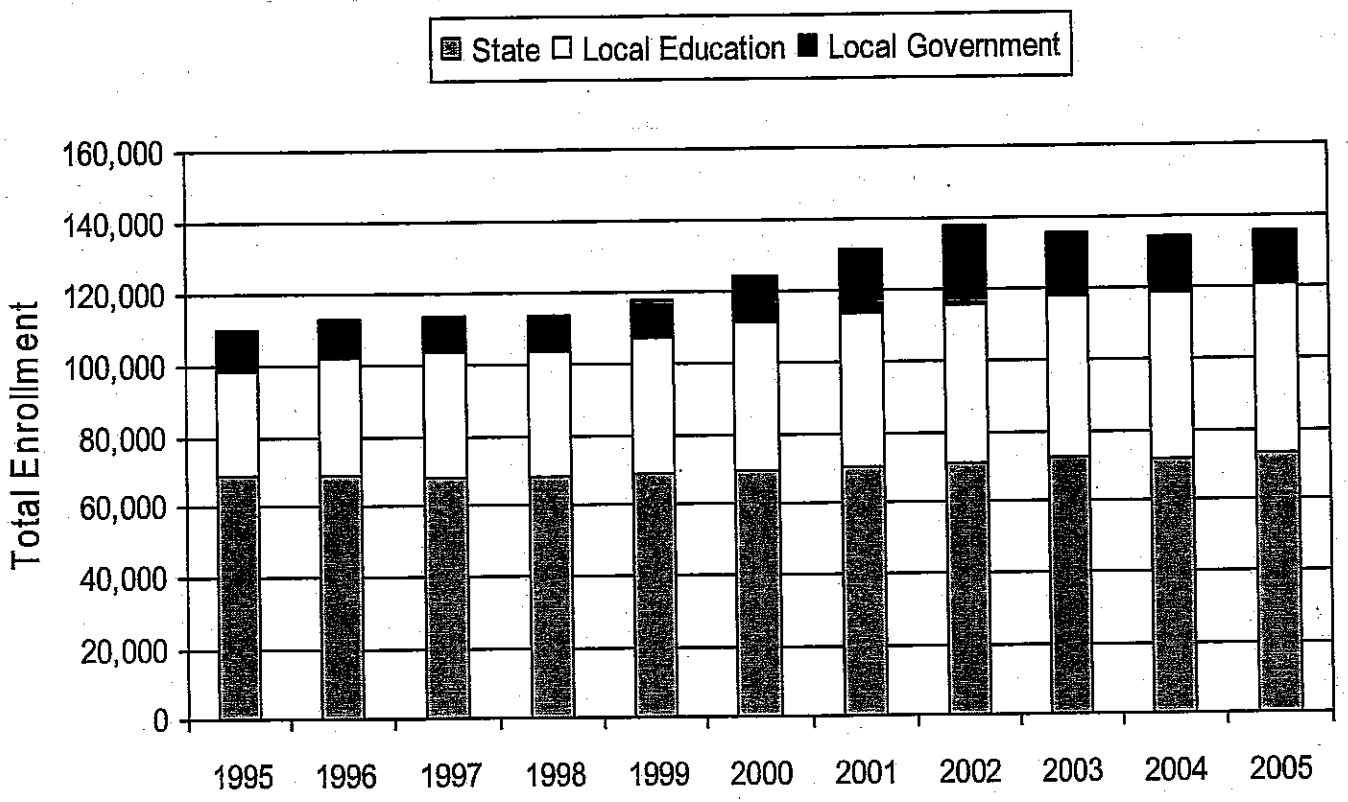
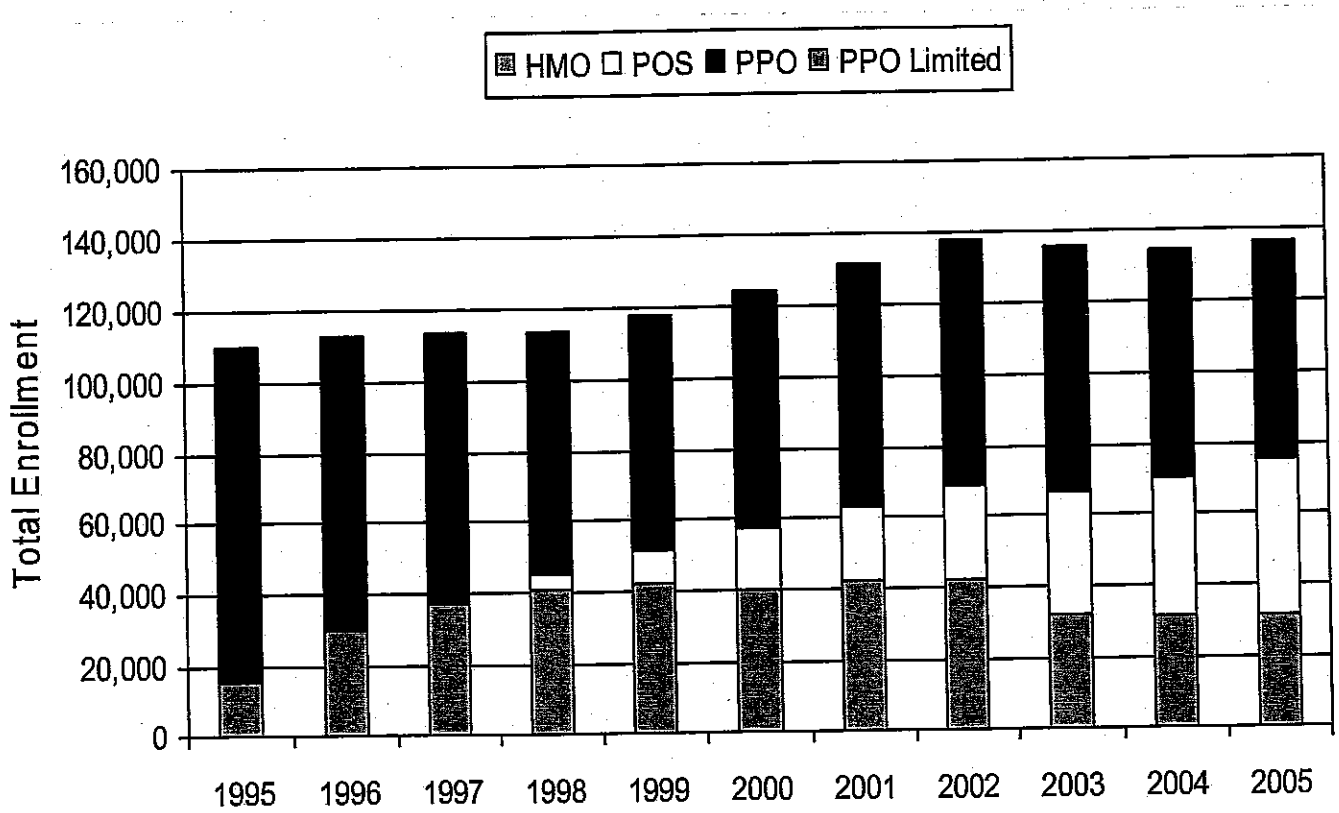
PLAN ENROLLMENT TOTALS
1995-2005



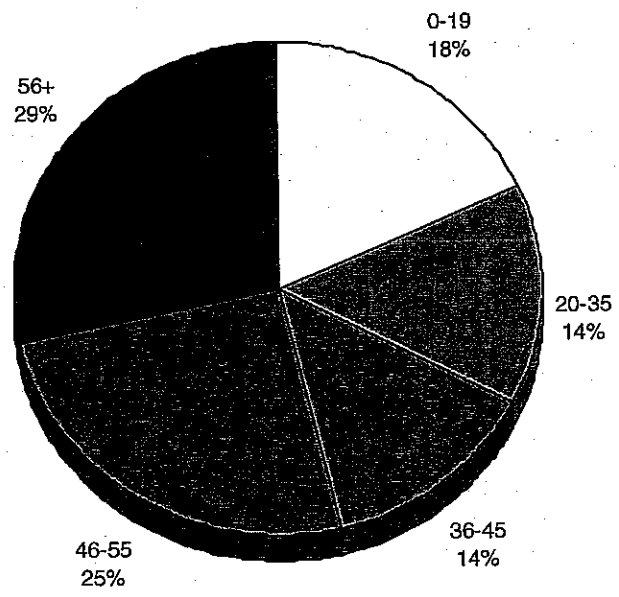
ENROLLMENT TOTALS 1995-2005
(State, Local Education, Local Gov't combined)



Member Demographics

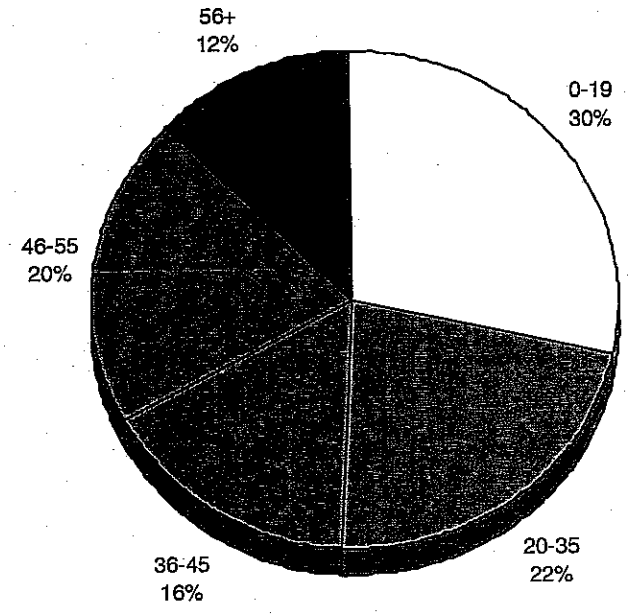
December 2004

PPO



Males:	50,119
Females:	62,828
Total:	112,947

POS/HMO



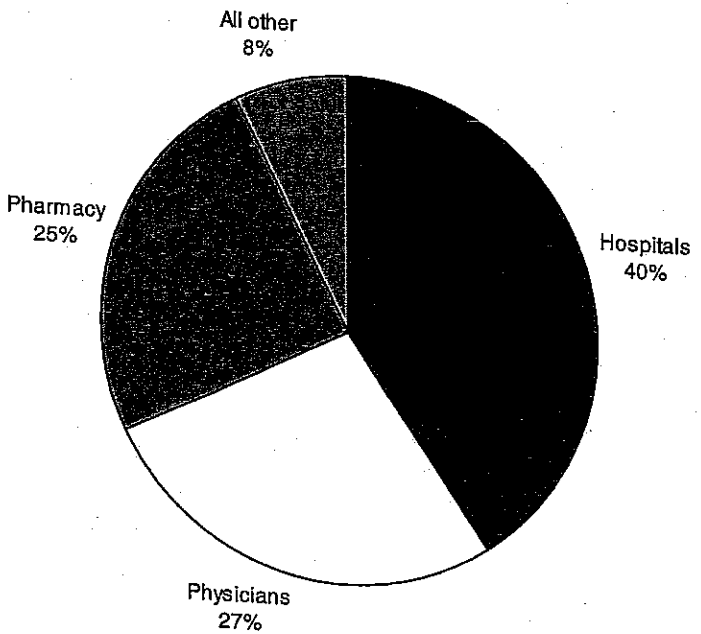
Males:	67,614
Females:	80,335
Total:	147,949

Benefit Payments by Provider

All Plans Combined

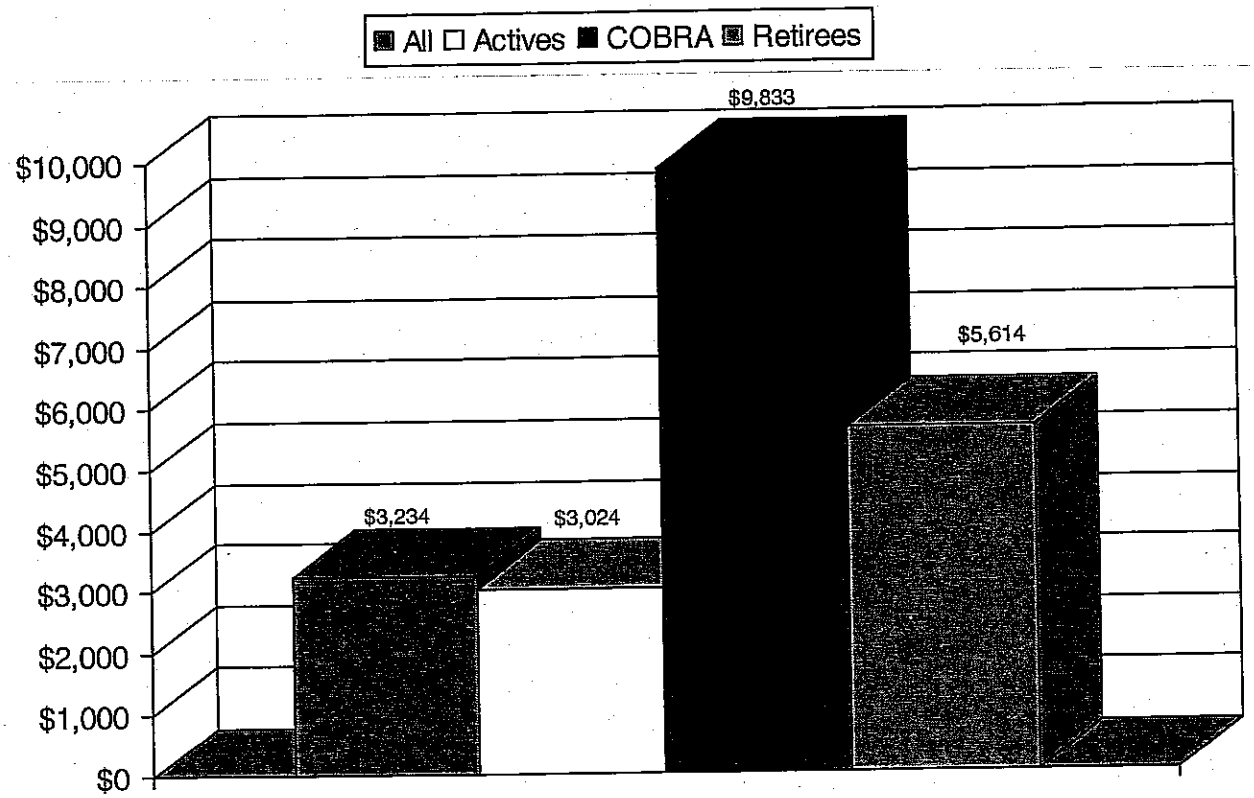
2004

Total Disbursements = $820,610,647

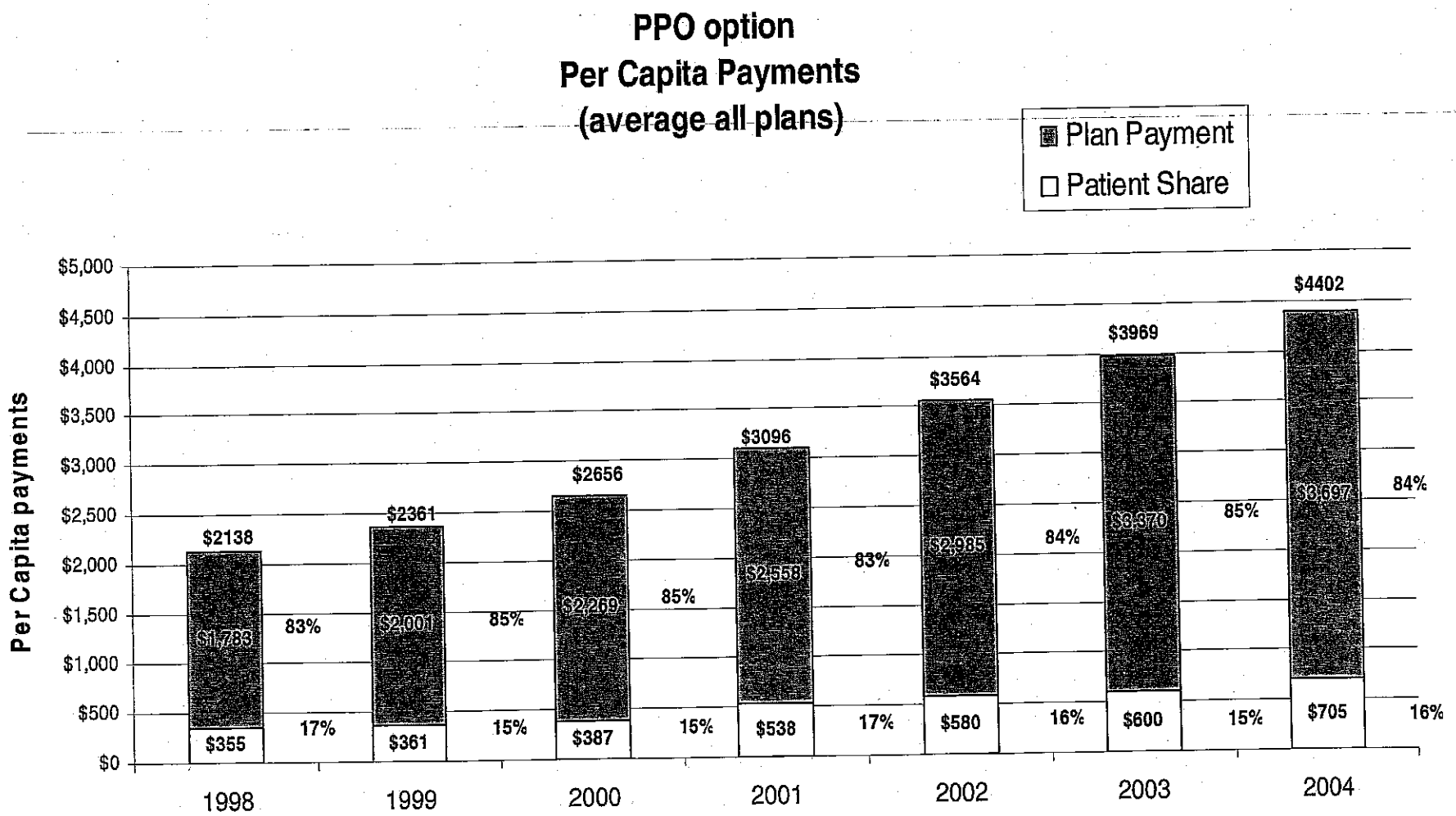


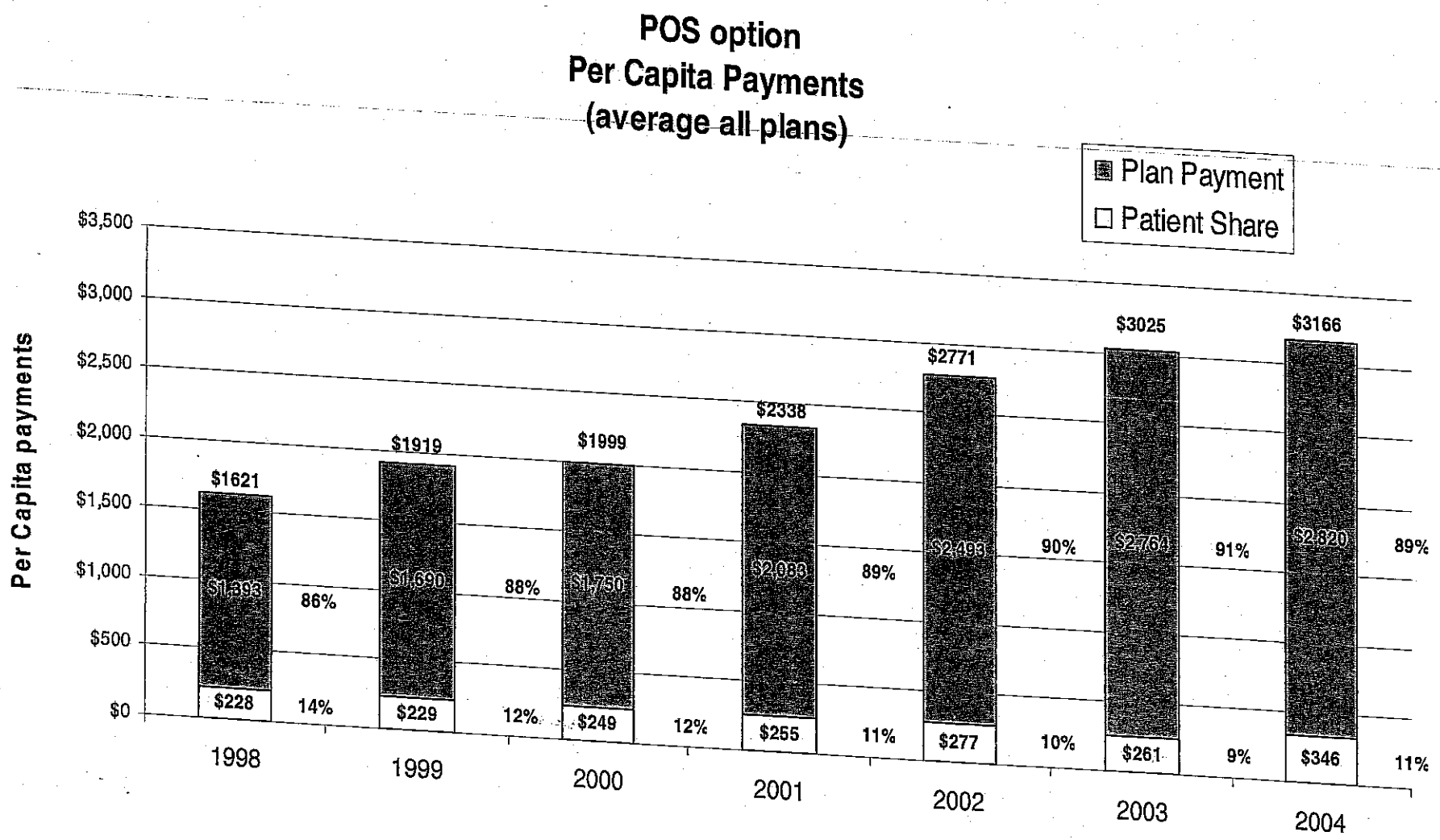
Net Payments per Capita

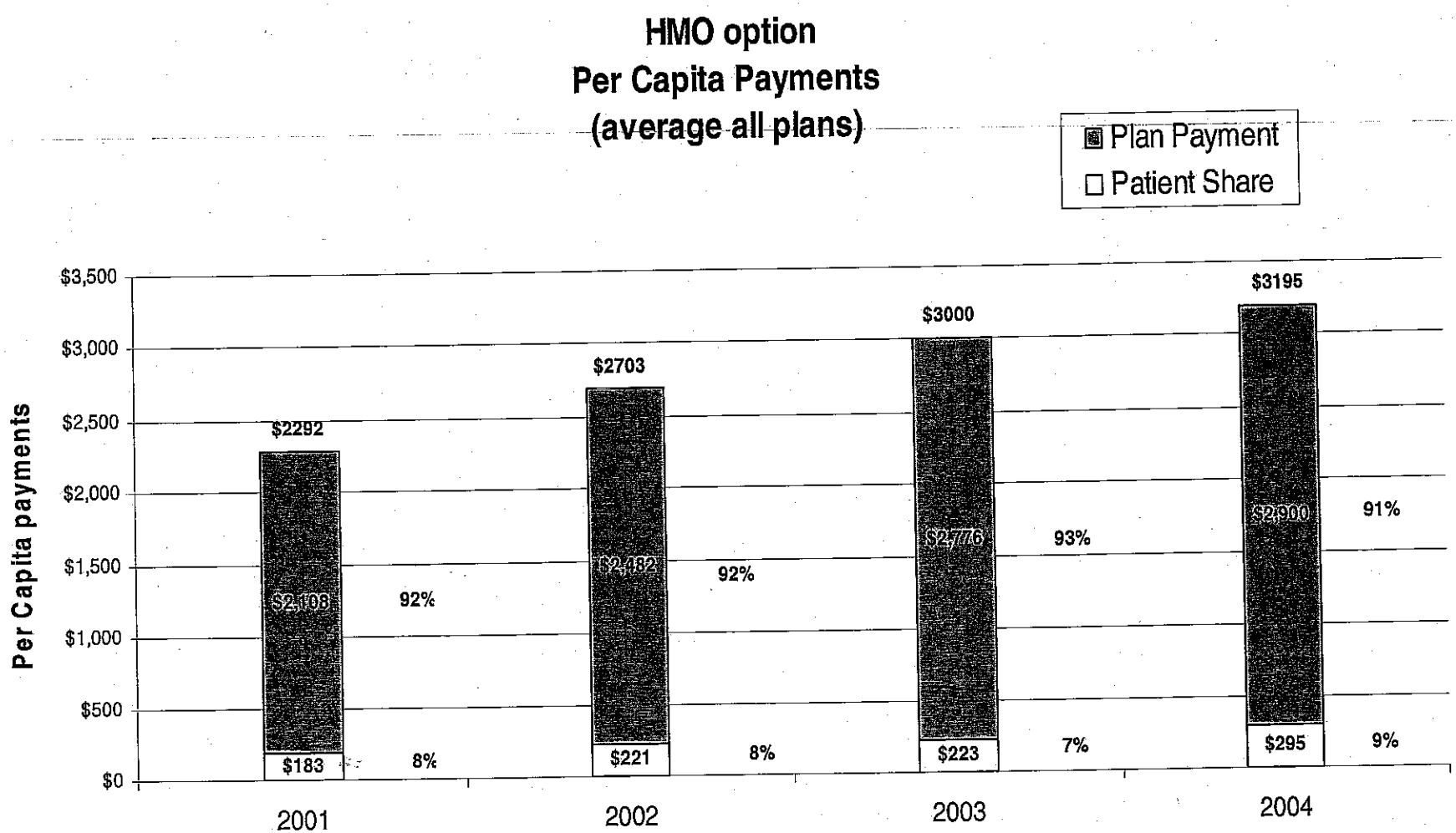
2004 – All Plans combined



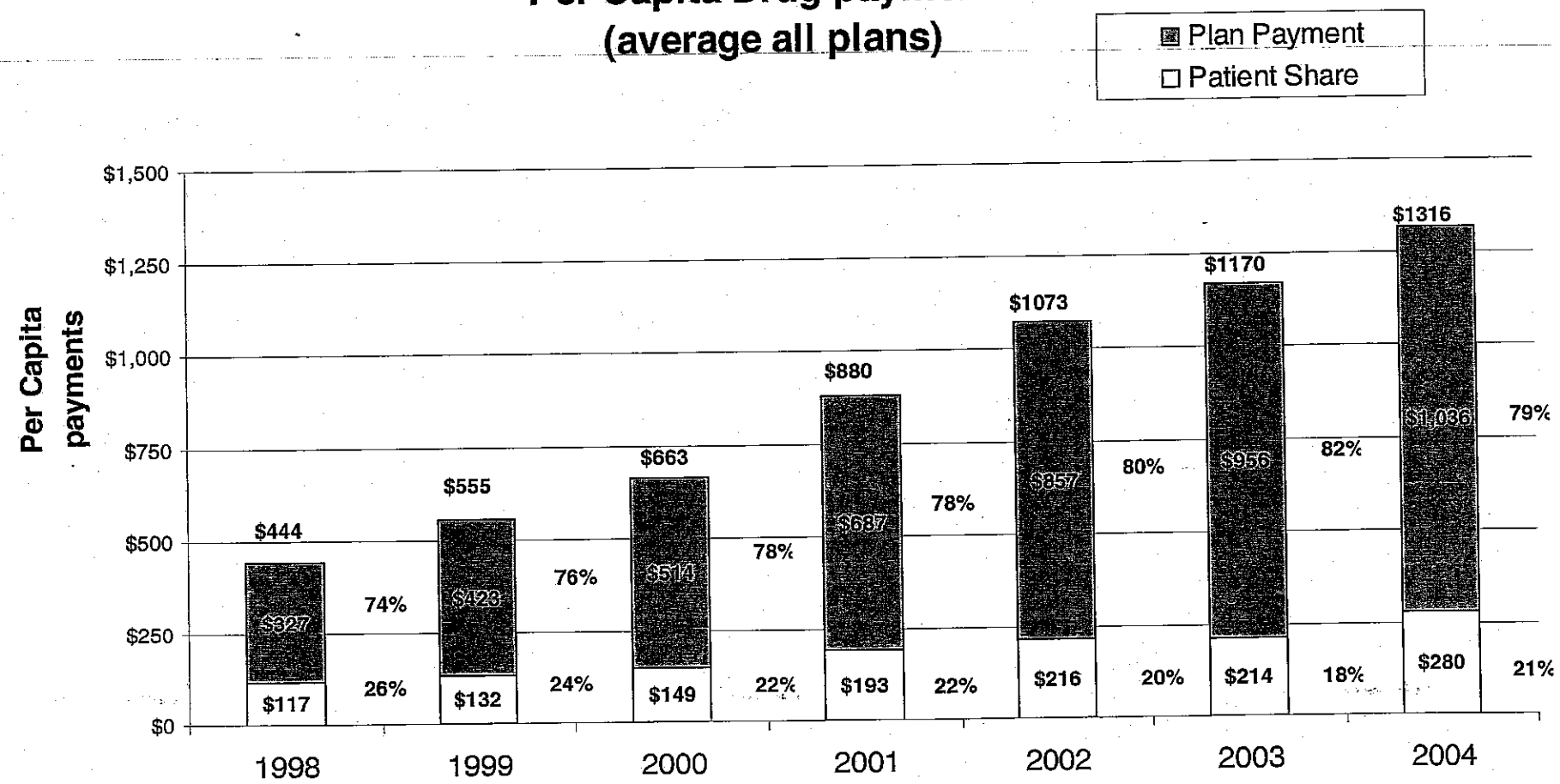
Enrollment (lives)	Actives	COBRA	Retirees	TOTAL
State	135,351	336	10,374	146,167
Local Education	80,878	202	5,176	86,303
Local Government	22,744	131	495	23,517


PPO option
Per Capita Payments
(average all plans)
Plan Payment
Patient Share
Per Capita payments
$5,000
$4,500
$4,000
$3,500
$3,000
$2,500
$2,000
$1,500
$1,000
$500
$0
$2138
$1,783
$355
83%
17%
$2361
$2,001
$361
85%
15%
$2656
$2,269
$387
85%
15%
$3096
$2,558
$538
83%
17%
$3564
$2,985
$580
84%
16%
$3969
$3,370
$600
85%
15%
$4402
$3,697
$705
84%
16%
1998
1999
2000
2001
2002
2003
2004


POS option
Per Capita Payments
(average all plans)
Plan Payment
Patient Share
Per Capita payments
$3,500
$3,000
$2,500
$2,000
$1,500
$1,000
$500
$0
$1621
$1,393
$228
86%
14%
$1919
$1,690
$229
88%
12%
$1999
$1,750
$249
88%
12%
$2338
$2,083
$255
89%
11%
$2771
$2,493
$277
90%
10%
$3025
$2,764
$261
91%
9%
$3166
$2,820
$346
89%
11%
1998
1999
2000
2001
2002
2003
2004

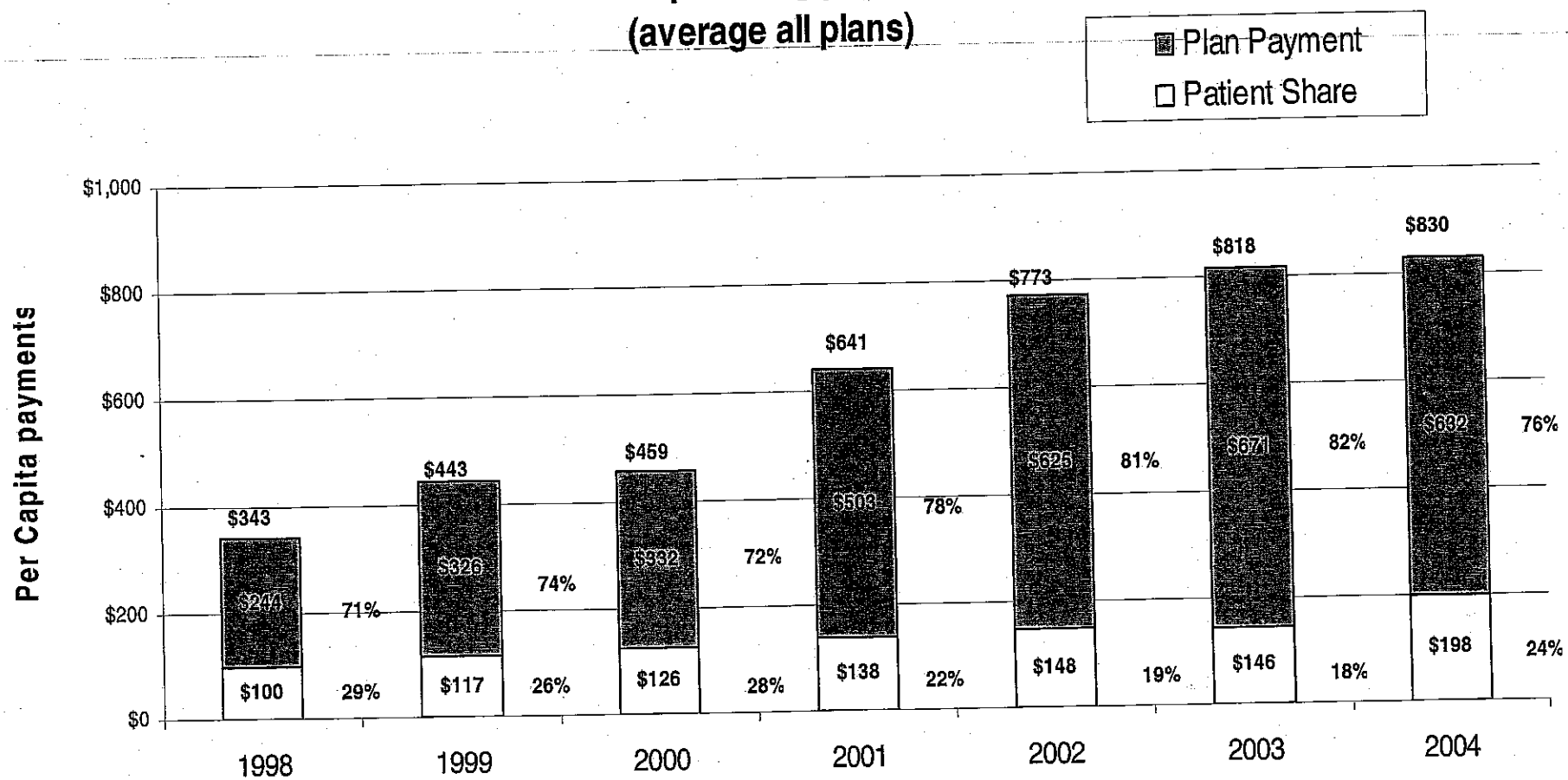

HMO option
Per Capita Payments
(average all plans)
Plan Payment
Patient Share
Per Capita payments
$3,500
$3,000
$2,500
$2,000
$1,500
$1,000
$500
$0
$2292
$2,108
$183
92%
8%
$2703
$2,482
$221
92%
8%
$3000
$2,776
$223
93%
7%
$3195
$2,900
$295
91%
9%
2001
2002
2003
2004

PPO option
Per Capita Drug payments
(average all plans)



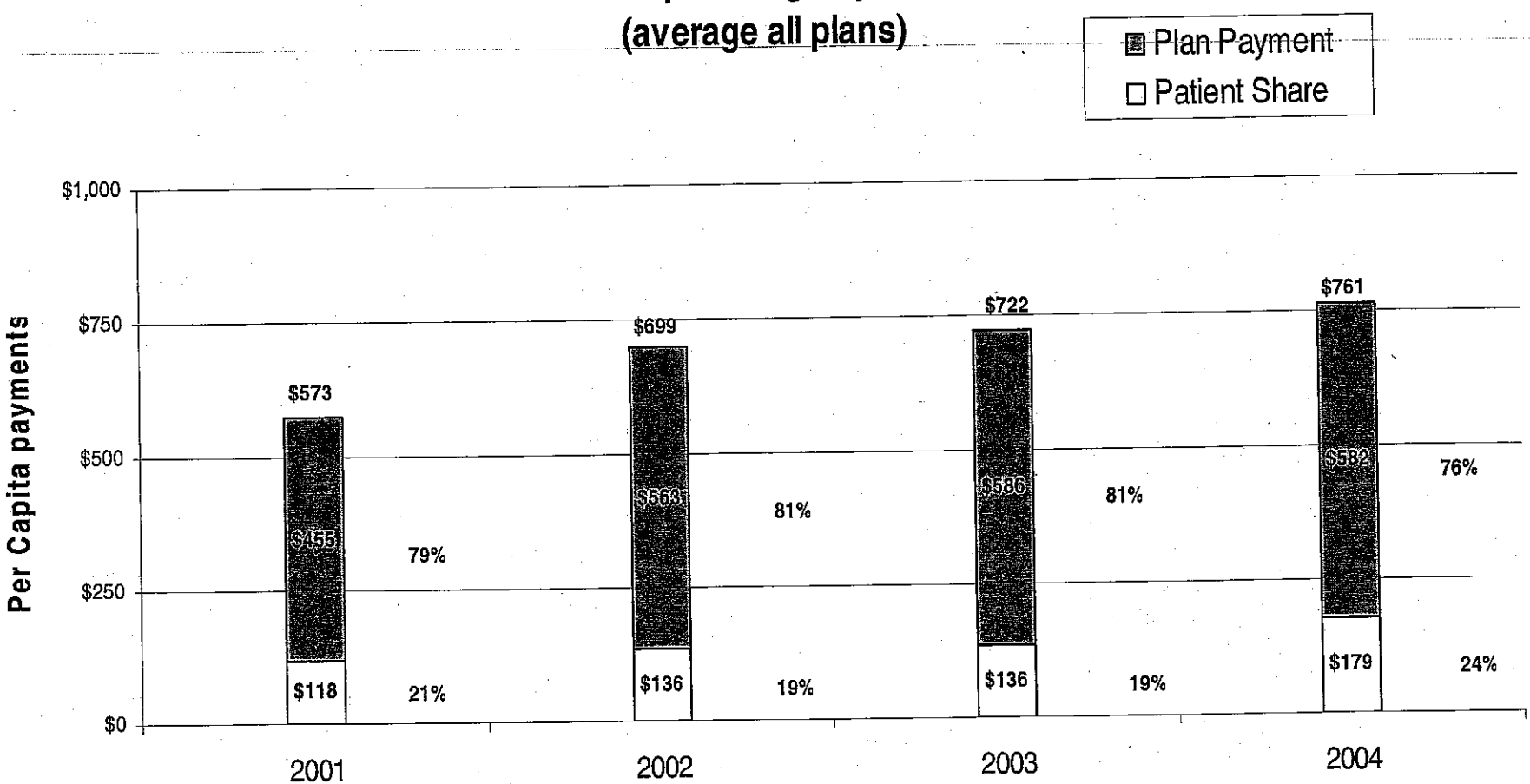
NOTE: percentages indicate portion of pharmacy expense paid by employee and plan

POS option
Per Capita Drug payments
(average all plans)

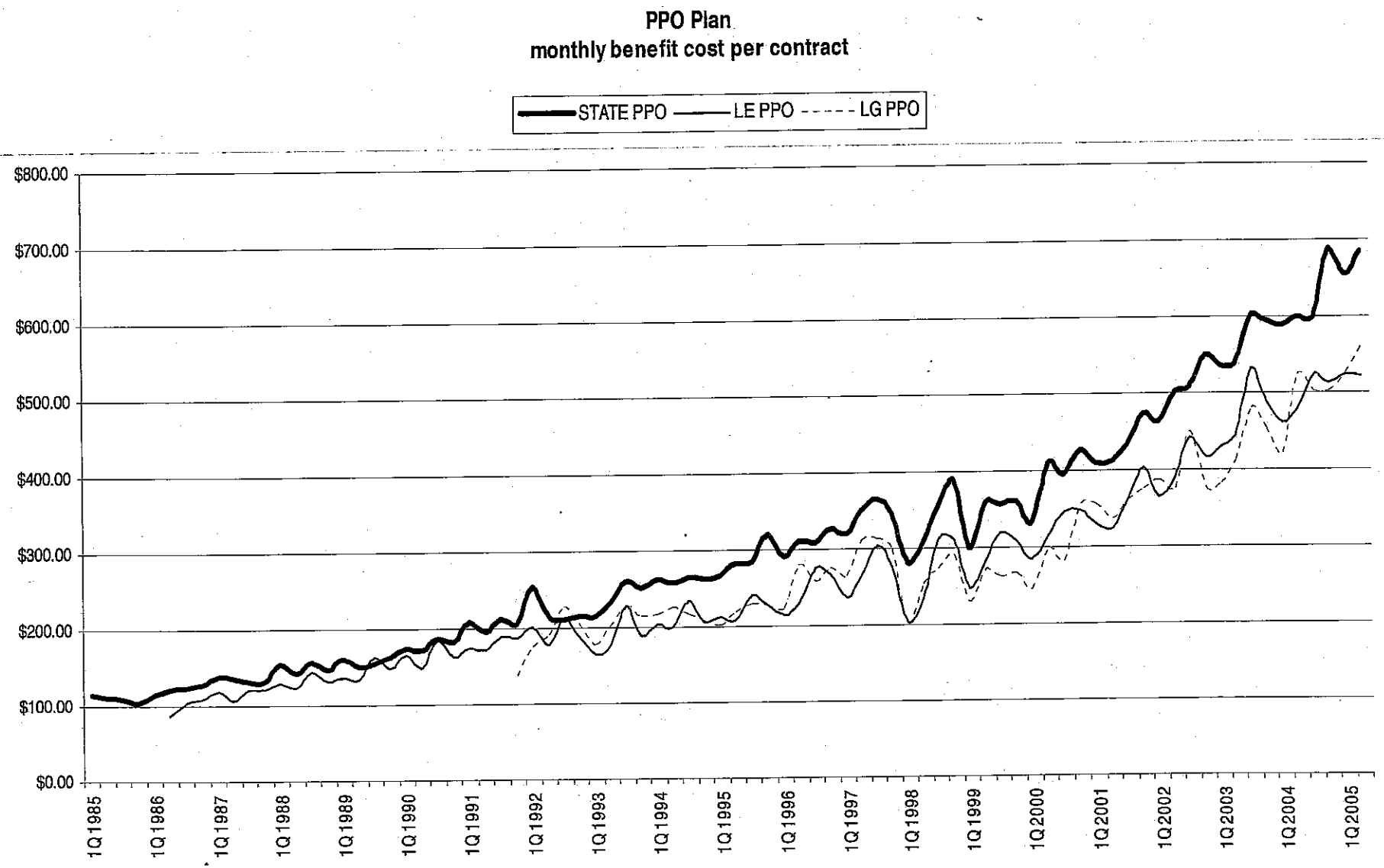


NOTE: percentages indicate portion of pharmacy expense paid by employee and plan

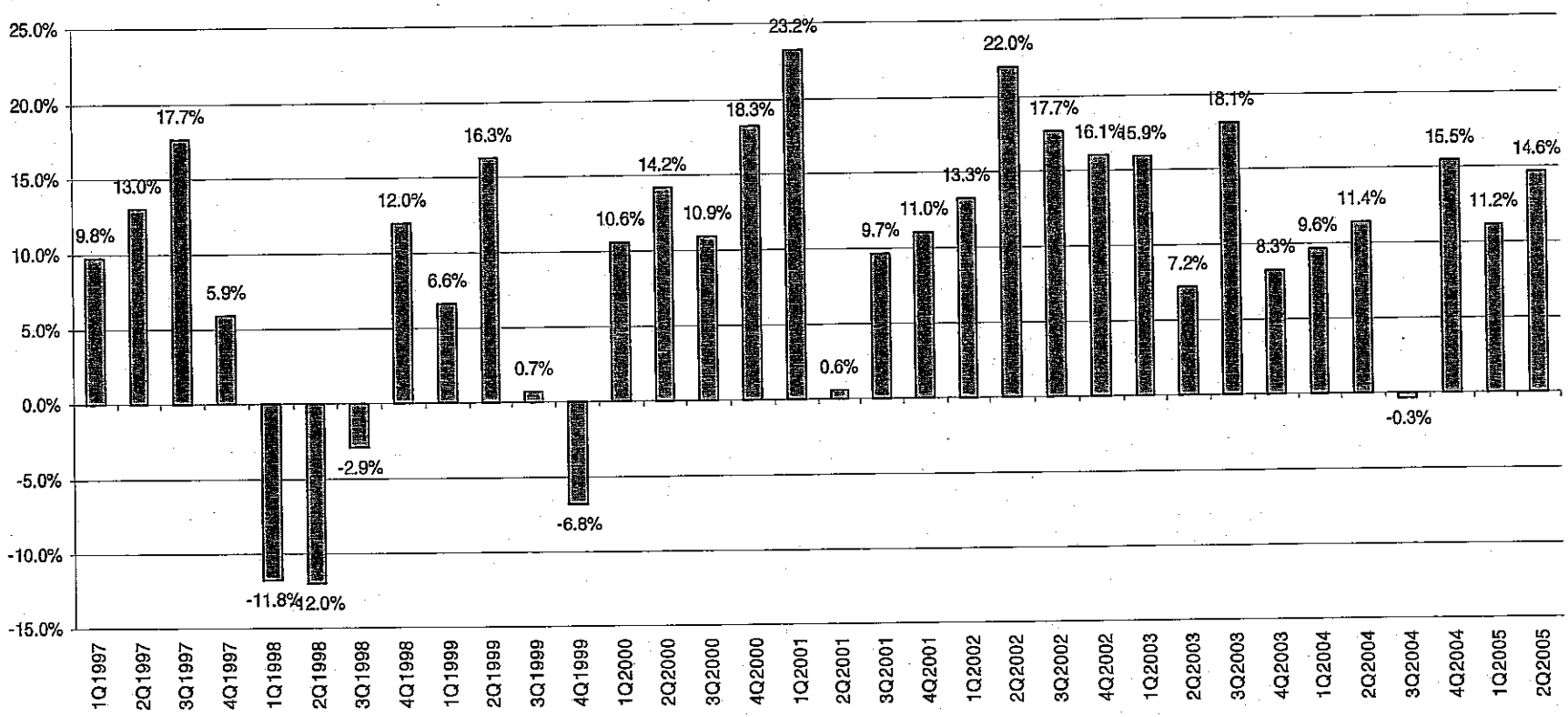
HMO option
Per Capita Drug Payments
(average all plans)

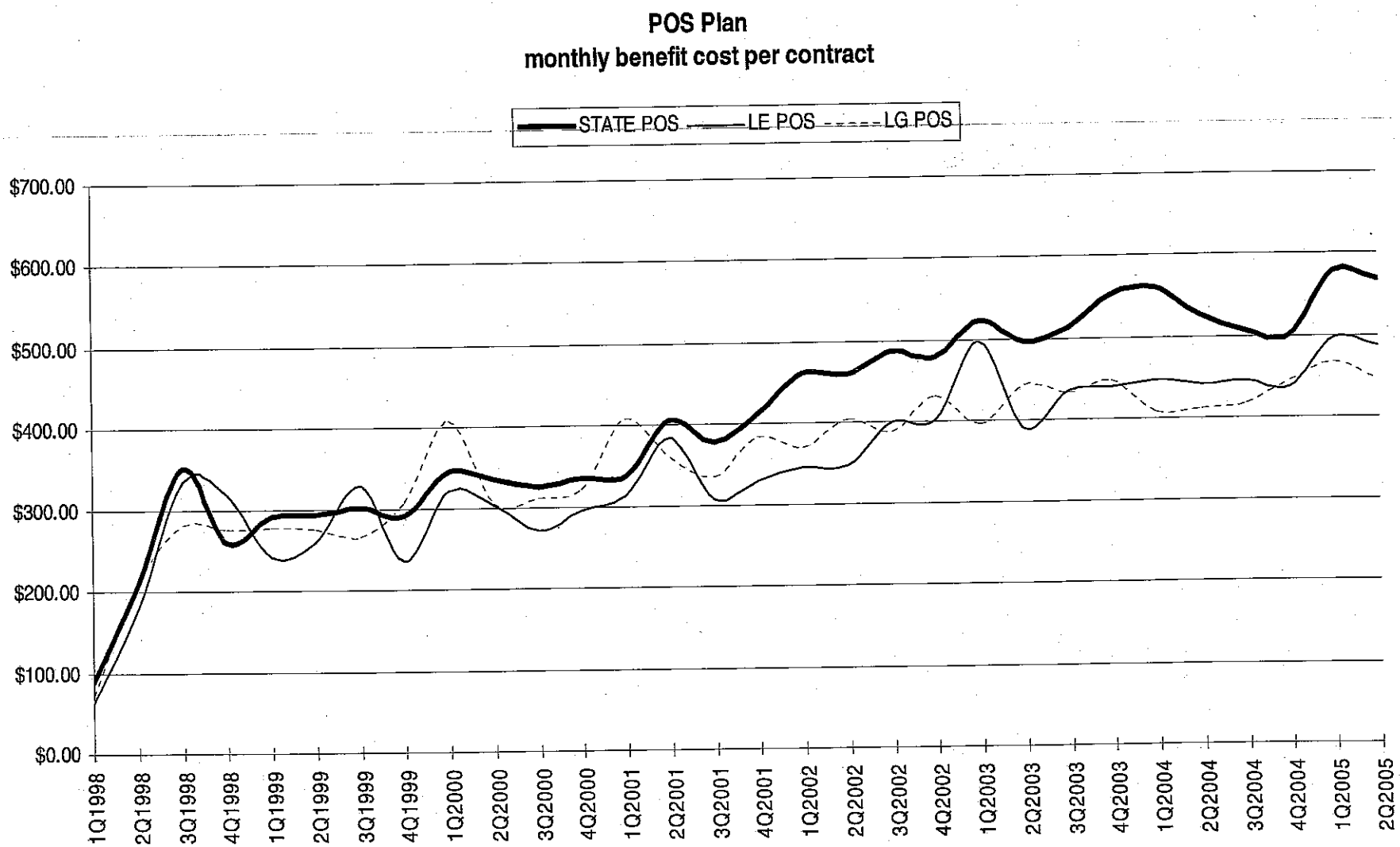


NOTES: 1) employee portion represents deductibles and coinsurance/copays
2) percentages indicate portion of medical expenses paid by employee or plan

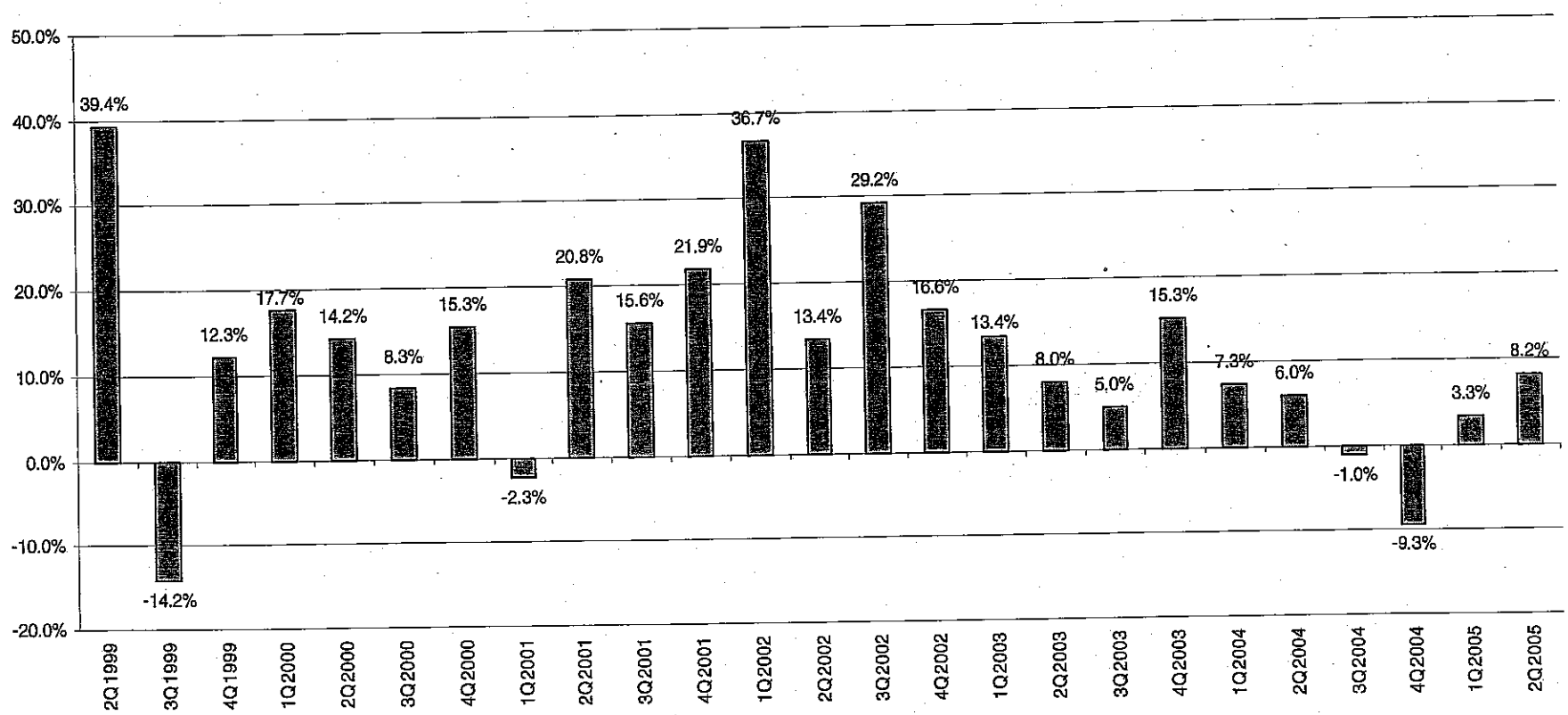

PPO Plan
monthly benefit cost per contract
STATE PPO
LE PPO
LG PPO
$800.00
$700.00
$600.00
$500.00
$400.00
$300.00
$200.00
$100.00
$0.00
1Q1985
1Q1986
1Q1987
1Q1988
1Q1989
1Q1990
1Q1991
1Q1992
1Q1993
1Q1994
1Q1995
1Q1996
1Q1997
1Q1998
1Q1999
1Q2000
1Q2001
1Q2002
1Q2003
1Q2004
1Q2005

Rate of Annual Change in Quarterly Benefit Cost per Contract
STATE PPO

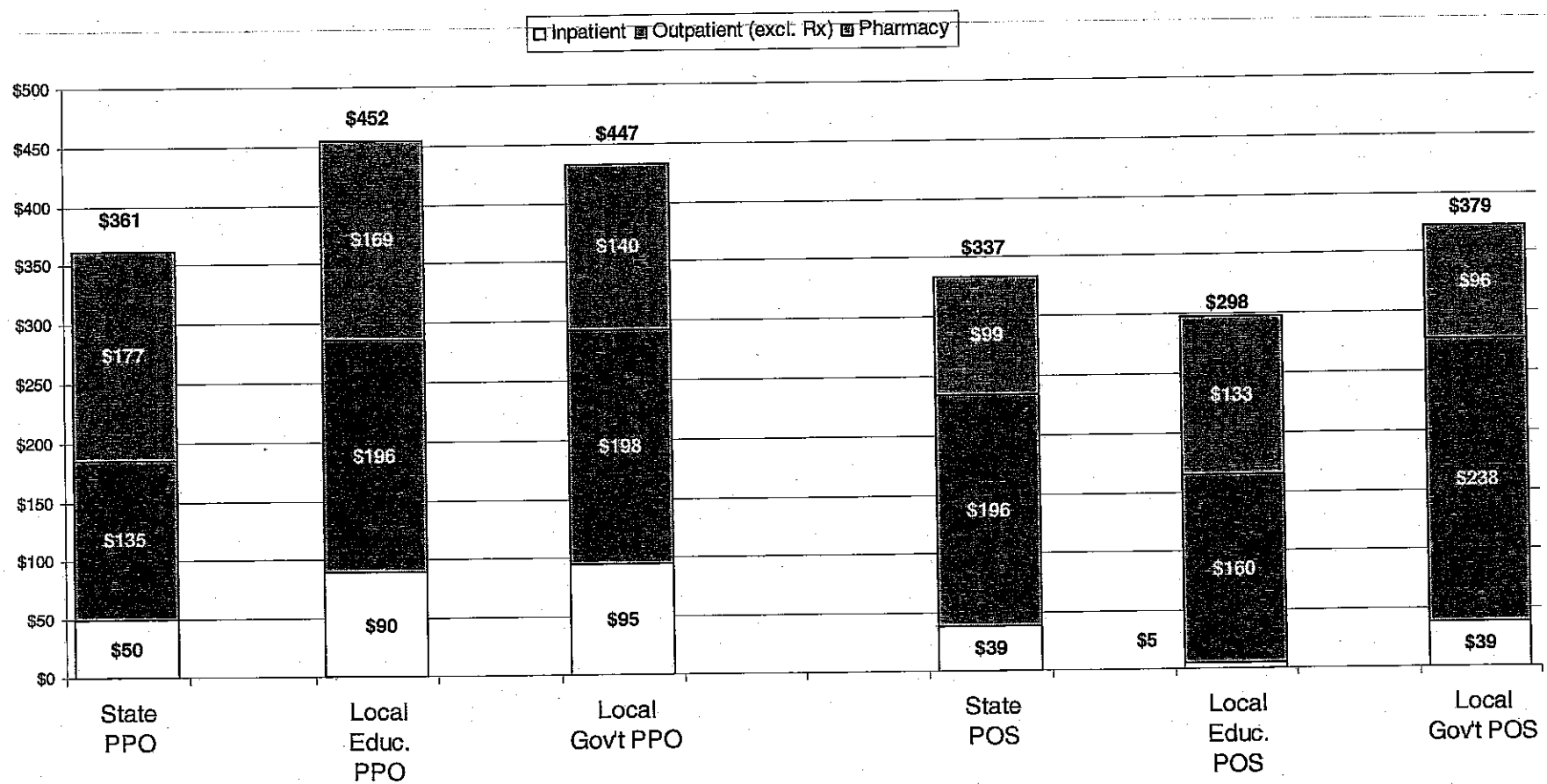



POS Plan
monthly benefit cost per contract
STATE POS
LE POS
LG POS
$700.00
$600.00
$500.00
$400.00
$300.00
$200.00
$100.00
$0.00
1Q1998
2Q1998
3Q1998
4Q1998
1Q1999
2Q1999
3Q1999
4Q1999
1Q2000
2Q2000
3Q2000
4Q2000
1Q2001
2Q2001
3Q2001
4Q2001
1Q2002
2Q2002
3Q2002
4Q2002
1Q2003
2Q2003
3Q2003
4Q2003
1Q2004
2Q2004
3Q2004
4Q2004
1Q2005
2Q2005

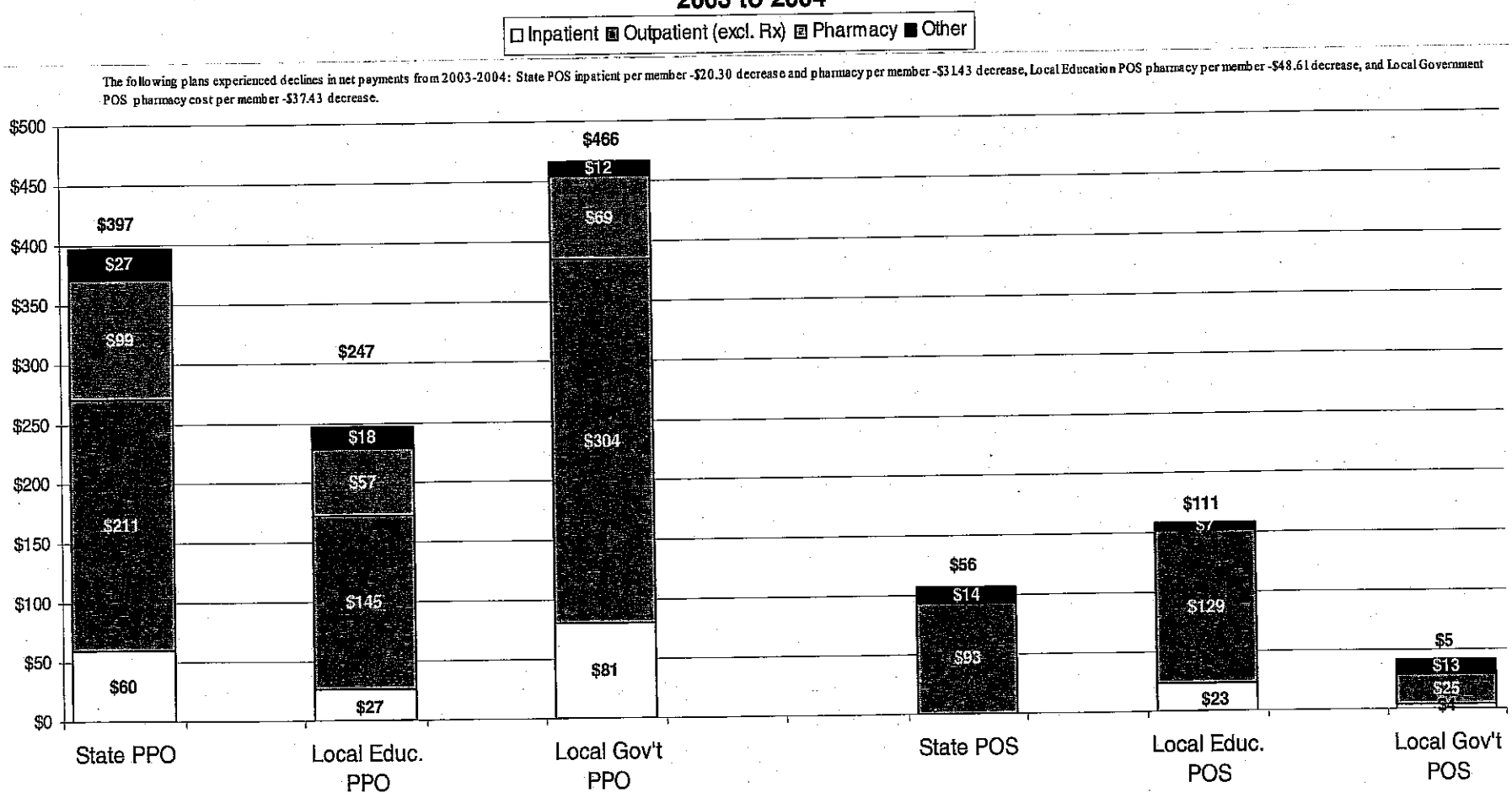
Rate of Annual Change in Quarterly Benefit Cost per Contract
STATE POS



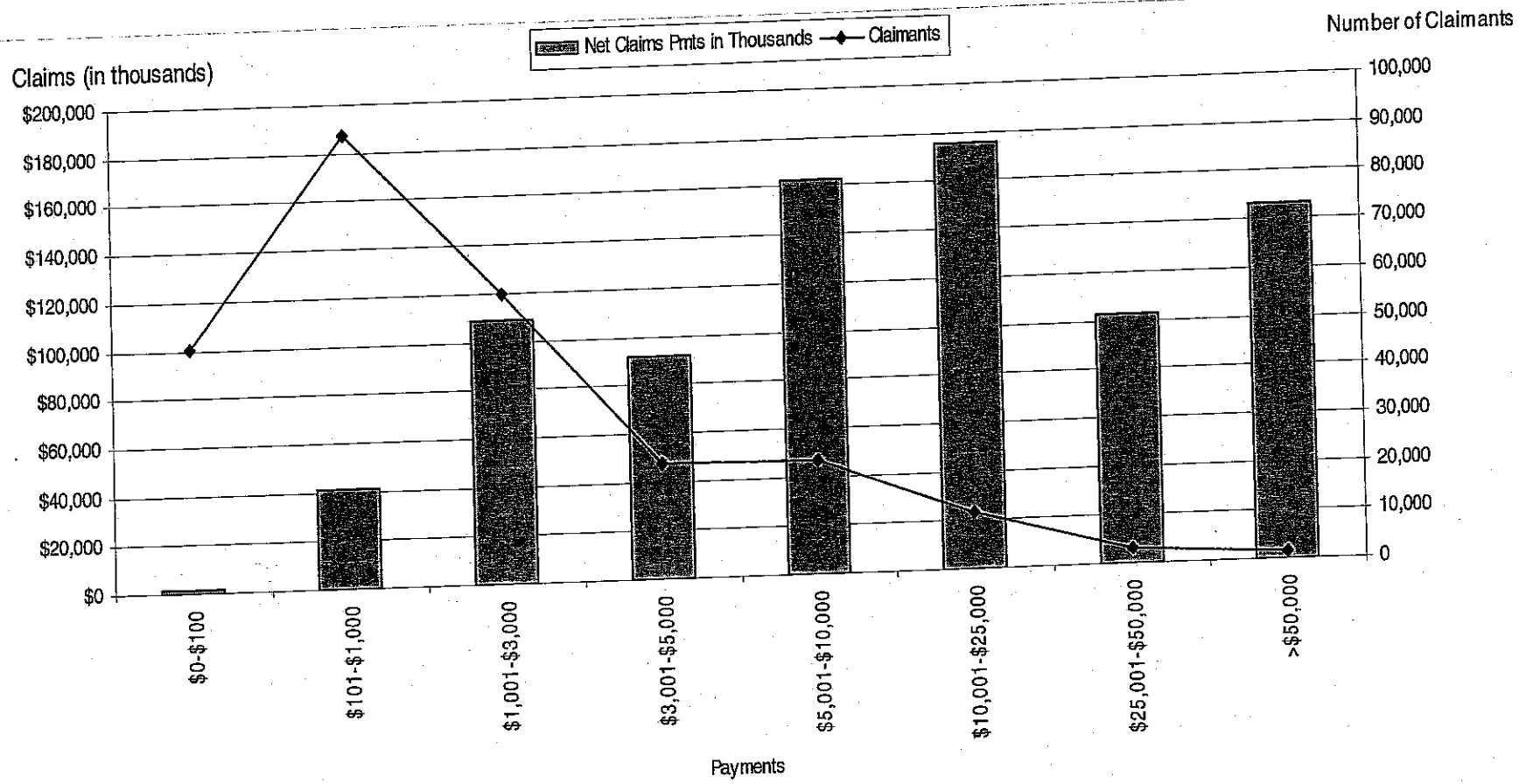
NET CHANGE IN PER CAPITA BENEFIT
2002 to 2003



NET CHANGE IN PER CAPITA BENEFIT
2003 to 2004



The following plans experienced declines in net payments from 2003-2004: State POS inpatient per member -$20.30 decrease and pharmacy per member -$3143 decrease, Local Education POS pharmacy per member -$48.61 decrease, and Local Government POS pharmacy cost per member -$37.43 decrease.

Paid Claims Distribution by Individual

All Plans Combined 2004