

STATE OF WEST VIRGINIA



RETIREE HEALTH BENEFIT TRUST FUND

Quarterly Report March 31, 2007

Fiscal Years 2007-2011

June 2007



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Finance Board West Virginia Retiree Health Benefit Trust Fund State Capitol Complex Building 5, Room 1001 1900 Kanawha Boulevard, East Charleston, WV 25305-0710

Ladies and Gentlemen:

I, Dave Bond, am a Fellow of the Society of Actuaries, a Member of the American Academy of Actuaries, and the Managing Partner in the firm of CCRC Actuaries, LLC ("CCRC Actuaries").

During the 2006 Regular Session of the West Virginia Legislature, House Bill 4654 was enacted creating the West Virginia Retiree Health Benefit Trust Fund ("Trust Fund") for the purpose of providing for and administering retiree post-employment health care benefits, and the respective revenues and costs of those benefits as a cost sharing multiple employer plan. The Public Employees Insurance Agency ("PEIA"), on behalf of the Public Employees Insurance Agency Finance Board ("Board"), is responsible for the day-to-day operation of the Trust Fund, including all administrative functions.

Statutory provisions governing the Trust Fund require the actuary retained by the PEIA to provide technical advice regarding the operation of the Trust Fund. Using the actuarial assumptions most recently adopted by the Board, the actuary is required to develop actuarial valuations of normal cost, actuarial liability, actuarial value of assets, and related actuarial present values for the West Virginia plan for other post-employment benefits including health insurance. Consequently, the Board has requested CCRC Actuaries to prepare a report separating the actuarial projections for the Trust Fund from the PEIA forecast report. The West Virginia Retiree Health Benefit Trust Fund will assume the financial liabilities of the retiree programs currently under the PEIA effective July 1, 2007.

The provisions of the Code of West Virginia ("Code"), 1931, as amended, charge the Board with the responsibility to prepare a proposed financial plan designed to generate revenues sufficient to meet all estimated program and administrative costs of the PEIA, including incurred but unreported claims, for the fiscal year for which the plan is proposed. CCRC Actuaries has been retained by the PEIA to review the proposed financial plan, and as supported by our work, to render an opinion stating whether the plan may be reasonably expected to generate sufficient revenues to meet estimated insurance program and administrative costs of plan through FY 2011. The analysis is to be prepared on an accrued and incurred reporting basis for a projection period not to exceed five years.

The Code provisions also require the Board to establish and maintain a reserve fund for the purposes of offsetting unanticipated claim losses in any fiscal year. Beginning with the fiscal year two thousand two plan and for each succeeding fiscal year plan, the Board shall transfer ten percent of the projected total plan costs for that year into the reserve fund, which is to be certified by the actuary and included in the final, approved financial plan submitted to the Governor and Legislature in accordance with the provisions of the Code. Any moneys saved in a plan year shall be transferred into the reserve fund. At the close of any fiscal year in which the balance in the reserve fund exceeds the recommended reserve amount by fifteen percent, these excess funds shall be transferred to the West Virginia Retiree Health Benefit Trust Fund. Additionally, during the 2007 Regular Session, the West Virginia Legislature enacted House Bill 2007 ("HB 2007") requiring an appropriation of \$39,674,000 to the Other Post Employment Benefit ("OPEB") Contribution Accumulation Fund in FY 2008.

In accordance with the Code provisions, in FY 2008, PEIA is projected to transfer excess reserves to the Trust Fund in the amount of \$27,679,595 and \$82,763,255 for FY 2006 and FY 2007, respectively.

CCRC Actuaries has provided preliminary forecasts for the Trust Fund for fiscal years ending June 30, 2007 ("FY 2007"), June 30, 2008 ("FY 2008"), June 30, 2009 ("FY 2009"), June 30, 2010 ("FY 2010"), and June 30, 2011 ("FY 2011"). This opinion of plan adequacy is based on the projections through FY 2011 using updated future revenue and plan modifications provided by the Board in the plan adopted in December 2006.

Effective July 1, 2007, PEIA has contracted with Coventry Health Care to provide Medicare Advantage/Prescription Drug (MAPD) Benefits to Medicare-eligible retired employees and dependents. Under this arrangement, Coventry Health Care has assumed the financial risk of providing comprehensive medical and prescription drug coverage with limited copayments. Accordingly, this report assumes that the Trust Fund will not continue to participate in the Retiree Drug Subsidy ("RDS") program under CMS Medicare Part D after FY 2007. In FY 2007, these projections have assumed \$20,000,000 in anticipated savings from RDS resulting from the enactment of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 ("Medicare Part D").

Additionally, the Medicaid / PEIA Hospital Bill has been extended through FY 2008 and is anticipated to continue to provide substantial non-Medicare hospital savings. We are assuming that the Bill will terminate at the end of Fiscal Year 2008 and hospital reimbursement for non-Medicare coverages will resume to previous levels which will increase plan expense.

In reviewing the plan, CCRC Actuaries utilized information concerning the plan's prior experience, covered individuals, plan revenues, plan benefits, plan administrative costs, and other expenses. This information was developed and provided by PEIA, the plan's third party administrators and other sources. In our review, we completely relied on the accuracy of this information and did not perform any due diligence on the information.

Since the adoption of the financial plan in December 2006, PEIA has experienced favorable claim expense. In the circumstances, and subject to the conditions described herein, based on our review, we believe the financial plan approved by the Board for FY 2006 through FY 2011 may be reasonably expected to generate sufficient revenues, when combined with the existing surplus, to meet estimated insurance program and administrative costs of the Trust Fund.

This conclusion is based on significant revenue increases in employer and employee premiums in later fiscal years of the plan through FY 2011 as approved by the Board in December 2006.

The preparation of any estimate of future health costs requires consideration of a broad array of complex social and economic events. Changes in reimbursement methodology, the emergence of new and expensive medical procedures and prescription drugs options, and the continuing evolution and changes of the framework of MAPD and other managed care options impacting Non-Medicare retirees, as are contemplated in the Board's proposed plan, increase the level of uncertainty of such estimates. As such, the estimate costs of insurance program contain considerable uncertainty and variability and actual experience may not conform to the assumptions utilized in this report.

Respectfully,

Dave Bond

Dave Bond, F.S.A., M.A.A.A. Managing Partner

Brad Paulin

Bradley Paulis Reviewing Partner

West Virginia Retiree Health Benefit Trust Fund Report of Independent Actuary Financial Plan for FY 2007 – FY 2011

OVERVIEW

This report analyzes revenues and expenses related to funding the health insurance benefits of retired employees of the State of West Virginia and various local agencies, together with their dependents. This report is intended for the sole use of the Board, and any other use requires written approval by CCRC Actuaries.

This report was compiled utilizing claims data collected by PEIA's third party administrators through May 2007 for prescription drugs and medical claims. Enrollment data, administrative expenses, managed care capitations, and plan revenues were provided at special request from PEIA. Revenue assumptions are based on premium rates, assumed interest income and significant general and special revenue allocations provided by the Governor, some which have not been approved by the West Virginia Legislature. In addition, other information became available through presentations made at Board meetings, which has been used in arriving at our conclusions.

The Code of West Virginia establishes the actuarial reporting requirements for the Trust Fund on an incurred basis for medical claims and capitations and on an accrued basis for administrative expenses and revenue for a period not to exceed five years. At the request of the Board, the reporting basis is based upon the Trust Fund. The Trust Fund represents all state and local agency retirees and their survivors. The Trust Fund has been allocated the anticipated administrative costs incurred by PEIA for retiree coverages.

KEY ASSUMPTIONS

A. Enrollment Changes

The Board has requested that the projection assume retiree enrollment growth consistent with the experience of the plan. These projections assume that the Trust Fund will annually have 1,000 additional retirees. While we have recently observed a net increase of 1,018 retirees from June 2006 to June 2007, we note that from June 2004 through June 2006, the average annual increase in retirees was 1,032, approximating our current assumption.

In aggregate, June 2007 enrollment has increased by 1,018 coverages since the end of FY 2006. Aggregate Preferred Provider Benefit ("PPB") enrollment has increased by 980 in total over the same period, while managed care enrollment continues to cover fewer participants, with an increase of 38 coverages.

The following chart summarizes the current enrollment as of the selected monthly billing dates of June 2005, June 2006 and June 2007 for purposes of comparison:

Trust Fund		Preferre	d Provider	Benefit	Managed Care		
	Coverage	Jun-05	Jun-06	Jun-07	Jun-05	Jun-06	Jun-07
Retirees	Medicare Single	15,714	16,007	16,273	-	-	-
	Medicare Family	9,153	9,385	9,636			
	Medicare Total	24,867	25,392	25,909	-	-	-
	Non Medicare Single	2,696	2,914	3,120	183	191	214
	Non Medicare Family	3,997	4,234	4,491	175	181	196
	Non Medicare Total	6,693	7,148	7,611	358	372	410
	Retiree Total	31,560	32,540	33,520	358	372	410
	Grand Total				31,918	32,912	33,930

B. Changes in Claim Backlog

The medical claim backlog has been relatively stable throughout FY 2007. Detail of the medical claim backlog is presented in the PEIA report titled "PEIA Quarterly Report - March 31, 2007."

C.Trend Analysis

CCRC Actuaries performed the detailed medical and prescription drugs trend analysis in the report titled, "Medical & Prescription Drugs Claims Trend Report - September, 2006". This report includes the detailed trend analysis in aggregate for both PEIA and Trust Fund experience by medical and prescription drugs category and whether the PEIA, the Trust Fund or Medicare was primary. Based on the analysis, we have reduced the FY 2007 Non-Medicare medical claim trend to 6.5% and the FY 2007 Medicare medical claim trend to 6.5%. Based on Trust Fund's favorable prescription drug experience, we have reduced our trend assumption for all prescription drugs coverage to 12.0% in FY 2007.

Claim Type	Previous Assumption	Updated Assumption
	FY 2007 Trend	FY 2007 Trend
Non-Medicare – Medical	8.5%	6.5%
Medicare – Medical	9.0%	6.5%
Non-Medicare – Drugs	17.0%	12.0%
Medicare – Drugs	17.0%	12.0%

The current projection assumes the trends on the following table:

In addition, we have assumed that trends will remain the same for FY 2008 and then increase by 0.5% in each successive fiscal year beginning in FY 2009. At the Board's request, the baseline trend assumptions have been established to reflect the most likely or expected trends. In order to provide information on the impact of varying trend assumptions, two alternative trend scenarios were developed. The Optimistic Scenario incorporates trend assumptions 2.0% below the Baseline Scenario and the Pessimistic Scenario incorporates trend assumptions 2.0% above the Baseline Scenario.

The following chart summarizes the trend results observed for the plan using data through May 2007. It is important to note that these trends <u>have not</u> been adjusted to reflect savings as a result of the expansion of the drug rebate program or the claim savings due to changes in provider reimbursement methodologies nor changes in the benefit structure. In developing the claim cost projection, we have reflected for benefit and reimbursement changes as an adjustment to the gross trend assumption.

Fiscal	Non-Medicare	Medicare	Non-Medicare	Medicare	
Year	Medical	Medical	Drugs	Drugs	<u>Total</u>
2003	-18%	3%	0%	11%	0%
2004	0%	10%	-2%	3%	5%
2005	-2%	6%	1%	16%	8%
2006	5%	6%	17%	11%	9%
2007	-2%	6%	11%	7%	4%

Aggregate Trust Fund Historical Trends (Retirees)

D. Enrollment, Claim, Expense and Revenue Assumptions

Using aggregate PEIA and Trust Fund paid claim data through May 2007 for medical claims and for prescription drugs claims, average annualized incurred unit claim costs were developed for the Trust Fund for both self-funded and managed care coverages. CCRC Actuaries has developed the claim cost on an adjusted exposure basis using the respective expected claim cost for each coverage type. The adjusted exposure methodology weighs the expected claim cost under each coverage type for single, member and children, and family coverages based on observed differences in health care cost. For example, under this methodology single coverage types are given a weight of 1.0 exposure, whereas member and children coverages are given a greater weighting based on historical expected health care cost relationships. The methodology results in different weighting for coverages whether the Trust Fund is primary or secondary payor to Medicare. Based on this methodology, the result of FY 2006 and the projection of FY 2007 claims and expenses are summarized in the following chart. It should be noted that all of these numbers are on a per policy basis.

Fiscal Yea	r 2007 Projection			Reve	nu	ie	Expenses					
			N	Aonthly		Monthly	N	/Ionthly	N	Ionthly		Monthly
			Er	nployer	E	mployee	I	Medical		Drugs	Ca	apitation
Fund	Program	Policies	Pr	emiums	P	remiums		Costs		Costs		Costs
Retiree	PPB - Medicare <u>PPB – Non-Medicare</u> PPB - Total <u>Managed Care</u>	25,578 7,611 33,189 373	\$ \$	-	\$ \$	161 500	\$ \$ \$	169 <u>475</u> 239	\$ <u>\$</u> \$	246 <u>207</u> 237	\$	1,033
	Total	33,562										-

Projected plan revenues and administrative expenses were provided by PEIA. The following chart summarizes the additional revenues from retirees, Medicare Part D reimbursements and Mandatory Transfer From General Revenue under the West Virginia Legislature enacted House Bill 2007.

	Fiscal Year	Fiscal Year	Fiscal Year	Fiscal Year	Fiscal Year
Source	2007	2008	2009	2010	2011
Additional Retiree					
Premiums	\$4,100,000	(\$9,200,000)	\$4,700,000	\$6,600,000	\$9,600,000
Medicare Part D					
Revenue	\$20,000,000	\$0	\$0	\$0	\$0
Mandatory Transfer					
From General	\$0	\$39,674,000	\$0	\$0	\$0
Revenue					

Board Decisions – December 2006

Future fiscal year State revenue increases will require legislative appropriation. Additional retiree premiums represent premiums paid by retirees either directly or through sick and annual leave conversion credits.

Additionally, PEIA management has assumed that the Retiree Premium Assistance Program will grow as a direct result from the required retiree premium increases in the financial plan. The program's cost is currently projected to grow from approximately \$3.0 million in FY 2007 to approximately \$4.6 million in FY 2011, based on the Board's direction and projected retiree enrollment growth in the financial plan.

E. Provider Reimbursement Changes

Our projections assume significant revenue from Medicare Part D and savings from MAPD participation as well as non-Medicare hospital savings from the Medicaid / PEIA Hospital Bill. We have assumed that Trust Fund will not continue to participate in the Retiree Drug Subsidy ("RDS") program under CMS Medicare Part D after FY 2007.

This report does not include any savings anticipated from scheduled reductions in provider reimbursement under the Medicare program or from any substantial changes in provider reimbursement for non-Medicare coverages throughout the projection period.

FISCAL YEAR 2007 FORECAST

The financial forecast for FY 2007 under the Baseline scenario is presented in the Appendix. The Baseline forecast for FY 2007, projects accrued revenue of \$211,976,692 and incurred plan expenses of \$204,625,894 to produce a fiscal year surplus of \$7,350,798.

FISCAL YEAR 2008 FORECAST

The financial forecast for FY 2008 under the Baseline scenario is presented in the Appendix. The Baseline forecast for FY 2008, projects accrued revenue of \$384,611,288 and incurred plan expenses of \$140,833,747 to produce a fiscal year surplus of \$243,777,541.

FISCAL YEAR 2009 FORECAST

The financial forecast for FY 2009 under the Baseline scenario is presented in the Appendix. The Baseline forecast for FY 2009, projects accrued revenue of \$229,927,512 and incurred plan expenses of \$162,661,069 to produce a fiscal year surplus of \$67,266,443.

FISCAL YEAR 2010 FORECAST

The financial forecast for FY 2010 under the Baseline scenario is presented in the Appendix. The Baseline forecast for FY 2010, projects accrued revenue of \$259,289,984 and incurred plan expenses of \$183,723,822 to produce a fiscal year surplus of \$75,566,162.

FISCAL YEAR 2011 FORECAST

The financial forecast for FY 2011 under the Baseline scenario is presented in the Appendix. The Baseline forecast for FY 2011, projects accrued revenue of \$294,666,458 and incurred plan expenses of \$207,847,081 to produce a fiscal year surplus of \$86,819,377.

LITIGATION

The forecasts presented in the attached tables do not contemplate any additional revenues or expenses to be generated from litigation activities.

SUMMARY

It should be noted that the aggregate PEIA and Trust Fund reserves will meet or exceed the 10% of program expense requirement under the Baseline Scenario assumptions. With projected changes to the plan as adopted in the Board, we are forecasting that the plan will meet the 10% reserve target through the projection period ending with the Fiscal Year 2011. These projections are based on Medicare Part D subsidies in FY 2007, significant MAPD savings effective in FY 2008, and significant revenue increases projected by PEIA and are contingent on legislative approval. These forecasts are based on assumptions including the estimated cost and savings of plan changes, expected trend levels and exposure levels. The continued enrollment changes of the managed care options, changes in physician, ambulatory and hospital provider reimbursement; possible changes in methodology of managed care premium calculation; and changes in the prescription drugs program, can be expected to further exacerbate the difficulty of projecting future medical and drugs claim levels and lags. These projections do not incorporate any anticipated effects of national or state health care reform, such as Medicare and Medicaid reform. On the national level, it would not be surprising to see significant changes in the MAPD program, which will impact Trust Fund financial projections. As such, actual results deviating from those amounts projected in these pages should not be unexpected. With the legislatively mandated requirement of a five-year projection, it should be assumed that constant modifications would be required.

WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST FINANCIAL FORECAST FISCAL YEAR 2007

PERIOD 7/1/2006 - 6/30/2007

		TRUST Total
Revenues Local Agencies - Pay Go Premiums State Agencies Employers - Pay Go Premiums State Agencies Employees - Pay Go Premiums Retiree Premiums - PPB Retiree Premiums - MCO Local Agencies - Initial UAAL OPEB Funding State Agencies - Initial UAAL OPEB Funding Mandatory Transfer from General Revenue PEIA Mandatory Transfer to WV RHBT Medicare RDS Reimbursement Non Par Premiums Investment Income	\$	16,016,207 85,221,766 19,990,273 64,200,520 2,238,028 - - - 20,000,000 4,309,898 -
Total Revenue	\$	211,976,692
Program Expenses Medical Claims Prescription Drug Claims Managed Care Capitations MAPD Capitations Administration Retiree Assistance Program Director's Discretionary Fund Total Expenses	\$ \$	95,200,463 94,457,205 4,621,489 - 7,156,776 3,013,174 176,787 204,625,894
Fiscal Year Results	\$	7,350,798
Beginning Plan Reserve		-
Ending Plan Reserve	\$	7,350,798

KEY ASSUMPTIONS							
Pay Go Monthly Premium	\$	139.11	Claim and Other Expense Trends				
Additional Retiree Premiums	\$	4,100,000	<u>Eligibility</u>	Medical	Drugs		
			Non-Medicare	6.5%	12.0%		
			Medicare	6.5%	12.0%		
			Capitations		10.0%		
			Administrative Expense		5.0%		
Number of Net New Retirees		1,000	Pay Go Monthly Premium		10.0%		

WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST FINANCIAL FORECAST FISCAL YEAR 2008

PERIOD 7/1/2007 - 6/30/2008

	TRUST Total
RevenuesLocal Agencies - Pay Go PremiumsState Agencies Employers - Pay Go PremiumsState Agencies Employees - Pay Go PremiumsRetiree Premiums - PPBRetiree Premiums - MCOLocal Agencies - Initial UAAL OPEB FundingState Agencies - Initial UAAL OPEB FundingMandatory Transfer from General RevenuePEIA Mandatory Transfer to WV RHBT 2007PEIA Mandatory Transfer to WV RHBT 2006Non Par PremiumsInvestment Income	\$ $17,254,370 \\92,031,173 \\21,122,420 \\57,218,997 \\1,994,652 \\4,761,728 \\34,000,000 \\39,674,000 \\82,763,255 \\27,679,595 \\5,034,823 \\1,076,275 \\$
Total Revenue	\$ 384,611,288
Program Expenses Non-Medicare Medical Claims Non-Medicare Prescription Drug Claims Non-Medicare Managed Care Capitations MAPD Capitations Administration Retiree Assistance Program Director's Discretionary Fund Total Expenses	\$ 48,203,673 19,777,370 4,514,573 56,700,000 7,514,615 3,615,809 507,707 140,833,747
Fiscal Year Results	\$ 243,777,541
Beginning Plan Reserve	7,350,798
Ending Plan Reserve	\$ 251,128,339

KEY ASSUMPTIONS							
Pay Go Monthly Premium	\$	151.08	Claim and Other Expense Trends				
Additional Retiree Premiums	\$	(9,300,000)	<u>Eligibility</u>	Medical	Drugs		
			Non-Medicare	6.5%	12.0%		
			Medicare	6.5%	12.0%		
			Capitations		5.0%		
			Administrative Expense		5.0%		
Number of Net New Retirees		1,000	Pay Go Monthly Premium		10.0%		

WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST FINANCIAL FORECAST FISCAL YEAR 2009

PERIOD 7/1/2008 - 6/30/2009

		TRUST Total
Revenues Local Agencies - Pay Go Premiums State Agencies Employers - Pay Go Premiums Retiree Premiums - PPB Retiree Premiums - MCO Local Agencies - Initial UAAL OPEB Funding State Agencies - Initial UAAL OPEB Funding Mandatory Transfer from General Revenue PEIA Mandatory Transfer to WV RHBT 2008 Non Par Premiums	\$	18,979,808 101,121,224 23,347,728 64,988,463 2,265,496 - - - 5,881,680 13,243,113
Investment Income Total Revenue	\$	13,343,113 229,927,512
Program Expenses Non-Medicare Medical Claims Non-Medicare Prescription Drug Claims Non-Medicare Managed Care Capitations MAPD Capitations Administration Retiree Assistance Program Director's Discretionary Fund Total Expenses	\$ \$	58,972,748 23,896,967 4,966,030 62,511,750 7,890,346 3,905,074 518,154 162,661,069
Fiscal Year Results	\$	67,266,443
Beginning Plan Reserve		251,128,339
Ending Plan Reserve	\$	318,394,782

Pay Go Monthly Premium	\$ 166.19	Claim and C	Other Expense Trends	
Additional Retiree Premiums	\$ 4,700,000	Eligibility	Medical	Drugs
		Non-Medicare	7.0%	12.5%
		Medicare	7.0%	12.5%
		Capitations		10.0%
		Administrative Expense		5.0%
Number of Net New Retirees	1,000	Pay Go Monthly Premium		10.0%

WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST FINANCIAL FORECAST FISCAL YEAR 2010

PERIOD 7/1/2009 - 6/30/2010

	TRUST Total
Revenues Local Agencies - Pay Go Premiums State Agencies Employees - Pay Go Premiums Retiree Premiums - PPB Retiree Premiums - MCO Local Agencies - Initial UAAL OPEB Funding State Agencies - Initial UAAL OPEB Funding Mandatory Transfer from General Revenue PEIA Mandatory Transfer to WV RHBT 2009 Non Par Premiums Investment Income	 \$ 20,877,788 \$ 111,091,690 \$ 25,824,159 75,210,559 2,621,838 - - 6,870,979 16,792,971 \$ 259,289,984
Program Expenses Non-Medicare Medical Claims Non-Medicare Prescription Drug Claims Non-Medicare Managed Care Capitations MAPD Capitations Administration Retiree Assistance Program Director's Discretionary Fund Total Expenses	 \$ 67,447,167 28,857,927 5,462,633 68,919,204 8,284,863 4,217,479 534,549 \$ 183,723,822
Fiscal Year Results Beginning Plan Reserve Ending Plan Reserve	 \$ 75,566,162 318,394,782 \$ 393,960,944

KEY ASSUMPTIONS	
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Pay Go Monthly Premium	\$ 182.81	Claim and O	ther Expense Trends	
Additional Retiree Premiums	\$ 6,600,000	Eligibility	Medical	Drugs
		Non-Medicare	7.5%	13.0%
		Medicare	7.5%	13.0%
		Capitations		10.0%
		Administrative Expense		5.0%
Number of Net New Retirees	1,000	Pay Go Monthly Premium		10.0%

WEST VIRGINIA RETIREE HEALTH BENEFIT TRUST FINANCIAL FORECAST FISCAL YEAR 2011

PERIOD 7/1/2010 - 6/30/2011

	FRUST Total
Revenues Local Agencies - Pay Go Premiums State Agencies Employers - Pay Go Premiums Retiree Premiums - PPB Retiree Premiums - MCO Local Agencies - Initial UAAL OPEB Funding State Agencies - Initial UAAL OPEB Funding Mandatory Transfer from General Revenue PEIA Mandatory Transfer to WV RHBT 2010 Non Par Premiums Investment Income	\$ 22,965,567 122,015,512 28,591,920 89,286,908 3,112,539 - - - - - 8,026,677 20,667,335
Total Revenue	\$ 294,666,458
Program Expenses Non-Medicare Medical Claims Non-Medicare Prescription Drug Claims Non-Medicare Managed Care Capitations MAPD Capitations Administration Retiree Assistance Program Director's Discretionary Fund Total Expenses	\$ 77,200,657 34,850,315 6,008,897 75,983,423 8,699,106 4,554,878 549,805 207,847,081
Fiscal Year Results	\$ 86,819,377
Beginning Plan Reserve	393,960,944
Ending Plan Reserve	\$ 480,780,322

Pay Go Monthly Premium	\$ 201.09	Claim and O	ther Expense Trends	
Additional Retiree Premiums	\$ 9,600,000	Eligibility	Medical	Drugs
		Non-Medicare	8.0%	13.5%
		Medicare	8.0%	13.5%
		Capitations		10.0%
		Administrative Expense		5.0%
Number of Net New Retirees	1,000	Pay Go Monthly Premium		10.0%

					Fiscal Ye	ear 2003						
Exposure												
	<u>Jul-02</u>	<u>Aug-02</u>	Sep-02	<u>Oct-02</u>	<u>Nov-02</u>	Dec-02	<u>Jan-03</u>	Feb-03	<u>Mar-03</u>	<u>Apr-03</u>	<u>May-03</u>	<u>Jun-03</u>
NonMed_NonDrug	9,993	9,903	10,041	10,063	10,048	10,078	10,138	10,114	10,100	12,217	10,032	9,964
Med_NonDrug	28,437	28,641	28,726	28,707	28,785	28,832	28,775	28,845	28,866	29,501	28,895	28,734
NonMed_Drug	9,619	9,535	9,668	9,689	9,676	9,703	9,759	9,736	9,724	11,324	9,659	9,593
Med_Drug	28,492	28,699	28,784	28,765	28,842	28,889	28,833	28,903	28,923	30,675	28,954	28,791
	Jul-02	Aug-02	Sep-02	Oct-02	Nov-02	Dec-02	Jan-03	Feb-03	Mar-03	Apr-03	May-03	Jun-03
NonMed_NonDrug	\$165.13	\$188.13	\$188.35	\$220.28	\$223.79	\$175.48	\$245.70	\$199.69	\$238.85	\$182.03	\$247.69	\$225.70
Med_NonDrug	91.29	90.46	89.71	95.81	90.49	90.36	121.02	94.69	110.37	103.84	107.33	102.60
NonMed_Drug	58.94	84.79	83.56	90.82	85.87	91.53	90.53	79.90	89.79	79.82	95.75	99.55
Med_Drug	<u>93.72</u>	<u>130.77</u>	129.97	140.27	<u>135.16</u>	<u>146.82</u>	144.86	<u>131.12</u>	144.45	<u>138.49</u>	<u>154.39</u>	160.00
Total	\$409.08	\$494.16	\$491.59	\$547.17	\$535.31	\$504.18	\$602.11	\$505.40	\$583.45	\$504.18	\$605.16	\$587.85
Change From Prior			-									
NonMed_NonDrug	-36.8%	-12.9%	-30.4%	-29.6%	4.0%	-20.9%	2.2%	-22.6%	-14.0%	-28.7%	-1.3%	-10.5%
Med_NonDrug	5.9%	-2.9%	3.6%	-6.3%	1.8%	-1.6%	-3.5%	-3.4%	14.1%	9.8%	8.8%	9.2%
NonMed_Drug	9.4%	3.5%	6.4%	1.5%	-3.2%	3.8%	-1.9%	-3.2%	3.4%	-14.0%	-0.9%	3.5%
Med_Drug	<u>23.3%</u>	<u>12.4%</u>	<u>17.4%</u>	<u>13.8%</u>	<u>10.2%</u>	<u>16.0%</u>	<u>9.4%</u>	<u>7.0%</u>	<u>7.5%</u>	<u>0.7%</u>	<u>10.2%</u>	<u>10.9%</u>
Total	-14.3%	-2.6%	-10.1%	-12.9%	3.8%	-4.6%	2.0%	-9.9%	-2.1%	-13.1%	3.2%	0.2%
Change From Prior	Year - Quart	ter to Quart	-									
NonMed_NonDrug			-27.6%			-17.4%			-11.8%			-13.5%
Med_NonDrug			2.1%			-2.2%			1.8%			9.3%
NonMed_Drug			6.0%			0.7%			-0.5%			-3.7%
Med_Drug			<u>16.9%</u>			<u>13.4%</u>			<u>8.0%</u>			<u>7.3%</u>
Total			-8.9%			-5.1%			-3.2%			-3.2%
Change From Prior	Year - Year	to Year An	-			44.00/						47 50/
NonMed_NonDrug			-7.5%			-11.6%			-15.7%			-17.5%
Med_NonDrug			15.5%			-0.5%			-0.3%			2.7%
NonMed_Drug			15.5%			9.0%			5.5%			0.3%
Med_Drug			<u>65.0%</u>			<u>21.9%</u>			<u>13.5%</u>			<u>11.0%</u>
Total			11.4%			0.2%			-3.6%			-5.0%

					Fiscal Ye	ear 2004						
Exposure												
	<u>Jul-03</u>	<u>Aug-03</u>	<u>Sep-03</u>	<u>Oct-03</u>	<u>Nov-03</u>	Dec-03	<u>Jan-04</u>	<u>Feb-04</u>	<u>Mar-04</u>	<u> Apr-04</u>	<u>May-04</u>	<u>Jun-04</u>
NonMed_NonDrug	12,281	12,519	12,636	11,939	11,800	13,119	13,132	13,089	13,172	13,171	13,569	13,366
Med_NonDrug	29,617	29,510	29,369	29,825	29,932	30,087	30,146	30,193	30,217	30,197	31,151	30,560
NonMed_Drug	11,388	11,611	11,722	11,073	10,941	12,155	12,168	12,129	12,203	12,202	12,572	12,382
Med_Drug	30,795	30,683	30,536	31,014	31,125	31,287	31,350	31,400	31,424	31,401	32,398	31,785
	Jul-03	Aug-03	Sep-03	Oct-03	Nov-03	Dec-03	Jan-04	Feb-04	Mar-04	Apr-04	May-04	Jun-04
NonMed NonDrug	\$175.84	\$165.40	\$208.39	\$253.85	\$199.27	\$217.17	\$213.86	\$215.01	\$241.38	\$187.46	\$210.29	\$222.39
Med NonDrug	96.46	94.43	102.25	106.45	92.90	100.40	137.17	113.01	129.09	116.90	107.12	113.60
NonMed_Drug	56.39	76.22	81.46	93.40	86.51	115.68	85.05	81.85	90.92	87.63	77.21	81.84
Med Drug	80.56	136.99	115.91	154.85	141.87	206.25	156.84	145.44	165.67	160.01	138.69	97.30
Total	\$409.25	\$473.04	\$508.02	\$608.54	\$520.54	\$639.49	\$592.92	\$555.31	\$627.05	\$552.00	\$533.31	\$515.13
Change From Prior	Year - Montl	h to Month	Analysis									
NonMed_NonDrug	6.5%	-12.1%	10.6%	15.2%	-11.0%	23.8%	-13.0%	7.7%	1.1%	3.0%	-15.1%	-1.5%
Med_NonDrug	5.7%	4.4%	14.0%	11.1%	2.7%	11.1%	13.3%	19.3%	17.0%	12.6%	-0.2%	10.7%
NonMed_Drug	-4.3%	-10.1%	-2.5%	2.8%	0.7%	26.4%	-6.1%	2.4%	1.3%	9.8%	-19.4%	-17.8%
Med_Drug	<u>-14.0%</u>	<u>4.8%</u>	<u>-10.8%</u>	<u>10.4%</u>	<u>5.0%</u>	<u>40.5%</u>	<u>8.3%</u>	<u>10.9%</u>	<u>14.7%</u>	<u>15.5%</u>	<u>-10.2%</u>	<u>-39.2%</u>
Total	0.0%	-4.3%	3.3%	11.2%	-2.8%	26.8%	-1.5%	9.9%	7.5%	9.5%	-11.9%	-12.4%
Change From Prior	Year - Quart	ter to Quart	-									
NonMed_NonDrug			1.5%			8.2%			-2.0%			-5.4%
Med_NonDrug			8.0%			8.3%			16.3%			7.6%
NonMed_Drug			-5.8%			10.2%			-0.9%			-10.3%
Med_Drug			<u>-5.9%</u>			<u>19.1%</u>			<u>11.3%</u>			<u>-12.6%</u>
Total			-0.3%			11.5%			5.0%			-5.7%
Change From Prior	Year - Year	to Year Ana	alysis									
NonMed_NonDrug			-11.2%			-5.0%			-2.2%			0.4%
Med_NonDrug			4.1%			6.7%			10.7%			10.3%
NonMed_Drug			-2.2%			0.2%			0.1%			-1.6%
Med_Drug			<u>5.9%</u>			<u>7.7%</u>			<u>8.5%</u>			<u>3.1%</u>
Total			-3.1%			1.0%			3.2%			2.6%

					Fiscal Ye	ar 2005						
Exposure												
	<u>Jul-04</u>	<u>Aug-04</u>	<u>Sep-04</u>	<u>Oct-04</u>	<u>Nov-04</u>	Dec-04	<u>Jan-05</u>	Feb-05	<u>Mar-05</u>	<u>Apr-05</u>	<u>May-05</u>	<u>Jun-05</u>
NonMed_NonDrug	13,923	14,586	14,603	14,608	14,677	14,699	14,636	14,677	14,667	14,523	14,444	14,416
Med_NonDrug	30,671	30,821	30,934	31,117	31,106	31,109	31,241	31,264	31,267	31,401	31,412	31,457
NonMed_Drug	12,897	13,506	13,523	13,527	13,592	13,612	13,553	13,591	13,585	13,451	13,376	13,353
Med_Drug	31,901	32,058	32,175	32,367	32,356	32,361	32,500	32,524	32,527	32,679	32,690	32,739
	Jul-04	Aug-04	Sep-04	Oct-04	Nov-04	Dec-04	Jan-05	Feb-05	Mar-05	Apr-05	May-05	Jun-05
NonMed_NonDrug	\$176.44	\$185.75	\$191.72	\$180.34	\$191.79	\$183.89	\$217.01	\$215.72	\$241.01	\$206.10	\$218.07	\$255.43
Med_NonDrug	101.13	106.37	106.94	105.84	104.23	102.09	143.16	125.37	131.56	122.01	121.31	120.08
NonMed_Drug	70.13	77.09	94.73	71.40	90.87	102.08	93.88	87.98	78.57	72.18	92.83	90.00
Med_Drug	107.55	143.58	<u>180.98</u>	<u>136.83</u>	167.95	<u>187.16</u>	169.71	<u>157.75</u>	181.65	<u>174.18</u>	<u>180.01</u>	<u>187.05</u>
Total	\$455.26	\$512.78	\$574.37	\$494.42	\$554.86	\$575.21	\$623.77	\$586.82	\$632.79	\$574.47	\$612.22	\$652.56
Change From Prior			Analysis									
NonMed_NonDrug	0.3%	12.3%	-8.0%	-29.0%	-3.7%	-15.3%	1.5%	0.3%	-0.2%	9.9%	3.7%	14.9%
Med_NonDrug	4.8%	12.6%	4.6%	-0.6%	12.2%	1.7%	4.4%	10.9%	1.9%	4.4%	13.2%	5.7%
NonMed_Drug	24.4%	1.1%	16.3%	-23.5%	5.0%	-11.8%	10.4%	7.5%	-13.6%	-17.6%	20.2%	10.0%
Med_Drug	<u>33.5%</u>	<u>4.8%</u>	<u>56.1%</u>	<u>-11.6%</u>	<u>18.4%</u>	<u>-9.3%</u>	<u>8.2%</u>	<u>8.5%</u>	<u>9.6%</u>	<u>8.9%</u>	<u>29.8%</u>	<u>92.2%</u>
Total	11.2%	8.4%	13.1%	-18.8%	6.6%	-10.1%	5.2%	5.7%	0.9%	4.1%	14.8%	26.7%
Change From Prior	rear - Quart	er to Quart	-									
NonMed_NonDrug			0.8%			-17.0%			0.5%			9.6%
Med_NonDrug			7.3%			4.1%			5.5%			7.6%
NonMed_Drug			13.0%			-10.6%			1.0%			3.4%
Med_Drug			<u>29.6%</u>			<u>-2.2%</u>			<u>8.8%</u>			<u>36.7%</u>
Total			10.9%			-8.1%			3.8%			14.9%
Change From Prior	Year - Year	to Year An	-									
NonMed_NonDrug			0.2%			-6.2%			-5.6%			-1.9%
Med_NonDrug			10.0%			9.0%			6.1%			6.1%
NonMed_Drug			2.4%			-3.3%			-2.8%			0.7%
Med_Drug			<u>10.4%</u>			<u>4.6%</u>			<u>4.1%</u>			<u>16.1%</u>
Total			5.1%			-0.1%			-0.3%			4.8%

					Fiscal Ye	ar 2006						
Exposure												
	<u>Jul-05</u>	<u>Aug-05</u>	<u>Sep-05</u>	<u>Oct-05</u>	<u>Nov-05</u>	Dec-05	<u>Jan-06</u>	<u>Feb-06</u>	<u>Mar-06</u>	<u>Apr-06</u>	<u>May-06</u>	<u>Jun-06</u>
NonMed_NonDrug	14,864	15,500	15,616	15,455	15,454	15,534	15,496	15,694	15,588	15,382	15,357	15,358
Med_NonDrug	31,544	31,669	31,771	31,901	31,968	32,040	32,050	32,081	32,107	32,174	32,183	32,149
NonMed_Drug	13,767	14,356	14,463	14,312	14,314	14,389	14,353	14,534	14,440	14,248	14,226	14,229
Med_Drug	32,828	32,961	33,067	33,204	33,275	33,350	33,360	33,393	33,422	33,491	33,497	33,463
	Jul-05	Aug-05	Sep-05	Oct-05	Nov-05	Dec-05	Jan-06	Feb-06	Mar-06	Apr-06	May-06	Jun-06
NonMed NonDrug	\$179.05	\$264.41	\$196.20	\$213.35	\$198.18	\$210.06	\$210.37	\$218.83	\$238.41	\$197.78	\$246.39	\$217.70
Med NonDrug	102.96	116.45	111.78	118.00	114.01	109.69	156.41	125.43	138.03	123.17	128.18	123.20
NonMed_Drug	48.48	95.14	94.71	98.01	101.17	106.09	102.85	98.07	111.88	103.54	115.68	119.50
Med_Drug	124.20	177.43	176.68	179.58	182.56	193.32	186.23	175.06	198.02	181.81	202.88	204.55
Total	\$454.69	\$653.44	\$579.38	\$608.93	\$595.92	\$619.15	\$655.85	\$617.39	\$686.34	\$606.30	\$693.13	\$664.96
Change From Prior			Analysis									
NonMed_NonDrug	1.5%	42.3%	2.3%	18.3%	3.3%	14.2%	-3.1%	1.4%	-1.1%	-4.0%	13.0%	-14.8%
Med_NonDrug	1.8%	9.5%	4.5%	11.5%	9.4%	7.4%	9.2%	0.0%	4.9%	1.0%	5.7%	2.6%
NonMed_Drug	-30.9%	23.4%	0.0%	37.3%	11.3%	3.9%	9.6%	11.5%	42.4%	43.5%	24.6%	32.8%
Med_Drug	<u>15.5%</u>	<u>23.6%</u>	<u>-2.4%</u>	<u>31.2%</u>	<u>8.7%</u>	<u>3.3%</u>	<u>9.7%</u>	<u>11.0%</u>	<u>9.0%</u>	<u>4.4%</u>	<u>12.7%</u>	<u>9.4%</u>
Total	-0.1%	27.4%	0.9%	23.2%	7.4%	7.6%	5.1%	5.2%	8.5%	5.5%	13.2%	1.9%
Change From Prior	Year - Quart	ter to Quart										
NonMed_NonDrug			15.5%			11.8%			-0.9%			-2.6%
Med_NonDrug			5.3%			9.5%			4.9%			3.1%
NonMed_Drug			-1.5%			15.5%			20.1%			32.8%
Med_Drug			<u>10.7%</u>			<u>12.9%</u>			<u>9.9%</u>			<u>8.9%</u>
Total			9.4%			12.3%			6.3%			6.8%
Change From Prior	Year - Year	to Year Ana	-									
NonMed_NonDrug			1.4%			8.9%			8.5%			5.2%
Med_NonDrug			5.7%			6.9%			6.7%			5.6%
NonMed_Drug			-2.3%			4.8%			9.7%			17.0%
Med_Drug			<u>12.3%</u>			<u>16.6%</u>			<u>16.7%</u>			<u>10.5%</u>
Total			4.6%			10.0%			10.6%			8.6%

					Fiscal Ye	ar 2007						
Exposure												
	<u>Jul-06</u>	<u>Aug-06</u>	<u>Sep-06</u>	<u>Oct-06</u>	<u>Nov-06</u>	Dec-06	<u>Jan-07</u>	Feb-07	<u>Mar-07</u>	<u>Apr-07</u>	<u>May-07</u>	
NonMed_NonDrug	15,718	16,375	16,476	16,472	16,483	15,710	16,604	16,581	16,525	16,454	16,279	
Med_NonDrug	32,311	32,405	32,483	32,493	32,556	30,649	32,675	32,685	32,697	32,644	32,642	
NonMed_Drug	14,559	15,171	15,265	15,262	15,272	14,554	15,385	15,365	15,312	15,247	15,086	
Med_Drug	33,633	33,734	33,816	33,827	33,894	31,890	34,021	34,034	34,046	33,988	33,984	
	Jul-06	Aug-06	Sep-06	Oct-06	Nov-06	Dec-06	Jan-07	Feb-07	Mar-07	Apr-07	May-07	
NonMed NonDrug	\$176.60	\$213.52	\$183.63	\$199.57	\$201.97	\$236.21	\$245.24	\$209.72	\$232.65	\$224.60	\$222.57	
Med_NonDrug	109.99	123.63	115.79	125.06	118.98	123.34	169.65	128.47	148.99	128.09	133.28	
NonMed Drug	55.51	102.97	105.88	109.22	109.40	119.84	113.27	100.81	114.81	109.30	133.23	
Med Drug	100.04	191.76	185.40	197.43	194.33	212.44	203.37	182.50	208.01	198.90	244.39	
Total	\$442.15	\$631.88	\$590.71	\$631.27	\$624.69	\$691.83	\$731.52	\$621.50	\$704.45	\$660.90	\$733.47	
Change From Prior Y	'ear - Montl	h to Month	Analysis									
NonMed_NonDrug	-1.4%	-19.2%	-6.4%	-6.5%	1.9%	12.4%	16.6%	-4.2%	-2.4%	13.6%	-9.7%	
Med_NonDrug	6.8%	6.2%	3.6%	6.0%	4.4%	12.4%	8.5%	2.4%	7.9%	4.0%	4.0%	
NonMed_Drug	14.5%	8.2%	11.8%	11.4%	8.1%	13.0%	10.1%	2.8%	2.6%	5.6%	15.2%	
Med_Drug	<u>-19.4%</u>	<u>8.1%</u>	<u>4.9%</u>	<u>9.9%</u>	<u>6.4%</u>	<u>9.9%</u>	<u>9.2%</u>	<u>4.2%</u>	<u>5.0%</u>	<u>9.4%</u>	<u>20.5%</u>	
Total	-2.8%	-3.3%	2.0%	3.7%	4.8%	11.7%	11.5%	0.7%	2.6%	9.0%	5.8%	
Change From Prior Y	'ear - Quart	er to Quart	er Analysis									
NonMed_NonDrug			-10.3%			2.6%			3.0%			
Med_NonDrug			5.5%			7.5%			6.5%			
NonMed_Drug			10.9%			10.9%			5.1%			
Med_Drug			<u>-0.2%</u>			<u>8.8%</u>			<u>6.2%</u>			
Total			-1.3%			6.8%			5.0%			
Change From Prior Y	'ear - Year	to Year Ana	alysis									
NonMed_NonDrug			-0.9%			-2.8%			-1.8%			
Med_NonDrug			5.6%			5.2%			5.7%			
NonMed_Drug			19.9%			18.4%			14.3%			
Med_Drug			<u>7.9%</u>			<u>7.0%</u>			<u>6.1%</u>			
Total			6.0%			4.8%			4.4%			