## BLOUNT COUNTY FUND 264 - HEALTH FUND FISCAL YEAR-TO-DATE SEPTEMBER 30, 2017

C.C. Object	Account Title	Jan - June 2017	Estimated Revenue	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17
43101	SELF-INSURANCE PREMIUMS	9,105,949.30	11,052,720.00	792,341.00	764,451.00	789,659.50			
43102	OTHER EMPLOYEE BENEFITS	7,341,876.59	8,926,834.00	584,793.26	600,835.54	631,139.43			
44110	INTEREST EARNED	8,310.01	6,000.00	2,562.50	3,394.09	2,558.48			
44160	RETIREES INSURANCE PMTS	1,447,078.30	1,465,510.00	115,162.14	124,120.12	120,000.00			
44161	COBRA INSURANCE PAYMENTS	41,653.27	54,000.00	3,240.53	3,255.17	1,606.50			
48130	CONTRIBUTIONS - HEALTH FAIR	3,500.00	3,500.00	1,000.00		2,500.00			
48990	OTHER-NET ASSETS UNRESTRICTED	92,201.24							
44990	OTHER LOCAL REVENUES - LOA	15,000.00							
	TOTAL	18,055,568.71	21,508,564.00	1,499,099.43	1,496,055.92	1,547,463.91	<u> </u>	-	<u> </u>
C.C. Object	Account Title		Estimated Expenditures	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17
500207	EMPLOYEE INSURANCE - HEALTH	535,916.19	750,000.00	42,890.84	43,545.98	42,501.76		-	
500312	CONTRACTS W/PRIVATE AGCY	325,832.15	310,000.00	24,916.67	23,495.67	24,614.00	-		
500325	FISCAL AGENT CHARGES	311,141.25	600,000.00	36,058.00	36,696.00	36,102.00			
500399	OTHER CONTRACTED SERVICES		-						
500499	OTHER SUPPLIES & MATERIALS		3,500.00	-		1,109.78			
500507		47 046 022 24	19,750,000.00	1,340,608.88	1,390,529.09	1,458,684.06			
	MEDICAL CLAIMS	17,046,023.24	19,750,000.00	1,340,000.00	1,330,323.03	1,430,004.00			
	MEDICAL CLAIMS REIMBURSEMENTS	(693,015.03)	19,750,000.00	(181,617.94)	(360.25)	1,430,004.00	(260,475.17)		
500530			20,000.00			1,430,004.00	(260,475.17)		
500530	REIMBURSEMENTS		, ,	(181,617.94)		1,563,011.60	(260,475.17) (260,475.17)	-	-
500530	REIMBURSEMENTS FINES, ASSESSMENTS, AND PENALTIES	(693,015.03)	20,000.00	(181,617.94) 8,375.56	(360.25)			-	- -

Special Notes

Explanations of Account Title									
43101 - SELF-INSURANCE PREMIUMS	Employee Only Medical Premiums and Employer for Employee Only Medical Premiums								
45101 - SELF-INSURANCE PREIVIIOIVIS									
	(\$25.00 and \$425.00 monthly; eff. 1/1/16 \$85 and \$425 monthly)								
43102 - OTHER EMPLOYEE BENEFITS	Employee Dependent Medical Premiums and Employer for Dependent Medical Premiums								
	(\$150, \$100, \$125 and \$550 monthly; eff. 1/1/16 \$200, \$175, \$225 & \$550 monthly)								
44110 - INTEREST EARNED	Interest Earned								
44160 - RETIREES INSURANCE PMTS	Retiree Premiums								
44161 - COBRA INSURANCE PAYMENTS	Cobra Premiums								
44990 - OTHER LOCAL REVENUES - LOA	Received from CIGNA to assist with costs of transitioning to new vendor								
500207 - EMPLOYEE INSURANCE - HEALTH	Stoploss Carrier Premiums								
500312 - CONTRACTS W/PRIVATE AGCY	ETMG Clinic and CONCERN EAP (BMH)								
500325 - FISCAL AGENT CHARGES	2015 - Humana Admin Fees and Open Enrollment System; 2016 - Allegiance Admin Fees								
500507 - MEDICAL CLAIMS	Medical Claims and Pharmacy Claims								
500530 - FINES, ASSESSMENTS, AND PENALTIES	ACA Fees and PCORI Fees (IRS)								

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## BLOUNT COUNTY FUND 264 - HEALTH FUND FISCAL YEAR-TO-DATE SEPTEMBER 30, 2017

C.C. Object	Account Title	Jan - June 2017	Estimated Revenue	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18		Fiscal Year to Date	Calendar Year to Date (2017)	Calendar Year to Date (2018)
43101	SELF-INSURANCE PREMIUMS	9,105,949.30	11,052,720.00								2,346,451.50	11,452,400.80	-
43102	OTHER EMPLOYEE BENEFITS	7,341,876.59	8,926,834.00								1,816,768.23	9,158,644.82	-
44110	INTEREST EARNED	8,310.01	6,000.00								8,515.07	16,825.08	-
44160	RETIREES INSURANCE PMTS	1,447,078.30	1,465,510.00								359,282.26	1,806,360.56	-
44161	COBRA INSURANCE PAYMENTS	41,653.27	54,000.00								8,102.20	49,755.47	-
48130	CONTRIBUTIONS - HEALTH FAIR	3,500.00	3,500.00								3,500.00	7,000.00	-
48990	OTHER-NET ASSETS UNRESTRICTED	92,201.24									-	92,201.24	-
44990	OTHER LOCAL REVENUES - LOA	15,000.00									-	15,000.00	-
											-		-
	TOTAL	18,055,568.71	21,508,564.00	-	-	-	-	-	-		4,542,619.26	22,598,187.97	-
C.C.	Account Title		Estimated	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	1	Fiscal Year to	Calendar Year to	
Object 500207	EMPLOYEE INSURANCE - HEALTH	535,916.19	750.000.00								Date 128,938.58	Date (2017) 664,854.77	Date (2018)
500207	CONTRACTS W/PRIVATE AGCY	325,832.15	310,000.00								73,026.34	398,858.49	-
500312	FISCAL AGENT CHARGES	311,141.25	600,000.00								108,856.00	419,997.25	
500323	OTHER CONTRACTED SERVICES	311,141.23	000,000.00								108,830.00	415,557.25	
500499	OTHER SUPPLIES & MATERIALS		3,500.00										
500507	MEDICAL CLAIMS	17,046,023.24	19,750,000.00								4,189,822.03	21,235,845.27	_
300307	REIMBURSEMENTS	(693,015.03)	15,750,000.00								(442,453.36)	(1,135,468.39)	_
500530	FINES, ASSESSMENTS, AND PENALTIES	(055,015.05)	20,000.00								8,375.56	8,375.56	_
	TOTAL	17,525,897.80	21,433,500.00		-	-	-	-	-		4,066,565.15	21,592,462.95	-
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	Net Position	529,670.91	75,064.00		-	-	-	-	-		476,054.11	1,005,725.02	-

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