

Travis County Commissioners Court Agenda Request

Meeting Date: Tuesday, May 8, 2012

Prepared By/Phone Number: C.W. Bruner (854-9760), Bonnie Floyd

Elected/Appointed Official/Dept. Head: Cyd Grimes

Commissioners Court Sponsor: Judge Biscoe

Approve Modification No. 15 to Contract No. 02T00005OJ, United Healthcare Services, Inc., for Administrative Services Agreement.

➤ Purchasing Recommendation and Comments: Purchasing concurs with department and recommends approval of requested action. This procurement action meets compliance requirements as outlined by the statutes.

The contract provides the group health benefit plans to Travis County employees, retirees and their dependents. The Commissioners Court approved the contract for Group Health Benefits on September 25, 2001.

This Modification No. 15 amends the Administrative Services Agreement Service Fees which is necessary to create a systems interface and reporting services to provide claims information on a monthly basis to the excess risk or stop-loss administrator. These services, which are required for excess risk or stop-loss administration, are subject to an additional fee to be effective November 1, 2011.

Modification No. 14 was previously issued to correct scriveners' errors in Modification No. 13. The Administrative Services Agreement requires us to provide access to networks and to network provider discounts. We are modifying many network provider agreements to include alternative payment methodologies, which may include various conditional payments, withholds, bonus payments, and incentives, if the network providers meet certain standards described in this modification. It was approved by the Commissioners Court on December 20, 2011.

Modification No. 13 extended the contract for twelve months, through

September 30, 2012. It was approved by the Commissioners Court on September 27, 2011.

Modification No. 12 was previously issued to amend the Administrative Services Agreement between United Healthcare and the County to incorporate the agreement entitled "Early Retiree Reinsurance Program Data Release and Service Agreement for Self-Fund Plans". The Patient Protection and Affordable Care Act provides for reimbursement for certain expenses related to "early retirees". To accommodate access to this reimbursement, the final rule requires Plan Sponsors and Third Party Administrators to enter into agreements that authorize the third party administrator to share the medical information necessary to review claims of early retirees for reimbursement with the United States Department of Health and Human Services and its agents and subcontractors. On May 22, 2010, the Commissioners Court authorized and approved the Risk & Benefit Manager to apply for the new early retiree 80% reinsurance subsidy described in the Healthcare Reform Act.

Modification No. 11 was previously issued to extend the contract for twelve months, through September 30, 2011. It was approved by the Commissioners Court on September 28, 2010.

Modification No. 10 was previously issued to extend the contract for twelve months, through September 30, 2010. It was approved by the Commissioners Court on September 22, 2009.

Modification No. 9 was previously issued to extend the contract for twelve months, through September 30, 2009. It was approved by the Commissioners Court on September 30, 2008.

Modification No. 8 was previously issued to extend the contract for twelve months, through September 30, 2008. It was approved by the Commissioners Court on September 25, 2007.

Modification No. 7 was previously issued to extend the contract for twelve months, through September 30, 2007. It was approved by the Commissioners Court on September 12, 2006.

Modification No. 6 was previously issued to extend the contract for twelve months, through September 30, 2006. It was approved by the Commissioners Court on September 20, 2005.

Modification No. 5 was previously issued to amend the Administrative Services Agreement. It was approved by the Commissioners Court on April 19, 2005.

Modification No. 4 was previously issued to exercise the third option period to extend the contract for twelve months, through September 30, 2005. It was approved by the Commissioners Court on September 28, 2004.

Modification No. 3 was previously issued to exercise the second option period to extend the contract for twelve months, through September 30, 2004. It was approved by the Commissioners Court on September 23, 2003.

Modification No. 2 was previously issued to amend the Administrative Services Agreement to incorporate the Protected Health Information as defined under the privacy regulations issued pursuant to the Health Insurance Portability and Accountability Act (HIPAA). It was approved by the Commissioners Court on May 20, 2003.

Modification No. 1 was previously issued to exercise the first option period to extend the contract for twelve months, through September 30, 2003. It was approved by the Commissioners Court on September 24, 2002.

➤ Contract Expenditures: Within the last twelve (12) months \$4,069,074.43 has been spent against this contract.

Contract Modification Information:

Modification Amount: Estimated Requirement

Modification Type: Bilateral

Modification Period: October 1, 2011 through September 30, 2012

Fundir	ng	Informa	tion	:

☐ Purchase Requisition in H.T.E.: N/A
522-4709 (Admin. PPO), 526-1145-522-4716 (Admin. CEPO), 526-
1145-522-4717 (Admin. Retiree)
☐ Comments: Requisitions are processed monthly based on current
eligible members and the contract rates.

MODIFICATION OF CONTRACT NUMBER: Contract #02T00005OJ, Administrative Services PAGE 1 OF 7 PAGES					
ISSUED BY: PURCHASING OFFICE 700 LAVACA STREET, 8 TH FLOOR	PURCHASING AGENT ASST: CW Bruner TEL. NO: (512) 854-9760	DATE PREPARED: May 1, 2012			
AUSTIN, TX 78701 ISSUED TO: United HealthCare Services, Inc. Attn: Frank Sievel 185 Asylum Street	FAX NO: (512) 854-4211 MODIFICATION NO.:	EXECUTED DATE OF ORIGINAL CONTRACT: SEPTEMBER 11, 2001			
Hartford, Connecticut 06103-3408					
ORIGINAL CONTRACT TERM DATES: Octobe	r 1, 2001-October 1-2002 CURRENT CONTRACT TERM DAT	ES: October 1, 2011-October 1-2012			
FOR TRAVIS COUNTY INTERNAL USE ONLY	Y: Original Contract Amount: \$ N/A Current Modified	Amount \$ N/A			
DESCRIPTION OF CHANGES: Except as provided herein, all terms, conditions, and provisions of the document referenced above as heretofore modified, remain unchanged and in full force and effect. This amendment number fifteen to the Administrative Services Agreement is made by the following parties: United HealthCare Services, Inc., formerly known as United HealthCare Insurance Company, a Texas corporation ("Our", "Us", and "We" in this Amendment) and Travis County, Texas ("You" or "Your" in this Amendment"). RECITALS You and We entered into a contract for administrative services for group employee benefits, such as self funded health coverage for county employees, retirees, and their dependents that began October 1, 2001. Section 14.5 Amendment of the Administrative Services Agreement allows Us and You to amend the Agreement in writing signed by both of Us. Section 8.2 Changes in Service Fees provides those circumstances under which changes in rates are allowed. When You contracted for excess risk or stop-loss coverage from another company, certain claims information needed to be provided to the excess risk or stop-loss administrator. To do this, a systems interface and reporting services are needed. These services which are required for excess risk or stop-loss administration is subject to an additional fee to be effective November 1, 2011. AGREEMENT TO AMEND CONTRACT You and We agree to amend the Administrative Services Agreement as follows:					
monthly basis, we shall provide required by the excess risk or stop- 2.0 MODIFICATION TO FEES	 1.0 We agree to provide a systems interface with the excess or stop-loss company that you select. On a monthly basis, we shall provide an electronic upload of claims information in our possession that is required by the excess risk or stop-loss company that you select. 2.0 MODIFICATION TO FEES 2.1 Pursuant to Section 8.2 Changes in Service Fees and Section 9.1 Services Begin of the Administrative Services 				
Agreement, sections 2 and 3 of Modification 13 are deleted and the following sections 2 and 3 are inserted in their place in Modification 13:					
Note to Vendor: [X] Complete and execute (sign) your portion of the signature block section below for all copies and return all signed copies to Travis County. [] DO NOT execute and return to Travis County. Retain for your records.					
United HealthCare Services, Inc.		□ DBA			
		CORPORATION			
	□ OTHER				
BY: Frank Sievel	DATE:				
SIGNATURE PRINT NAME: Frank Sievel TITLE: Regional. Contract Manager, ITS DULY AUTHORIZED AGENT					
TRAVIS COUNTY, TEXAS		DATE:			
BY:CYD V. GRIMES, C.P.M., TRAVIS COUNTY PURCHASING AGENT					
TRAVIS COUNTY, TEXAS		DATE:			
BY: SAMUEL T. BISCOE, TRAVIS COUNTY JUDGE					

2.0 FEES FOR FY 2012

2.1 Pursuant to Section 8.2 Changes in Service Fees and Section 9.1 Services Begin of the Administrative Services Agreement as amended herein, the fees applicable for the option period from October 1, 2011 through October 31, 2011 are as follows:

Administrative Fees with the following components included:

Pharmacy Fee with Rx Solutions

United Behavioral Health (UHB) Fee at National Service Center—PPO Optum Fees for Nurseline and Ps Personal Health Support Ps PHS/HeNotes, including Diabetes, Coronary Artery Disease and Congestive Heart Failure Spectera Fee

Medicare Part D Reporting

On Site Customer Service Representative

Data Extracts and Expanded Employer Customer Reporting (eCR)

The sum of the following prior to rebates:

- \$39.58 per month per Employee covered under the "United HealthCare Choice Plus" portion of the Plan.
- \$39.58 per month per Employee covered under the "United HealthCare Choice" portion of the Plan.
- \$39.58 per month per Employee covered under the "United HealthCare Coinsured Exclusive Provider Network" portion of the Plan.

Pharmacy Average Wholesale Price (AWP) Contract Rates

There is more than one applicable rate for pharmacy services because of the variety of services involved. Your contract rates for prescription drugs are stated in Attachment A to Modification 14. We use Medispan's national drug data file as the source for average wholesale price (AWP) information. We reserve the right to revise the pricing and adopt a new source or benchmark if there are material industry changes in pricing methodologies and will give you notice of any revisions or new sources or benchmarks at least 30 days before they are implemented, if possible and, if not, as soon as possible.

Service Fee for Facility Reasonable Charge Determination and Negotiation

You will pay a fee for our services, as described in Section 12, equal to thirty (30%) of the amount of the reductions obtained through our efforts.

We will bill you for the amounts that you owe us. The bill will reflect reductions obtained during the preceding month and adjustments, if any, from previous months.

Service Fees for Shared Savings Program

You will pay a fee equal to thirty-five (35%) of the "Savings Obtained" as a result of the Shared Savings Program as described in Section 12. "Savings Obtained" means the amount that would have been payable to a health care provider, including amounts payable by both the Participant and the Plan, if no discount were available, minus the amount that is payable to the health care provider, again, including amounts payable by both the Participant and the Plan, after the discount is taken.

Service Fees for Medicare Cross-over Program

\$1.46 per month per Employee covered as a Medicare Eligible Participant

Service Fees for Benefit Plan for Prescriptions ONLY for Retirees Only

\$2.10 per month per Employee covered by the Benefit Plan for Prescriptions ONLY for Retirees

2.2 Pursuant to Section 8.2 Changes in Service Fees and Section 9.1 Services Begin of the Administrative Services Agreement as amended herein, the fees applicable for the option period from November 1, 2011 to October 1, 2012 are as follows:

Administrative Fees with the following components included:

Pharmacy Fee with Rx Solutions
United Behavioral Health (UHB) Fee at National Service Center—PPO

Optum Fees for Nurseline and Ps Personal Health Support Ps PHS/HeNotes, including Diabetes, Coronary Artery Disease and Congestive Heart Failure Spectera Fee

Medicare Part D Reporting

On Site Customer Service Representative

Data Extracts and Expanded Employer Customer Reporting (eCR)

Systems Interface and Reporting services for stop-loss

The sum of the following prior to rebates:

- \$40.37 per month per Employee covered under the "United HealthCare Choice Plus" portion of the Plan.
- \$40.37 per month per Employee covered under the "United HealthCare Choice" portion of the Plan.
- \$40.37 per month per Employee covered under the "United HealthCare Coinsured Exclusive Provider Network" portion of the Plan.

Pharmacy Average Wholesale Price (AWP) Contract Rates

There is more than one applicable rate for pharmacy services because of the variety of services involved. Your contract rates for prescription drugs are stated in Attachment A to Modification 14. We use Medispan's national drug data file as the source for average wholesale price (AWP) information. We reserve the right to revise the pricing and adopt a new source or benchmark if there are material industry changes in pricing methodologies and will give you notice of any revisions or new sources or benchmarks at least 30 days before they are implemented.

Service Fee for Facility Reasonable Charge Determination and Negotiation

You will pay a fee for our services, as described in Section 12, equal to thirty (30%) of the amount of the reductions obtained through our efforts.

We will bill you for the amounts that you owe us. The bill will reflect reductions obtained during the preceding month and adjustments, if any, from previous months.

Service Fees for Shared Savings Program

You will pay a fee equal to thirty-five (35%) of the "Savings Obtained" as a result of the Shared Savings Program as described in Section 12. "Savings Obtained" means the amount that would have been payable to a health care provider, including amounts payable by both the Participant and the Plan, if no discount were available, minus the amount that is payable to the health care provider, again, including amounts payable by both the Participant and the Plan, after the discount is taken.

Service Fees for Medicare Cross-over Program

\$1.46 per month per Employee covered as a Medicare Eligible Participant

Service Fees for Benefit Plan for Prescriptions ONLY for Retirees Only

\$2.10 per month per Employee covered by the Benefit Plan for Prescriptions ONLY for Retirees

3.0 FEES FOR SUBSEQUENT FISCAL YEARS

3.1 If you exercise your option to extend this Administrative Services Agreement for an additional one year option period from October 1, 2012 through September 30, 2013, the fees applicable for that option period are as follows:

Administrative Fees for County Fiscal Year ending September 30, 2013 with the following components included:

Pharmacy Fee with Rx Solutions
United Behavioral Health (UHB) Fee at National Service Center—PPO
Optum Fees for Nurseline and Ps Personal Health Support Ps PHS/HeNotes, including Diabetes, Coronary Artery Disease and Congestive Heart Failure Spectera Fee
Medicare Part D Reporting

On Site Customer Service Representative
Data Extracts and Expanded Employer Customer Reporting (eCR)
Systems Interface and Reporting services for stop-loss

The sum of the following prior to rebates:

- \$40.58 per month per Employee covered under the "United HealthCare Choice Plus" portion of the Plan.
- \$40.58 per month per Employee covered under the "United HealthCare Choice" portion of the Plan.
- \$40.58 per month per Employee covered under the "United HealthCare Coinsured Exclusive Provider Network" portion of the Plan.

Pharmacy Average Wholesale Price (AWP) Contract Rates

There is more than one applicable rate for pharmacy services because of the variety of services involved. Your contract rates for prescription drugs are stated in Attachment A to Modification 14. We use Medispan's national drug data file as the source for average wholesale price (AWP) information. We reserve the right to revise the pricing and adopt a new source or benchmark if there are material industry changes in pricing methodologies and will give you notice of any revisions or new sources or benchmarks at least 30 days before they are implemented.

Service Fee for Facility Reasonable Charge Determination and Negotiation

You will pay a fee for our services, as described in Section 12, equal to thirty (30%) of the amount of the reductions obtained through our efforts.

We will bill you for the amounts that you owe us. The bill will reflect reductions obtained during the preceding month and adjustments, if any, from previous months.

Service Fees for Shared Savings Program

You will pay a fee equal to thirty-five (35%) of the "Savings Obtained" as a result of the Shared Savings Program as described in Section 12. "Savings Obtained" means the amount that would have been payable to a health care provider, including amounts payable by both the Participant and the Plan, if no discount were available, minus the amount that is payable to the health care provider, again, including amounts payable by both the Participant and the Plan, after the discount is taken.

Service Fees for Medicare Cross-over Program

\$1.46 per month per Employee covered as a Medicare Eligible Participant

Service Fees for Benefit Plan for Prescriptions ONLY for Retirees Only

- \$2.10 per month per Employee covered by the Benefit Plan for Prescriptions ONLY for Retirees
- 3.2 If you exercise your option to extend this Administrative Services Agreement for an additional one year option period from October 1, 2013 through September 30, 2014, the fees applicable to the Administrative Fee for that option period are as follows:

Administrative Fees for County Fiscal Year ending September 30, 2013 with the following components included:

Pharmacy Fee with Rx Solutions

United Behavioral Health (UHB) Fee at National Service Center—PPO Optum Fees for Nurseline and Ps Personal Health Support Ps PHS/HeNotes, including Diabetes, Coronary Artery Disease and Congestive Heart Failure Spectera Fee

Medicare Part D Reporting

On Site Customer Service Representative

Data Extracts and Expanded Employer Customer Reporting (eCR)

Systems Interface and Reporting services for stop-loss

The sum of the following prior to rebates:

- \$42.16 per month per Employee covered under the "United HealthCare Choice Plus" portion of the Plan.
- \$42.16 per month per Employee covered under the "United HealthCare Choice" portion of the Plan.
- \$42.16 per month per Employee covered under the "United HealthCare Coinsured Exclusive Provider Network" portion of the Plan.

Pharmacy Average Wholesale Price (AWP) Contract Rates

There is more than one applicable rate for pharmacy services because of the variety of services involved. Your contract rates for prescription drugs are stated in Attachment A to Modification 14. We use Medispan's national drug data file as the source for average wholesale price (AWP) information. We reserve the right to revise the pricing and adopt a new source or benchmark if there are material industry changes in pricing methodologies and will give you notice of any revisions or new sources or benchmarks at least 30 days before they are implemented.

Service Fee for Facility Reasonable Charge Determination and Negotiation

You will pay a fee for our services, as described in Section 12, equal to thirty (30%) of the amount of the reductions obtained through our efforts.

We will bill you for the amounts that you owe us. The bill will reflect reductions obtained during the preceding month and adjustments, if any, from previous months.

Service Fees for Shared Savings Program

You will pay a fee equal to thirty-five (35%) of the "Savings Obtained" as a result of the Shared Savings Program as described in Section 12. "Savings Obtained" means the amount that would have been payable to a health care provider, including amounts payable by both the Participant and the Plan, if no discount were available, minus the amount that is payable to the health care provider, again, including amounts payable by both the Participant and the Plan, after the discount is taken.

Service Fees for Medicare Cross-over Program

\$1.46 per month per Employee covered as a Medicare Eligible Participant

Service Fees for Benefit Plan for Prescriptions ONLY for Retirees Only

\$2.10 per month per Employee covered by the Benefit Plan for Prescriptions ONLY for Retirees

3.0 INCORPORATION OF CONTRACT

3.1 You and We hereby incorporate this amendment into the Administrative Services Agreement as amended by Modifications One, Two, Three, Four, Five, Six, Seven, Eight, Nine, Ten, Eleven, Thirteen, and Fourteen. You and we hereby ratify all of the terms and conditions of the Agreement as amended.

4.0 EFFECTIVE DATE

4.1 The changes stated in this amendment are effective November 1, 2011.



Human Resources Management Department

1010 Lavaca #200

P.O. Box 1748

Austin, Texas 78767

(512) 854-9626 / FAX(512) 854-3128

April 24, 2012

MEMORANDUM

To:

C. W. Bruner, Purchasing Department

Bonnie Floyd

From:

Cindy Purinton- Benefit Administrato

Department:

Human Resources Management Department

Re:

FY12 Benefit Plan Renewals- modification #15

Contract #:

02T00005OJ- UHC Health Plan

Travis County HRMD has modified the FY12 UHC contract administrative fees to include the fee for the needed stoploss reporting. Note: Stoploss coverage is now with Sun Life, however there is an administrative fee for processing the UHC stoploss reporting needed and sending to Sun Life...

Administrative	526-1145-522-4708	EPO
ž.	526-1145-522-4709	PPO
	526-1145-522-4716	CEPO
	526-1145-522-4717	Retiree

Administrative Rates	
Plan administration all plans	39.58 pspm
	(two year rate
	guarantee
	FY13=39.58
	FY14=41.16)

UHC Service	FY09	FY10 Rates changes in Red	FY11 Rates Changes in blue	FY12 UHC Administrative rates Changes in green
Administration See below Note: FY12 there is a .21 pepm adj for FY12 due to no onsite UHC rep for partial year. Also stoploss fee of \$1.00 started in Nov. 11 (short year)	38.89 2.8% increase	\$39.90 2.6% increase	40.50* 1.5% increase And increased care management programs	\$39.5821=39.37 for FY12 only 2 % decrease with a two yr admin rate guarantee FY13=39.58 FY14=41.16
Stoploss reporting fee- added to Administration fee				\$1.00 pepm Started in Nov 2011
Medicare Crossover fee	1.46	1.46	1.46	1.46
Medicare Rx Fee	2.36	2.10	2.10	2.10
Shared Savings	35% of savings	35% of savings	35% of savings	35% of savings
Facility R/C charge negotiation	30% of the amount of reductions obtained by UHC	30% of the amount of reductions obtained by UHC	30% of the amount of reductions obtained by UHC	30% of the amount of reductions obtained by UHC
Individual Stoploss \$200,000 paid w TL incl RX	37.07 pspm 14.9% increase ISL to \$175,000	\$41.86 12.9% increase ISL to \$175,000	46.02 9.9% increase ISL to \$200,000	n/a now with Sun Life
Aggregate Stoploss agg factor incl 125% corridor	1.78 pspm 836.80	1.78 pspm agg factor increase to: \$888.79 6.3%	1.78 pspm Agg factor increase to \$995.13 12%	Coverage discontinued 10-1-11
Expected Claims pspm Annual maximum Liability	\$669.14 \$47,673,11 4.00	711.03 \$52,932,02 4.00 6.4% increase	\$796.10 \$60,962.158 11.4% increase	815.52
ERRP reporting	~3		\$13,000 per yr	discontinued
Medicare Part D subsidy reporting	Included	included	Included	Included

admin fee includes ½ of 1 full time onsite CSR(.60pspm.) Employee vision \$3.00 pspm.
 And increased care management services.

The chart below shows the "add-ons" that are included in our admin fee for the County's plans:

Service	PSPM Fee
UBH (MHSA administration)	\$ 3.05
Stoploss reporting fee	\$1.00pepm
Nurseline	\$ 1.00
Rx administration	\$

	0.81
FT On-Site CSR (UHC and TC each split 1/2 total cost)- we pay out about \$3,000/mo or \$36,000 annually for Jennifer) that includes her salary, benefits, and tech support for her.	\$ 0.63
Spectera Vision (Employee Coverage)	\$ 3.00
Personal Health Support 2.0	Absorbed by UHC
Expanded eCR Reporting	Absorbed by UHC
Medicare Part D Reporting	Absorbed by UHC
Monthly Medical and Quarterly Rx Data Extracts	Absorbed by UHC

UHC keeps 20% of pharmacy rebates. built in guarantee for no more than 5% increase to admin fee. (so fy12 will be \$42.53 or less)

UHC does not charge a separate fee for any other services (like SPD, ID cards, etc), because these items are included in base all-encompassing admin fee.

## TRAVIS COUNTY 4/26/12 Fiscal Year 2012 Account Balance Inquiry 14:57:42 Account number	GM200I13 TRAVI	a commit	1/25/55
Account number : 526-1145-522.47-08 Fund : 526 EMPLOYEE HEALTH BENEFIT Department : 11 HUMAN RESOURCE MANAGEMENT Division : 45 SELF INSURED HEALTH INS Activity basic : 52 GENERAL GOVERNMENT Sub activity : 2 HUMAN RESOURCE MANAGEMENT Element : 47 LOSS ADJUSTMENT EXPENSES Object : 08 A&H ADMINTV & CLAIMS-EPO Original budget : 1,145,046 Revised budget : 899,322 11/04/2011 Actual expenditures - current : 29,495.50 Actual expenditures - ytd : 162,952.81 Unposted expenditures : 00 Encumbered amount : 13,000.00 Unposted encumbrances : 00 Pre-encumbrance amount : 00 Total expenditures & encumbrances: 205,448.31 22.8% Unencumbered balance : 693,873.69 77.2 F5=Encumbrances F7=Project data F8=Misc inquiry			
Fund			14:57:42
Department	Account number : 526-1145-522.4	1 7-08	
Department	Fund : 526 EMPLOYEE	HEALTH BENEFIT	
Division	Department : 11 HUMAN RES	SOURCE MANAGEMENT	
Activity basic : 52 GENERAL GOVERNMENT Sub activity : 2 HUMAN RESOURCE MANAGEMENT Element : 47 LOSS ADJUSTMENT EXPENSES Object : 08 A&H ADMINTV & CLAIMS-EPO Original budget : 1,145,046 Revised budget : 899,322 11/04/2011 Actual expenditures - current . : 29,495.50 Actual expenditures - ytd : 162,952.81 Unposted expenditures : 00 Encumbered amount : 00 Total expenditures & encumbrances : 00 Total expenditures & encumbrances : 205,448.31 22.8% Unencumbered balance : 693,873.69 77.2 F5=Encumbrances F7=Project data F8=Misc inquiry			
Sub activity : 2 HUMAN RESOURCE MANAGEMENT Element : 47 LOSS ADJUSTMENT EXPENSES Object : 08 A&H ADMINTV & CLAIMS-EPO Original budget : 1,145,046 Revised budget : 899,322 11/04/2011 Actual expenditures - current . : 29,495.50 Actual expenditures - ytd : 162,952.81 Unposted expenditures : 00 Encumbered amount : 13,000.00 Unposted encumbrances : 00 Pre-encumbrance amount : 00 Total expenditures & encumbrances: 205,448.31 22.8% Unencumbered balance : 693,873.69 77.2 F5=Encumbrances F7=Project data F8=Misc inquiry			
Element : 47 LOSS ADJUSTMENT EXPENSES Object			
Object			
Original budget			
Revised budget	Object	NIV & CLAIMS-EPO	
F10=Detail trans F11=Acct activity list F12=Cancel F24=More keys	Revised budget	899,322 11/04/2 29,495.50 162,952.81 .00 13,000.00 .00 .00 205,448.31 22. 693,873.69 77. F8=Misc inquiry	. 8%
	F10=Detail trans F11=Acct activity li	st F12=Cancel	F24=More keys

	COUNTY	4/26/12
Fiscal Year 2012 Account Balar	ce Inquiry	14:57:46
Account number : 526-1145-522.47	'-09	
Fund : 526 EMPLOYEE H		
Department : 11 HUMAN RESC		
Division : 45 SELF INSUF		
Activity basic : 52 GENERAL GO		
Sub activity : 2 HUMAN RESO		
Element 47 LOSS ADJUS		
Object : 09 A&H ADMINT	V & CLAIMS-PPO	
Original budget :	1,421,920	
Actual expenditures - current . :	118,185.88	
Actual expenditures - ytd :		
Unposted expenditures :	.00	
Encumbered amount :	.00	
Unposted encumbrances :		
Pre-encumbrance amount :	.00	
		E7 09
Total expenditures & encumbrances:		
Unencumbered balance :		
F5=Encumbrances F7=Project data		
F10=Detail trans F11=Acct activity lis	t F12=Cancel	F24=More keys

Fiscal Year 2012 Account Balance I	Tanamad assa	4/26/12
	Inquiry	14:57:48
Account number : 526-1145-522.47-16		
Fund : 526 EMPLOYEE HEALT	TH BENEFIT	
Department : 11 HUMAN RESOURCE	E MANAGEMENT	
Division : 45 SELF INSURED H	HEALTH INS	
Activity basic : 52 GENERAL GOVERN	NMENT	
Sub activity : 2 HUMAN RESOURCE		
Element : 47 LOSS ADJUSTMEN		
Object : 16 A&H ADMIN & CL	LAIMS-COEPO	
Original budget	23,114.72 140,588.16 .00 .00 .00 .00 163,702.88 51.3% 155,541.12 48.7 F8=Misc inquiry	=More keys

GM200I13 TRAVIS CO	OUNTY	4/26/12
Fiscal Year 2012 Account Balance	e Inquiry	14:57:50
Account number : 526-1145-522.47-3	17	
Fund : 526 EMPLOYEE HEA	ALTH BENEFIT	
Department : 11 HUMAN RESOUR		
Division : 45 SELF INSURE		
Activity basic : 52 GENERAL GOVE		
Sub activity : 2 HUMAN RESOUR	RCE MANAGEMENT	
Element : 47 LOSS ADJUSTN	MENT EXPENSES	
Object : 17 A&H ADMIN &		
-	•	
Original budget :	0	
Revised budget :	308,724 11/04/	/2011
Actual expenditures - current . :	26,320.70	
Actual expenditures - ytd :	151,551.82	
Unposted expenditures :	.00	
Encumbered amount :	.00	
Unposted encumbrances :	.00	
Pre-encumbrance amount :	.00	
Total expenditures & encumbrances:	177,872.52 57	7.6%
	· ·	2.4
	F8=Misc inquiry	
F10=Detail trans F11=Acct activity list		F24=More keys
-		•