108. Please provide rates and attachment factors by plan for 2012 and 2013 (Individual stop loss, administration fees, etc.).

Administrative fees are not being released at this time. Proposers are encouraged to submit their best offers.

The County no longer purchases aggregate stop loss coverage. The history of Individual Specific stop loss premiums and terms is:

Policy Year	Lifetime Max	Annual Max	Deductible	Coverage	Incurred & Paid Basis	Composite Premium
2013	Unlimited	\$5,000,000	\$225,000	Medical and Rx	24/12	\$32.02
2012	Unlimited	\$5,000,000	\$225,000	Medical and Rx	24/12	\$29.51

109. Are the plans grandfathered or non-grandfathered?

The County of El Paso also prefers to maintain the grandfathered status of its non-CDHP benefit options. All Benefit options contain a tiered hospital PPO network where the University Medical Center receives the highest benefit reimbursement compared to the PPO network providers as described in its SPD and benefit summaries. The County will consider all offers presented and reserves the right to select and administrator or program that best meets their needs.

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110. Please confirm pharmacy benefits. Is there a possibility that the Rx will be carved out?

The pharmacy benefits are summarized in the SPD provided. The Rx program is currently carved out. Based upon proposals received, the County may or may not continue to carve out the Rx program.

111. Can you confirm the intent of the attached Business Associates Agreement? Should we outline deviations from the proposed language, or is it just provided as a sample for our consideration?

The Use and Disclosure Agreement is provided to network providers for execution in order to be able to receive the medical and pharmacy claim repricing data files which would be returned with line item results as provided in the instructions that will accompany the file.

112. What is the current administration fee?

There is no separate dental administrative fee.

113. Can you confirm the inforce deductible?

The plan does not have any deductible at this time.

114. Can you confirm how the out-of-network claims are paid?

a) R&C level?

b) Does the TPA utilize their own dental network, or do they use another carrier's network? Is so, which carrier's network do they use?

The dental plan is an indemnity plan and R&C is determined at the 90th percentile.

115. Can you provide zip codes on the census?

A revised census has been provided with this Addendum.

116. Can you provide a listing of all providers used in the last 12 months?

This information is not available.

117. What is the current funding arrangement?

The dental plan is self funded.

118. Would it be acceptable for BCBSTX to quote on a Non-Grandfathered (NGF) basis?

The County of El Paso also prefers to maintain the grandfathered status of its non-CDHP benefit options. All Benefit options contain a tiered hospital PPO network where the University Medical Center receives the highest benefit reimbursement compared to the PPO network providers as described in its

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SPD and benefit summaries. The County will consider all offers presented and reserves the right to select and administrator or program that best meets their needs.

119. Can we get the zip codes of employees on the census?

A revised census has been provided with this Addendum.

Additional reports referenced follow. A separate Excel file containing census data with zip codes is also provided separately.

The County of El Paso

April 2013



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May 15, 2013

County of El Paso Risk Pool
 c/o Betsy C. Keller
 500 East San Antonio, Room 302
 El Paso, Texas 79901

RE: Year XIV, Quarter I, Month III Performance Guarantee Status

I am writing to inform you of our **Year XIV, Quarter III**, (April - June 2013) performance guarantee results. For your review, we have enclosed the supporting documents. The following synopsis is for **April**.

Item	Performance Standard	April 2013
Claims Payment Accuracy	97%	100.00%
Claims Turnaround-Average Days	16	3
Claim Coding Accuracy	97.5%	100.00%
Claim Dollar Payment Accuracy	98%	100.00%
Customer Service - Abandoned Calls	5%	1.000%

If you should have any questions, please do not hesitate to call. Thank you for your continued support.

Sincerely,

Mary Catherine Person
 President



	Current Month April 2013	Prior Month March 2013	Last Year April 2012
Total Dollars Paid			
Month	\$ 1,151,468	\$ 1,550,073	\$ 891,726
PTD (Oct-10 to Sept-11)	\$ 9,029,703	\$ 7,878,235	\$ 8,121,791
%/ Claim Type			
Medical	69%	76%	64%
**Rx	27%	21%	31%
Dental	4%	3%	5%
Average Employee Census			
Medical	2459	2456	2373
Dental	1571	1564	1493

Month	Gross Billed	\$ Allowed	% Allowed to Billed	% Savings	\$ Savings	\$ Paid by health plan	% Paid to Allowed	Claims Processed
October	\$ 4,307,409	\$ 1,583,055	37%	63%	\$ 2,724,354	\$ 1,068,483	67%	3332
November	\$ 4,329,878	\$ 1,339,377	31%	69%	\$ 2,990,500	\$ 853,406	64%	3333
December	\$ 3,409,391	\$ 1,293,997	38%	62%	\$ 2,115,394	\$ 993,805	77%	2459
January	\$ 4,562,445	\$ 1,451,023	32%	68%	\$ 3,111,422	\$ 953,800	66%	3681
February	\$ 3,023,857	\$ 1,023,214	34%	66%	\$ 2,000,643	\$ 608,733	59%	3682
March	\$ 4,288,075	\$ 1,547,850	36%	64%	\$ 2,740,224	\$ 1,185,150	77%	3286
April	\$ 4,336,373	\$ 1,483,985	34%	66%	\$ 2,852,388	\$ 798,035	54%	3238
May								
June								
July								
August								
September								
Year To Date	\$ 28,257,427	\$ 9,722,502	34%	66%	\$ 18,534,925	\$ 6,461,411	66%	23011

* This table does not reflect prescription costs.

	(7 months) 10/12 - 4/13	Current Avg/Month	(12 months) 10/11 - 09/12	Prior Avg/Month
Medical	\$ 6,461,412	\$ 923,058.80	\$ 9,996,047	\$ 833,004
Rx	\$ 2,255,940	\$ 322,277.19	\$ 3,627,123	\$ 302,260
Dental	\$ 312,351	\$ 44,621.53	\$ 532,881	\$ 44,407
Total	\$ 9,029,703	\$ 1,289,958	\$ 14,156,051	\$ 1,179,671

Month Ending:	April-13	April-12
Gross Billed	\$ 4.0 mil.	\$3.5 mil.
Allowed	\$ 1.4 mil.	\$ 1.3 mil.
Savings	\$ 2.6 mil.	\$ 2.3 mil.
Paid	\$ 923 thous.	\$ 811 thous.

	Member Count*	**Current Month	**PTD 10/11 - 09/12
Employee	2459	\$ 834,566	\$ 6,402,482
Spouse	309	\$ 187,243	\$ 1,381,271
Child	1305	\$ 129,659	\$ 1,245,949
Total	4073	\$ 1,151,468	\$ 9,029,703

Met and/or exceeded 50% of deductible.		
Member	Running Total	Prognosis
1	\$155,835.08	F
2	\$128,025.10	Expired
Met and/or exceeded 100% of deductible 225,000		
Member	Running Total	Prognosis

Paid Period	Months	Paid/M months	Amount Paid/Year
Current Fiscal Year Oct-12 to Sept-13	7 months	\$ 9,029,703	\$ 9,029,703
Prior Fiscal Year Oct-11 to Sept-12	12 months	\$ 891,726	\$ 14,156,051
Prior Fiscal Year Oct-10 to Sept-11	12 months	\$ 7,887,142	\$ 14,199,102

Incurred	**Summary Totals	Claimant Cour	Received	**Pending
2011	\$ 220,094.42	2	\$ 220,094.42	\$ -
2012	\$ 337,451.88	2	\$ 337,451.88	\$ -
2013	\$ -	0	\$ -	\$ -

Member	Total Paid	Date of Service	Provider/Prognosis	Paid to Provider
1	\$ 48,137	2/12/13-2/15/13	MD Anderson/ Fair to Good	\$ 48,074.04
2	\$ 33,109	3/21/2013	Providence Memorial / Good	\$ 21,882.23
3	\$ 84,332	3/18/13-3/21/13	Las Palmas Med Ctr/ Fair	\$ 79,375.03
	\$ 165,578			

++ All Reinsurance table illustrations are based upon the Reinsurance contract period.
** Summary Totals and Pending Amounts are subject to change depending on reinsurance ineligible amounts
** Aggregate and Stop Loss amounts are based on a Calendar year.

* Detailed Information can be found on the standard month end report. Member Count in box 4, reflects the count for the current medical month.
* The data presented on this page does not reflect administrative fees. It only reflects total claim dollars paid by health plan.

Claims Detail and Membership – 2012-2013



Healthy People
Healthy Business
Healthy Futures

Active Employees – Core Plan



Paid Month	Employee		Spouse		Dependent		TOTAL	
	Member Count	Claims Paid	Member Count	Claims Paid	Member Count	Claims Paid	Members	Claims Paid
Oct-12	774	\$ 142,122.10	77	\$ 15,423.98	317	\$ 23,542.55	1,168	\$ 181,088.63
Nov-12	768	\$ 213,631.95	78	\$ 36,409.04	313	\$ 27,637.04	1,159	\$ 277,678.03
Dec-12	768	\$ 197,720.03	76	\$ 93,161.27	314	\$ 23,192.60	1,158	\$ 314,073.90
Jan-13	794	\$ 210,883.72	75	\$ 60,796.81	341	\$ 34,856.40	1,210	\$ 306,536.93
Feb-13	709	\$ 124,618.81	73	\$ 16,266.90	341	\$ 26,066.26	1,123	\$ 166,951.97
Mar-13	815	\$ 310,982.76	75	\$ 32,715.03	341	\$ 19,696.01	1,231	\$ 363,393.80
Apr-13	817	\$ 177,176.17	74	\$ 70,476.77	345	\$ 39,385.34	1,236	\$ 287,038.28
May-13							0	\$ -
Jun-13							0	\$ -
Jul-13							0	\$ -
Aug-13							0	\$ -
Sep-13							0	\$ -
Gross Claims		\$ 1,377,135.54		\$ 325,249.80		\$ 194,376.20		\$ 1,896,761.54
**Stop Loss		\$ 150,205.36		\$ -		\$ -		\$ 150,205.36
Net Claims		\$ 1,226,930.18		\$ 325,249.80		\$ 194,376.20		\$ 1,746,556.18
Average Member Count	778		75		330			
Avg. Member Cost/Month	\$ 225.33		\$ 616.00		\$ 84.07			

**Reimbursed Amount

Includes Medical and Rx Data



Healthy People
Healthy Business
Healthy Futures

Active Employees – Buy Up Plan



Paid Month	Employee		Spouse		Dependent		TOTAL	
	Member Count	Claims Paid	Member Count	Claims Paid	Member Count	Claims Paid	Members	Claims Paid
Oct-12	645	\$ 690,137.15	81	\$ 59,139.54	276	\$ 66,312.49	1,002	\$ 815,589.18
Nov-12	646	\$ 310,304.56	82	\$ 28,486.07	273	\$ 106,273.92	1,001	\$ 445,064.55
Dec-12	644	\$ 337,431.31	83	\$ 33,634.71	272	\$ 68,772.60	999	\$ 439,838.62
Jan-13	641	\$ 483,298.15	78	\$ 82,677.79	246	\$ 66,116.63	965	\$ 632,092.57
Feb-13	640	\$ 323,987.63	78	\$ 42,011.54	240	\$ 72,967.75	958	\$ 438,966.92
Mar-13	643	\$ 565,164.22	78	\$ 81,614.28	238	\$ 31,258.84	959	\$ 678,037.34
Apr-13	646	\$ 390,895.55	80	\$ 23,418.49	248	\$ 32,228.49	974	\$ 446,542.53
May-13							0	\$ -
Jun-13							0	\$ -
Jul-13							0	\$ -
Aug-13							0	\$ -
Sep-13							0	\$ -
Gross Claims		\$ 3,101,218.57		\$ 350,982.42		\$ 443,930.72		\$ 3,896,131.71
**Stop Loss		\$ -		\$ -				\$ -
Net Claims		\$ 3,101,218.57		\$ 350,982.42		\$ 443,930.72		\$ 3,896,131.71
Average Member Count	644		80		256			
Avg. Member Cost/Month	\$ 688.39		\$ 626.75		\$ 247.59			

**Reimbursed Amount

Includes Medical and Rx Data



Healthy People
Healthy Business
Healthy Futures

Cobra Employees – Core Plan



Paid Month	Employee		Spouse		Dependent		TOTAL	
	Member Count	Claims Paid	Member Count	Claims Paid	Member Count	Claims Paid	Members	Claims Paid
Oct-12	1	\$ 243.10	0	\$ -	0	\$ -	1	\$ 243.10
Nov-12	1	\$ 66.50	0	\$ -	0	\$ -	1	\$ 66.50
Dec-12	1	\$ -	0	\$ -	0	\$ -	1	\$ -
Jan-13	2	\$ -	0	\$ -	0	\$ -	2	\$ -
Feb-13	2	\$ 555.19	0	\$ -	0	\$ -	2	\$ 555.19
Mar-13	2	\$ -	0	\$ -	0	\$ -	2	\$ -
Apr-13	2	\$ 3,233.24	0	\$ -	0	\$ -	2	\$ 3,233.24
May-13							0	\$ -
Jun-13							0	\$ -
Jul-13							0	\$ -
Aug-13							0	\$ -
Sep-13							0	\$ -
Gross Claims		\$ 4,098.03		\$ -		\$ -		\$ 4,098.03
**Stop Loss		\$ -		\$ -		\$ -		\$ -
Net Claims		\$ 4,098.03		\$ -		\$ -		\$ 4,098.03
Average Member Count	2		0		0			
Avg. Member Cost/Month	\$ -		\$ -		\$ -			

**Reimbursed Amount

Includes Medical and Rx Data



Healthy People
Healthy Business
Healthy Futures

Cobra Employees – Buy Up Plan



Paid Month	Employee		Spouse		Dependent		TOTAL	
	Member Count	Claims Paid	Member Count	Claims Paid	Member Count	Claims Paid	Members	Claims Paid
Oct-12	4	\$ 505.55	0	\$ -	0	\$ -	4	\$ 505.55
Nov-12	4	\$ 442.57	0	\$ -	0	\$ -	4	\$ 442.57
Dec-12	3	\$ 1,978.51	0	\$ -	0	\$ -	3	\$ 1,978.51
Jan-13	4	\$ 855.73	0	\$ -	0	\$ -	4	\$ 855.73
Feb-13	5	\$ 780.67	1	\$ 186.27	2	\$ -	8	\$ 966.94
Mar-13	4	\$ 1,255.71	1	\$ 186.27	0	\$ -	5	\$ 1,441.98
Apr-13	5	\$ 1,565.24	1	\$ 84.48	0	\$ -	6	\$ 1,649.72
May-13							0	\$ -
Jun-13							0	\$ -
Jul-13							0	\$ -
Aug-13							0	\$ -
Sep-13							0	\$ -
Gross Claims		\$ 7,383.98		\$ 457.02		\$ -		\$ 7,841.00
**Stop Loss		\$ -		\$ -		\$ -		\$ -
Net Claims		\$ 7,383.98		\$ 457.02		\$ -		\$ 7,841.00
Average Member Count	4		0		0			
Avg. Member Cost/Month	\$ 254.62		\$ -		0			

**Reimbursed Amount

Includes Medical and Rx Data



Healthy People
Healthy Business
Healthy Futures

Sheriff Employees – Core Plan



Paid Month	Employee		Spouse		Dependent		TOTAL	
	Member Count	Claims Paid	Member Count	Claims Paid	Member Count	Claims Paid	Members	Claims Paid
Oct-12	396	\$ 27,822.95	54	\$ 15,776.36	291	\$ 17,487.87	741	\$ 61,087.18
Nov-12	394	\$ 30,752.40	53	\$ 30,156.60	283	\$ 9,393.73	730	\$ 70,302.73
Dec-12	411	\$ 15,933.54	53	\$ 156,196.06	289	\$ 17,007.17	753	\$ 189,136.77
Jan-13	440	\$ 40,055.02	66	\$ 73,953.07	316	\$ 17,841.19	822	\$ 131,849.28
Feb-13	439	\$ 25,980.70	66	\$ 53,926.32	321	\$ 19,828.24	826	\$ 99,735.26
Mar-13	440	\$ 187,153.52	65	\$ 24,234.75	322	\$ 13,629.77	827	\$ 225,018.04
Apr-13	437	\$ 44,991.51	65	\$ 39,267.92	317	\$ 9,143.09	819	\$ 93,402.52
May-13							0	\$ -
Jun-13							0	\$ -
Jul-13							0	\$ -
Aug-13							0	\$ -
Sep-13							0	\$ -
Gross Claims		\$ 372,689.64		\$ 393,511.08		\$ 104,331.06		\$ 870,531.78
**Stop Loss		\$ -		\$ -		\$ -		\$ -
Net Claims		\$ 372,689.64		\$ 393,511.08		\$ 104,331.06		\$ 870,531.78
Average Member Count	422		60		306			
Avg. Member Cost/Month	\$ 126.04		\$ 932.49		\$ 48.78			

**Reimbursed Amount

Includes Medical and Rx Data



Healthy People
Healthy Business
Healthy Futures

Sheriff Employees – Buy Up Plan



Paid Month	Employee		Spouse		Dependent		TOTAL	
	Member Count	Claims Paid	Member Count	Claims Paid	Member Count	Claims Paid	Members	Claims Paid
Oct-12	385	\$ 86,994.57	55	\$ 33,013.81	368	\$ 48,040.61	808	\$ 168,048.99
Nov-12	385	\$ 79,312.81	54	\$ 12,157.70	368	\$ 64,072.96	807	\$ 155,543.47
Dec-12	392	\$ 112,221.32	55	\$ 16,739.62	375	\$ 66,006.72	822	\$ 194,967.66
Jan-13	382	\$ 78,286.17	49	\$ 9,556.14	377	\$ 56,493.67	808	\$ 144,335.98
Feb-13	381	\$ 55,378.67	49	\$ 19,198.40	378	\$ 30,829.55	808	\$ 105,406.62
Mar-13	380	\$ 59,034.78	49	\$ 10,178.63	376	\$ 55,077.35	805	\$ 124,290.76
Apr-13	378	\$ 96,413.79	49	\$ 11,657.20	371	\$ 29,955.17	798	\$ 138,026.16
May-13							0	\$ -
Jun-13							0	\$ -
Jul-13							0	\$ -
Aug-13							0	\$ -
Sep-13							0	\$ -
Gross Claims		\$ 567,642.11		\$ 112,501.50		\$ 350,476.03		\$ 1,030,619.64
**Stop Loss		\$ -		\$ -		\$ -		\$ -
Net Claims		\$ 567,642.11		\$ 112,501.50		\$ 350,476.03		\$ 1,030,619.64
Average Member Count	383		51		373			
Avg. Member Cost/Month	\$ 211.57		\$ 312.50		\$ 134.13			

**Reimbursed Amount

Includes Medical and Rx Data

Paid Month	Employee		Spouse		Dependent		TOTAL	
	Member Count	Claims Paid	Member Count	Claims Paid	Member Count	Claims Paid	Members	Claims Paid
Oct-12	51	\$ 17,056.08	5	\$ 384.97	15	\$ -	71	\$ 17,441.05
Nov-12	50	\$ 10,619.00	4	\$ 1,202.24	15	\$ -	69	\$ 11,821.24
Dec-12	48	\$ 51,880.39	5	\$ 33.57	15	\$ -	68	\$ 51,913.96
Jan-13	50	\$ 17,828.38	5	\$ 147.02	15	\$ -	70	\$ 17,975.40
Feb-13	48	\$ 22,467.30	4	\$ 181.27	11	\$ 29.36	63	\$ 22,677.93
Mar-13	48	\$ 11,297.56	4	\$ 226.90	11	\$ 908.50	63	\$ 12,432.96
Apr-13	49	\$ 13,773.37	4	\$ 7,910.22	11	\$ 3,888.33	64	\$ 25,571.92
May-13							0	\$ -
Jun-13							0	\$ -
Jul-13							0	\$ -
Aug-13							0	\$ -
Sep-13							0	\$ -
Gross Claims		\$ 144,922.08		\$ 10,086.19		\$ 4,826.19		\$159,834
**Stop Loss		\$ -		\$ -		\$ -		\$0
Net Claims		\$ 144,922.08		\$ 10,086.19		\$ 4,826.19		\$159,834
Average Member Count	49		4		13			
Avg. Member Cost/Month	\$ 421.29		\$ 325.36		\$ 51.89			

**Reimbursed Amount



Healthy People
Healthy Business
Healthy Futures

Retiree with Medicare – Core Plan



Paid Month	Employee		Spouse		Dependent		TOTAL	
	Member Count	Claims Paid	Member Count	Claims Paid	Member Count	Claims Paid	Members	Claims Paid
Oct-12	16	\$ 21,656.65	4	\$ 339.20	0	\$ -	20	\$ 21,995.85
Nov-12	16	\$ 14,326.75	4	\$ 991.78	0	\$ -	20	\$ 15,318.53
Dec-12	15	\$ 16,562.39	4	\$ 926.56	0	\$ -	19	\$ 17,488.95
Jan-13	15	\$ 24,536.31	5	\$ 127.08	0	\$ -	20	\$ 24,663.39
Feb-13	17	\$ 22,680.62	6	\$ 1,147.55	0	\$ -	23	\$ 23,828.17
Mar-13	17	\$ 20,870.27	6	\$ 1,021.44	0	\$ -	23	\$ 21,891.71
Apr-13	17	\$ 14,515.35	6	\$ 1,309.99	0	\$ -	23	\$ 15,825.34
May-13							0	\$ -
Jun-13							0	\$ -
Jul-13							0	\$ -
Aug-13							0	\$ -
Sep-13							0	\$ -
Gross Claims		\$ 135,148.34		\$ 5,863.60		\$ -		\$ 141,011.94
**Stop Loss		\$ -		\$ -		\$ -		\$ -
Net Claims		\$ 135,148.34		\$ 5,863.60		\$ -		\$ 141,011.94
Average Member Count	16		5		0			
Avg. Member Cost/Month	\$ 1,196.00		\$ 167.53		\$ -			

**Reimbursed Amount

Includes Medical and Rx Data



Healthy People
Healthy Business
Healthy Futures

Retiree with Medicare – Buy Up Plan



Paid Month	Employee		Spouse		Dependent		TOTAL	
	Member Count	Claims Paid	Member Count	Claims Paid	Member Count	Claims Paid	Members	Claims Paid
Oct-12	65	\$ 43,994.84	16	\$ 15,397.60	0	\$ -	81	\$ 59,392.44
Nov-12	66	\$ 30,627.06	16	\$ 6,741.05	0	\$ -	82	\$ 37,368.11
Dec-12	65	\$ 26,441.87	16	\$ 3,756.34	0	\$ -	81	\$ 30,198.21
Jan-13	62	\$ 36,970.49	15	\$ 14,434.64	0	\$ -	77	\$ 51,405.13
Feb-13	62	\$ 25,044.26	15	\$ 3,777.68	0	\$ -	77	\$ 28,821.94
Mar-13	62	\$ 21,518.58	15	\$ 10,071.92	0	\$ -	77	\$ 31,590.50
Apr-13	61	\$ 25,978.00	15	\$ 16,913.79	0	\$ -	76	\$ 42,891.79
May-13							0	\$ -
Jun-13							0	\$ -
Jul-13							0	\$ -
Aug-13							0	\$ -
Sep-13							0	\$ -
Gross Claims		\$210,575.10		\$71,093.02		\$0.00		\$281,668.12
**Stop Loss		\$0.00		\$0.00		\$0.00		\$0.00
Net Claims		\$210,575.10		\$71,093.02		\$0.00		\$281,668.12
Average Member Count	63		15		0			
Avg. Member Cost/Month	\$ 475.34		\$ 658.27		\$ -			

**Reimbursed Amount

Includes Medical and Rx Data



Healthy People
Healthy Business
Healthy Futures

Retiree without Medicare – Core Plan



Paid Month	Employee		Spouse		Dependent		TOTAL	
	Member Count	Claims Paid	Member Count	Claims Paid	Member Count	Claims Paid	Members	Claims Paid
Oct-12	21	\$ 28,287.45	7	\$ 1,617.25	6	\$ 4,657.34	34	\$ 34,562.04
Nov-12	23	\$ 39,544.20	9	\$ 2,503.16	10	\$ 35,931.33	42	\$ 77,978.69
Dec-12	22	\$ 31,262.36	8	\$ 5,051.81	8	\$ 3,724.66	38	\$ 40,038.83
Jan-13	25	\$ 29,440.61	8	\$ 2,574.49	6	\$ 7,172.60	39	\$ 39,187.70
Feb-13	24	\$ 6,727.22	8	\$ 1,232.68	6	\$ 2,213.65	38	\$ 10,173.55
Mar-13	26	\$ 11,883.35	9	\$ 2,388.06	7	\$ 2,018.83	42	\$ 16,290.24
Apr-13	27	\$ 9,745.52	11	\$ 1,431.67	11	\$ 2,149.97	49	\$ 13,327.16
May-13							0	\$ -
Jun-13							0	\$ -
Jul-13							0	\$ -
Aug-13							0	\$ -
Sep-13							0	\$ -
Gross Claims		\$ 156,890.71		\$ 16,799.12		\$ 57,868.38		\$ 231,558.21
**Stop Loss		\$ 16,425.24		\$ -		\$ -		\$ 16,425.24
Net Claims		\$ 140,465.47		\$ 16,799.12		\$ 57,868.38		\$ 215,132.97
Average Member Count	24		9		8			
Avg. Member Cost/Month	\$ 836.10		\$ 279.99		\$ 1,071.64			

**Reimbursed Amount

Includes Medical and Rx Data



Healthy People
Healthy Business
Healthy Futures

Retiree without Medicare – Buy Up Plan



Paid Month	Employee		Spouse		Dependent		TOTAL	
	Member Count	Claims Paid	Member Count	Claims Paid	Member Count	Claims Paid	Members	Claims Paid
Oct-12	20	\$ 21,128.67	7	\$ 3,140.55	2	\$ 373.25	29	\$ 24,642.47
Nov-12	20	\$ 19,952.30	6	\$ 12,467.41	2	\$ 192.13	28	\$ 32,611.84
Dec-12	20	\$ 14,853.48	6	\$ 2,491.55	2	\$ 718.41	28	\$ 18,063.44
Jan-13	17	\$ 15,563.50	4	\$ 11,717.08	2	\$ 418.11	23	\$ 27,698.69
Feb-13	19	\$ 18,789.91	4	\$ 2,537.28	2	\$ 527.46	25	\$ 21,854.65
Mar-13	19	\$ 29,895.30	4	\$ 2,365.04	2	\$ 556.75	25	\$ 32,817.09
Apr-13	20	\$ 30,851.60	4	\$ 8,158.66	2	\$ 159.41	26	\$ 39,169.67
May-13							0	\$ -
Jun-13							0	\$ -
Jul-13							0	\$ -
Aug-13							0	\$ -
Sep-13							0	\$ -
Gross Claims		\$151,034.76		\$42,877.57		\$2,945.52		\$196,857.85
**Stop Loss		\$0.00		\$0.00		\$0.00		\$0.00
Net Claims		\$151,034.76		\$42,877.57		\$2,945.52		\$196,857.85
Average Member Count	19		5		2			
Avg. Member Cost/Month	\$ 1,118.78		\$ 1,225.07		\$ 210.39			

**Reimbursed Amount

Includes Medical and Rx Data

Total Medical / RX Claims



Paid Month	Employee		Spouse		Dependent		TOTAL	
	Member Count	Claims Paid	Member Count	Claims Paid	Member Count	Claims Paid	Members	Claims Paid
Oct-12	2378	\$ 1,079,949.11	306	\$ 144,233.26	1275	\$ 160,414.11	3,959	\$ 1,384,596.48
Nov-12	2373	\$ 749,580.10	306	\$ 131,115.05	1264	\$ 243,501.11	3,943	\$ 1,124,196.26
Dec-12	2389	\$ 806,285.20	306	\$ 311,991.49	1275	\$ 179,422.16	3,970	\$ 1,297,698.85
Jan-13	2432	\$ 937,718.08	305	\$ 255,984.12	1303	\$ 182,898.60	4,040	\$ 1,376,600.80
Feb-13	2346	\$ 627,010.98	304	\$ 140,465.89	1301	\$ 152,462.27	3,951	\$ 919,939.14
Mar-13	2456	\$ 1,219,056.05	306	\$ 165,002.32	1297	\$ 123,146.05	4,059	\$ 1,507,204.42
Apr-13	2459	\$ 809,139.34	309	\$ 180,629.19	1305	\$ 116,909.80	4,073	\$ 1,106,678.33
May-13	0	\$ -	0	\$ -	0	\$ -	0	\$ -
Jun-13	0	\$ -	0	\$ -	0	\$ -	0	\$ -
Jul-13	0	\$ -	0	\$ -	0	\$ -	0	\$ -
Aug-13	0	\$ -	0	\$ -	0	\$ -	0	\$ -
Sep-13	0	\$ -	0	\$ -	0	\$ -	0	\$ -
Gross Claims		\$ 6,228,738.86		\$ 1,329,421.32		\$ 1,158,754.10		\$ 8,716,914.28
**Stop Loss		\$ 166,630.60		\$ -		\$ -		\$ 166,630.60
Net Claims		\$ 6,062,108.26		\$ 1,329,421.32		\$ 1,158,754.10		\$ 8,550,283.68
Average Member Count	1403		179		752			
Avg. Member Cost/Month	\$ 360.13		\$ 620.64		\$ 128.46			

**Reimbursed Amount

Paid Month	Employee		Spouse		Dependent		TOTAL	
	Member Count	Claims Paid	Member Count	Claims Paid	Member Count	Claims Paid	Members	Claims Paid
Oct-12	1457	\$ 23,330.70	279	\$ 5,242.05	639	\$ 14,923.38	2,375	\$ 43,496.13
Nov-12	1452	\$ 21,095.04	282	\$ 6,969.99	635	\$ 7,895.94	2,369	\$ 35,960.97
Dec-12	1448	\$ 18,123.46	281	\$ 4,776.65	634	\$ 6,626.76	2,363	\$ 29,526.87
Jan-13	1476	\$ 30,410.58	291	\$ 10,211.70	693	\$ 20,785.25	2,460	\$ 61,407.53
Feb-13	1488	\$ 26,019.20	293	\$ 7,178.13	683	\$ 11,952.62	2,464	\$ 45,149.95
Mar-13	1497	\$ 20,229.64	292	\$ 7,953.76	676	\$ 12,110.84	2,465	\$ 40,294.24
Apr-13	1504	\$ 24,848.08	294	\$ 5,877.55	685	\$ 12,749.57	2,483	\$ 43,475.20
May-13							0	\$ -
Jun-13							0	\$ -
Jul-13							0	\$ -
Aug-13							0	\$ -
Sep-13							0	\$ -
Gross Claims		\$ 164,056.70		\$ 48,209.83		\$ 87,044.36		\$ 299,310.89
Net Claims		\$ 164,056.70		\$ 48,209.83		\$ 87,044.36		\$ 299,310.89
Average Member Count	1475		287		664			
Avg. Member Cost/Month	\$ 15.89		\$ 23.96		\$ 18.74			

Paid Month	Employee		Spouse		Dependent		TOTAL	
	Member Count	Claims Paid	Member Count	Claims Paid	Member Count	Claims Paid	Members	Claims Paid
Oct-12	5	\$ 190.00	0	\$ -	0	\$ -	5	\$ 190.00
Nov-12	5	\$ 127.50	0	\$ -	0	\$ -	5	\$ 127.50
Dec-12	4	\$ -	0	\$ -	0	\$ -	4	\$ -
Jan-13	5	\$ -	0	\$ -	0	\$ -	5	\$ -
Feb-13	6	\$ 337.50	1	\$ -	0	\$ -	7	\$ 337.50
Mar-13	6	\$ 147.60	1	\$ -	0	\$ -	7	\$ 147.60
Apr-13	6	\$ 125.00	1	\$ -	0	\$ -	7	\$ 125.00
May-13							0	\$ -
Jun-13							0	\$ -
Jul-13							0	\$ -
Aug-13							0	\$ -
Sep-13							0	\$ -
Gross Claims		\$ 927.60		\$ -		\$ -		\$ 927.60
Net Claims		\$ 927.60		\$ -		\$ -		\$ 927.60
Average Member Count	5		0		0			
Avg. Member Cost/Month	\$ 25.07		\$ -		0			



Healthy People
Healthy Business
Healthy Futures

Dental Claims - Retirees



Paid Month	Employee		Spouse		Dependent		TOTAL	
	Member Count	Claims Paid	Member Count	Claims Paid	Member Count	Claims Paid	Members	Claims Paid
Oct-12	58	\$ 1,044.10	18	\$ 384.00	2	\$ 151.00	58	\$ 1,579.10
Nov-12	59	\$ 1,890.18	17	\$ 726.60	2	\$ -	59	\$ 2,616.78
Dec-12	59	\$ 612.00	17	\$ (360.00)	2	\$ -	59	\$ 252.00
Jan-13	59	\$ 1,518.20	16	\$ 1,264.80	0	\$ -	75	\$ 2,783.00
Feb-13	61	\$ 2,365.30	17	\$ 382.00	0	\$ -	78	\$ 2,747.30
Mar-13	61	\$ 1,482.20	17	\$ 506.74	0	\$ -	78	\$ 1,988.94
Apr-13	61	\$ 453.20	17	\$ 736.00	0	\$ -	78	\$ 1,189.20
May-13							0	\$ -
Jun-13							0	\$ -
Jul-13							0	\$ -
Aug-13							0	\$ -
Sep-13							0	\$ -
Gross Claims		\$ 9,365.18		\$ 3,640.14		\$ 151.00		\$ 13,156.32
Net Claims		\$ 9,365.18		\$ 3,640.14		\$ 151.00		\$ 13,156.32
Average Member Count	4		17		1			
Avg. Member Cost/Month	\$ 334.47		\$ 30.59		\$ 25.17			

Total Dental Claims



Paid Month	Employee		Spouse		Dependent		TOTAL	
	Member Count	Claims Paid	Member Count	Claims Paid	Member Count	Claims Paid	Members	Claims Paid
Oct-12	1520	\$ 24,564.80	297	\$ 5,626.05	641	\$ 15,074.38	2438	\$ 45,265.23
Nov-12	1516	\$ 23,112.72	299	\$ 7,696.59	637	\$ 7,895.94	2433	\$ 38,705.25
Dec-12	1511	\$ 18,735.46	298	\$ 4,416.65	636	\$ 6,626.76	2426	\$ 29,778.87
Jan-13	1540	\$ 31,928.78	307	\$ 11,476.50	693	\$ 20,785.25	2540	\$ 64,190.53
Feb-13	1555	\$ 28,722.00	311	\$ 7,560.13	683	\$ 11,952.62	2549	\$ 48,234.75
Mar-13	1564	\$ 21,859.44	310	\$ 8,460.50	676	\$ 12,110.84	2550	\$ 42,430.78
Apr-13	1571	\$ 25,426.28	312	\$ 6,613.55	685	\$ 12,749.57	2568	\$ 44,789.40
May-13	0	\$ -	0	\$ -	0	\$ -	0	\$ -
Jun-13	0	\$ -	0	\$ -	0	\$ -	0	\$ -
Jul-13	0	\$ -	0	\$ -	0	\$ -	0	\$ -
Aug-13	0	\$ -	0	\$ -	0	\$ -	0	\$ -
Sep-13	0	\$ -	0	\$ -	0	\$ -	0	\$ -
Gross Claims		\$ 174,349.48		\$ 51,849.97		\$ 87,195.36		\$ 313,394.81
Net Claims		\$ 174,349.48		\$ 51,849.97		\$ 87,195.36		\$ 313,394.81
Average Member Count	898		178		388			
Avg. Member Cost/Month	\$ 16.18		\$ 24.30		\$ 18.75			



Healthy People
Healthy Business
Healthy Futures

Claim Summary by Plan



	MEDICAL ACT	MEDICAL SHF	MEDICAL COBRA	MEDICAL RETIREE	CDHP	MEDICAL TOTAL	DENTAL TOTAL	*RX TOTAL	GRAND TOTAL
Apr-13									
EMPLOYEE	\$ 419,095.33	\$ 104,356.74	\$ 2,745.74	\$ 43,795.97	\$ 13,108.19	\$ 583,101.97	\$ 25,426.28	\$ 226,037.37	\$ 834,565.62
SPOUSE	\$ 74,214.60	\$ 37,161.21	\$ 84.48	\$ 1,828.05	\$ 7,771.24	\$ 121,059.58	\$ 6,613.55	\$ 59,569.61	\$ 187,242.74
DEPENDENT	\$ 58,175.35	\$ 30,950.52	\$ -	\$ 858.78	\$ 3,888.33	\$ 93,872.98	\$ 12,749.57	\$ 23,036.82	\$ 129,659.37
TOTAL	\$ 551,485.28	\$ 172,468.47	\$ 2,830.22	\$ 46,482.80	\$ 24,767.76	\$ 798,034.53	\$ 44,789.40	\$ 308,643.80	\$ 1,151,467.73
PTD TOTAL									
EMPLOYEE	\$ 3,295,756.09	\$ 711,631.40	\$ 5,605.30	\$ 341,960.22	\$ 132,452.10	\$ 4,487,405.11	\$ 173,305.38	\$ 1,741,771.36	\$ 6,402,481.85
SPOUSE	\$ 532,378.69	\$ 439,224.72	\$ 84.48	\$ 33,856.88	\$ 9,514.67	\$ 1,015,059.44	\$ 51,849.97	\$ 314,361.91	\$ 1,381,271.32
DEPENDENT	\$ 519,158.72	\$ 384,671.87	\$ -	\$ 50,290.27	\$ 4,826.19	\$ 958,947.05	\$ 87,195.36	\$ 199,807.05	\$ 1,245,949.46
TOTAL	\$ 4,347,293.50	\$ 1,535,527.99	\$ 5,689.78	\$ 426,107.37	\$ 146,792.96	\$ 6,461,411.60	\$ 312,350.71	\$ 2,255,940.32	\$ 9,029,702.63

Claims in Excess of 50% of the Specific Deductible

Date	Name	Total Amount Paid	Amount Excluded Due to Specific Deductible	Amount in Excess of Deductibles by Month	Diagnosis Code	Diagnosis Description
Jan-13	None	\$ -	\$ -	\$ -		
Feb-13	None	\$ -	\$ -	\$ -		
Mar-13		\$ 154,050.99	\$ -	\$ -	410.71	SUBENDOCARDIAL INFARCTION, INITIAL
		\$ 126,562.31			584.90	ACUTE KIDNEY FAILURE, UNSPECIFIED
Apr-13		\$ 155,835.08	\$ -	\$ -	410.71	SUBENDOCARDIAL INFARCTION, INITIAL
		\$ 128,025.10	\$ -	\$ -	584.90	ACUTE KIDNEY FAILURE, UNSPECIFIED

Disclaimer

The reports provided are for informational purposes only. The numbers in the reports may change at any time due to adjustments to claims or enrollment. Specific claim amounts noted in the reports cannot be used to calculate actual reimbursement. Aggregate paid claims cannot be used to calculate actual reimbursement.

This report contains PHI. The information may only be viewed by the plan sponsor or the employer and the employer's agents, employee and representative who have a need to know that all such parties: (a) have been instructed to safeguard Disclosed Information; (b) use Disclosed Information solely for the purpose for which the information is intended; (c) acknowledge that all Disclosed Information remains the sole and exclusive property of the TPA and/or its present, future and potential client; (d) will not further release any Disclosed Information to any third party without the prior written consent of the TPA; and (e) will comply with all the requirements of HIPAA's Privacy Rules and

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	EMPLOYEE	SPOUSE	DEPENDENTS	TOTAL
JANUARY	12/22/12-01/04/13	01/05/13-01/18/13	01/19/13-02/01/13	
ACTIVE	\$ 260,275.52	\$ 38,926.95	\$ 40,763.04	\$ 339,965.51
COBRA	\$ 855.73	\$ -	\$ -	\$ 855.73
RETIREE	\$ 57,433.03	\$ 22,867.38	\$ 1,678.84	\$ 81,979.25
	\$ 318,564.28	\$ 61,794.33	\$ 42,441.88	\$ 422,800.49
FEBRUARY	02/02/13-02/15/13	02/16/13-03/01/13		
ACTIVE	\$ 191,543.85	\$ 38,295.40	\$ 30,352.06	\$ 260,191.31
COBRA	\$ 780.67	\$ 186.27	\$ -	\$ 966.94
RETIREE	\$ 41,942.20	\$ 6,420.14	\$ 1,685.15	\$ 50,047.49
	\$ 234,266.72	\$ 44,901.81	\$ 32,037.21	\$ 311,205.74
MARCH	03/02/13-03/15/13	03/15/13-03/29/13		
ACTIVE	212,745.64	24,688.13	26,675.42	264,109.19
COBRA	1,022.33	186.27	0.00	1,208.60
RETIREE	43,094.41	12,688.97	1,387.93	57,171.31
	256,862.38	37,563.37	28,063.35	322,489.10
APRIL	03/30/13-4/12/13	4/13/13-4/26/13		
ACTIVE	186,690.13	33,583.55	21,586.22	241,859.90
COBRA	1,537.06	0.00	0.00	1,537.06
RETIREE	37,294.50	25,986.06	1,450.60	64,731.16
	225,521.69	59,569.61	23,036.82	308,128.12
MAY				
ACTIVE				0.00
COBRA				0.00
RETIREE				0.00
	0.00	0.00	0.00	0.00
JUNE				
ACTIVE				0.00
COBRA				0.00
RETIREE				0.00
	0.00	0.00	0.00	0.00
JULY				
ACTIVE				0.00
COBRA				0.00
RETIREE				0.00
	0.00	0.00	0.00	0.00
AUGUST				
ACTIVE				0.00
COBRA				0.00
RETIREE				0.00
	0.00	0.00	0.00	0.00
SEPTEMBER				
ACTIVE				0.00
COBRA				0.00
RETIREE				0.00
	0.00	0.00	0.00	0.00
OCTOBER				
ACTIVE				0.00
COBRA				0.00
RETIREE				0.00
	0.00	0.00	0.00	0.00
NOVEMBER				
ACTIVE				0.00
COBRA				0.00
RETIREE				0.00
	0.00	0.00	0.00	0.00
DECEMBER				
ACTIVE				0.00
COBRA				0.00
RETIREE				0.00
	0.00	0.00	0.00	0.00
Grand Total	\$ 1,035,215.07	\$ 203,829.12	\$ 125,579.26	\$ 1,364,623.45

Total Claims	# of Claims	Total Charges*	Estimated Paid Amount**
Claims Older than 30 Days in Inventory- In Process	1	\$7,181	\$1,795
Claims Less than 30 Days Old - In Process	445	\$823,480	\$205,870

Soft Denial Claims	Total Claims	Total Charges*
	157	\$347,110

Description	Charges*
Coordination of Benefits	\$150,563
Potential Subrogation	\$99,984
Itemized Billing	\$43,824
Other	\$52,739
Total	\$347,110

* Total Charges does not include discount or patient responsibility.

** Estimated Paid Amount is calculated by applying a conservative .25 Paid to Charge Ratio.



SubgroupID	# Member	# Claims	Paid
COUNT.ACT	253	571	\$170,579
COUNT.REL	3	5	\$725
COUNT.RET	2	5	\$15
COUNT.SHF	82	140	\$40,212
TOTAL	340	721	\$211,531

InOutPat	Diag1	DiagDesc	# Members	# Claims	PaidAmt
I	61801	CYSTOCELE MIDLINE	1	3	\$12,540
I	8245	BIMALLEOLAR FRACTURE, OPEN	1	3	\$12,015
I	63310	TUBAL PREGNANCY WITHOUT INTRAUTERINE PREGNANCY	1	1	\$10,998
I	6262	EXCESSIVE OR FREQUENT MENSTRUATION	1	1	\$10,878
I	41401	CORONARY ATHEROSCLEROSIS OF NATIVE CORONARY ARTERY	1	1	\$7,119
I	53240	CHRONIC OR UNSPECIFIED DUODENAL ULCER WITH HEMORRHAGE WITHOUT OBSTRUCTION	1	1	\$6,888
I	0389	UNSPECIFIED SEPTICEMIA	1	1	\$5,600
I	64981	ONSET (SPONTANEOUS) OF LABOR AFTER 37 COMPLETED WEEKS OF GESTATION BUT BEFORE 39 COMPLE	1	1	\$4,085
I	55200	FEMORAL HERNIA WITH OBSTRUCTION, UNILATERAL OR UNSPECIFIED (NOT SPECIFIED AS RECURRENT)	1	1	\$3,806
I	6173	ENDOMETRIOSIS OF PELVIC PERITONEUM	1	2	\$3,040
I	5589	OTHER AND UNSPECIFIED NONINFECTIOUS GASTROENTERITIS AND COLITIS	1	1	\$2,803
I	66411	SECOND-DEGREE PERINEAL LACERATION WITH DELIVERY	1	1	\$2,423
I	66401	FIRST-DEGREE PERINEAL LACERATION, DELIVERED, WITH OR WITHOUT MENTION OF ANTEPARTUM COND	1	1	\$2,422
I	64681	OTHER SPECIFIED COMPLICATIONS OF PREGNANCY WITH DELIVERY	1	1	\$2,187
I	650	NORMAL DELIVERY	1	1	\$1,952
I	4359	UNSPECIFIED TRANSIENT CEREBRAL ISCHEMIA	1	1	\$1,330
I	V3000	SINGLE LIVEBORN BORN IN HOSPITAL DELIVERED WITHOUT CESAREAN SECTION	5	17	\$998
I	V3001	SINGLE LIVEBORN BORN IN HOSPITAL DELIVERED BY CESAREAN SECTION	1	3	\$380
I	20961	BENIGN CARCINOID TUMOR OF THE BRONCHUS AND LUNG	1	3	\$0
I	25080	DIABETES WITH OTHER SPECIFIED MANIFESTATIONS, TYPE II OR UNSPECIFIED TYPE, NOT STATED AS UNC	1	2	\$0
I	6170	ENDOMETRIOSIS OF UTERUS	1	1	\$0
I	64511	POST TERM PREGNANCY DELIVERED WITH OR WITHOUT ANTEPARTUM CONDITION	1	1	\$0
TOTAL			26	48	\$91,462

InOutPat	Diag1	DiagDesc	# Members	# Claims	PaidAmt
O	6262	EXCESSIVE OR FREQUENT MENSTRUATION	2	2	\$10,473
O	57511	CHRONIC CHOLECYSTITIS	1	1	\$9,994
O	57410	CALCULUS OF GALLBLADDER WITH OTHER CHOLECYSTITIS, WITHOUT MENTION OF OBSTRUCTION	2	3	\$9,584
O	71887	OTHER JOINT DERANGEMENT, NOT ELSEWHERE CLASSIFIED, ANKLE AND FOOT	1	1	\$8,780
O	55090	UNILATERAL OR UNSPECIFIED INGUINAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE	1	2	\$8,590
O	79093	ELEVATED PROSTATE SPECIFIC ANTIGEN (PSA)	1	1	\$5,628
O	V571	CARE INVOLVING OTHER PHYSICAL THERAPY	11	25	\$5,380
O	470	DEVIATED NASAL SEPTUM	2	3	\$5,342
O	8360	TEAR OF MEDIAL CARTILAGE OR MENISCUS OF KNEE CURRENT	1	2	\$4,139
O	07811	CONDYLOMA ACUMINATUM	1	1	\$3,915
O	V5721	ENCOUNTER FOR OCCUPATIONAL THERAPY	5	8	\$2,489
O	4019	UNSPECIFIED ESSENTIAL HYPERTENSION	9	18	\$2,427
O	25000	DIABETES MELLITUS WITHOUT MENTION OF COMPLICATION, TYPE II OR UNSPECIFIED TYPE, NOT STATED	12	24	\$1,937
O	4139	OTHER AND UNSPECIFIED ANGINA PECTORIS	1	1	\$1,822
O	78650	UNSPECIFIED CHEST PAIN	7	11	\$1,595
O	V7651	SPECIAL SCREENING FOR MALIGNANT NEOPLASMS COLON	2	2	\$1,500
O	79439	OTHER NONSPECIFIC ABNORMAL FUNCTION STUDY OF CARDIOVASCULAR SYSTEM	2	2	\$1,464
O	2411	NONTOXIC MULTINODULAR GOITER	1	2	\$1,456
O	185	MALIGNANT NEOPLASM OF PROSTATE	1	2	\$1,423
O	78079	OTHER MALAISE AND FATIGUE	15	25	\$1,397
O	V7612	OTHER SCREENING MAMMOGRAM	9	9	\$1,298
O	5921	CALCULUS OF URETER	2	2	\$1,086
O	V7231	ROUTINE GYNECOLOGICAL EXAMINATION	6	9	\$1,060
O	78659	OTHER CHEST PAIN	2	2	\$907
O	2724	OTHER AND UNSPECIFIED HYPERLIPIDEMIA	6	9	\$821
TOP 25 TOTAL			103	167	\$94,507
ALL OTHER TOTAL			353	506	\$25,563
GRAND TOTAL			456	673	\$120,069

Inpatient

SvcCode	SvcCodeDesc	# Member	# Claims	Paid
HS	Hospital Ancillary	24	46	\$34,633
ER	Emergency Room	8	14	\$9,901
RA	Radiology	11	17	\$8,382
LB	Laboratory	23	45	\$5,814
SP	Semi-Private Room	18	24	\$5,437
AN	Anesthesia	14	20	\$4,909
IC	Intensive Care Room	5	5	\$2,191
SU	Surgery	1	1	\$1,791
PT	Physical Therapy	4	7	\$1,015
NU	Nursery	6	20	\$921
PA	Pathology	8	11	\$708
CF	Clinic	4	4	\$143
ST	Speech Therapy	1	1	\$24
BL	Blood	1	1	\$14
PR	Private Room	3	4	\$0
Total		131	220	\$75,882

Outpatient

SvcCode	SvcCodeDesc	# Member	# Claims	Paid
HS	Hospital Ancillary	80	103	\$70,945
LB	Laboratory	260	444	\$17,236
RA	Radiology	57	73	\$13,472
AN	Anesthesia	11	11	\$8,915
ER	Emergency Room	44	57	\$8,273
PT	Physical Therapy	11	24	\$5,355
PA	Pathology	21	40	\$2,883
OC	Occupational Therapy	5	8	\$2,489
OV	Office Visit	39	48	\$2,303
DM	Diabetic Instruction	3	4	\$1,217
GY	Gynecological Exam	4	5	\$817
MM	Mammogram	11	11	\$673
RP	Pap Smear	12	12	\$640
B5	Contraception	1	1	\$102
SP	Semi-Private Room	2	2	\$100
SU	Surgery	1	1	\$77
XA	Exam	1	1	\$55
IJ	Injection	4	5	\$52
CF	Clinic	14	14	\$46
DT	Diagnostic Services	3	3	\$0
IN	Ineligible Services	4	4	\$0
Total		588	871	\$135,649

DepFirstName	Dates of Serv	ReportMonth Val	SUM_of_PaidAmt
UMC CNTY CLINIC	August 2012	01Oct2012	\$20,130
UMC CNTY CLINIC	Oct 2012, Nov 2012	01Dec2012	\$45,225
UMC CNTY CLINIC	November 2012	01Jan2013	\$15,630
UMC CNTY CLINIC	Jan 2013, Feb 13	01Feb2013	\$42,169
UMC CNTY CLINIC	February 2013	01Mar2013	\$15,302
UMC CNTY CLINIC	1-Feb-13	1-Apr-13	\$8,265
Total			\$146,721

Month	Total Billed Encounters	\$45 County Payment	Avg PCP Paid \$60.00	Est Savings to Plan
Oct-12	432	\$19,440	\$25,920	\$6,480
Nov-12	322	\$14,490	\$19,320	\$4,830
Dec-12	367	\$16,515	\$22,020	\$5,505
Jan-13	470	\$21,150	\$28,200	\$7,050
Feb-13	475	\$21,375	\$28,500	\$7,125
Mar-13	485	\$21,825	\$29,100	\$7,275
Apr-13	545	\$24,525	\$32,700	\$8,175
May-13		\$0	\$0	\$0
Jun-13		\$0	\$0	\$0
Jul-13		\$0	\$0	\$0
Aug-13		\$0	\$0	\$0
Sep-13		\$0	\$0	\$0
	3096	\$139,320	\$185,760	\$46,440

Week of: APR 1-5

1	Insurance Card Request	3
2	Medco PBM Benefit Questions/Problems	0
3	Benefit Booklet or Directory	0
4	Medical/Dental Benefits Infor.	0
5	Claim Status/Questions	0
6	Claim reconsideration/Appeal	0
7	Submission/Claims/Acc details/COB's	0
8	Other	12
Total		15

Week of: APR 8-12

1	Insurance Card Request	0
2	Medco PBM Benefit Questions/Problems	0
3	Benefit Booklet or Directory	0
4	Medical/Dental Benefits Infor.	1
5	Claim Status/Questions	3
6	Claim reconsideration/Appeal	0
7	Submission/Claims/Acc details/COB's	0
8	Other	11
Total		15

Week of: APR 15-19

1	Insurance Card Request	2
2	Medco PBM Benefit Questions/Problems	0
3	Benefit Booklet or Directory	0
4	Medical/Dental Benefits Infor.	2
5	Claim Status/Questions	3
6	Claim reconsideration/Appeal	0
7	Submission/Claims/Acc details/COB's	0
8	Other	13
Total		20

Week of: APR 22-26

1	Insurance Card Request	0
2	Medco PBM Benefit Questions/Problems	0
3	Benefit Booklet or Directory	0
4	Medical/Dental Benefits Infor.	2
5	Claim Status/Questions	2
6	Claim reconsideration/Appeal	0
7	Submission/Claims/Acc details/COB's	0
8	Other	12
Total		16

Week of: APR 29-30

1	Insurance Card Request	0
2	Medco PBM Benefit Questions/Problems	0
3	Benefit Booklet or Directory	0
4	Medical/Dental Benefits Infor.	2
5	Claim Status/Questions	3
6	Claim reconsideration/Appeal	0
7	Submission/Claims/Acc details/COB's	0
8	Other	10
Total		15

Total Visits: 80

Calls: 39

- Other:**
- Enrolled dependent to the health plan;
 - Dropped dependent from health plan;
 - Cert. Of Coverage • RX temporary id cards
 - EP Fitness Enroll and/or Drop; • Healthy Lifestyle Reimbursement Program
 - Returned Mail • Open Enrollment

Inpatient Summary



Inpatient Summary: APR2013 to APR2013

Hospital	ADMITS	BedDays	Avg LOS	TotalPaid	Paid per Admit	Paid per Day	% of Admits	% of Paid
LAS PALMAS CAMP LPSDH	6	19	3.2	\$96,891	\$16,148	\$5,100	30.00%	38.92%
MD ANDERSON CANCER CENTER	1	3	3	\$48,074	\$48,074	\$16,025	5.00%	19.31%
DEL SOL CAMP LPDSH	4	20	5	\$40,701	\$10,175	\$2,035	20.00%	16.35%
EL PASO CHILDRENS HOSPITAL	1	2	2	\$22,981	\$22,981	\$11,491	5.00%	9.23%
UNIVERSITY MEDICAL CENTER OF EL PASO	3	10	3.3	\$18,377	\$6,126	\$1,838	15.00%	7.38%
PROVIDENCE MEMORIAL HOSPITAL	2	4	2	\$12,596	\$6,298	\$3,149	10.00%	5.06%
MAUI MEMORIAL MEDICAL CENTER	1	2	2	\$6,988	\$6,988	\$3,494	5.00%	2.81%
BAYLOR MEDICAL CENTER AT GARLAND	1	13	13	\$1,184	\$1,184	\$91	5.00%	0.48%
SIERRA MEDICAL CENTER	1	13	13	\$1,184	\$1,184	\$91	5.00%	0.48%
TOTAL	20	86	4.3	\$248,976	\$12,449	\$2,895	100.00%	100.00%

Inpatient Summary: OCT2012 to APR2013

Hospital	ADMITS	BedDays_Sum	Avg LOS	TotalPaid	Paid per Admit	Paid per Day	% of Admits	% of Paid
DEL SOL CAMP LPDSH	19	79	4.2	\$513,514	\$27,027	\$6,500	14.18%	25.37%
LAS PALMAS CAMP LPSDH	28	87	3.1	\$389,199	\$13,900	\$4,474	20.90%	19.23%
PROVIDENCE MEMORIAL HOSPITAL	24	61	2.5	\$239,142	\$9,964	\$3,920	17.91%	11.81%
SIERRA MEDICAL CENTER	12	48	4	\$221,053	\$18,421	\$4,605	8.96%	10.92%
EL PASO CHILDRENS HOSPITAL	6	35	5.8	\$206,475	\$34,413	\$5,899	4.48%	10.20%
UNIVERSITY MEDICAL CENTER OF EL PASO	21	69	3.3	\$106,006	\$5,048	\$1,536	15.67%	5.24%
SIERRA PROVIDENCE EAST MEDICAL CENT	9	16	1.8	\$104,206	\$11,578	\$6,513	6.72%	5.15%
FOUNDATION SURGICAL HOSPITAL OF ELI	3	5	1.7	\$61,345	\$20,448	\$12,269	2.24%	3.03%
MD ANDERSON CANCER CENTER	1	3	3	\$48,074	\$48,074	\$16,025	0.75%	2.37%
EL PASO SPECIALTY HOSPITAL	2	7	3.5	\$37,980	\$18,990	\$5,426	1.49%	1.88%
COOK CHILDRENS MEDICAL CENTER	1	2	2	\$27,611	\$27,611	\$13,805	0.75%	1.36%
SCOTTSDALE HEALTHCARE ADULT DAY SEF	1	3	3	\$25,016	\$25,016	\$8,339	0.75%	1.24%
UNIVERSITY BEHAVIORAL HEALTH OF EL P.	3	38	12.7	\$23,130	\$7,710	\$609	2.24%	1.14%
PEAK BEHAVIORAL HEALTH SERVICES LLC	1	24	24	\$12,126	\$12,126	\$505	0.75%	0.60%
MAUI MEMORIAL MEDICAL CENTER	1	2	2	\$6,988	\$6,988	\$3,494	0.75%	0.35%
BAYLOR MEDICAL CENTER AT GARLAND	1	13	13	\$1,184	\$1,184	\$91	0.75%	0.06%
CONROE REGIONAL MED CTR	1	5	5	\$1,156	\$1,156	\$231	0.75%	0.06%
TOTAL	134	497	3.7	\$2,024,204	\$15,106	\$4,073	100.00%	100.00%

Outpatient Summary



Outpatient Summary: APR2013 to APR2013

Provider Name	# Patients	# Claims	Total Paid
PROVIDENCE MEMORIAL HOSPITAL	26	40	\$54,065
SIERRA PROVIDENCE EAST MEDICAL CENTER	22	30	\$50,271
SIERRA MEDICAL CENTER	19	20	\$25,935
UNIVERSITY MEDICAL CENTER OF EL PASO	77	92	\$20,654
EAST EL PASO PHY MED CTR	17	19	\$18,587
SURGICAL CENTER OF EL PASO	8	10	\$13,782
DEL SOL CAMP LPDSH	23	26	\$12,711
EL PASO VAMC	15	42	\$4,719
CHILDRENS MEDICAL CENTER (DALLAS, TX)	1	1	\$3,888
LAS PALMAS CAMP LPDSH	15	19	\$3,790
EL PASO CHILDRENS HOSPITAL	5	6	\$3,099
EL PASO CENTER FOR GASTROINTESTINAL ENDOSCOPY	3	4	\$2,272
WILLIAM BEAUMONT ARMY MEDICAL CENTER	1	4	\$1,966
PASO DEL NORTE SURGERY CENTER	3	4	\$1,650
ENDOSCOPY CENTER OF EL PASO	2	2	\$1,528
EL PASO SPECIALTY HOSPITAL	2	3	\$897
MEMORIAL MEDICAL CENTER OF LAS CRUCES	1	2	\$573
LINCOLN COUNTY MEDICAL CENTER (RUIDOSO, MN)	1	2	\$463
TEXAS HEALTH ARLINGTON MEMORIAL HOSPITAL	1	1	\$14
GERALD CHAMPION REGIONAL MEDICAL CTR (ALAMOGORDO, NM)	1	1	\$9
DUKES MEMORIAL HOSPITAL (CHICAGO, IL)	1	1	\$0
MD ANDERSON CANCER CENTER (HOUSTON, TX)	1	1	\$0
BAYLOR MEDICAL CENTER AT GRAPEVINE	1	1	\$0
TEXAS MEDICAID & HEALTHCARE (HOUSTON, TX)	5	6	\$0
TOTAL	251	337	\$220,873

Outpatient Summary: OCT2012 to APR2013

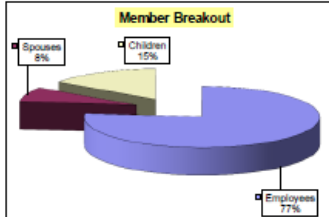
Provider Name	# Patients	# Claims	Total Paid
PROVIDENCE MEMORIAL HOSPITAL	149	285	\$379,618
LAS PALMAS CAMP LPDSH	70	128	\$234,376
SIERRA PROVIDENCE EAST MEDICAL CENTER	96	168	\$194,253
DEL SOL CAMP LPDSH	88	129	\$176,754
SIERRA MEDICAL CENTER	107	167	\$158,650
UNIVERSITY MEDICAL CENTER OF EL PASO	342	585	\$115,685
EL PASO SPECIALTY HOSPITAL	31	53	\$114,787
FOUNDATION SURGICAL HOSPITAL OF EL PASO	74	94	\$99,797
MD ANDERSON CANCER CENTER (HOUSTON, TX)	8	27	\$59,607
SURGICAL CENTER OF EL PASO	20	32	\$52,511
EL PASO CHILDRENS HOSPITAL	43	100	\$50,597
COOK CHILDRENS MEDICAL CENTER (FORT WORTH, TX)	1	2	\$39,089
ENDOSCOPY CENTER OF EL PASO	31	35	\$20,587
EL PASO VAMC	57	193	\$14,110
EL PASO DAY SURGERY	16	18	\$13,023
PASO DEL NORTE SURGERY CENTER,	15	24	\$12,088
AMBULATORY HEALTH SYSTEMS LLC (DALLAS, TX)	2	4	\$9,902
SHARP MEMORIAL HOSPITAL (LOS ANGELES, CA)	1	2	\$9,261
EL PASO CENTER FOR GASTROINTESTINAL ENDOSCOPY	12	17	\$8,590
WILLIAM BEAUMONT ARMY MEDICAL CENTER	7	24	\$7,357
CENTRAL TEXAS MEDICAL CENTER (SAN MARCOS, TX)	1	1	\$5,831
UNIV OF KANSAS HOSPITAL AUTH (SHAWNEE MISSION, KS)	1	3	\$5,334
MESA HILLS SPECIALITY HOSPITAL	2	3	\$5,192
TEXAS CHILDRENS HOSPITAL (HOUSTON, TX)	1	1	\$4,615
LINCOLN COUNTY MEDICAL CENTER (RUIDOSO, MN)	2	14	\$4,513
TOP 25 TOTAL	1177	2109	\$1,796,125
ALL OTHER TOTAL	57	124	\$22,405
GRAND TOTAL	1,234	2,233	\$1,818,531



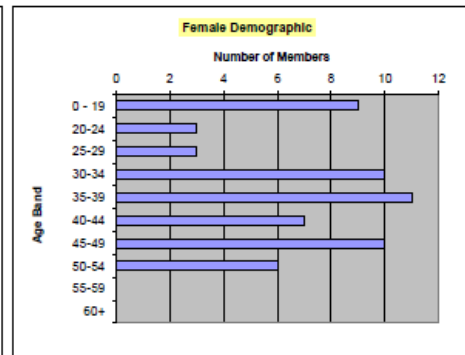
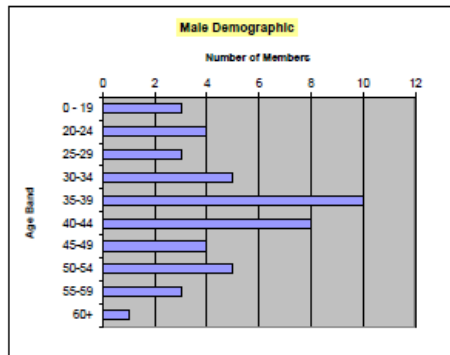
CHOICE CONSULTING-EAP SERVICES
THE COMPLETE EL PASO COUNTY REPORTS
DEMOGRAPHIC REPORT 2013

Demographics	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Employees	21	16	19	20									76
Spouses	1	4	5	2									12
Children	2	4	3	4									13
Total	24	24	27	26	0	0	0	0	0	0	0	0	101
Males													
0 - 19	1	0	1	1									3
20-24	0	1	2	1									4
25-29	1	0	1	1									3
30-34	1	1	1	2									5
35-39	2	2	2	4									10
40-44	1	0	3	4									8
45-49	2	1	1	0									4
50-54	2	0	0	3									5
55-59	0	2	1	0									3
60+	0	1	0	0									1
Total	10	8	12	16	0	0	0	0	0	0	0	0	46
Females													
0 - 19	1	3	2	3									9
20-24	0	2	0	1									3
25-29	1	0	0	2									3
30-34	2	2	3	3									10
35-39	5	2	3	1									11
40-44	1	2	2	2									7
45-49	2	3	4	1									10
50-54	2	2	1	1									6
55-59	0	0	0	0									0
60+	0	0	0	0									0
Total	14	16	15	14	0	0	0	0	0	0	0	0	59

Male	2011 YTD
0 - 19	3
20-24	4
25-29	3
30-34	5
35-39	10
40-44	8
45-49	4
50-54	5
55-59	3
60+	1



Female	2011 YTD
0 - 19	9
20-24	3
25-29	3
30-34	10
35-39	11
40-44	7
45-49	10
50-54	6
55-59	0
60+	0

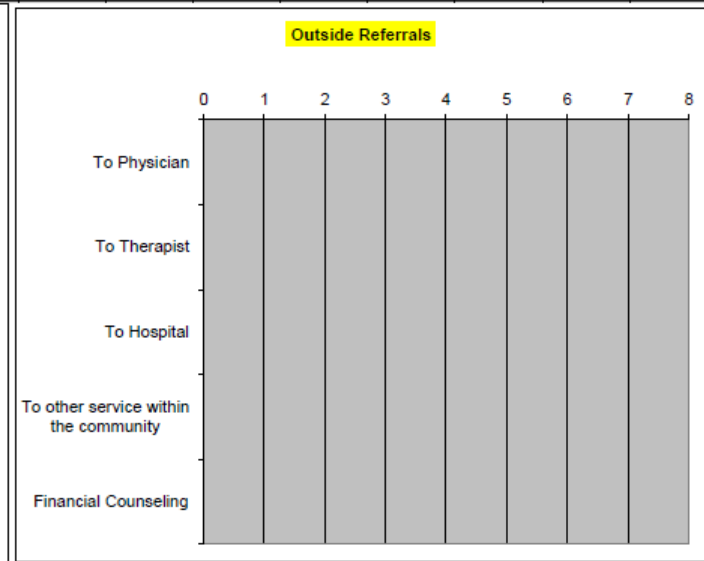
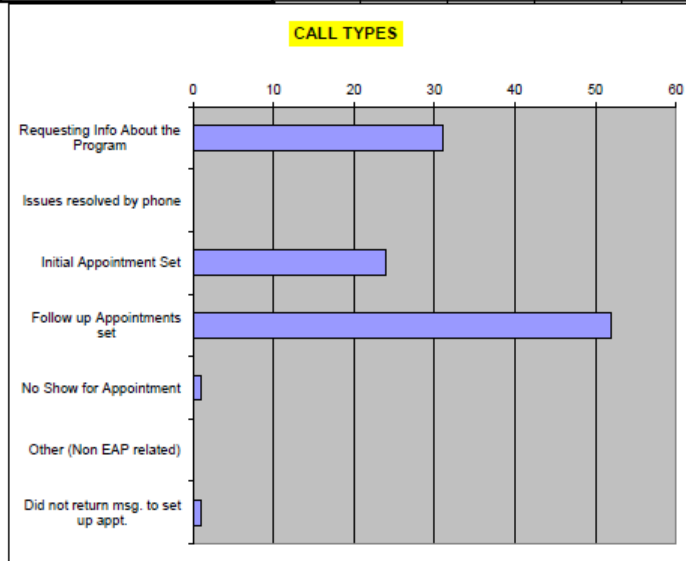




CHOICE CONSULTING-EAP SERVICES
THE COMPLETE EL PASO COUNTY REPORTS
Call Type and Referral Report 2013

Call Types	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Requesting Info About the Program	38	30	28	31									127
Issues resolved by phone	2	0	0	0									2
Initial Appointment Set	19	16	19	24									78
Follow up Appointments set	62	46	64	52									224
No Show for Appointment	4	0	1	1									6
Other (Non EAP related)	0	0	0	0									0
Did not return msg. to set up appt.	4	0	1	1									6
Total	129	92	113	109	0	0	0	0	0	0	0	0	443

Referrals	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
To Physician	0	0	0	0									0
To Therapist	1	0	2	0									3
To Hospital	0	0	0	0									0
To other service within the community	0	0	0	0									0
Financial Counseling	0	0	0	0									0
Total	1	0	2	0	0	0	0	0	0	0	0	0	3

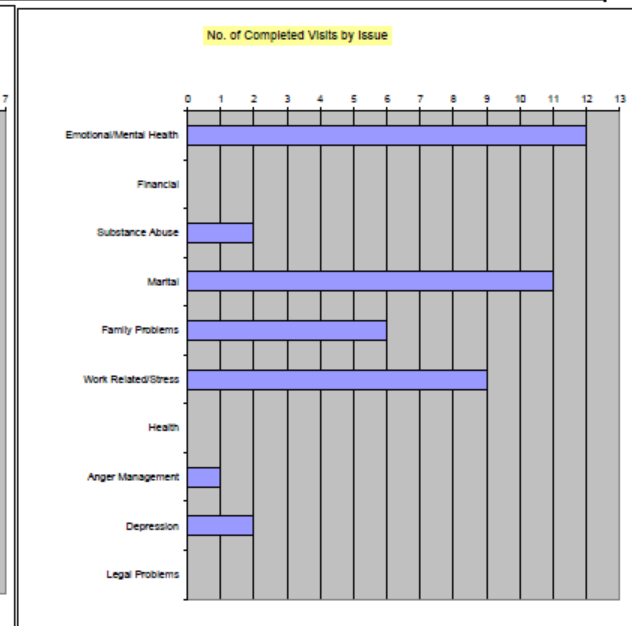
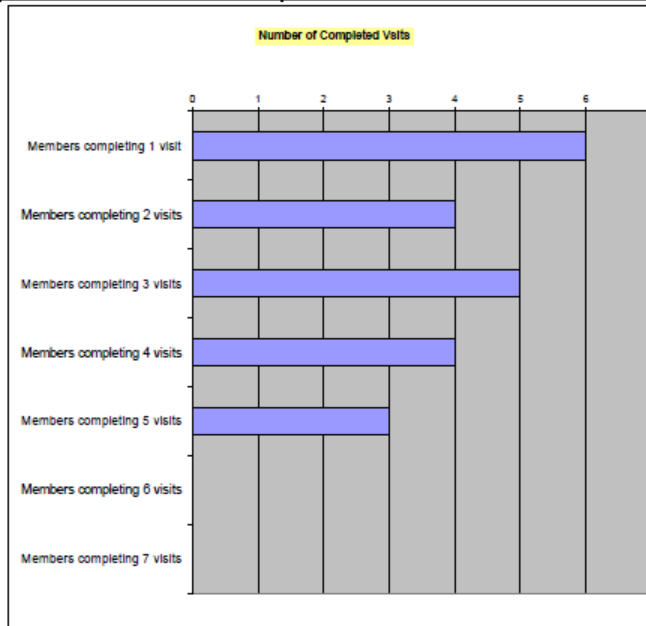




CHOICE CONSULTING-EAP SERVICES
THE COMPLETE EL PASO COUNTY REPORTS
COMPLETED VISITS REPORT 2013

Completed Visits	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Members completing 1 visit	6	6	5	6									23
Members completing 2 visits	5	2	3	4									28
Members completing 3 visits	4	4	4	5									51
Members completing 4 visits	2	2	1	4									36
Members completing 5 visits	1	2	1	3									35
Members completing 6 visits	0	0	2	0									12
Members completing 7 visits	2	0	3	0									35
Total	20	16	19	22	0	0	0	0	0	0	0	0	173

Completed Visits by Issue	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Emotional/Mental Health	17	9	13	12									51
Financial	0	0	0	0									0
Substance Abuse	1	0	2	2									5
Marital	4	6	7	11									28
Family Problems	4	0	5	6									15
Work Related/Stress	6	2	2	9									19
Health	0	0	0	0									0
Anger Management	0	1	1	1									3
Depression	7	4	3	2									16
Legal Problems	0	0	0	0									0
Total	39	22	33	43	0	0	0	0	0	0	0	0	137



EL PASO COUNTY
EMPLOYEE ASSISTANCE PROGRAM



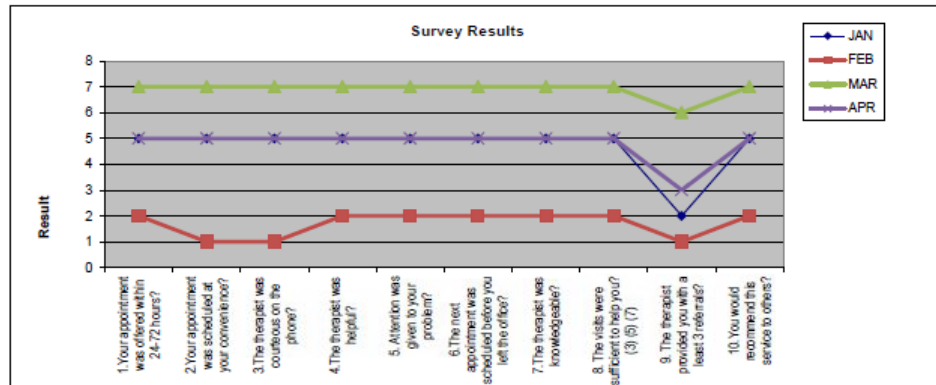
CHOICE CONSULTING- EAP SERVICES
1717 N. Brown St. Bld. 2-B
El Paso, Texas 79902
Office (915) 541-1140
Cell (915) 472-1140

ALL EL PASO COUNTY
POINT OF SERVICE

SURVEY RESULTS

		2013												
		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Tot
# of respondents for	APRIL	5	2	7	6									20
# of employees seen?		24	24	27	30									105
	QUESTION													TOT
1.	Your appointment was offered within 24-72 hours?	5	2	7	5									19
2.	Your appointment was scheduled at your convenience?	5	1	7	5									18
3.	The therapist was courteous on the phone?	5	1	7	5									18
4.	The therapist was helpful?	5	2	7	5									19
5.	Attention was given to your problem?	5	2	7	5									19
6.	The next appointment was scheduled before you left the office?	5	2	7	5									19
7.	The therapist was knowledgeable?	5	2	7	5									19
8.	The visits were sufficient to help you? (3) (5) (7)	5	2	7	5									19
9.	The therapist provided you with a least 3 referrals?	2	1	6	3									12
10.	You would recommend this service to others?	5	2	7	5									19

LEGEND Y = 1 N = 0 NA = 1 No Answer = Not Counted



COMMENTS:

1. Mr. McCormack is very knowledgeable counselor very attentive and courteous. Would strongly recommend Mr. McCormack.
2. This counselor really helped me get stuff out of my mind. And seeing life a different way. I love how the counselor was able to help me and talk to me. I would really recommend him.
3. Mr. McCormack is very helpful and passionate about his job. I really recommend it to anyone seeking help emotionally.
4. The Program was helpful.
5. No Comments
6. I was able to dig until finally found the REAL problem. I hated to see it ir even say it. But, found solutions. Love this program I would have not say this at first but I can now. Excellent, Program.

County of El Paso



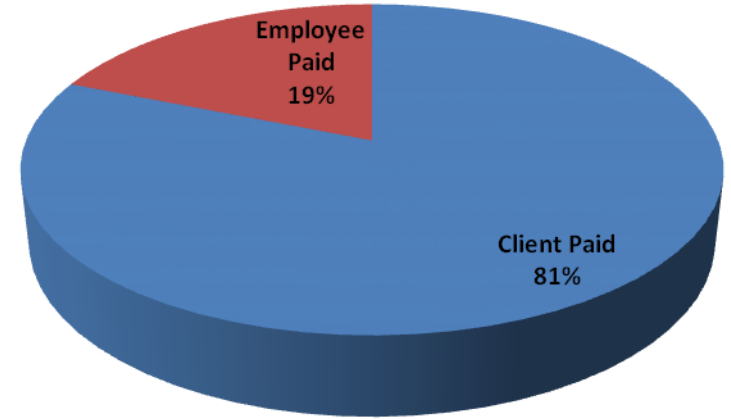
October 2012 – March 2013



DataSCOPE

- Annualized Gross cost per employee for 2nd QTR of fiscal YTD 2012-2013 is \$4,696. Which is 2.3% above the 2011 El Paso Index cost of \$4,591.
- There are currently 6 member's that exceeded the \$112,500 catastrophic threshold. These 6 member's account for 18% of the plans total paid dollars.
- Employee's share in 19% of the Medical cost.
- Outpatient services account for 48% of the plans total paid dollars.
- Top 3 Outpatient Types of Service for this reporting period are; Hospital Ancillary, Radiology and Laboratory. These three categories account for 70% of all Outpatient paid dollars.
- Insured member's account for 69% of all paid dollars, children at 15% and spouse's at 16%.
- Top 3 major diagnostic category are; Disorder of Musculoskeletal system, Nephritis/Nephrosis and Disorder of Circulatory System. These make up 37% of the paid dollars.
- For Inpatient services, 89% of the paid dollars were incurred in the 7 major El Paso Hospitals.
- For the current period there were 259 patients with 308 ER visits. Most of the ER visits occurred on Sunday's and Thursday's.

Summary:	OCT2011 - SEP2012	OCT2012 - MAR2013	2011 El Paso Peer Index	Variance to Index
Avg # Employees	2,363	2,412		
Avg # Members	3,947	4,003		
Mem/EE Ratio	1.67	1.66	1.53	8.5%
Gross Cost				
Gross Cost	\$9,996,047	\$5,663,377		
Gross Cost per EE*	\$4,230	\$4,696	\$4,591	2.3%
Net Cost per EE*	\$3,842	\$4,401	\$3,579	23.0%
Number of Catastrophic Cases				
Number of Catastrophic Cases	11	6		
Catastrophic Cases / 1,000	2.8	1.5	8.3	-81.9%
Avg Catastrophic Case Paid	\$195,885	\$171,930	\$129,484	32.8%
Cats % of Gross Dollars	21.60%	18.20%	35.90%	-49.3%



Employee Paid consists of Co-Pay, Co-Insurance and Deductible amounts. It does not contain Premium dollars.

* Annualized Data

Paid Dollar Range	# of Members	% of Members	# of Claims	% of Claims	Total Paid	% of Paid
\$100,000.01 Plus	7	0.17%	515	2.84%	\$1,136,065	20.06%
\$50,000.01 - \$100,000.00	10	0.25%	476	2.63%	\$806,751	14.25%
\$25,000.01 - \$50,000.00	21	0.52%	834	4.60%	\$739,982	13.07%
\$10,000.01 - \$25,000.00	53	1.32%	1,413	7.80%	\$835,613	14.75%
\$5,000.01 - \$10,000.00	99	2.47%	1,945	10.74%	\$703,060	12.41%
\$2,500.01 - \$5,000.00	129	3.22%	1,916	10.58%	\$454,226	8.02%
\$0.01 - \$2,500.00	2,283	57.03%	10,770	59.44%	\$987,688	17.44%
\$0.00	1,401	35.00%	249	1.37%	(\$8)	0.00%
	4,003	100.00%	18,118	100.00%	\$5,663,377	100.00%

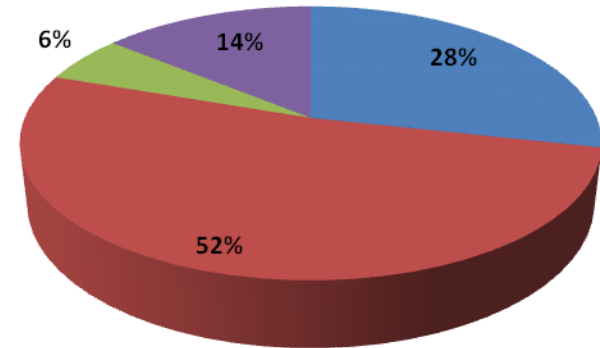
Inpatient:	OCT2011 - SEP2012	OCT2012 - MAR2013	2011 El Paso Peer Index	Variance to Index
# of Admits	228	114		
# of Patient Days	896	411		
Paid per Admit	\$13,352	\$15,572	\$13,226	17.7%
Paid per Day	\$3,397	\$4,319	\$3,064	41.0%
Admits / 1,000*	58	57	63	-9.5%
Days / 1,000*	227	205	272	-24.6%
Average LOS	3.9	3.6	4.3	-16.3%
Inpatient Professional / Member*	\$149	\$122	\$163	-25.2%
Outpatient Professional / Member	\$282	\$318	\$359	-11.4%

Cost Distribution - PMPY:	OCT2011 - SEP2012	OCT2012 - MAR2013	2011 El Paso Peer Index	Variance to Index
Hospital Inpatient*	\$789	\$805	\$740	8.8%
Facility Outpatient*	\$1,239	\$1,467	\$1,496	-1.9%
PCP Physician Office*	\$147	\$159	\$212	-25.0%
Specialist Physician Office*	\$358	\$399	\$555	-28.1%
Total*	\$2,533	\$2,830	\$3,003	-5.8%

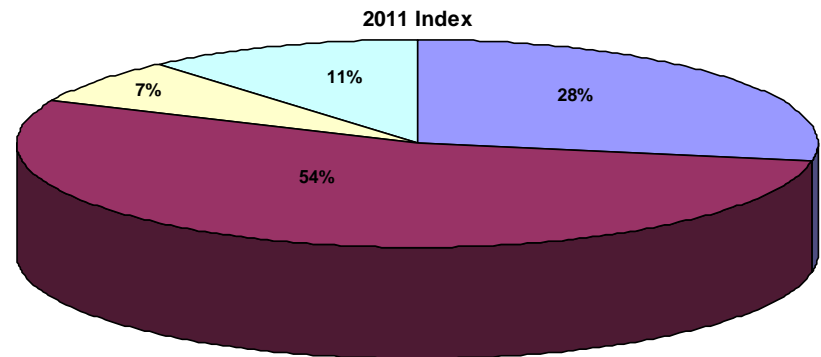
Physician Office:	OCT2011 - SEP2012	OCT2012 - MAR2013	2011 El Paso Peer Index	Variance to Index
Office Visit Utilization*	2.7	2.8	3.1	-9.7%
Office Visit Paid	\$62	\$67	\$72	-6.9%
Office Visit Avg - PPM*	\$165	\$188	\$226	-16.8%

DX&L Utilization*	8	8.4	9.7	-13.4%
DX&L Paid	\$75	\$82	\$67	22.4%
DX&L Avg - PPM*	\$596	\$688	\$651	5.7%

* Annualized Data



■ Hospital Inpatient* ■ Facility Outpatient*
■ PCP Physician Office* ■ Specialist Physician Office*



Physician Office (PCP/Spec):	OCT2011 - SEP2012	OCT2012 - MAR2013	2011 El Paso Peer Index	Variance to Index
PCP Office Visit Utilization*	1.3	1.3	1.6	-18.8%
PCP Office Visit Paid	\$61	\$66	\$70	-5.7%
PCP Office Visit Avg - PPM*	\$78	\$87	\$116	-25.0%
PCP DX&L Utilization*	0.9	1.1	1.4	-21.4%
PCP DX&L Paid	\$27	\$25	\$28	-10.7%
PCP DX&L Avg - PPM*	\$24	\$26	\$38	-31.6%
Specialist Office Visit Utilization*	1.4	1.5	1.5	0.0%
Specialist Office Visit Paid	\$63	\$68	\$74	-8.1%
Specialist Office Visit Avg - PPM*	\$86	\$100	\$110	-9.1%
Specialist DX&L Utilization*	7.1	7.4	8.3	-10.8%
Specialist DX&L Paid	\$81	\$90	\$74	21.6%
Specialist DX&L Avg - PPM*	\$572	\$662	\$613	8.0%
Emergency Room:	OCT2011 - SEP2012	OCT2012 - MAR2013	2011 El Paso Peer Index	Variance to Index
Number of Patients	423	259		
Number of Visits	549	308		
Number of Admits	94	37		
Visits Per Member*	0.14	0.15	0.14	7.1%
Average Paid per Visit	\$1,100	\$1,158	\$1,404	-17.5%
Admits per Visit	0.17	0.12	0.18	-33.3%

* Annualized Data

Subgroup	Age	Gender	Relationship	Diag Cd	Diagnosis Description	Total Paid
COUNT.SHF	50	F	Wife	2330	CARCINOMA IN SITU OF BREAST	\$221,153
COUNT.ACT	75	M	Insured	72142	SPONDYLOSIS WITH MYELOPATHY LUMBAR REGION	\$134,510
COUNT.SHF	57	M	Insured	41071	SUBENDOCARDIAL INFARCTION, INITIAL EPISODE OF CARE	\$154,103
COUNT.ACT	54	F	Insured	41071	SUBENDOCARDIAL INFARCTION, INITIAL EPISODE OF CARE	\$201,334
COUNT.ACT	66	M	Insured	5849	ACUTE KIDNEY FAILURE, UNSPECIFIED	\$127,008
COUNT.ACT	56	M	Insured	5856	END STAGE RENAL DISEASE	\$193,473
TOTAL						\$1,031,581

Catastrophic members account
for 18% of total paid dollars.

Description	NumPatients	NumClaims	TotalPaid	% of Paid
(MDC 10) DISORDER OF CIRCULATORY SYSTEM	389	1,121	\$879,186	15.52%
(MDC 18) DISORDER OF MUSCULOSKELETAL SYSTEM	535	2,266	\$684,108	12.08%
(MDC 14) NEPHRITIS / NEPHROSIS	165	701	\$651,722	11.51%
(MDC 02) NEOPLASMS	177	899	\$540,334	9.54%
(MDC 23) FRACTURES AND OTHER INJURIES	301	1,230	\$450,438	7.95%
(MDC 25) FACTORS AFFECTING HEALTH	997	2,386	\$393,149	6.94%
(MDC 22) ILLDEFINED CONDITIONS	870	1,995	\$382,449	6.75%
(MDC 12) DISORDER OF DIGESTIVE SYSTEM	227	470	\$218,223	3.85%
(MDC 07) DISORDER OF NERVOUS SYSTEM	158	600	\$210,199	3.71%
(MDC 17) PREGNANCY / CHILDBIRTH	53	347	\$205,600	3.63%
(MDC 11) DISORDER OF RESPIRATORY SYSTEM	836	1,661	\$204,105	3.60%
(MDC 16) FEMALE DISORDERS	218	525	\$189,000	3.34%
(MDC 13) OTHER DIGESTIVE DISORDERS	49	169	\$139,260	2.46%
(MDC 03) ENDOCRINE, NUTRITIONAL, METABOLIC, IMMUNITY, DISORDERS	518	1,369	\$106,631	1.88%
(MDC 08) DISORDER OF EYE / ADNEXA	223	400	\$95,316	1.68%
(MDC 19) DISORDER OF BREAST OR SKIN	277	551	\$85,723	1.51%
(MDC 05) PSYCHOTIC CONDITIONS	145	497	\$74,662	1.32%
(MDC 20) CONGENITAL ANOMALIES	31	75	\$44,069	0.78%
(MDC 01) INFECTIOUS / PARASITIC DISEASE	188	300	\$37,911	0.67%
(MDC 04) DISORDER OF BLOOD	55	175	\$19,716	0.35%
(MDC 21) PERINATAL PERIOD CONDITIONS	14	38	\$19,037	0.34%
(MDC 09) DISORDER OF EAR	127	209	\$18,716	0.33%
(MDC 15) DISORDER OF MALE GENITAL ORGANS	62	127	\$12,542	0.22%
(MDC 24) BURNS / ACCIDENTS BY FIRE	4	6	\$969	0.02%
(MDC 06) ALCOHOL / DRUG PSYCHOTROPIC DEPENDENCY	1	1	\$313	0.01%
TOTAL	6,620	18,118	\$5,663,377	100.00%

MDC (10) DISORDER OF CIRCULATORY SYSTEM

MDC	Diag Code	Diagnosis Description	# Patients	# Claims	Total Paid
10	41071	SUBENDOCARDIAL INFARCTION, INITIAL EPISODE OF CARE	2	10	\$332,083
10	41401	CORONARY ATHEROSCLEROSIS OF NATIVE CORONARY ARTERY	20	52	\$132,194
10	4541	VARICOSE VEINS OF LOWER EXTREMITIES WITH INFLAMMATION	28	121	\$117,829
10	42731	ATRIAL FIBRILLATION	11	43	\$105,686
10	41011	ACUTE MYOCARDIAL INFARCTION OF OTHER ANTERIOR WALL, INITIAL EPISODE OF CARE	2	6	\$60,178

MDC (14) NEPHRITIS / NEPHROSIS

MDC	Diag Code	Diagnosis Description	# Patients	# Claims	Total Paid
14	5856	END STAGE RENAL DISEASE	9	307	\$429,457
14	5849	ACUTE KIDNEY FAILURE, UNSPECIFIED	6	28	\$120,336
14	5921	CALCULUS OF URETER	22	56	\$58,530
14	5990	URINARY TRACT INFECTION, SITE NOT SPECIFIED	64	103	\$13,010
14	586	RENAL FAILURE UNSPECIFIED	2	5	\$6,253

MDC (18) DISORDER OF MUSCULOSKELETAL SYSTEM

MDC	Diag Code	Diagnosis Description	# Patients	# Claims	Total Paid
18	72142	SPONDYLOSIS WITH MYELOPATHY LUMBAR REGION	1	35	\$122,321
18	71536	OSTEOARTHRISIS LOCALIZED NOT SPEC WHETHER PRIMARY OR SECONDARY INVOLVING LOWER LEG	7	15	\$76,262
18	72283	POSTLAMINECTOMY SYNDROME, LUMBAR REGION	2	2	\$53,030
18	71596	OSTEOARTHRISIS, UNSPECIFIED WHETHER GENERALIZED OR LOCALIZED, LOWER LEG	21	69	\$45,849
18	71516	OSTEOARTHRISIS LOCALIZED PRIMARY INVOLVING LOWER LEG	6	9	\$22,920

Outpatient Type of Service Summary



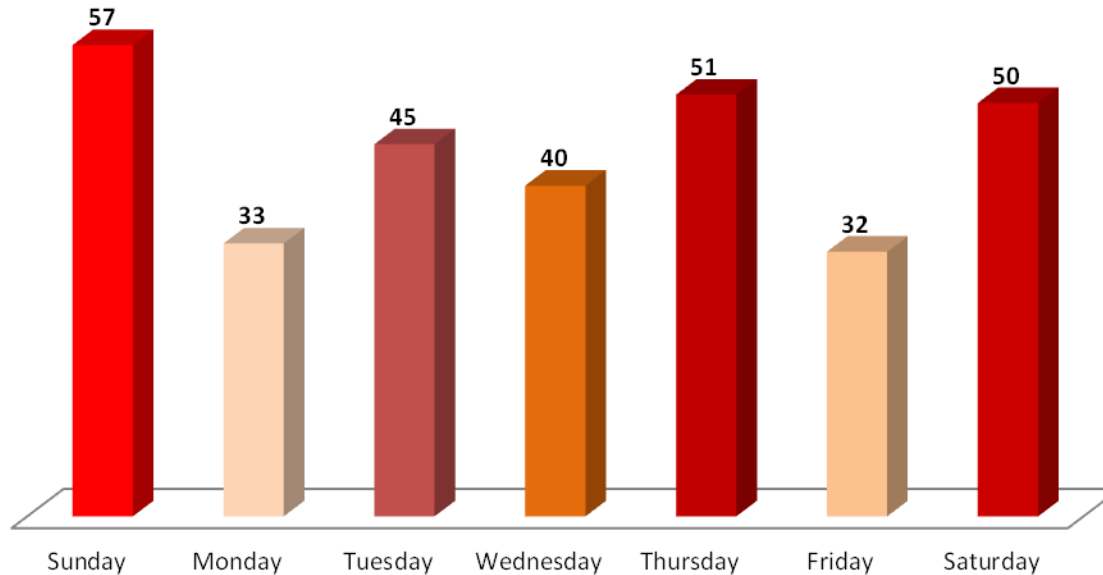
Service Code	# Patients	% of Patients	Paid	% of Paid
Hospital Ancillary	492	9.50%	\$1,277,005	47.45%
Radiology	492	9.50%	\$347,484	12.91%
Laboratory	1,275	24.63%	\$265,662	9.87%
Surgery	243	4.69%	\$191,764	7.13%
Emergency Room	265	5.12%	\$124,471	4.63%
Anesthesia	168	3.25%	\$122,041	4.53%
ER Professional Fee	265	5.12%	\$54,500	2.03%
Office Visit	472	9.12%	\$51,395	1.91%
Medical Equipment	72	1.39%	\$44,581	1.66%
Pathology	159	3.07%	\$42,668	1.59%
Miscellaneous	148	2.86%	\$21,493	0.80%
Physical Therapy	26	0.50%	\$15,025	0.56%
Mammogram	65	1.26%	\$14,825	0.55%
Pap Smear	225	4.35%	\$12,126	0.45%
Ambulance	28	0.54%	\$11,888	0.44%
Injection	146	2.82%	\$10,049	0.37%
Dialysis	6	0.12%	\$9,999	0.37%
Hospital Visit	17	0.33%	\$9,586	0.36%
Clinic	51	0.99%	\$9,375	0.35%
Home Health Care	12	0.23%	\$8,908	0.33%
Medical Reimb	66	1.27%	\$6,203	0.23%
Allergy Testing	18	0.35%	\$4,787	0.18%
Orthotics	30	0.58%	\$3,880	0.14%
Assistant Surgery	12	0.23%	\$3,799	0.14%
Radiation Therapy	1	0.02%	\$3,707	0.14%
Diagnostic Services	85	1.64%	\$3,350	0.12%
INFUSION THERAPY	12	0.23%	\$3,063	0.11%
Consultation	11	0.21%	\$2,923	0.11%
Speech Therapy	5	0.10%	\$2,689	0.10%
Chemotherapy	3	0.06%	\$2,493	0.09%
Occupational Therapy	7	0.14%	\$2,489	0.09%
Psychotherapy	6	0.12%	\$2,208	0.08%
Diabetic Instruction	2	0.04%	\$1,552	0.06%
Bone Density Test	6	0.12%	\$1,012	0.04%
Immunization	11	0.21%	\$546	0.02%
Home Health Aide	1	0.02%	\$522	0.02%
Flu Vaccine	17	0.33%	\$440	0.02%
Insured Routine Exam	3	0.06%	\$251	0.01%
Medical Records	1	0.02%	\$220	0.01%
Exam	1	0.02%	\$75	0.00%
Oxygen	1	0.02%	\$40	0.00%
Cardiac Rehab	1	0.02%	\$0	0.00%
Education Training	2	0.04%	\$0	0.00%
Ineligible Services	245	4.73%	\$0	0.00%
Prescription Drugs	1	0.02%	\$0	0.00%
Spouse Routine Exam	1	0.02%	\$0	0.00%
Stool, Occult Blood	1	0.02%	\$0	0.00%
Total	5,177	100.00%	\$2,691,094	100.00%

Inpatient Summary: OCT2012 to MAR2013

Hospital	Admits	BedDays	Avg LOS	TotalPaid	Paid per Admit	Paid per Day	% of Admits	% of Paid
DEL SOL CAMP LPDSH	15	59	3.9	\$472,813	\$31,521	\$8,014	13.16%	26.63%
LAS PALMAS CAMP LPSDH	22	68	3.1	\$292,308	\$13,287	\$4,299	19.30%	16.47%
PROVIDENCE MEMORIAL HOSPITAL	22	57	2.6	\$226,546	\$10,298	\$3,974	19.30%	12.76%
SIERRA MEDICAL CENTER	11	35	3.2	\$219,869	\$19,988	\$6,282	9.65%	12.39%
EL PASO CHILDRENS HOSPITAL	5	33	6.6	\$183,494	\$36,699	\$5,560	4.39%	10.34%
SIERRA PROVIDENCE EAST MEDICAL CENTER	9	16	1.8	\$104,206	\$11,578	\$6,513	7.89%	5.87%
UNIVERSITY MEDICAL CENTER OF EL PASO	18	59	3.3	\$87,629	\$4,868	\$1,485	15.79%	4.94%
FOUNDATION SURGICAL HOSPITAL OF EL PASO	3	5	1.7	\$61,345	\$20,448	\$12,269	2.63%	3.46%
EL PASO SPECIALTY HOSPITAL	2	7	3.5	\$37,980	\$18,990	\$5,426	1.75%	2.14%
COOK CHILDRENS MEDICAL CENTER	1	2	2	\$27,611	\$27,611	\$13,805	0.88%	1.56%
SCOTTSDALE HEALTHCARE ADULT DAY SERVICES	1	3	3	\$25,016	\$25,016	\$8,339	0.88%	1.41%
UNIVERSITY BEHAVIORAL HEALTH OF EL PASO LLC	3	38	12.7	\$23,130	\$7,710	\$609	2.63%	1.30%
PEAK BEHAVIORAL HEALTH SERVICES LLC	1	24	24	\$12,126	\$12,126	\$505	0.88%	0.68%
CONROE REGIONAL MED CTR	1	5	5	\$1,156	\$1,156	\$231	0.88%	0.07%
TOTAL	114	411	3.6	\$1,775,228	\$15,572	\$4,319	100.00%	100.00%

<i>Emergency Room:</i>	<i>OCT2012 - MAR2013</i>	<i>2011 Index</i>
<i>Number of Patients</i>	259	
<i>Number of Visits</i>	308	
<i>Visits Per Member*</i>	0.15	14.3
<i>Average Paid per Visit</i>	\$1,158	\$1,404
<i>Admits per Visit</i>	0.12	0.18

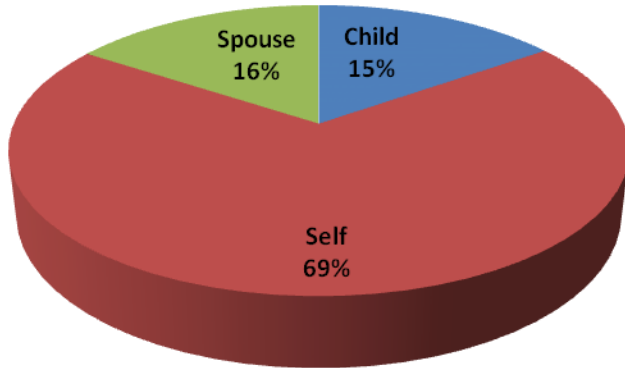
ER Visits



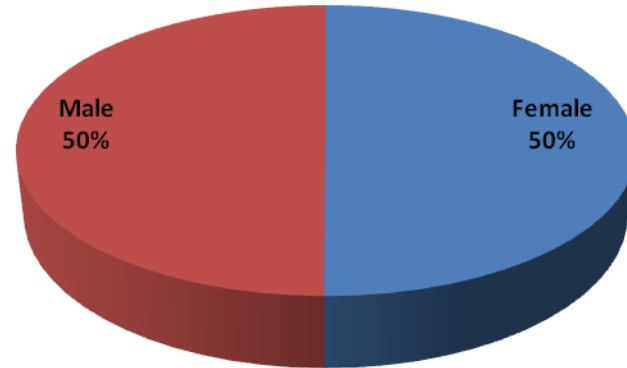
- Cost breakdown by Gender and Relationship
- Dental Breakdown
- Network Utilization

Patient Type	Patient Relationship	# Members	# Patients	# Claims	ER Visits	Admits	Inpatient Paid	Outpatient Paid	PCP Paid	Specialist Paid	Other Paid	Total Paid
Child	Child	1,286	844	4,197	102	33	\$222,053	\$248,261	\$133,422	\$245,808	\$15,531	\$865,074
Self	Insured	2,412	1,701	13,131	169	65	\$1,144,460	\$1,375,226	\$173,506	\$1,171,366	\$39,745	\$3,904,303
Spouse	Husband	65	48	502	1	4	\$58,692	\$77,820	\$7,568	\$60,515	\$1,951	\$206,546
	Wife	241	229	2,072	36	12	\$186,062	\$288,313	\$21,577	\$184,094	\$7,406	\$687,454
		306	277	2,574	37	16	\$244,755	\$366,133	\$29,145	\$244,610	\$9,357	\$894,000
Female		1,825	1,422	10,917	150	63	\$701,710	\$1,002,440	\$162,222	\$942,113	\$27,384	\$2,835,869
Male		2,178	1,400	8,985	158	51	\$909,557	\$987,180	\$173,852	\$719,671	\$37,248	\$2,827,508
Total:		4,003	2,822	19,902	308	114	\$1,611,267	\$1,989,620	\$336,073	\$1,661,784	\$64,632	\$5,663,377

Percent Paid by Relationship



Percent Paid by Gender



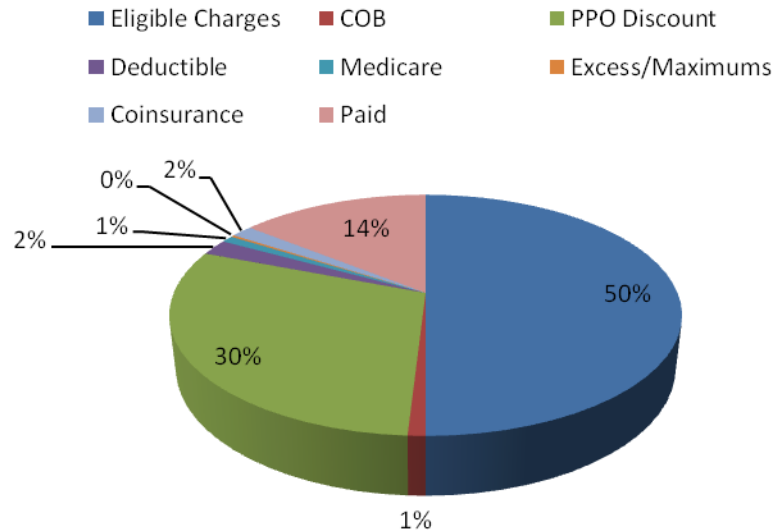
Cost Distribution

Paid Dollar Range	# of Members	% of Members	# of Claims	% of Claims	Total Paid	% of Paid
\$1,000.01 Plus	48	1.92%	257	12.67%	\$64,658	24.07%
\$750.01 - \$1,000.00	25	1.00%	95	4.68%	\$22,356	8.32%
\$500.01 - \$750.00	60	2.40%	237	11.68%	\$36,622	13.63%
\$250.01 - \$500.00	137	5.48%	377	18.58%	\$47,300	17.61%
\$0.01 - \$250.00	751	30.05%	1,046	51.55%	\$97,669	36.36%
\$0.00	1,478	59.14%	17	0.84%	\$0	0.00%
Total	2,499	100.00%	2,029	100.00%	\$268,605	100.00%

Dental Patient Demographics

Patient Type	Patient Relationship	# Members	# Patients	# Claims	Total Paid
Child	Child	661	328	686	\$74,446
Self	Insured	1,534	597	1,254	\$148,923
Spouse	Husband	133	54	138	\$17,907
	Wife	171	86	215	\$27,329
		304	140	353	\$45,236
Female		1,341	620	1,326	\$155,490
Male		1,158	445	967	\$113,116
Total:		2,499	1,065	2,293	\$268,605

Category	Dollars	% of Eligible
Eligible Charges	\$19,883,680	100.00%
COB	\$370,341	1.90%
PPO Discount	\$11,907,253	59.90%
Deductible	\$846,710	4.30%
Medicare	\$357,063	1.80%
Excess/Maximums	\$104,735	0.50%
Coinsurance	\$634,200	3.20%
Paid	\$5,663,377	28.50%



The County of El Paso

December 2011

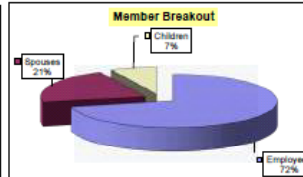




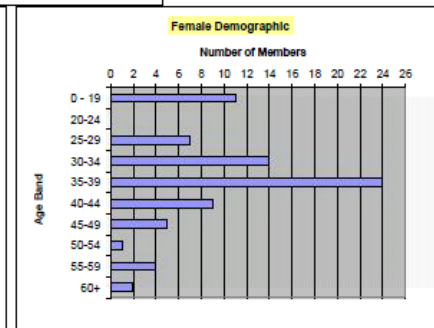
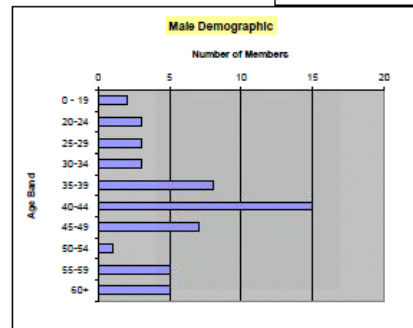
CHOICE CONSULTING-EAP SERVICES
THE EL PASO COUNTY REPORTS
DEMOGRAPHIC REPORT 2011

Demographics	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Employees	5	8	5	5	5	8	11	12	13	8	5	10	95
Spouses	0	1	3	0	0	1	1	4	5	1	1	3	20
Children	2	4	1	2	1	1	1	0	0	0	1	1	14
Total	7	13	9	7	6	10	13	16	18	9	7	14	129
Males													
0 - 19	0	1	0	0	0	0	0	0	0	0	0	1	2
20-24	0	0	0	1	1	1	0	0	0	0	0	0	3
25-29	0	1	1	0	0	0	0	0	1	0	0	0	3
30-34	0	0	0	0	0	0	0	0	0	1	1	1	3
35-39	0	2	1	0	0	0	1	2	2	0	0	0	8
40-44	0	1	0	0	0	0	2	4	2	3	1	2	15
45-49	0	1	2	2	0	0	0	0	0	0	1	1	7
50-54	0	0	0	0	0	0	0	0	0	0	0	1	1
55-59	0	0	0	0	1	1	0	1	1	1	0	0	5
60+	0	0	0	0	1	1	1	1	1	0	0	0	5
Total	0	6	4	3	3	3	4	8	7	5	3	6	52
Females													
0 - 19	2	3	1	2	0	1	1	0	0	0	1	0	11
20-24	0	0	0	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	2	1	1	1	0	0	2	7
30-34	1	1	0	0	0	1	2	3	3	0	1	2	14
35-39	3	3	3	0	1	2	2	2	3	2	2	1	24
40-44	0	0	0	0	0	0	1	1	3	2	0	2	9
45-49	0	0	1	2	1	0	1	0	0	0	0	0	5
50-54	1	0	0	0	0	0	0	0	0	0	0	0	1
55-59	0	0	0	0	0	0	1	1	1	0	0	1	4
60+	0	0	0	0	1	1	0	0	0	0	0	0	2
Total	7	7	5	4	3	7	9	8	11	4	4	8	77

Male 2011 YTD	Count
0 - 19	2
20-24	3
25-29	3
30-34	3
35-39	8
40-44	15
45-49	7
50-54	1
55-59	5
60+	5



Female 2011 YTD	Count
0 - 19	11
20-24	0
25-29	7
30-34	14
35-39	24
40-44	9
45-49	5
50-54	1
55-59	4
60+	2

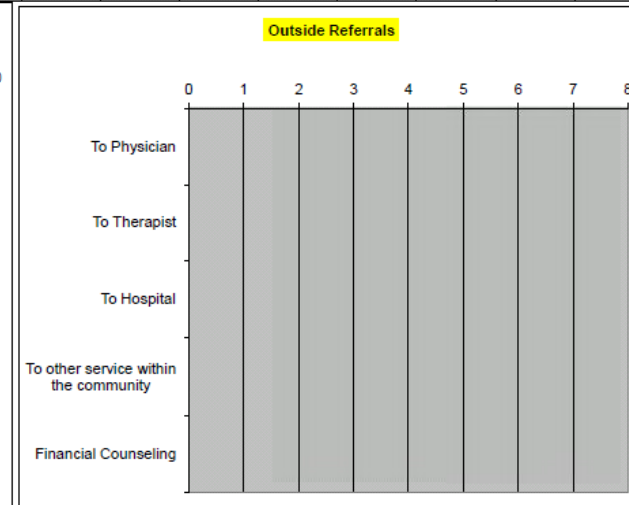
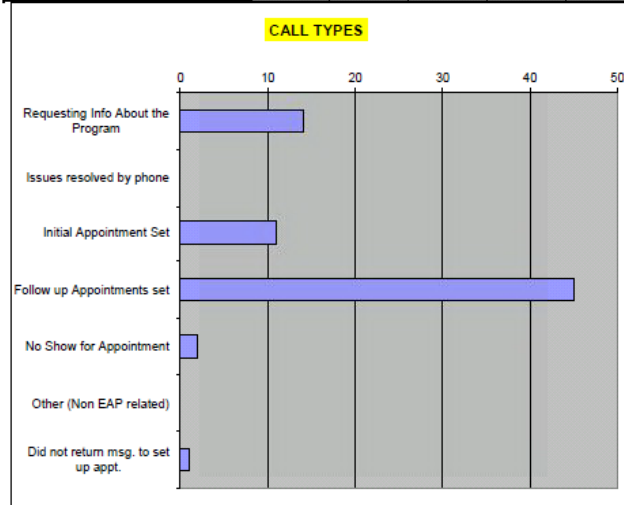




CHOICE CONSULTING-EAP SERVICES
THE EL PASO COUNTY REPORTS
Call Type and Referral Report 2011

Call Types	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Requesting Info About the Program	12	12	6	11	5	14	15	18	16	10	10	14	143
Issues resolved by phone	0	0	0	0	0	0	0	4	1	0	2	0	7
Initial Appointment Set	5	8	5	5	5	9	11	10	13	8	6	11	96
Follow up Appointments set	15	21	11	12	13	22	35	36	50	37	26	45	323
No Show for Appointment	2	2	0	0	0	0	0	2	3	3	0	2	14
Other (Non EAP related)	0	0	0	0	0	0	0	0	0	0	1	0	1
Did not return msg. to set up appt.	2	2	0	0	0	0	0	1	2	1	1	1	10
Total	36	45	22	28	23	45	61	71	85	59	46	73	594

Referrals	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
To Physician	0	0	0	0	0	0	0	0	0	0	0	0	0
To Therapist	1	0	0	0	0	0	2	0	0	0	0	0	3
To Hospital	0	0	0	0	0	0	0	0	0	0	0	0	0
To other service within the community	0	0	0	0	0	0	0	0	0	0	0	0	0
Financial Counseling	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	1	0	0	0	0	0	2	0	0	0	0	0	3

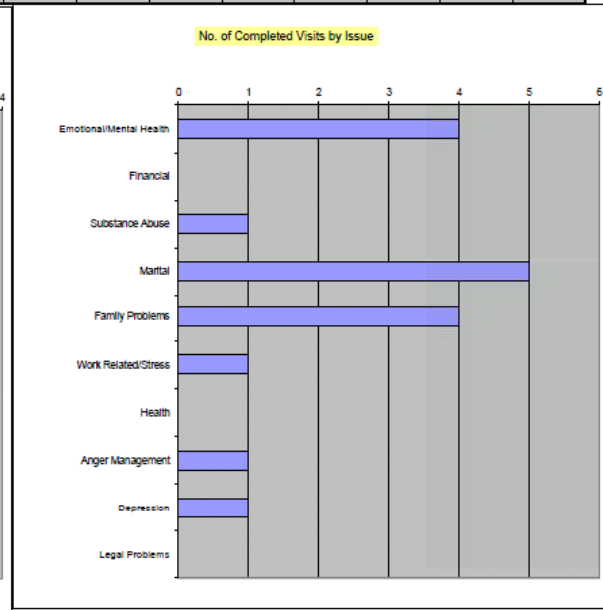
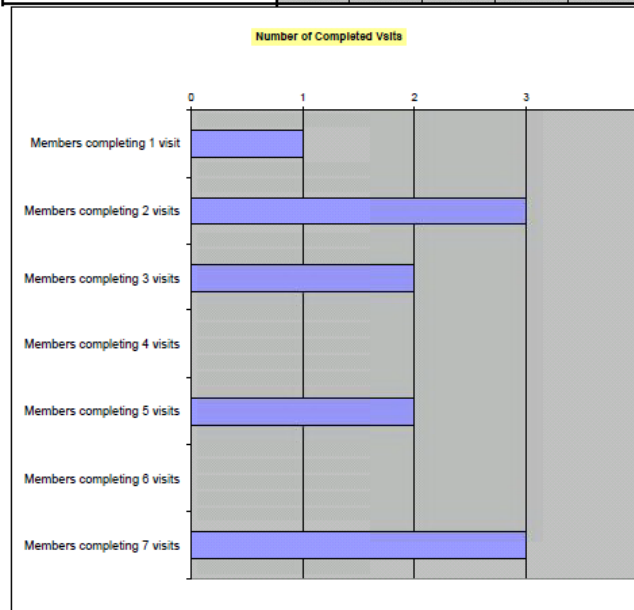




**CHOICE CONSULTING-EAP SERVICES
THE EL PASO COUNTY REPORTS
COMPLETED VISITS REPORT 2011**

Completed Visits	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Members completing 1 visit	2	4	2	1	2	1	1	3	1	0	0	1	18
Members completing 2 visits	1	0	1	2	0	4	4	3	2	0	0	3	40
Members completing 3 visits	0	2	1	1	2	1	3	0	1	2	1	2	48
Members completing 4 visits	1	1	1	1	0	1	0	3	3	0	1	0	48
Members completing 5 visits	0	0	0	0	1	2	1	3	4	2	0	2	75
Members completing 6 visits	1	1	0	0	0	0	2	0	1	0	4	0	54
Members completing 7 visits	0	0	0	0	0	0	0	0	0	1	0	3	28
Total	5	8	5	5	5	9	11	12	12	5	6	11	229

Completed Visits by Issue	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Emotional/Mental Health	2	4	3	3	3	8	8	5	8	5	5	4	58
Financial	0	0	0	0	0	0	0	0	0	1	0	0	1
Substance Abuse	0	0	0	0	0	0	0	0	1	0	0	1	2
Marital	3	4	3	1	2	4	3	7	7	2	4	5	45
Family Problems	2	2	2	2	0	3	4	1	3	2	2	4	27
Work Related/Stress	0	0	1	0	0	4	5	3	4	3	2	1	23
Health	0	0	0	0	0	1	0	0	0	0	0	0	1
Anger Management	1	1	0	0	0	0	2	1	0	0	0	1	6
Depression	3	3	0	0	1	1	3	2	1	1	2	1	18
Legal Problems	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	11	14	9	6	6	21	25	19	24	14	15	17	181





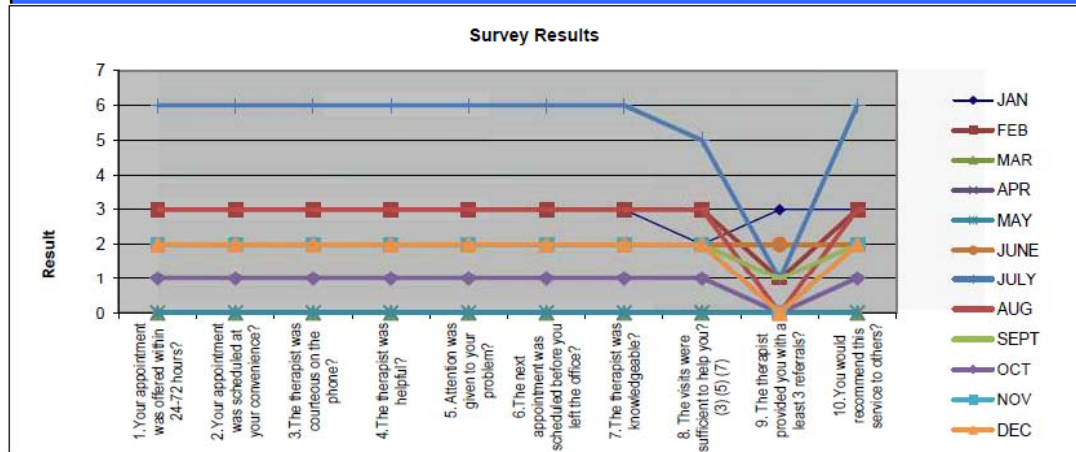
CHOICE CONSULTING- EAP SERVICES
1717 N. Brown St. Bld. 2-B
El Paso, Texas 79902
Office (915) 541-1140
Cell (915) 472-1140

EL PASO COUNTY
POINT OF SERVICE

SURVEY RESULTS

		2011												
		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Tot
# of respondents for	DECEMBER	3	3	0	0	0	2	6	3	2	1	2	2	24
# of employees seen?		7	13	9	5	6	10	13	16	18	21	7	16	141
QUESTION														TOT
1.	Your appointment was offered within 24-72 hours?	3	3	0	0	0	2	6	3	2	1	2	2	24
2.	Your appointment was scheduled at your convenience?	3	3	0	0	0	2	6	3	2	1	2	2	24
3.	The therapist was courteous on the phone?	3	3	0	0	0	2	6	3	2	1	2	2	24
4.	The therapist was helpful?	3	3	0	0	0	2	6	3	2	1	2	2	24
5.	Attention was given to your problem?	3	3	0	0	0	2	6	3	2	1	2	2	24
6.	The next appointment was scheduled before you left the office?	3	3	0	0	0	2	6	3	2	1	2	2	24
7.	The therapist was knowledgeable?	3	3	0	0	0	2	6	3	2	1	2	2	24
8.	The visits were sufficient to help you? (3) (5) (7)	2	3	0	0	0	2	5	3	2	1	2	2	22
9.	The therapist provided you with a least 3 referrals?	3	1	0	0	0	2	1	0	1	0	0	0	8
10.	You would recommend this service to others?	3	3	0	0	0	2	6	3	2	1	2	2	24

LEGEND Y = 1 N = 0 NA = 1 No Answer = Not Counted



COMMENTS:

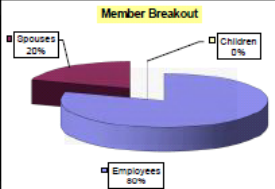
- #8 Even though I completed 7 visits would like to continue exploring "new" self. Mike is awesome!!
- I only have positive things to say about my experience. My process of grief wouldn't have been as half of tolerable if I wouldn't of had this help. Thank you so much.



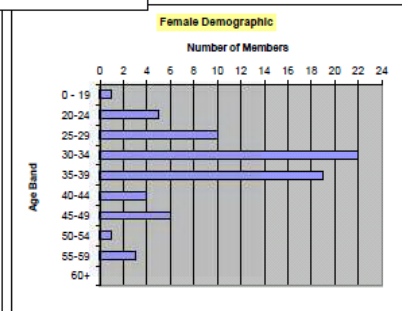
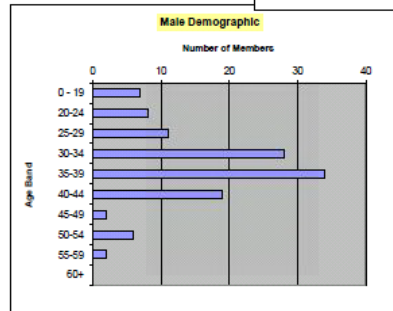
CHOICE CONSULTING-EAP SERVICES
THE EL PASO COUNTY-SHERIFF'S OFFICE REPORTS
DEMOGRAPHIC REPORT 2011

Demographics	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Employees	13	13	8	10	6	5	17	19	21	16	11	12	151
Spouses	2	3	1	1	0	0	4	5	4	2	1	3	26
Children	2	1	0	0	0	1	2	2	1	1	0	0	10
Total	17	17	9	11	6	6	23	26	26	19	12	15	187
Males													
0 - 19	0	0	0	0	0	1	2	2	1	1	0	0	7
20-24	1	0	0	0	0	2	0	1	2	0	1	1	8
25-29	2	1	0	2	0	0	2	0	0	1	1	2	11
30-34	2	3	2	1	2	1	3	3	4	3	2	2	28
35-39	5	4	3	3	1	0	5	3	4	4	0	2	34
40-44	0	0	1	2	1	0	3	3	2	2	3	2	19
45-49	0	0	1	0	0	0	0	0	0	0	0	1	2
50-54	0	0	0	1	1	0	0	1	1	0	1	1	6
55-59	0	0	0	0	0	0	0	1	1	0	0	0	2
60+	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	10	8	7	9	5	4	15	14	15	11	8	11	117
Females													
0 - 19	1	0	0	0	0	0	0	0	0	0	0	0	1
20-24	1	1	0	0	0	0	0	0	0	0	1	2	5
25-29	0	2	1	0	0	0	1	2	1	2	1	0	10
30-34	1	2	1	1	1	1	3	5	4	2	1	0	22
35-39	2	2	0	0	0	0	1	3	4	3	1	3	19
40-44	0	0	0	0	0	0	0	1	2	1	0	0	4
45-49	0	0	0	1	0	1	3	1	0	0	0	0	6
50-54	1	0	0	0	0	0	0	0	0	0	0	0	1
55-59	1	2	0	0	0	0	0	0	0	0	0	0	3
60+	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	7	9	2	2	1	2	8	12	11	8	4	5	71

Male	2011 YTD
0 - 19	7
20-24	8
25-29	11
30-34	28
35-39	34
40-44	19
45-49	2
50-54	6
55-59	2
60+	0



Female	2011 YTD
0 - 19	1
20-24	5
25-29	10
30-34	22
35-39	19
40-44	4
45-49	6
50-54	1
55-59	3
60+	0

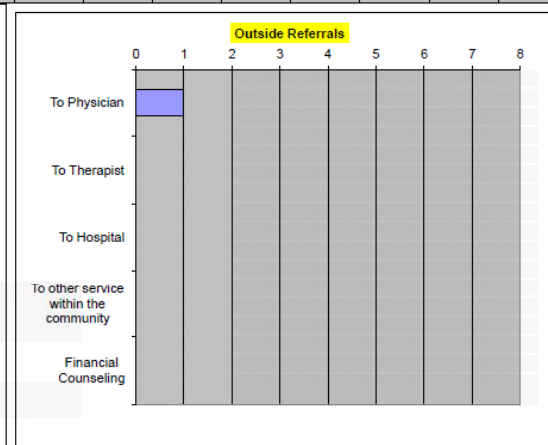
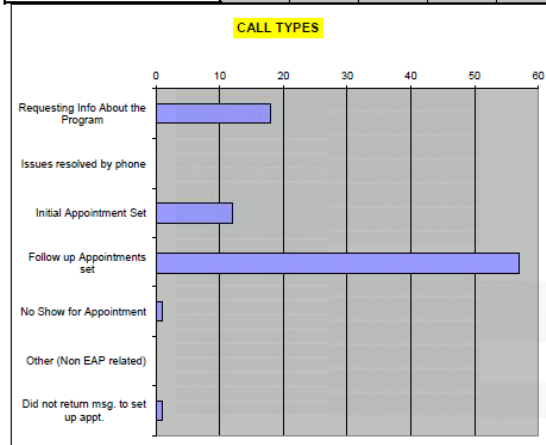




CHOICE CONSULTING-EAP SERVICES
THE EL PASO COUNTY- SHERIFF'S OFFICE REPORTS
Call Type and Referral Report 2011

Call Types	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Requesting Info About the Program	31	22	8	10	7	6	20	21	26	23	15	18	207
Issues resolved by phone	0	0	0	0	1	0	0	1	2	0	0	0	4
Initial Appointment Set	13	13	7	10	6	5	16	17	21	18	11	12	149
Follow up Appointments set	39	43	23	19	20	10	52	65	67	49	39	57	483
No Show for Appointment	2	2	3	0	0	0	0	3	1	5	2	1	19
Other (Non EAP related)	0	0	0	0	0	0	0	0	0	0	0	0	0
Did not return msg. to set up appt.	3	2	3	0	0	0	0	3	0	2	2	1	16
Total	88	82	44	39	34	21	88	110	117	97	69	89	878

Referrals	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
To Physician	0	0	0	0	0	0	0	0	0	0	0	1	1
To Therapist	1	2	0	0	0	0	1	1	0	0	0	0	5
To Hospital	0	0	0	0	0	0	0	0	0	0	1	0	1
To other service within the community	0	0	0	0	0	0	0	0	0	0	0	0	0
Financial Counseling	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	1	2	0	0	0	0	1	1	0	0	1	1	7

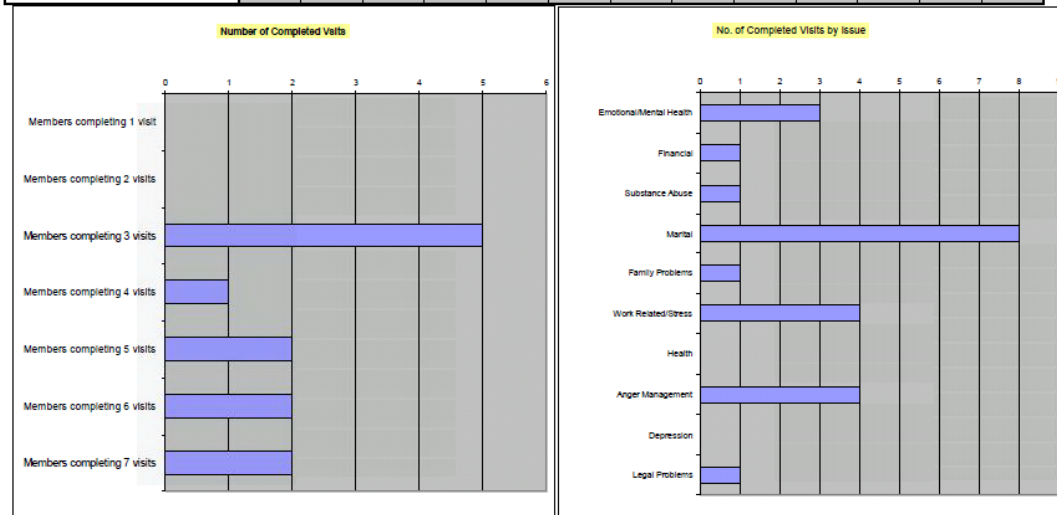




CHOICE CONSULTING-EAP SERVICES
THE EL PASO COUNTY- SHERIFF'S OFFICE REPORTS
COMPLETED VISITS REPORT 2011

Completed Visits	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Members completing 1 visit	0	1	0	1	1	3	1	1	3	3	3	0	17
Members completing 2 visits	4	3	0	6	1	1	5	3	6	0	1	0	60
Members completing 3 visits	3	3	4	1	2	1	4	4	4	8	1	5	120
Members completing 4 visits	4	3	2	0	1	0	2	2	1	2	2	1	80
Members completing 5 visits	0	1	0	1	1	0	1	2	2	3	3	2	80
Members completing 6 visits	0	2	2	1	0	0	2	3	3	0	0	2	75
Members completing 7 visits	1	1	0	0	0	0	1	1	1	0	1	2	40
Total	12	14	8	10	6	5	16	16	20	16	11	12	472

Completed Visits by Issue	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Emotional/Mental Health	7	7	7	4	5	2	9	11	16	7	5	3	83
Financial	0	0	0	0	0	0	0	0	0	0	0	1	1
Substance Abuse	0	2	2	0	0	1	3	1	1	1	1	1	13
Marital	5	5	3	1	0	0	6	8	6	4	4	8	50
Family Problems	3	0	0	2	2	0	2	3	4	4	0	1	21
Work Related/Stress	1	3	4	8	4	1	7	5	11	6	5	4	59
Health	0	0	0	0	0	0	0	0	0	0	0	0	0
Anger Management	0	1	3	0	0	0	5	4	3	3	4	4	27
Depression	1	2	0	0	1	1	2	1	0	1	2	0	11
Legal Problems	3	0	0	0	0	0	1	0	0	0	1	1	6
Total	20	20	19	15	12	5	35	33	41	26	22	23	271



EL PASO COUNTY
EMPLOYEE ASSISTANCE PROGRAM

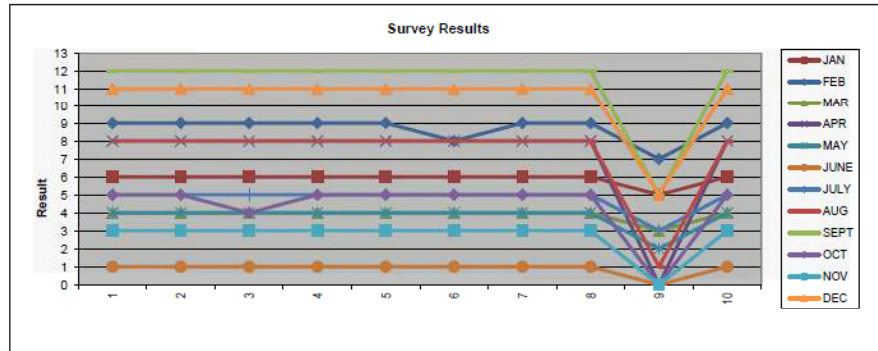


CHOICE CONSULTING- EAP SERVICES
1717 N. Brown St. Bld. 2-B
El Paso, Texas 79902
Office (915) 541-1140
Cell (915) 472-1140

POINT OF SERVICE
SHERIFF'S OFFICE
SURVEY RESULTS

	2011												
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Tot
# of respondents for DECEMBER	6	9	4	8	4	1	5	8	12	5	3	11	76
# of employees seen?	17	17	9	11	6	6	23	26	26	19	12	15	187
QUESTION	TOT												
1. Your appointment was offered within 24-72 hours?	6	9	4	8	4	1	5	8	12	5	3	11	76
2. Your appointment was scheduled at your convenience?	6	9	4	8	4	1	5	8	12	5	3	11	76
3. The therapist was courteous on the phone?	6	9	4	8	4	1	5	8	12	4	3	11	75
4. The therapist was helpful?	6	9	4	8	4	1	5	8	12	5	3	11	76
5. Attention was given to your problem?	6	9	4	8	4	1	5	8	12	5	3	11	76
6. The next appointment was scheduled before you left the office?	6	8	4	8	4	1	5	8	12	5	3	11	75
7. The therapist was knowledgeable?	6	9	4	8	4	1	5	8	12	5	3	11	76
8. The visits were sufficient to help you? (3) (5) (7)	6	9	4	8	4	1	5	8	12	5	3	11	76
9. The therapist provided you with a least 3 referrals?	5	7	3	0	2	0	3	1	5	0	0	5	31
10. You would recommend this service to others?	6	9	4	8	4	1	5	8	12	5	3	11	76

LEGEND Y = 1 N = 0 NA = 1 No Answer = Not Counted



COMMENTS:

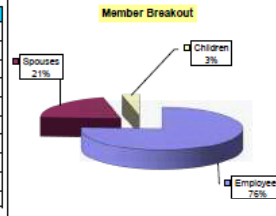
- Helped me a lot made realize I was not alone in this.
- Mr. McCormack was very helpful and knowledgeable to my situation.
- Mr. McCormack has been of great Help! Excellent Counselor, very knowledgeable and helpful.
- I really liked the way everything was explained to me to help me with my situation.
- Therapist was knowledgeable about giving me advice. Had good advice that helped me look at the same situation in a different aspect.
- Mike was great at helping
- Therapist is very knowledgeable he's kind hearted, likes one on one. I learned a lot even though he was not in a financial background.
- It helped me to think before teaching when something happens.
- No comments
- I recommend to officers, that need to be heard. Mike pays attention to your problems and answers you.
- Helpful, good resource for employees



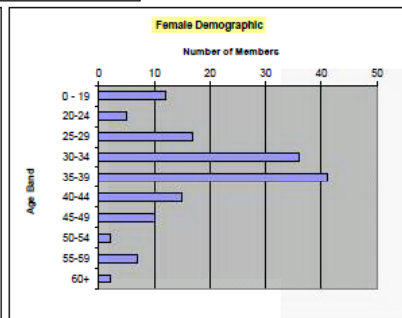
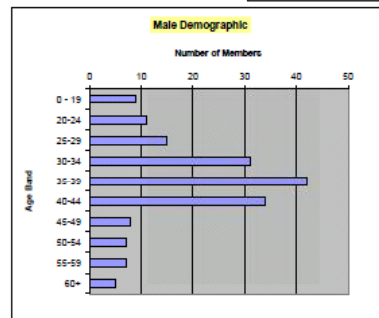
CHOICE CONSULTING-EAP SERVICES
THE COMPLETE EL PASO COUNTY REPORTS
DEMOGRAPHIC REPORT 2011

Demographics	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Employees	18	21	13	15	11	13	28	31	34	24	16	22	246
Spouses	2	4	4	1	1	1	5	9	9	3	2	6	47
Children	4	5	1	2	0	2	3	2	1	1	1	1	23
Total	24	30	18	18	12	16	36	42	44	28	19	29	316
Males													
0 - 19	0	1	0	0	0	1	2	2	1	1	0	1	9
20-24	1	0	0	1	1	2	0	1	2	1	1	1	11
25-29	2	2	2	2	0	1	2	0	1	0	1	2	15
30-34	2	3	2	1	2	1	3	3	4	4	3	3	31
35-39	5	6	4	3	1	0	6	5	6	4	0	2	42
40-44	0	1	1	2	1	0	5	7	4	5	4	4	34
45-49	0	1	2	2	0	0	0	0	0	0	1	2	8
50-54	0	0	0	1	1	0	0	1	1	0	1	2	7
55-59	0	0	0	0	1	1	0	2	2	1	0	0	7
60+	0	0	0	0	1	1	1	1	1	0	0	0	5
Total	10	14	11	12	8	7	19	22	22	16	11	17	169
Females													
0 - 19	3	3	1	2	0	1	1	0	0	0	1	0	12
20-24	1	1	0	0	0	0	0	0	0	0	1	2	5
25-29	0	2	1	0	0	2	2	3	2	2	1	2	17
30-34	2	3	1	1	1	2	5	8	7	2	2	2	36
35-39	5	5	3	0	1	2	4	5	7	5	1	3	41
40-44	0	0	0	0	0	0	1	2	5	3	2	2	15
45-49	0	0	1	3	1	1	3	1	0	0	0	0	10
50-54	2	0	0	0	0	0	0	0	0	0	0	0	2
55-59	1	2	0	0	0	0	1	1	1	0	0	1	7
60+	0	0	0	0	1	1	0	0	0	0	0	0	2
Total	14	16	7	6	4	9	17	20	22	12	8	12	147

Male	2011 YTD
0 - 1	9
20-2	11
25-2	15
30-3	31
35-3	42
40-4	34
45-4	8
50-5	7
55-5	7
60+	5



Female	2011 YTD
0 - 19	12
20-24	5
25-29	17
30-34	36
35-39	41
40-44	15
45-49	10
50-54	2
55-59	7
60+	2

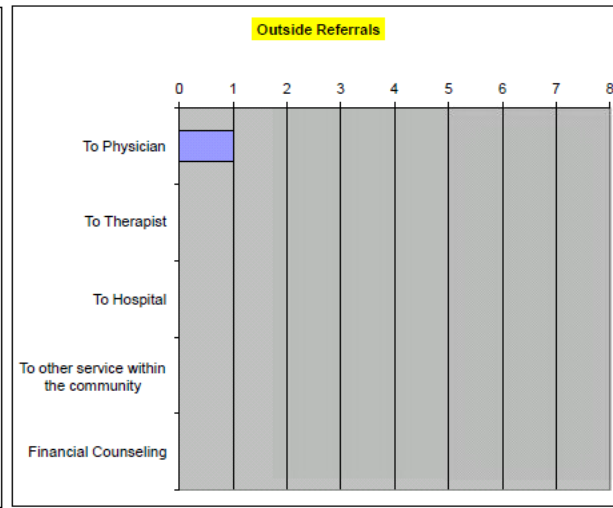
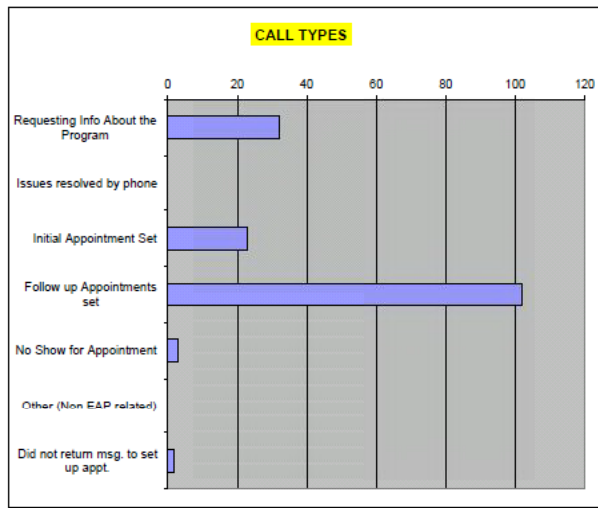




CHOICE CONSULTING-EAP SERVICES
THE COMPLETE EL PASO COUNTY REPORTS
Call Type and Referral Report 2011

Call Types	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Requesting Info About the Program	43	34	14	21	12	20	35	39	42	33	25	32	350
Issues resolved by phone	0	0	0	0	0	0	0	5	3	0	0	0	8
Initial Appointment Set	18	21	12	15	11	14	27	27	34	26	17	23	245
Follow up Appointments set	54	64	34	31	33	32	87	101	117	86	65	102	806
No Show for Appointment	4	4	3	0	0	0	0	5	4	8	3	3	34
Other (Non EAP related)	0	0	0	0	0	0	0	0	0	0	0	0	0
Did not return msg. to set up appt.	5	4	3	0	0	0	0	4	2	3	3	2	26
Total	124	127	66	67	56	66	149	181	202	156	113	162	1469

Referrals	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
To Physician	0	0	0	0	0	0	0	0	0	0	0	1	1
To Therapist	2	2	0	0	0	0	2	1	0	0	1	0	8
To Hospital	0	0	0	0	0	0	0	0	0	0	1	0	1
To other service within the community	0	0	0	0	0	0	0	0	0	0	0	0	0
Financial Counseling	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	2	2	0	0	0	0	2	1	0	0	0	1	10

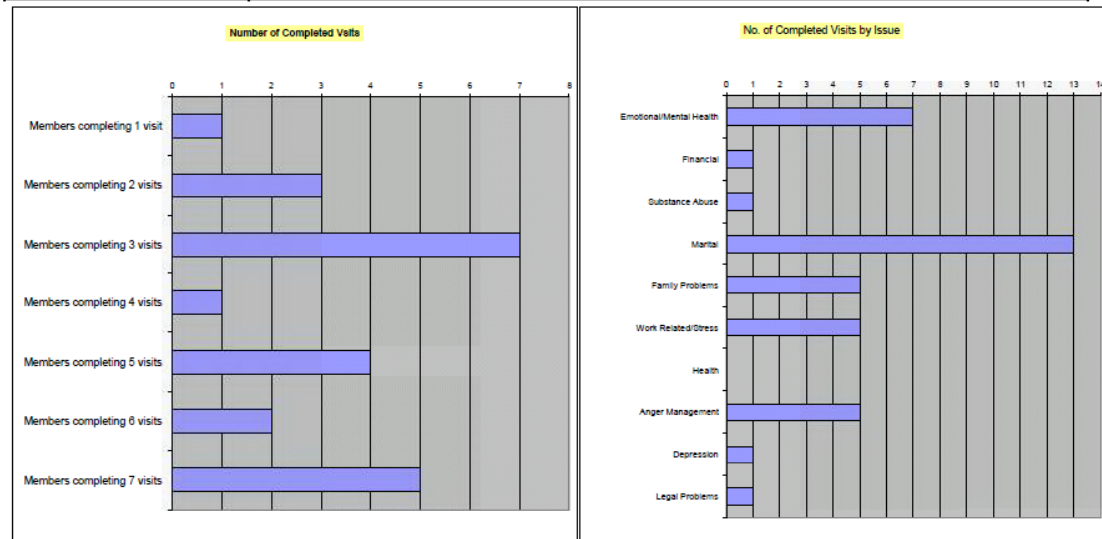




CHOICE CONSULTING-EAP SERVICES
THE COMPLETE EL PASO COUNTY REPORTS
COMPLETED VISITS REPORT 2011

Completed Visits	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Members completing 1 visit	2	5	2	2	3	4	2	4	4	3	3	1	35
Members completing 2 visits	5	3	1	8	1	5	9	6	8	0	1	3	100
Members completing 3 visits	3	5	5	2	4	2	7	4	5	10	2	7	168
Members completing 4 visits	5	4	3	1	1	1	2	5	4	2	3	1	128
Members completing 5 visits	0	1	0	1	2	2	2	5	6	5	3	4	155
Members completing 6 visits	1	3	2	1	0	0	4	3	4	0	4	2	144
Members completing 7 visits	1	1	0	0	0	0	1	1	1	1	1	5	84
Total	17	22	13	15	11	14	27	28	32	21	17	23	814

Completed Visits by Issue	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Emotional/Mental Health	9	11	10	7	8	10	17	16	24	12	10	7	141
Financial	0	0	0	0	0	0	0	0	0	1	0	1	2
Substance Abuse	0	2	2	0	0	1	3	1	2	1	1	1	14
Marital	8	9	6	2	2	4	9	15	13	6	8	13	95
Family Problems	5	2	2	4	2	3	6	4	7	6	2	5	48
Work Related/Stress	1	3	5	8	4	5	12	8	15	9	2	5	77
Health	0	0	0	0	0	1	0	0	0	0	0	0	1
Anger Management	1	2	3	0	0	0	7	5	3	3	4	5	33
Depression	4	5	0	0	2	2	5	3	1	2	4	1	29
Legal Problems	3	0	0	0	0	0	1	0	0	0	1	1	6
Total	31	34	28	21	18	26	60	52	65	40	32	39	446



EL PASO COUNTY
EMPLOYEE ASSISTANCE PROGRAM



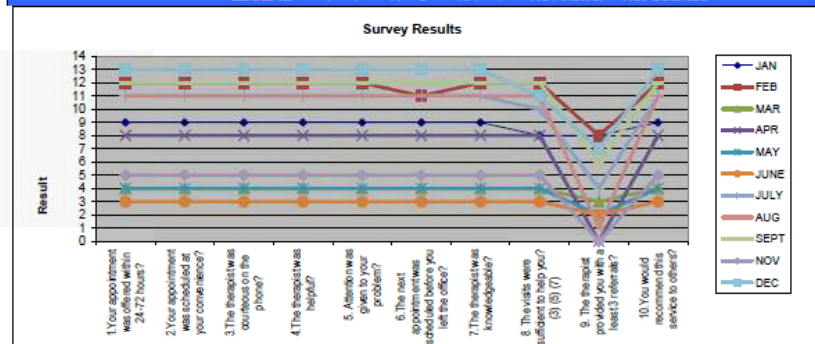
CHOICE CONSULTING- EAP SERVICES
1717 N. Brown St. Bld. 2-B
El Paso, Texas 79902
Office (915) 541-1140
Cell (915) 472-1140

ALL EL PASO COUNTY
POINT OF SERVICE

SURVEY RESULTS
2011

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Tot
# of respondents for DECEMBER	9	12	4	8	4	3	11	11	12	6	5	13	98
# of employees seen?	24	30	18	18	11	10	36	42	44	28	19	29	309
QUESTION	TOT												
1. Your appointment was offered within 24-72 hours?	9	12	4	8	4	3	11	11	12	6	5	13	98
2. Your appointment was scheduled at your convenience?	9	12	4	8	4	3	11	11	12	6	5	13	98
3. The therapist was courteous on the phone?	9	12	4	8	4	3	11	11	12	5	5	13	97
4. The therapist was helpful?	9	12	4	8	4	3	11	11	12	6	5	13	98
5. Attention was given to your problem?	9	12	4	8	4	3	11	11	12	6	5	13	98
6. The next appointment was scheduled before you left the office?	9	11	4	8	4	3	11	11	12	6	5	13	97
7. The therapist was knowledgeable?	9	12	4	8	4	3	11	11	12	6	5	13	98
8. The visits were sufficient to help you? (3) (5) (7)	0	12	4	0	4	0	10	11	12	0	5	11	94
9. The therapist provided you with a least 3 referrals?	8	8	3	0	2	2	4	1	6	0	0	7	41
10. You would recommend this service to others?	9	12	4	8	4	3	11	11	12	6	5	13	98

LEGEND Y = 1 N = 0 NA = 1 No Answer = Not Counted



COMMENTS:

- Helped me a lot made realize I was not alone in this.
- Mr. McCormack was very helpful and knowledgeable to my situation.
- Mr. McCormack has been of great Help! Excellent Counselor, very knowledgeable and helpful.
- I really liked the way everything was explained to me to help me with my situation.
- Therapist was knowledgeable about giving me advice. Had good advice that helped me look at the same situation in a different aspect.
- Mike was great at helping
- Therapist is very knowledgeable he's kind hearted, likes one on one. I learned a lot even though he was not in a financial background.
- It helped me to think before teaching when something happens.
- No comments
- I recommend to officers, that need to be heard. Mike pays attention to your problems and answers you.
- Helpful, good resource for employees
- #8 Even though I completed 7 visits would like to continue exploring "new"self. Mike is awesome!!
- I only have positive things to say about my experience. My process of grief wouldn't have been half as tolerable if I wouldn't of had this help. Thank you so much.

The County of El Paso

December 2012

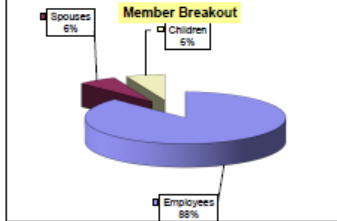




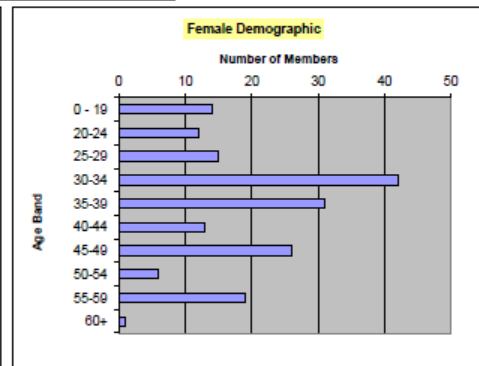
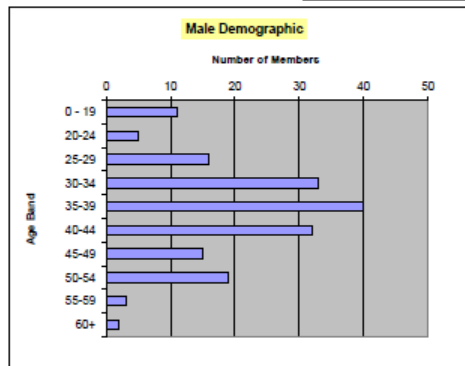
CHOICE CONSULTING-EAP SERVICES
THE COMPLETE EL PASO COUNTY REPORTS
DEMOGRAPHIC REPORT 2012

Demographic	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Employees	30	25	24	23	20	21	19	17	21	17	14	257
Spouses	5	8	7	4	4	5	13	10	8	5	3	71
Children	5	7	3	5	3	1	0	0	1	1	1	27
Total	36	45	35	33	30	26	34	29	23	27	21	355
Males												
0 - 19	2	3	2	1	0	0	0	0	1	1	1	11
20-24	1	1	1	0	0	0	1	0	0	0	0	5
25-29	0	2	2	1	2	1	1	0	2	2	2	16
30-34	3	4	2	3	2	1	3	3	2	4	4	33
35-39	2	1	3	5	5	5	5	5	3	2	3	40
40-44	4	7	5	2	2	1	0	3	3	1	1	32
45-49	1	3	1	2	1	1	3	2	1	0	0	15
50-54	3	3	1	0	2	1	3	3	1	0	1	19
55-59	0	0	0	0	0	0	0	0	1	1	1	3
60+	0	0	0	1	0	0	0	0	0	0	0	2
Total	16	24	17	15	14	10	16	17	10	14	13	176
Females												
0 - 19	2	3	1	4	3	1	0	0	0	0	0	14
20-24	2	0	0	0	1	1	2	2	1	2	0	12
25-29	3	3	2	2	1	1	1	0	0	1	0	15
30-34	4	5	5	2	3	3	4	3	2	6	5	42
35-39	1	4	3	5	2	4	4	0	3	2	1	31
40-44	5	2	1	0	0	0	2	2	1	0	0	13
45-49	1	2	4	3	2	3	2	3	1	1	1	26
50-54	1	0	0	0	0	0	2	2	0	0	0	6
55-59	1	2	2	2	4	3	0	1	3	1	0	19
60+	0	0	0	0	0	0	0	0	0	0	1	1
Total	20	21	18	18	16	16	18	12	13	13	8	179

Age Band	2012 YTD
0 - 19	11
20-24	5
25-29	16
30-34	33
35-39	40
40-44	32
45-49	15
50-54	19
55-59	3
60+	2



Age Band	2012 YTD
0 - 19	14
20-24	12
25-29	15
30-34	42
35-39	31
40-44	13
45-49	26
50-54	6
55-59	19
60+	1

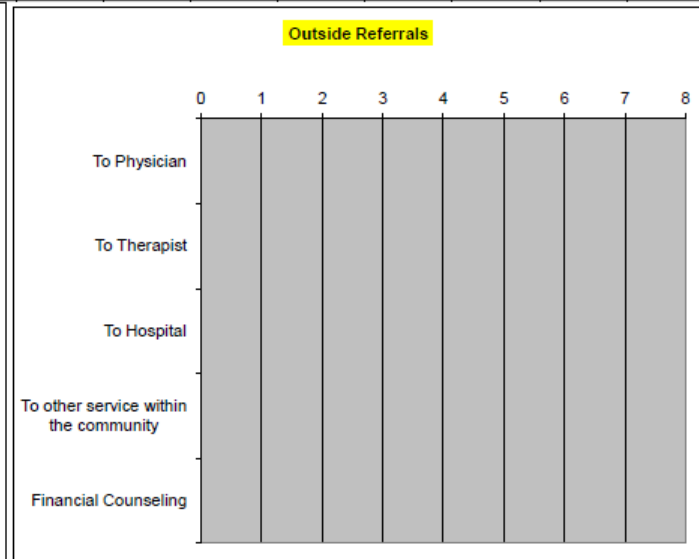
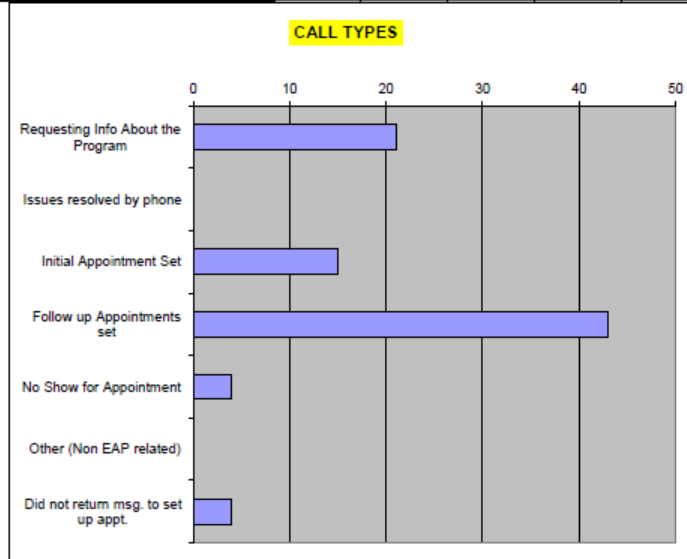




CHOICE CONSULTING-EAP SERVICES
THE COMPLETE EL PASO COUNTY REPORTS
Call Type and Referral Report 2012

Call Types	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Requesting Info About the Program	51	47	27	45	30	32	37	35	30	39	30	21	424
Issues resolved by phone	1	1	1	1	0	1	1	2	3	0	0	0	11
Initial Appointment Set	28	30	25	24	22	19	22	20	17	21	17	15	260
Follow up Appointments set	66	103	87	73	71	73	67	74	54	73	67	43	851
No Show for Appointment	4	8	4	3	8	5	7	5	1	7	2	4	58
Other (Non EAP related)	0	0	0	0	0	0	0	0	0	0	0	0	0
Did not return msg. to set up appt.	4	8	4	3	8	3	7	5	1	7	2	4	56
Total	154	197	148	149	139	133	141	141	106	147	118	87	1660

Referrals	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
To Physician	0	0	0	0	0	0	0	1	0	0	0	0	1
To Therapist	0	0	2	0	0	0	0	2	1	0	0	0	5
To Hospital	0	1	0	0	0	0	0	0	0	0	0	0	1
To other service within the community	0	0	0	0	0	0	0	0	0	0	0	0	0
Financial Counseling	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	0	1	2	0	0	0	0	3	1	0	0	0	7

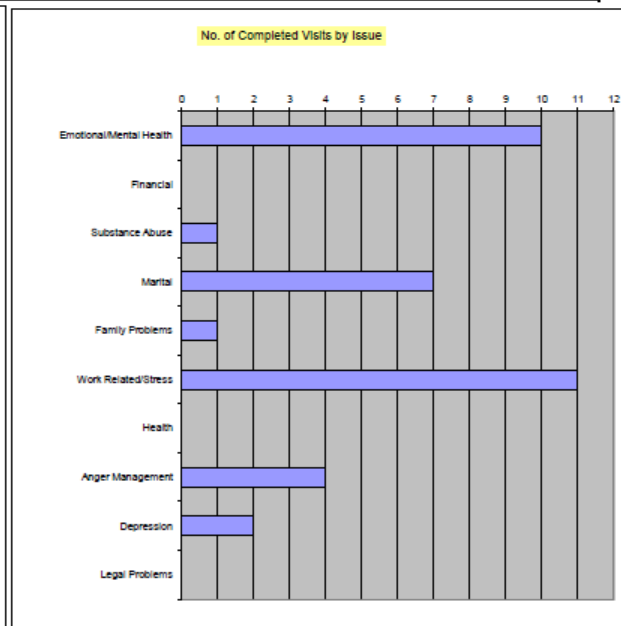
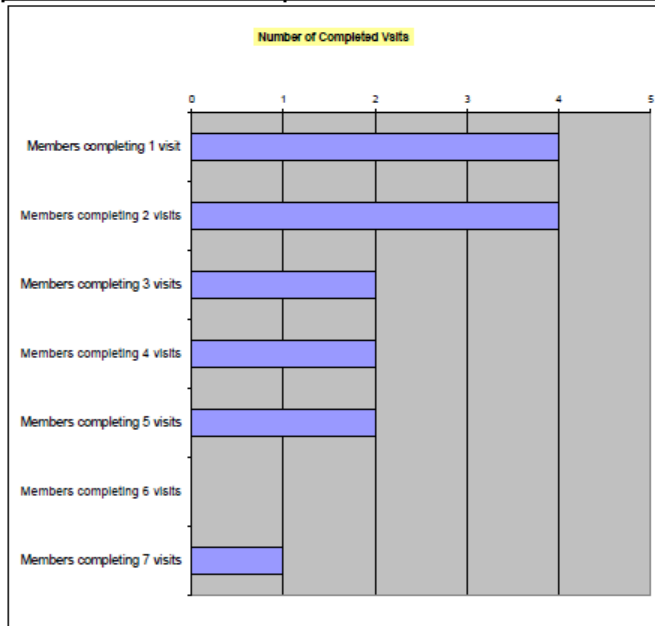




CHOICE CONSULTING-EAP SERVICES
THE COMPLETE EL PASO COUNTY REPORTS
COMPLETED VISITS REPORT 2012

Completed Visits	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Members completing 1 visit	8	0	6	2	4	3	6	3	3	2	2	4	43
Members completing 2 visits	7	10	4	11	6	4	7	2	4	3	3	4	130
Members completing 3 visits	6	6	4	2	4	3	0	4	2	4	3	2	120
Members completing 4 visits	6	4	2	2	4	3	5	2	4	5	3	2	168
Members completing 5 visits	0	5	1	5	3	4	2	3	3	4	3	2	175
Members completing 6 visits	0	3	5	0	2	0	3	3	0	2	1	0	114
Members completing 7 visits	0	0	3	0	1	4	1	2	1	1	2	1	112
Total	27	28	25	22	24	21	24	19	17	21	17	15	636

Completed Visits by Issue	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Emotional/Mental Health	19	18	18	18	12	11	5	12	11	12	6	10	152
Financial	0	0	0	0	0	0	0	0	0	0	0	0	0
Substance Abuse	0	1	1	0	10	0	0	2	1	2	2	1	20
Marital	11	18	16	5	3	7	16	11	5	7	3	7	109
Family Problems	11	7	3	4	8	4	0	2	1	1	2	1	44
Work Related/Stress	6	6	9	7	2	5	1	7	6	9	4	11	73
Health	0	0	0	2	0	1	1	1	0	2	1	0	8
Anger Management	2	2	2	3	3	2	4	2	3	1	4	4	32
Depression	1	5	2	7	4	3	0	3	3	3	3	2	36
Legal Problems	0	1	0	0	1	1	0	0	0	0	0	0	3
Total	50	58	51	46	43	34	27	9	30	37	25	36	477





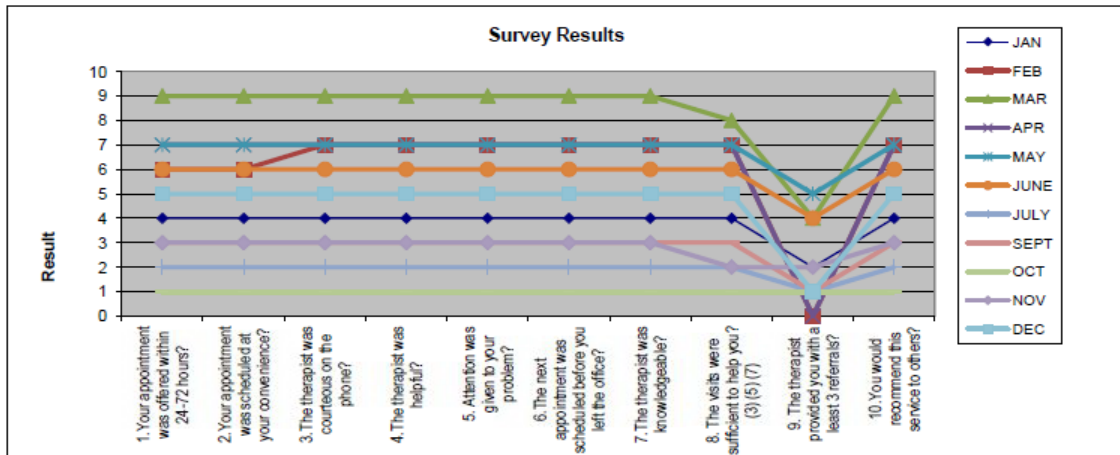
CHOICE CONSULTING- EAP SERVICES
1717 N. Brown St. Bld. 2-B
El Paso, Texas 79902
Office (915) 541-1140
Cell (915) 472-1140

**ALL EL PASO COUNTY
POINT OF SERVICE**

**SURVEY RESULTS
2012**

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Tot
# of respondents for DECEMBER	4	7	9	7	7	6	2	9	3	1	3	5	63
# of employees seen?	36	45	35	33	30	26	34	29	23	27	21	16	355
QUESTION	TOT												
1. Your appointment was offered within 24-72 hours?	4	6	9	7	7	6	2	9	3	1	3	5	62
2. Your appointment was scheduled at your convenience?	4	6	9	7	7	6	2	9	3	1	3	5	62
3. The therapist was courteous on the phone?	4	7	9	7	7	6	2	9	3	1	3	5	63
4. The therapist was helpful?	4	7	9	7	7	6	2	9	3	1	3	5	63
5. Attention was given to your problem?	4	7	9	7	7	6	2	9	3	1	3	5	63
6. The next appointment was scheduled before you left the office?	4	7	9	7	7	6	2	9	3	1	3	5	63
7. The therapist was knowledgeable?	4	7	9	7	7	6	2	9	3	1	3	5	63
8. The visits were sufficient to help you? (3) (5) (7)	4	7	8	7	7	6	2	9	3	1	2	5	61
9. The therapist provided you with a least 3 referrals?	2	0	4	0	5	4	1	4	1	1	2	1	25
10. You would recommend this service to others?	4	7	9	7	7	6	2	9	3	1	3	5	63

LEGEND Y = 1 N = 0 NA = 1 No Answer = Not Counted



COMMENTS:

1. I don't have anger issues but would recommend for someone who does.
2. Very good assistance on controlling my feelings and finding serenity. I am very proud of my therapist.
3. Good Therapist, - Didn't know of option.- might have helped years ago.
4. The counseling was very helpful, this is a great program in helping people!
5. Service was excellent and very professional overall.....

ADDENDUM #3
EMPLOYEE ASSISTANCE PROGRAM

Client wishes to provide access to an employee assistance program ("EAP") for all of its employees and for employee dependants. Contractor agrees to provide, or arrange for the provision of, EAP covered Services to County Employees and/or their Dependants in accordance with the terms of this agreement.

DEFINITIONS: All terms not defined herein shall be as defined in the Agreement, as amended, or in Client's 2012 Summary Plan Description

Employee: Any individual employed by the County of El Paso in either a fulltime, part time, temporary, or seasonal capacity and their Dependents.

Dependent: An Employee's lawfully married or common law spouse, or an Employee's child who is less than 26 years of age.

Employee Assistance Program (EAP): A comprehensive program that helps Employees resolve personal problems that may impact their work performance, conduct, health, and well-being.

EAP Network Provider: Behavioral health provider who is enrolled in Contractor's network of behavioral health care providers

Plan: The County Health Plan

Plan Participant: An Employee who is enrolled in the El Paso County Health Plan.

I. Participation in the Employee Assistance Program

A. Voluntary Contact Employees and/or their dependents may call EAP directly without having to notify the chain of command for help with a variety of issues including but not limited to:

1. Marriage/family;
2. Child/adolescent;
3. Mood and stress;
4. Drug/alcohol;
5. Anger management;
6. Budget/financial resources;
7. Critical incidents and critical incident follow-up;
8. Workplace concerns;
9. Referrals to Legal resources;
10. Illness or loss of a family member;
11. Emotional worries; or
12. Referrals to childcare resources.

B. Supervisor Referral—A supervisor who becomes aware that an employee has problems adversely affecting job performance or behavior related to the job may initiate a Supervisor Referral to EAP.

II. Confidentiality

A. EAP Network Providers shall not disclose to any third party, any medical record information regarding Employee or Dependents except where permitted or required by law, or where such disclosure is expressly approved by Employee, or as applicable, Dependent, in writing.

B. Contractor shall comply with all federal and state laws and regulations, and all bylaws, rules, regulations and policies of Client regarding confidentiality of such information.

C. An EAP counselor may release the following information to the County for employees who were required to contact EAP by a supervisor or manager:

1. Whether or not the referred employee scheduled an appointment as required;
2. Whether or not ongoing treatment is necessary for the referred employee;
3. Whether or not the referred employee is compliant with EAP recommendations; or
4. Whether or not the referred employee is fit for duty.

III. Employee Assistance Program Scope of Service

- A. Eligibility Determination – EAP is available to Employees and their Dependents. Client will be sole determiner of eligibility for EAP services. Client will provide Contractor an updated list of eligible employees at least on a quarterly basis.
- B. Counseling Sessions - Contractor will provide, or arrange for the provision of, telephonic and face-to-face mental health counseling to Employees and/or Dependents. Coverage includes up to eight (8) sessions per Employees and/or Dependents, per problem, per year. There is no limit to the number of problems a covered person may present each year. An EAP Network Provider may provide more than eight (8) sessions per problem per year, if the EAP Network Provider determines it is necessary. Assessments for homebound Employees or Dependents are available through the EAP.
- C. Financial Responsibility of Employee. The Employee shall be personally responsible for charges for services provided to an Employee or Dependent that do not fall within the scope of EAP services; for services provided by a non-EAP Network Provider; or for outside referrals by an EAP Network Provider.
- D. Employee Communication - Contractor will provide, or arrange for the provision of, initial Employee written communication, subject to the approval of the Client, informing Employees of the services to be provided through the Employee Assistance Program (EAP).
- E. Catastrophic Events – During and/or after a catastrophic event, Client may request EAP services at various locations within the County.
- F. Educational Materials - Contractor will provide, or arrange for the provision of, marketing or educational materials with pamphlets in English and Spanish depicting services, location and other details of services through the EAP.
- G. Website - Contractor will provide, or arrange for the provision of, a website available to Employees twenty-four (24) hours a day, seven (7) days a week, except for regularly scheduled and emergency maintenance performance on the website and exigencies not within the reasonable control of the provider.
- H. Licensing/Certification - Contractor will ensure that all principals, employees, and agents performing EAP services have all licenses, and/or certifications required to perform such services. EAP Network Providers providing services under this Agreement shall at all times be qualified, professionally competent, and duly licensed in Texas. EAP Network Providers providing services under this Agreement shall, at all times during the term of this Agreement, satisfy all State and federal certifications, regulations, or licensure requirements and render services under this Agreement in compliance with all applicable statutes, regulations, standards, rules, and directives of State, federal, and other applicable governmental and regulatory bodies. Contractor agrees to give immediate written notice to Client in the case of suspension or revocation, or initiation of any proceeding that could result in any change in the status, suspension or revocation, of such licensure, certification, or registration.
- I. Individual Reports – Contractor will provide, or arrange for the provision of, individual reports for employee referrals within 24 hours of each counseling session. The individual report will include at a minimum employee name, referral date, employee contact date, appointment dates, case status, and fit for duty.
- J. Statistical Reports – Contractor will provide, or arrange for the provision of, monthly statistical reports to include demographics, number of referrals and type, number of visits and issue, survey results.

IV. Employee Assistance Program Training

- A. Services provided to Client by EAP will include periodic employee orientation training and educational seminars, on a schedule to be agreed to by the parties.
- B. Supervisors will receive training in:
 - 1. Program services;
 - 2. Supervisor's role and responsibilities; and
 - 3. Identification of employee behaviors that indicate the existence of employee concerns, problems and/or issues that could impact employee job performance.

V. Compensation

- A. Client will pay no additional charge for EAP services for Plan Participants.
- B. EAP services for Employees and dependents not covered by the County Health Plan will be at a rate as provided in Addendum 1 to this Third Amendment.

**PARKING CONVERSION OR REIMBURSEMENT PLAN
Enrollment Form**

EMPLOYEE INFORMATION

Please print or type

NAME:	Last	First	MI
ADDRESS:	Street	City	State Zip
Date of Hire:			Effective Date:
COMPANY:	The County of El Paso Texas		SSN#:
PHONE:	()		

Please check if this is a new address.

Courthouse

Monthly Parking Fee: _____

MDR (Diversified Parking lot)

Monthly Parking Fee: _____

Reimbursement (BLK Parking lot)

Amount to be deducted per pay period: _____

EMPLOYEE ELECTION

I hereby **elect** **decline** to participate in Parking Plan agreeing to be bound by all the terms, conditions and limitations of the Plan and any and all separate plans, contracts and documents made a part thereof. I agree to have my gross salary reduced by the amount of the cost of my parking expenses. I understand that this amount will not be subject to Social Security or federal income tax withholding, which may result in a reduction of future Social Security benefits to which I may be entitled.

Signature of Employee

Date

HealthSCOPE Benefits
P. O. Box 350
Little Rock, AR 72203