CITY OF CHICAGO BENEFITS MANAGEMENT OFFICE

9/30/2011

ANNUITANT HEALTHCARE COSTS SUMMARY REPORT FOR 2010 BEFORE ERRP SUBSIDY

PART ONE - CLAIM COSTS

		MEDICAL CLAIMS COST					DRUG CLAIMS COST							
			A-1 through A-5*	k	B*	C*		D*	E*	F*				G*
GROUP	PERIOD	INCURRED FOR THE PERIOD AND PAID THROUGH 06/30/2011 (NET OF DISCOUNTS)	ESTIMATED BCBS OUTSTANDING INCURRED CLAIMS	OUTSTANDING INCURRED	CHARGE ON	SUBRO- GATION	SUBTOTAL MEDICAL COSTS	DRUG CLAIMS INCURRED/P AID IN THE PERIOD**	REBATE RECEIVED FOR THE PERIOD	MEDICARE PART D FOR MEDICARE SUBSIDIES	SUBTOTAL DRUG COST	TOTAL COSTS	2010 TOTAL COUNT OF PARTICIPANTS (FOR MEDICAL COSTS)	2010 TOTAL COUNT OF PARTICIPANTS (FOR DRUG COSTS)
Medicare	2010	,	\$380,994	\$228,793	(\$27,047)	(\$15,236)	\$36,042,892	\$44,089,764	(\$37,411)	(\$11,454,985)	\$32,597,368	\$68,640,260		260,142
Monthly Unit	2010			. ,	, , , , , , , , , , , , , , , , , , ,			. , ,	• • •		. , ,	. , ,	200,142	200,142
Cost/(Credit)		\$136.37	\$1.46	\$0.88	(\$0.10)	(\$0.06)	\$138.55	\$169.48	(\$0.14)	(\$44.03)	\$125.31	\$263.86		
Non-Medicare	2010	\$85,808,333	\$490,922	(\$135,874)	(\$2,796,427)	(\$201,828)	\$83,165,126	\$17,338,995	(\$22,248)		\$17,316,746	\$100,481,872	136,224	136,224
Monthly Unit Cost/(Credit)		\$629.91	\$3.60	(\$1.00)	(\$20.53)	(\$1.48)	\$610.50	\$127.28	(\$0.16)		\$127.12	\$737.62		
Children	2010	\$1,782,721	\$4,294	\$32,348			\$1,819,363	\$532,591	(\$683)		\$531,907	\$2,351,270	16,737	4,184
Monthly Unit Cost/(Credit)		\$106.51	\$0.26	\$1.93			\$108.70	\$31.82	(\$0.04)		\$31.78	\$140.48		
TOTAL		\$123,066,443	\$876,209	\$125,266	(\$2.823.473)	(\$217.065)	\$121,027,381	\$61,961,349	(\$60,342)	(\$11,454,985)	\$50,446,021	\$171,473,402	413,103	400,550

PART TWO - OTHER COSTS

			D*	G*	G*	
		ENCOMPASS SERVICE FEE/PAID IN THE PERIOD (FEE PER PRIMARY	CAREMARK OTHER COSTS	2010 TOTAL COUNT OF PRIMARY MEMBERS FOR ENCOMPASSS	2010 TOTAL COUNT OF PARTICIPAN TS (FOR DRUG SERVICE	
GROUP	PERIOD	MEMBER)	(FEE PER LIFE)	FEE	FEES)	
Medicare	2010	\$9,700.13	\$575,038	201,194	260,142	
Monthly Unit Cost/(Credit)		\$0.05	\$2.21			
Non-Medicare	2010	\$739,001	\$182,399	89,523	136,224	
Monthly Unit Cost/(Credit)		\$8.25	\$1.34			
Children Monthly Unit	2010	\$4,301	\$22,411	521	16,737	
Cost/(Credit)	_	\$8.25	\$1.34			
TOTAL		\$753,002	\$779,847	291,238	413,103	

PART THREE - UNIT FEE RATES

		BCBS ADMIN. FEE PER PRIMARY	CAREMARK MEDICARE PART D SERVICE FEE PER MEDICARE
GROUP	TIME PERIOD	MEMBER	LIFE
Medicare			
Monthly Unit			
Cost/(Credit)	2010	\$13.66	\$0.70
Non-Medicare			
Monthly Unit			
Cost/(Credit)	2010	\$27.00	\$0.00
Children			
Monthly Unit			
Cost/(Credit)	2010	\$27.00	\$0.00

* See the corresponding exhibits for details

** Due to the drug card, paid claims are assumed to be equal to incurred claims.