

080498



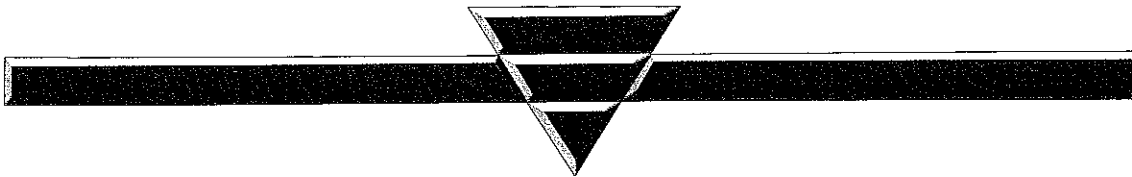
**BlueCross BlueShield
of Florida**

An Independent Licensee of the
Blue Cross and Blue Shield Association

CITY OF GAINESVILLE

ASO Renewal

01/01/2009



Marketing Team:

Sue Kelman, Strategic Account Executive
Jan Goess, Account Management Specialist

City of Gainesville Renewal Summary – 2009

	<u>Cost</u>	<u>PCPM</u>	<u>Increase over current</u>
Current Paid Claims & Capitation (09/1/2007 - 08/31/2008)	\$13,922,878	\$450.16	
2009 Projected Claims @ 14.5% trend for 16 months	\$16,678,216	\$539.24	19.8%

	<u>Cost</u>	<u>PCPM</u>	<u>BlueChoice</u>	<u>BlueOptions</u>
Estimated ASO Fees for 2008 - Composite	\$1,754,604	\$56.73	\$59.34	\$43.76
Estimated ASO Fees for 2009 - Composite	\$1,754,604	\$53.73	\$59.34	\$43.76
2009 Projected Total Cost	\$18,432,820			

	<u>Blue Choice Fees 2009 (+0%)</u>	<u>Blue Options Fees 2009 (+0%)</u>
Single	\$34.88	\$33.82
Family	\$80.22	\$77.81

Note: 2,577 contracts used.

\$286,729 in pharmacy rebates have been paid to the City of Gainesville to date in 2008.

Claims PCPM last renewal: \$427.50

Monitoring Report by Paid

Group Number: 16035
 Group Name: CITY OF GAINESVILLE
 Paid Period: 200709 Through 200808
 Product: BLUE OPTIONS;HMO;NON-HMO
 Run Date: 09/24/2008

Year/Mo	Contracts				Capitation				Hospital				TotalFFS & Capitation			
	Single	Emp/Sp	Emp/Ch	Family	Total Members	PCP	Specialty	Total	Inpatient	Outpatient	Total Hospital	Physician		Other	Pharmacy	Dental
200709	1273	479	172	632	2556	4892	\$0.00	\$418.40	\$130,797.78	\$223,718.14	\$354,515.92	\$332,219.91	\$107,052.01	\$271,740.09	\$0.00	\$1,065,946.33
200710	1285	478	172	637	2572	4920	\$0.00	\$412.00	\$121,507.41	\$241,104.68	\$362,612.09	\$540,822.07	\$115,761.71	\$256,416.15	\$0.00	\$1,276,024.02
200711	1277	474	172	636	2559	4903	\$0.00	\$424.80	\$170,353.89	\$231,551.08	\$401,904.97	\$321,767.51	\$76,588.48	\$244,139.88	\$0.00	\$1,044,825.84
200712	1283	474	173	635	2565	4809	\$0.00	\$421.60	\$234,848.05	\$217,566.17	\$452,414.22	\$330,069.46	\$119,705.89	\$248,126.96	\$0.00	\$1,150,736.15
200801	1328	462	180	628	2598	4917	\$0.00	\$426.40	\$63,599.37	\$152,609.17	\$216,408.54	\$269,039.10	\$70,710.06	\$257,311.00	\$0.00	\$813,895.10
200802	1330	466	175	607	2578	4839	\$0.00	\$640.80	\$556,598.90	\$270,186.93	\$826,785.83	\$259,864.30	\$82,910.88	\$377,112.68	\$0.00	\$1,547,314.49
200803	1343	457	176	613	2589	4860	\$0.00	\$389.90	\$232,866.26	\$195,430.09	\$428,296.35	\$262,902.89	\$68,742.16	\$260,853.34	\$0.00	\$1,021,184.64
200804	1338	445	175	621	2579	4860	\$0.00	\$406.33	\$192,476.62	\$235,032.52	\$427,509.14	\$303,216.64	\$83,120.79	\$269,290.14	\$0.00	\$1,083,543.04
200805	1334	444	177	617	2572	4841	\$0.00	\$386.59	\$302,865.80	\$233,897.16	\$536,762.96	\$289,333.25	\$65,655.08	\$273,408.74	\$0.00	\$1,165,546.62
200806	1347	440	175	621	2583	4858	\$0.00	\$386.57	\$171,891.87	\$126,069.84	\$297,961.71	\$297,330.65	\$79,042.94	\$285,810.50	\$0.00	\$960,534.37
200807	1366	430	174	620	2590	4850	\$0.00	\$392.84	\$272,507.80	\$199,658.35	\$472,166.15	\$361,246.04	\$88,775.77	\$255,915.26	\$0.00	\$1,178,496.06
200808	1364	431	175	618	2586	4843	\$0.00	\$387.96	\$515,235.30	\$264,337.79	\$779,573.09	\$340,736.34	\$101,753.52	\$392,377.24	\$0.00	\$1,614,830.15
Total:	15868	5480	2096	7485	30929	58492	\$0.00	\$5,096.19	\$2,965,549.05	\$2,591,361.92	\$5,556,910.97	\$3,908,550.16	\$1,059,819.29	\$3,392,502.00	\$0.00	\$13,922,878.61
Average:	1322	457	175	624	2577	4874	\$0.00	\$424.68	\$247,129.09	\$215,946.83	\$463,075.91	\$325,712.51	\$88,318.27	\$282,708.50	\$0.00	\$1,160,239.88

This report contains Summary Health Information.**
 contracts and Members do not reflect retroactive additions and terminations.
 experience is reflective of both active and terminated members.

Monitoring Report by Paid

Group Number: 16035 **Run Date:** 09/24/2008
Group Name: CITY OF GAINESVILLE
Paid Period: 200709 Through 200808
Product: NON-HMO

Year/Mo	Contracts			Capitation				Hospital				Total Hospital	Physician	Other	Pharmacy	Dental	TotalFFS & Capitation
	Single	Emp/Sp	Emp/Ch	Family	Total	Members	PCP	Specialty	Total	Inpatient	Outpatient						
200709	944	441	154	613	2152	4378	\$0.00	\$0.00	\$0.00	\$118,646.37	\$194,846.56	\$313,492.93	\$281,078.00	\$82,987.60	\$213,739.35	\$0.00	\$891,297.88
200710	952	440	154	618	2164	4402	\$0.00	\$0.00	\$0.00	\$103,843.90	\$161,210.28	\$265,054.18	\$463,671.87	\$87,113.92	\$193,014.71	\$0.00	\$1,008,854.68
200711	944	436	154	617	2151	4385	\$0.00	\$0.00	\$0.00	\$153,999.72	\$212,401.00	\$386,400.72	\$270,256.58	\$66,574.98	\$190,074.06	\$0.00	\$893,306.34
200712	949	436	156	616	2157	4392	\$0.00	\$0.00	\$0.00	\$201,690.37	\$180,646.10	\$382,336.47	\$269,069.88	\$93,771.48	\$189,889.97	\$0.00	\$934,867.61
200801	995	417	155	588	2155	4295	\$0.00	\$0.00	\$0.00	\$59,215.52	\$128,060.16	\$187,275.68	\$232,612.92	\$53,558.90	\$197,179.78	\$0.00	\$670,627.28
200802	997	419	153	589	2138	4226	\$0.00	\$0.00	\$0.00	\$420,335.13	\$245,588.15	\$665,923.28	\$198,631.39	\$67,611.46	\$292,845.03	\$0.00	\$1,225,011.16
200803	1007	411	154	573	2145	4239	\$0.00	\$0.00	\$0.00	\$124,403.46	\$151,523.96	\$275,926.82	\$209,981.55	\$45,350.22	\$202,810.33	\$0.00	\$734,068.92
200804	1003	398	154	581	2136	4239	\$0.00	\$0.00	\$0.00	\$159,910.25	\$179,525.99	\$339,436.24	\$255,969.43	\$70,540.72	\$203,959.92	\$0.00	\$869,906.31
200805	1001	397	155	577	2130	4221	\$0.00	\$0.00	\$0.00	\$286,237.74	\$201,759.24	\$487,996.98	\$232,816.19	\$49,583.85	\$193,601.50	\$0.00	\$943,998.52
200806	1014	393	153	580	2140	4234	\$0.00	\$0.00	\$0.00	\$128,453.95	\$97,211.24	\$225,665.19	\$237,875.76	\$65,390.13	\$217,454.96	\$0.00	\$746,386.04
200807	1029	383	152	580	2144	4226	\$0.00	\$0.00	\$0.00	\$202,091.36	\$147,421.35	\$349,512.71	\$297,781.62	\$67,034.05	\$200,302.11	\$0.00	\$914,630.49
200808	1026	383	153	578	2140	4216	\$0.00	\$0.00	\$0.00	\$471,051.89	\$234,725.81	\$705,777.70	\$291,477.29	\$80,363.59	\$286,682.91	\$0.00	\$1,364,291.49
Total:	11861	4954	1847	7090	25752	51463	\$0.00	\$0.00	\$0.00	\$2,409,879.66	\$2,134,919.24	\$4,544,798.90	\$3,241,222.29	\$829,870.90	\$2,681,364.63	\$0.00	\$11,197,246.72
Average:	988	413	154	591	2146	4288	\$0.00	\$0.00	\$0.00	\$200,823.31	\$177,909.94	\$378,733.24	\$270,101.86	\$69,155.91	\$215,112.89	\$0.00	\$833,103.89

This report contains Summary Health Information.**
Contracts and Members do not reflect retroactive additions and terminations.
Experience is reflective of both active and terminated members.

Monitoring Report by Paid

Group Number: 16035
 Group Name: CITY OF GAINESVILLE
 Paid Period: 200709 Through 200808
 Product: BLUE OPTIONS
 Run Date: 09/24/2008

Year/Mo	Contracts				Capitation				Hospital				Dental	Total FFS & Capitation			
	Single	Emp/Sp	Emp/Ch	Family	Total	Members	PCP	Specialty	Total	Inpatient	Outpatient	Total Hospital			Physician	Other	Pharmacy
200709	329	38	18	19	404	514	\$0.00	\$418.40	\$418.40	\$12,151.41	\$28,871.58	\$41,022.99	\$51,141.91	\$24,084.41	\$58,000.74	\$0.00	\$174,648.45
200710	333	38	18	19	408	518	\$0.00	\$412.00	\$412.00	\$17,863.51	\$79,894.40	\$97,557.91	\$77,150.20	\$28,647.79	\$63,401.44	\$0.00	\$267,169.34
200711	333	38	18	19	408	518	\$0.00	\$424.80	\$424.80	\$16,354.17	\$19,150.08	\$35,504.25	\$51,510.93	\$10,013.50	\$54,065.82	\$0.00	\$151,519.30
200712	334	38	17	19	408	517	\$0.00	\$421.60	\$421.60	\$33,157.68	\$36,920.07	\$70,077.75	\$60,999.77	\$25,934.41	\$58,437.01	\$0.00	\$215,870.54
200801	333	45	25	40	443	622	\$0.00	\$426.40	\$426.40	\$4,383.85	\$24,749.01	\$29,132.86	\$36,428.18	\$17,151.16	\$60,131.22	\$0.00	\$143,267.82
200802	333	47	22	38	440	613	\$0.00	\$640.80	\$640.80	\$136,263.77	\$24,598.78	\$160,862.55	\$61,232.91	\$15,299.42	\$84,267.85	\$0.00	\$322,303.33
200803	336	46	22	40	444	621	\$0.00	\$389.90	\$389.90	\$108,482.80	\$43,908.73	\$152,391.53	\$52,921.34	\$23,391.94	\$58,043.01	\$0.00	\$287,115.72
200804	335	47	21	40	443	621	\$0.00	\$406.33	\$406.33	\$32,586.37	\$55,508.53	\$88,072.90	\$47,247.21	\$12,580.07	\$65,330.22	\$0.00	\$213,636.73
200805	333	47	22	40	442	620	\$0.00	\$386.59	\$386.59	\$36,628.06	\$32,137.92	\$68,765.98	\$56,517.06	\$16,071.23	\$79,807.24	\$0.00	\$221,548.10
200806	333	47	22	41	443	624	\$0.00	\$386.57	\$386.57	\$43,437.92	\$28,858.60	\$72,296.52	\$59,454.89	\$13,652.81	\$66,355.54	\$0.00	\$214,148.33
200807	337	47	22	40	446	624	\$0.00	\$392.84	\$392.84	\$70,416.44	\$52,237.00	\$122,653.44	\$63,464.42	\$21,741.72	\$55,613.15	\$0.00	\$263,865.57
200808	338	48	22	40	448	627	\$0.00	\$387.96	\$387.96	\$44,183.41	\$29,611.98	\$73,795.39	\$49,261.05	\$21,399.93	\$105,694.33	\$0.00	\$250,538.66
Total:	4007	526	249	395	5177	7039	\$0.00	\$5,096.19	\$5,096.19	\$555,669.39	\$456,442.68	\$1,012,112.07	\$667,327.87	\$229,948.39	\$811,147.37	\$0.00	\$2,725,631.89
Average:	334	44	21	33	431	587	\$0.00	\$424.68	\$424.68	\$46,305.78	\$39,036.89	\$84,342.67	\$55,610.66	\$19,162.37	\$67,595.61	\$0.00	\$227,135.99

This report contains Summary Health Information. **
 Intraits and Members do not reflect retroactive additions and terminations.
 perrence is reflective of both active and terminated members.

Paid Claims by Month

Group Number: 16035 **Run Date** 9/24/2008
Group Name: CITY OF GAINESVILLE
Paid Period: 200609 Through 200808
Product: BLUE OPTIONS;HMO;NON-HMO

YEAR/MONTH	MEDICAL (FFS)	Pharmacy	Capitation	Dental	Total
200609	\$778,196 71	\$230,014 31	558 40	\$0.00	\$1,008,769 42
200610	\$833,634 92	\$240,114 73	556 80	\$0 00	\$1,074,306 45
200611	\$935,416 37	\$328,905 86	557 60	\$0.00	\$1,264 879 83
200612	\$889 013 68	\$224,468 25	555 20	\$0 00	\$1,114,037 13
200701	\$728,168 93	\$308,123 60	466 40	\$0 00	\$1,036,758 93
200702	\$837,058 87	\$303,600 40	454 40	\$0.00	\$1,141,113 67
200703	\$856 205 93	\$312,341 33	437 60	\$0.00	\$1,168,984 86
200704	\$861 324 45	\$251 448 87	433 60	\$0.00	\$1,113,206 92
200705	\$838,205 13	\$249,447 56	428 00	\$0 00	\$1,088,080 69
200706	\$817,293 52	\$258,798 33	425 60	\$0 00	\$1,076,517 45
200707	\$759 031 34	\$236 319 96	424 80	\$0 00	\$995,776 10
200708	\$626,816 14	\$376,106 04	448 80	\$0 00	\$1 003,370 98
Sum:	\$9,760,365 99	\$3,319,689.24	5,747.20	\$0.00	\$13,085,802.43

YEAR/MONTH	MEDICAL (FFS)	Pharmacy	Capitation	Dental	Total
200709	\$793 787 84	\$271,740 09	418 40	\$0 00	\$1,065,946 33
200710	\$1 019 195 87	\$256,416 15	412 00	\$0 00	\$1,276,024 02
200711	\$800,260 96	\$244,139 88	424 80	\$0.00	\$1,044,825 64
200712	\$902,189 57	\$248,126 98	421 60	\$0.00	\$1,150,738 15
200801	\$556 157 70	\$257 311 00	426 40	\$0 00	\$813,895 10
200802	\$1,169 561 01	\$377,112 68	640.80	\$0.00	\$1,547,314 49
200803	\$759 941 40	\$260,853 34	389.90	\$0 00	\$1,021,184 64
200804	\$813,846 57	\$269,290 14	406 33	\$0 00	\$1 083 543 04
200805	\$891,751 29	\$273 408 74	386 59	\$0.00	\$1,165,546 62
200806	\$674 335 30	\$285 810 50	388 57	\$0 00	\$960 534 37
200807	\$922,187 96	\$255,915 26	392 84	\$0 00	\$1,178,496 06
200808	\$1 222 064 95	\$392,377 24	387 96	\$0 00	\$1,614,830 15
Sum:	\$10,525,280.42	\$3,392,502.00	5,096.19	\$0.00	\$13,922,878 61

Grp Total: **\$20,285,646.41** **\$6,712,191.24** **10,843.39** **\$0.00** **\$27,008,681.04**

6.47

BCBSF Major Accounts Performance Report
 Prepared For: City Of Gainesville (16035)

Benefit Plan: PPO
 Claims Basis: Service Date With Three Months Run Out

Key Indicators

	Jun 2007 May 2008	Jun 2006 May 2007	% Incr/ (Decr)	Peer Groups	% Over/ (Under)
Payments Per Person:					
Payments Per Employee	4,870.00	4,698.00	3.7	6,137.00	(20.6)
Payments Per Member	2,419.00	2,279.00	6.1	3,006.00	(19.5)
Enrollment:					
Employees (Average)	2,152.00	2,089.00	3.0		
Members (Average)	4,333.00	4,306.00	0.6		
Payments:					
Inpatient Facility	2,236,844.00	1,873,725.00	19.4		
Outpatient Facility	2,236,878.00	1,952,698.00	14.6		
Total Facility	4,473,722.00	3,826,423.00	16.9		
Professional	3,447,870.00	3,724,482.00	(7.4)		
Prescription Drugs	2,558,365.00	2,263,381.00	13.0		
Grand Total	10,479,957.00	9,814,286.00	6.8		
Payments PMPM:					
Inpatient Facility	43.02	36.26	18.6	58.70	(26.7)
Outpatient Facility	43.02	37.79	13.8	46.49	(7.5)
Total Facility	86.04	74.05	16.2	105.19	(18.2)
Professional	66.31	72.08	(8.0)	95.95	(30.9)
Prescription Drugs	49.20	43.80	12.3	49.34	(0.3)
Grand Total	201.55	189.93	6.1	250.48	(19.5)

BCBSF Major Accounts Performance Report
 Prepared For: City Of Gainesville (16035)

Benefit Plan: PPO
 Claims Basis: Service Date With Three Months Run Out

Key Indicators (continued)

		Jun 2007		Jun 2006		% Incr/ (Decr)	Peer Groups	% Over/ (Under)
		May 2008	Jun 2007	May 2007	Jun 2006			
Other Key Payment Indicators:	Inpatient Facility:	1,078.00	1,078.00	1,078.09	1,078.09	0.0	1,420.98	(24.1)
	Inpatient Payments/Day	6,013.02	6,013.02	4,892.23	4,892.23	22.9	6,535.94	(8.0)
	Outpatient Facility:	479.40	479.40	412.83	412.83	16.1	520.43	(7.9)
	Professional/Pharmacy:	58.61	58.61	65.11	65.11	(10.0)	66.58	(12.0)
	Professional Payments/Service	81.62	81.62	75.20	75.20	8.5	63.51	28.5
	Prescription Drug Payments/Script	478.88	478.88	403.62	403.62	18.6	495.75	(3.4)
Key Utilization Indicators:	Inpatient Facility:	85.85	85.85	88.95	88.95	(3.5)	107.78	(20.3)
	Days/1000 Members	5.58	5.58	4.54	4.54	22.9	4.60	21.3
	Average Length Of Stay	16.67	16.67	10.70	10.70	55.7	9.38	77.7
	% Facility Admits > 10 Days	29.54	29.54	29.26	29.26	1.0	58.10	(49.2)
	Surgical Visits/1000 Members	80.08	80.08	69.67	69.67	14.9	161.07	(50.3)
	Emer. Rm. Visits/1000 Members	967.23	967.23	999.54	999.54	(3.2)	852.74	13.4
	Other Visits/1000 Members	1,076.85	1,076.85	1,098.47	1,098.47	(2.0)	1,071.91	0.5
	Total Visits/1000 Members	13,577.66	13,577.66	13,285.42	13,285.42	2.2	17,293.84	(21.5)
	Services/1000 Members	461.34	461.34	426.38	426.38	8.2	404.28	14.1
	Psa Services/1000 Members	2,907.22	2,907.22	2,904.09	2,904.09	0.1	3,765.65	(22.8)
	Visits/1000 Members							

NOTE: PSA = psychiatric and substance abuse

BCBSF Major Accounts Performance Report
 Prepared For: City Of Gainesville (16035)

Benefit Plan: PPO
 Claims Basis: Service Date With Three Months Run Out

Key Indicators (continued)
 General Enrollment Overview

	Jun 2007		% Of		Jun 2006		% Of		% Incr/ (Decr)
	May 2008	Total	Total	Total	May 2007	Total	Total		
Contracts (Average):	970	45.1	892	42.7	8.7				
Single									
Two Person	581	27.0	584	28.0	(0.5)				
Family	601	27.9	613	29.3	(2.0)				
Total:	2,152	100.0	2,089	100.0	3.0				
Members (Average):	2,152	49.7	2,089	48.5	3.0				
Employees	2,181	50.3	2,217	51.5	(1.6)				
Dependents	4,333	100.0	4,306	100.0	0.6				
Total:									

BCBSF Major Accounts Performance Report
 Prepared For: City Of Gainesville (16035)

Benefit Plan: PPO
 Claims Basis: Service Date With Three Months Run Out

Network and Program Estimated Savings Report
 For the Time Period: Jun 2007 Through May 2008

	PPC In Network			PHS / PPS In Network			NON Network/ Out Of State						
	Billed	Allowed	Savings	%Disc	Services	Billed	Allowed	Savings	%Disc	Services			
INPT FAC.	\$5,984,306	\$1,811,561	\$4,172,744	69.7	345	\$0	\$0	\$0	0	0	\$839,359	\$573,379	34
OUTPT FAC.	\$5,503,073	\$2,319,016	\$3,184,057	57.9	3,560	\$350	\$350	\$0	1	0.0	\$508,201	\$329,817	974
PHYSICIAN	\$7,689,454	\$2,824,600	\$4,864,853	63.3	22,489	\$646,506	\$258,444	\$388,062	2,127	60.0	\$475,016	\$137,723	1,065
OTHER	\$1,173,486	\$469,152	\$704,334	60.0	5,105	\$12,090	\$2,856	\$9,234	41	76.4	\$417,116	\$188,872	1,149
Total PPC and PHS/PPS Savings:	\$20,350,319	\$7,424,330	\$12,925,989	63.5	31,499	\$658,946	\$261,650	\$397,296	2,169	60.3	\$2,239,692	\$1,229,791	3,222

BCBSF Major Accounts Performance Report
 Prepared For: City Of Gainesville (16035)

Benefit Plan: PPO

Claims Basis: Service Date With Three Months Run Out

Network and Program Estimated Savings Report
 For the Time Period: Jun 2007 Through May 2008

	PPC & PHS/PPS In Network				Balancing Statistics					Total Group Amounts	
	PPC Amount	PHS/PPS Amount	PHS/PPS Total Amount	Out of Network Out of State	Grand Total	Adjustments Amounts	COB Payments Amounts	Exclusions from Savings Medicare A	Denied Line Items		RX Amounts
Billed Amount	\$20,350,319	\$658,946	\$21,009,265	\$2,239,692	\$23,248,957	\$1,359,176	\$111,317	\$0	\$240	\$3,467,380	\$28,187,071
Allowed Amount	\$7,424,330	\$261,650	\$7,685,980	\$1,229,791	\$8,915,771	\$259,534	\$344,197	\$0	\$0	\$3,522,273	\$13,041,775
Paid Amount	\$6,398,608	\$201,814	\$6,600,422	\$1,057,955	\$7,658,377	\$196,742	\$66,473	\$0	\$0	\$2,558,365	\$10,479,957

BCBSF Major Accounts Performance Report
 Prepared For: City Of Gainesville (16035)

Benefit Plan: PPO
 Claims Basis: Service Date With Three Months Run Out

Network and Program Estimated Savings Report
 For the Time Period: Jun 2007 Through May 2008

	PPC Utilization	PHS/PPS Utilization	Total PPC & PHS/PPS Utilization	Out of Network Out of State Utilization	Grand Total Utilization
INPT FAC.	91.03	0.00	91.03	8.97	100.0
OUTPT FAC.	78.50	0.02	78.52	21.48	100.0
PHYSICIAN	87.57	8.28	95.85	4.15	100.0
OTHER	81.10	0.65	81.75	18.25	100.0
TOTAL	85.39	5.88	91.27	8.73	100.0
Billed	= Submitted Charges				
Allowed	= Negotiated Agreements between Provider and BCBSFL				
Savings	= Difference between Billed and Allowed Amounts				
% Discount	= Savings Amount Divided by Billed Amount				

BCBSF Major Accounts Performance Report
 Prepared For: City Of Gainesville (16035)

Benefit Plan: Blue Options
 Claims Basis: Service Date With Three Months Run Out

Key Indicators

	Jun 2007		Jun 2006		% Incr/ (Decr)	Peer Groups	% Over/ (Under)
	May 2008	Jun 2007	May 2007	Jun 2006			
Payments Per Person:	6,188.00	6,445.00	(4.0)	6,137.00		6,137.00	0.8
Enrollment:	4,666.00	4,795.00	(2.7)	3,006.00		3,006.00	55.2
Payments:							
Payments Per Employee	423.00	465.00	(9.0)				
Members (Average)	561.00	625.00	(10.2)				
Inpatient Facility	491,924.00	655,124.00	(24.9)				
Outpatient Facility	547,880.00	504,511.00	8.6				
Total Facility	1,039,804.00	1,159,635.00	(10.3)				
Professional	774,369.00	1,037,601.00	(25.4)				
Capitation	5,215.00	6,048.00	(13.8)				
Prescription Drugs	798,038.00	793,491.00	0.6				
Grand Total	2,617,426.00	2,996,775.00	(12.7)				
Payments PMPM:							
Inpatient Facility	73.07	87.35	(16.3)	58.70		58.70	24.5
Outpatient Facility	81.38	67.27	21.0	46.49		46.49	75.0
Total Facility	154.46	154.62	(0.1)	105.19		105.19	46.8
Professional	115.03	138.35	(16.9)	95.95		95.95	19.9
Capitation	0.77	0.81	(4.9)	0.00		0.00	
Prescription Drugs	118.54	105.80	12.0	49.34		49.34	140.3
Grand Total	388.80	399.57	(2.7)	250.48		250.48	55.2

BCBSF Major Accounts Performance Report
 Prepared For: City Of Gainesville (16035)

Benefit Plan: Blue Options
 Claims Basis: Service Date With Three Months Run Out
 Key Indicators (continued)

	Jun 2007		Jun 2006		% Incr/ (Decr)	Peer Groups	% Over/ (Under)
	May 2008	May 2007	May 2007	May 2007			
Other Key Payment Indicators:							
Inpatient Facility:	2,659.05	2,684.93	(1.0)	1,420.98		87.1	
Inpatient Payments/Admission	9,109.70	8,508.10	7.1	6,535.94		39.4	
Outpatient Facility:	772.75	561.82	37.5	520.43		48.5	
Professional/Pharmacy:	79.25	88.06	(10.0)	66.58		19.0	
Prescription Drug Payments/Script	118.88	106.80	11.3	63.51		87.2	
Days/1000 Members	329.77	390.40	(15.5)	495.75		(33.5)	
Admits/1000 Members	96.26	123.20	(21.9)	107.78		(10.7)	
Average Length Of Stay	3.43	3.17	8.1	4.60		(25.5)	
% Facility Admits > 10 Days	1.85	3.90	(52.5)	9.38		(80.3)	
Surgical Visits/1000 Members	87.34	67.20	30.0	58.10		50.3	
Emer. Rm. Visits/1000 Members	114.08	126.40	(9.7)	161.07		(29.2)	
Other Visits/1000 Members	1,062.39	1,243.20	(14.5)	852.74		24.6	
Total Visits/1000 Members	1,263.81	1,436.80	(12.0)	1,071.91		17.9	
Services/1000 Members	17,417.11	18,852.80	(7.6)	17,293.84		0.7	
Psa Services/1000 Members	623.89	702.40	(11.2)	404.28		54.3	
Visits/1000 Members	4,336.90	4,630.40	(6.3)	3,765.65		15.2	

NOTE: PSA = psychiatric and substance abuse

BCBSF Major Accounts Performance Report
 Prepared For: City Of Gainesville (16035)

Benefit Plan: Blue Options
 Claims Basis: Service Date With Three Months Run Out

Key Indicators (continued)
 General Enrollment Overview

	Jun 2007 May 2008	% Of Total	Jun 2006 May 2007	% Of Total	% Incr/ (Decr)
Contracts (Average):	334	79.0	361	77.6	(7.5)
Single	61	14.4	74	15.9	(17.6)
Two Person Family	28	6.6	30	6.5	(6.7)
Total:	423	100.0	465	100.0	(9.0)
Members (Average):	423	75.4	465	74.4	(9.0)
Employees	138	24.6	160	25.6	(13.8)
Dependents	561	100.0	625	100.0	(10.2)

BCBSF Major Accounts Performance Report
 Prepared For: City Of Gainesville (16035)

Benefit Plan: Blue Options
 Claims Basis: Service Date With Three Months Run Out

Network and Program Estimated Savings Report
 For Time Period: Jun 2007 Through May 2008

	Network Blue			Traditional Network			NON Network/ Out Of State						
	Billed	Allowed	Savings	Services	%Disc	Billed	Allowed	Savings	Services	%Disc	Billed	Allowed	Services
INPT FAC.	\$1,517,924	\$305,880	\$1,212,044	36	79.8	\$478,511	\$208,984	\$269,527	16	56.3	\$14,038	\$5,894	1
OUTPT FAC.	\$1,536,171	\$402,317	\$1,133,853	493	73.8	\$408,037	\$180,905	\$227,131	253	55.7	\$61,103	\$28,119	99
PHYSICIAN	\$1,372,398	\$688,339	\$684,058	4,683	49.8	\$140,537	\$60,558	\$79,978	476	56.9	\$160,207	\$68,510	458
OTHER	\$156,612	\$98,189	\$58,424	590	37.3	\$24,063	\$8,994	\$15,069	116	62.6	\$77,123	\$46,833	221
	\$4,583,104	\$1,494,725	\$3,088,379	5,802	67.4	\$1,051,147	\$459,441	\$591,705	861	56.3	\$312,471	\$147,355	779
Total In-Network Savings: \$3,680,084.81													

BCBSF Major Account Performance Report
 Prepared For: City Of Gainesville (16035)

Benefit Plan: Blue Options
 Claims Basis: Service Date With Three Months Run Out

Network and Program Estimated Savings Report
 For Time Period: Jun 2007 Through May 2008

	Balancing Statistics										Total Group Amounts		
	Network Blue and Traditional		Network Blue		Out of Network Out of State		Grand Total		Exclusions from Savings			Denied Line Items	RX Amounts
	Network Blue Amount	Traditional Network Amount	Network Blue Traditional Total Amount	Network Blue Traditional Total Amount	Out of Network Out of State	Out of State	Grand Total	Grand Total	Adjustments Amounts	COB Payments Amounts	Medicare A		
Billed Amount	\$4,583,104	\$1,051,147	\$5,634,251	\$5,634,251	\$312,471	\$312,471	\$5,946,723	\$5,946,723	\$617,093	\$185,188	\$336,644	\$318,868	\$1,275,751
Allowed Amount	\$1,494,725	\$459,441	\$1,954,166	\$1,954,166	\$147,355	\$147,355	\$2,101,522	\$2,101,522	\$45,463	\$110,553	\$8,832	\$0	\$1,051,280
Paid Amount	\$1,241,404	\$401,132	\$1,642,537	\$1,642,537	\$99,970	\$99,970	\$1,742,507	\$1,742,507	\$42,220	\$20,850	\$8,596	\$0	\$798,038

BCBSF Major Accounts Performance Report
 Prepared For: City Of Gainesville (16035)

Benefit Plan: Blue Options
 Claims Basis: Service Date With Three Months Run Out

Network and Program Estimated Savings Report
 For Time Period: Jun 2007 Through May 2008

	Blue Network Utilization	Trad Network Utilization	Total In-Network Utilization	Out of Network Out of State Utilization	Grand Total Utilization
INPT FAC.	67.92	30.19	98.11	1.89	100.0
OUTPT FAC.	58.34	29.94	88.28	11.72	100.0
PHYSICIAN	83.37	8.47	91.85	8.15	100.0
OTHER	63.65	12.51	76.16	23.84	100.0
TOTAL	77.96	11.57	89.53	10.47	100.0

Billed = Submitted Charges
 Allowed = Negotiated Agreements between Provider and BCBSFL
 Savings = Difference between Billed and Allowed Amounts
 % Discount = Savings Amount Divided by Billed Amount

BCBSF Major Accounts Performance Report
 Prepared For: City Of Gainesville (16035)

Benefit Plan: Combined Products
 Claims Basis: Service Date With Three Months Run Out

Key Indicators

	Jun 2007	Jun 2006	% Incr/ (Decr)	Peer Groups	% Over/ (Under)
Payments Per Person:					
Payments Per Employee	5,088.00	5,016.00	1.4	6,741.00	(24.5)
Payments Per Member	2,676.00	2,598.00	3.0	3,412.00	(21.6)
Enrollment:					
Employees (Average)	2,574.00	2,554.00	0.8		
Members (Average)	4,895.00	4,931.00	(0.7)		
Payments:					
Inpatient Facility	2,728,768.00	2,528,849.00	7.9		
Outpatient Facility	2,784,758.00	2,457,209.00	13.3		
Total Facility	5,513,526.00	4,986,058.00	10.6		
Professional	4,222,239.00	4,762,083.00	(11.3)		
Capitation	5,215.00	6,048.00	(13.8)		
Prescription Drugs	3,356,403.00	3,056,872.00	9.8		
Grand Total	13,097,383.00	12,811,061.00	2.2		
Payments PMPM:					
Inpatient Facility	46.46	42.74	8.7	67.23	(30.9)
Outpatient Facility	47.41	41.53	14.2	56.83	(16.6)
Total Facility	93.86	84.26	11.4	124.05	(24.3)
Professional	71.88	80.48	(10.7)	100.91	(28.8)
Capitation	0.09	0.10	(10.0)	4.51	(98.0)
Prescription Drugs	57.14	51.66	10.6	54.86	4.2
Grand Total	222.97	216.51	3.0	284.33	(21.6)

BCBSF Major Accounts Performance Report
Prepared For: City Of Gainesville (16035)

Benefit Plan: Combined Products
Claims Basis: Service Date With Three Months Run Out

Key Indicators (continued)

	Jun 2007 May 2008	Jun 2006 May 2007	% Incr/ (Decr)	Peer Groups	% Over/ (Under)
Other Key Payment Indicators:					
Inpatient Facility:	1,207.42	1,275.91	(5.4)	1,569.35	(23.1)
Inpatient Payments/Day					
Inpatient Payments/Admission	6,405.56	5,497.50	16.5	6,985.55	(8.3)
Outpatient Facility:					
Outpatient Payments/Visit	518.09	436.60	18.7	559.67	(7.4)
Professional/Pharmacy:					
Professional Payments/Service	61.55	69.03	(10.8)	73.78	(16.6)
Prescription Drug Payments/Script	88.19	81.46	8.3	67.01	31.6
Inpatient Facility:					
Days/1000 Members	461.70	401.95	14.9	514.04	(10.2)
Admits/1000 Members	87.03	93.29	(6.7)	115.48	(24.6)
Average Length Of Stay	5.31	4.31	23.1	4.45	19.2
% Facility Admits > 10 Days	14.79	9.57	54.6	8.67	70.5
Outpatient Facility:					
Total Visits/1000 Members	1,098.06	1,141.35	(3.8)	1,218.43	(9.9)
Services/1000 Members	14,014.91	13,991.08	0.2	16,412.77	(14.6)
Professional/Pharmacy:					
Psa Services/1000 Members	479.88	461.37	4.0	295.53	62.4
Visits/1000 Members	3,070.48	3,122.90	(1.7)	4,083.06	(24.8)

NOTE: PSA = psychiatric and substance abuse

BCBSF Major Accounts Performance Report
 Prepared For: City Of Gainesville (16035)

Benefit Plan: Combined Products
 Claims Basis: Service Date With Three Months Run Out

Key Indicators (continued)
 General Enrollment Overview

	Jun 2007 May 2008	% Of Total	Jun 2006 May 2007	% Of Total	% Incr/ (Dectr)
Contracts (Average):	1,303	50.6	1,253	49.1	4.0
Single	643	25.0	658	25.8	(2.3)
Two Person	628	24.4	643	25.2	(2.3)
Family	2,574	100.0	2,554	100.1	0.8
Members (Average):	2,574	52.6	2,554	51.8	0.8
Employees	2,321	47.4	2,377	48.2	(2.4)
Dependents	4,895	100.0	4,931	100.0	(0.7)