

MEHIP -Non Profit

Premium and Expense Report

Analytic Paid Period Sept-2005 through Aug-2007

As of 09/26/2007

MEHIP -Non Profit

Premium and Expense Report by Rating Product Description

Reporting Period: Sept-2005 through Aug-2007

Rating Product Description: BlueCare POE

DATE	SUBSCRIBER ONLY	SUBSCRIBER & SPOUSE	SUBSCRIBER, SPOUSE & CHILD	SUBSCRIBER & CHILD	SUBSCRIBER & CHILDREN	TOTAL CONTRACTS	TOTAL MEMBERS	MEDICAL CLAIMS	DENTAL CLAIMS	PHARMACY CLAIMS	CAPITATION	TOTAL PLAN PAID CLAIMS
09/2005	827	145	181	61	29	1,243	2,037	\$445,553.63	\$0.00	\$0.00	\$0.00	\$445,553.63
10/2005	867	154	181	63	29	1,294	2,116	\$388,186.79	\$0.00	\$0.00	\$0.00	\$388,186.79
11/2005	901	169	188	65	30	1,353	2,216	\$446,568.66	\$0.00	\$0.00	\$0.00	\$446,568.66
12/2005	978	179	202	71	34	1,464	2,404	\$570,764.55	\$0.00	\$0.00	\$0.00	\$570,764.55
01/2006	1,024	184	221	72	35	1,536	2,535	\$470,827.61	\$0.00	\$0.00	\$0.00	\$470,827.61
02/2006	1,027	189	224	81	32	1,553	2,572	\$512,847.96	\$0.00	\$0.00	\$0.00	\$512,847.96
03/2006	1,017	196	220	76	28	1,537	2,548	\$675,266.98	\$0.00	\$0.00	\$0.00	\$675,266.98
04/2006	997	191	210	76	27	1,501	2,472	\$541,549.02	\$0.00	\$0.00	\$0.00	\$541,549.02
05/2006	944	172	194	66	25	1,401	2,276	\$647,116.72	\$0.00	\$0.00	\$0.00	\$647,116.72
06/2006	929	174	202	67	26	1,398	2,303	\$684,799.72	\$0.00	\$0.00	\$0.00	\$684,799.72
07/2006	1,025	202	232	72	31	1,562	2,600	\$565,448.98	\$0.00	\$0.00	\$0.00	\$565,448.98
08/2006	1,118	229	256	85	43	1,731	2,894	\$701,231.09	\$0.00	\$0.00	\$0.00	\$701,231.09
09/2006	1,144	231	250	80	41	1,746	2,888	\$698,410.02	\$0.00	\$0.00	\$0.00	\$698,410.02
10/2006	1,213	242	259	85	42	1,841	3,029	\$737,117.87	\$0.00	\$0.00	\$0.00	\$737,117.87
11/2006	1,221	242	266	85	46	1,860	3,079	\$580,691.64	\$0.00	\$0.00	\$0.00	\$580,691.64
12/2006	1,272	251	270	87	47	1,927	3,171	\$857,735.29	\$0.00	\$0.00	\$0.00	\$857,735.29
01/2007	1,264	250	266	83	44	1,907	3,131	\$812,234.97	\$0.00	\$0.00	\$0.00	\$812,234.97
02/2007	1,345	254	290	93	48	2,030	3,345	\$861,788.63	\$0.00	\$0.00	\$0.00	\$861,788.63
03/2007	1,320	249	291	95	50	2,005	3,320	\$1,117,774.28	\$0.00	\$0.00	\$0.00	\$1,117,774.28
04/2007	1,316	246	293	96	49	2,000	3,313	\$1,070,700.32	\$0.00	\$0.00	\$0.00	\$1,070,700.32
05/2007	1,352	250	300	101	52	2,055	3,401	\$1,201,086.84	\$0.00	\$0.00	\$0.00	\$1,201,086.84
06/2007	1,363	248	305	108	50	2,074	3,428	\$746,150.03	\$0.00	\$0.00	\$0.00	\$746,150.03
07/2007	1,327	248	296	107	52	2,030	3,369	\$1,216,249.98	\$0.00	\$0.00	\$0.00	\$1,216,249.98
08/2007	1,334	255	290	107	54	2,040	3,376	\$1,066,332.94	\$0.00	\$0.00	\$0.00	\$1,066,332.94
	27,125	5,150	5,887	1,982	944	41,088	67,823	\$17,616,434.52	\$0.00	\$0.00	\$0.00	\$17,616,434.52

This report represents the Medical, Drug and Connecticut Dental costs only, retention fees will be used in calculation of the renewal.

Earned Premium is based on the group's billing rates and does not reflect any other financial obligations between Anthem and Client.

MEHIP -Non Profit

Premium and Expense Report by Rating Product Description

Reporting Period: Sept-2005 through Aug-2007

Rating Product Description: BlueCare POS

DATE	SUBSCRIBER ONLY	SUBSCRIBER & SPOUSE	SUBSCRIBER, SPOUSE & CHILD	SUBSCRIBER & CHILD	SUBSCRIBER & CHILDREN	TOTAL CONTRACTS	TOTAL MEMBERS	MEDICAL CLAIMS	DENTAL CLAIMS	PHARMACY CLAIMS	CAPITATION	TOTAL PLAN PAID CLAIMS
09/2005	310	69	78	27	15	499	855	\$212,213.33	\$0.00	\$0.00	\$0.00	\$212,213.33
10/2005	304	69	78	23	15	489	837	\$204,440.97	\$0.00	\$0.00	\$0.00	\$204,440.97
11/2005	309	73	81	24	16	503	865	\$239,340.33	\$0.00	\$0.00	\$0.00	\$239,340.33
12/2005	326	79	88	27	18	538	934	\$224,361.71	\$0.00	\$0.00	\$0.00	\$224,361.71
01/2006	419	96	100	26	20	661	1,109	\$255,102.12	\$0.00	\$0.00	\$0.00	\$255,102.12
02/2006	450	102	104	28	20	704	1,173	\$274,661.50	\$0.00	\$0.00	\$0.00	\$274,661.50
03/2006	533	125	159	35	33	885	1,570	\$435,366.89	\$0.00	\$0.00	\$0.00	\$435,366.89
04/2006	578	118	150	34	33	913	1,572	\$340,964.69	\$0.00	\$0.00	\$0.00	\$340,964.69
05/2006	556	113	146	34	31	880	1,513	\$495,576.68	\$0.00	\$0.00	\$0.00	\$495,576.68
06/2006	555	113	146	38	30	882	1,519	\$363,985.08	\$0.00	\$0.00	\$0.00	\$363,985.08
07/2006	571	114	153	36	32	906	1,569	\$373,395.60	\$0.00	\$0.00	\$0.00	\$373,395.60
08/2006	578	116	152	38	29	913	1,569	\$473,952.93	\$0.00	\$0.00	\$0.00	\$473,952.93
09/2006	608	123	154	42	32	959	1,646	\$428,577.92	\$0.00	\$0.00	\$0.00	\$428,577.92
10/2006	655	130	163	54	34	1,036	1,769	\$561,971.41	\$0.00	\$0.00	\$0.00	\$561,971.41
11/2006	674	141	166	53	36	1,070	1,831	\$420,475.68	\$0.00	\$0.00	\$0.00	\$420,475.68
12/2006	687	143	168	55	38	1,091	1,866	\$440,445.97	\$0.00	\$0.00	\$0.00	\$440,445.97
01/2007	739	144	175	56	39	1,153	1,948	\$504,082.84	\$0.00	\$0.00	\$0.00	\$504,082.84
02/2007	736	143	178	51	36	1,144	1,935	\$533,976.04	\$0.00	\$0.00	\$0.00	\$533,976.04
03/2007	736	148	181	56	34	1,155	1,957	\$771,299.95	\$0.00	\$0.00	\$0.00	\$771,299.95
04/2007	753	149	184	61	37	1,184	2,007	\$434,514.53	\$0.00	\$0.00	\$0.00	\$434,514.53
05/2007	783	159	187	62	37	1,228	2,074	\$647,165.18	\$0.00	\$0.00	\$0.00	\$647,165.18
06/2007	809	165	188	67	39	1,268	2,137	\$580,094.18	\$0.00	\$0.00	\$0.00	\$580,094.18
07/2007	778	160	189	64	42	1,233	2,099	\$539,406.50	\$0.00	\$0.00	\$0.00	\$539,406.50
08/2007	770	158	191	63	40	1,222	2,085	\$609,331.28	\$0.00	\$0.00	\$0.00	\$609,331.28
	14,217	2,950	3,559	1,054	736	22,516	38,439	\$10,364,703.31	\$0.00	\$0.00	\$0.00	\$10,364,703.31

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MEHIP -Non Profit

Premium and Expense Report by Rating Product Description

Reporting Period: Sept-2005 through Aug-2007

Rating Product Description: CDHP Account Fund and Incentives

DATE	SUBSCRIBER ONLY	SUBSCRIBER & SPOUSE	SUBSCRIBER, SPOUSE & CHILD	SUBSCRIBER & CHILD	SUBSCRIBER & CHILDREN	TOTAL CONTRACTS	TOTAL MEMBERS	MEDICAL CLAIMS	DENTAL CLAIMS	PHARMACY CLAIMS	CAPITATION	TOTAL PLAN PAID CLAIMS
01/2007	18	6	10	4	4	42	96	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
02/2007	18	6	10	4	4	42	96	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
03/2007	32	22	28	8	6	96	234	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
04/2007	34	22	28	8	6	98	236	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
05/2007	32	22	28	8	6	96	234	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
06/2007	30	24	28	6	8	96	236	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
07/2007	28	26	28	8	8	98	242	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
08/2007	32	26	26	8	8	100	236	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	224	154	186	54	50	668	1,610	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Rating Product Description: CDHP HSA (Trad Health Plan)

DATE	SUBSCRIBER ONLY	SUBSCRIBER & SPOUSE	SUBSCRIBER, SPOUSE & CHILD	SUBSCRIBER & CHILD	SUBSCRIBER & CHILDREN	TOTAL CONTRACTS	TOTAL MEMBERS	MEDICAL CLAIMS	DENTAL CLAIMS	PHARMACY CLAIMS	CAPITATION	TOTAL PLAN PAID CLAIMS
01/2007	18	6	10	4	4	42	96	\$2,863.25	\$0.00	\$0.00	\$0.00	\$2,863.25
02/2007	18	6	10	4	4	42	96	\$1,205.38	\$0.00	\$0.00	\$0.00	\$1,205.38
03/2007	32	22	28	8	6	96	234	\$5,095.62	\$0.00	\$294.22	\$0.00	\$5,389.84
04/2007	34	22	28	8	6	98	236	\$6,447.76	\$0.00	\$2,308.97	\$0.00	\$8,756.73
05/2007	32	22	28	8	6	96	234	\$19,638.36	\$0.00	\$2,540.31	\$0.00	\$22,178.67
06/2007	30	24	28	6	8	96	236	\$13,761.95	\$0.00	\$2,419.30	\$0.00	\$16,181.25
07/2007	28	26	28	8	8	98	242	\$43,820.18	\$0.00	\$6,696.52	\$0.00	\$50,516.70
08/2007	32	26	26	8	8	100	236	\$17,923.76	\$0.00	\$7,441.72	\$0.00	\$25,365.48
	224	154	186	54	50	668	1,610	\$110,756.26	\$0.00	\$21,701.04	\$0.00	\$132,457.30

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MEHIP -Non Profit

Premium and Expense Report by Rating Product Description

Reporting Period: Sept-2005 through Aug-2007

Rating Product Description: Century Preferred

DATE	SUBSCRIBER ONLY	SUBSCRIBER & SPOUSE	SUBSCRIBER, SPOUSE & CHILD	SUBSCRIBER & CHILD	SUBSCRIBER & CHILDREN	TOTAL CONTRACTS	TOTAL MEMBERS	MEDICAL CLAIMS	DENTAL CLAIMS	PHARMACY CLAIMS	CAPITATION	TOTAL PLAN PAID CLAIMS
09/2005	41	15	11	1	2	70	124	\$68,889.13	\$0.00	\$0.00	\$0.00	\$68,889.13
10/2005	42	15	11	2	2	72	127	\$105,965.54	\$0.00	\$0.00	\$0.00	\$105,965.54
11/2005	44	16	11	2	2	75	131	\$51,874.47	\$0.00	\$0.00	\$0.00	\$51,874.47
12/2005	50	17	13	2	2	84	149	\$60,484.96	\$0.00	\$0.00	\$0.00	\$60,484.96
01/2006	52	17	14	2	1	86	154	\$48,553.45	\$0.00	\$0.00	\$0.00	\$48,553.45
02/2006	52	15	16	2	1	86	156	\$96,977.79	\$0.00	\$0.00	\$0.00	\$96,977.79
03/2006	50	15	16	3	1	85	150	\$76,951.75	\$0.00	\$0.00	\$0.00	\$76,951.75
04/2006	50	15	16	3	2	86	153	\$41,606.68	\$0.00	\$0.00	\$0.00	\$41,606.68
05/2006	50	14	14	5	2	85	149	\$47,891.16	\$0.00	\$0.00	\$0.00	\$47,891.16
06/2006	49	15	19	5	3	91	173	\$68,419.44	\$0.00	\$0.00	\$0.00	\$68,419.44
07/2006	42	15	20	6	3	86	171	\$31,390.59	\$0.00	\$0.00	\$0.00	\$31,390.59
08/2006	42	16	20	6	3	87	173	\$27,330.48	\$0.00	\$0.00	\$0.00	\$27,330.48
09/2006	46	14	20	6	4	90	176	\$43,379.28	\$0.00	\$0.00	\$0.00	\$43,379.28
10/2006	41	13	19	6	4	83	163	\$63,718.52	\$0.00	\$0.00	\$0.00	\$63,718.52
11/2006	45	22	25	6	3	101	203	\$62,752.85	\$0.00	\$0.00	\$0.00	\$62,752.85
12/2006	45	22	25	6	2	100	200	\$34,914.03	\$0.00	\$0.00	\$0.00	\$34,914.03
01/2007	54	24	25	5	2	110	211	\$46,514.50	\$0.00	\$0.00	\$0.00	\$46,514.50
02/2007	54	26	25	5	2	112	218	\$61,829.28	\$0.00	\$0.00	\$0.00	\$61,829.28
03/2007	52	26	25	5	2	110	216	\$108,010.08	\$0.00	\$0.00	\$0.00	\$108,010.08
04/2007	51	25	25	5	2	108	213	\$146,096.62	\$0.00	\$0.00	\$0.00	\$146,096.62
05/2007	44	20	23	3	0	90	178	\$87,457.69	\$0.00	\$0.00	\$0.00	\$87,457.69
06/2007	45	20	23	4	0	92	181	\$116,302.94	\$0.00	\$0.00	\$0.00	\$116,302.94
07/2007	47	19	23	4	0	93	180	\$166,378.72	\$0.00	\$0.00	\$0.00	\$166,378.72
08/2007	47	19	22	4	0	92	177	\$109,862.19	\$0.00	\$0.00	\$0.00	\$109,862.19
	1,135	435	461	98	45	2,174	4,126	\$1,773,552.14	\$0.00	\$0.00	\$0.00	\$1,773,552.14

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MEHIP -Non Profit

Premium and Expense Report by Rating Product Description

Reporting Period: Sept-2005 through Aug-2007

Rating Product Description: Managed Drug

DATE	SUBSCRIBER ONLY	SUBSCRIBER & SPOUSE	SUBSCRIBER, SPOUSE & CHILD	SUBSCRIBER & CHILD	SUBSCRIBER & CHILDREN	TOTAL CONTRACTS	TOTAL MEMBERS	MEDICAL CLAIMS	DENTAL CLAIMS	PHARMACY CLAIMS	CAPITATION	TOTAL PLAN PAID CLAIMS
09/2005	1,178	230	270	89	46	1,813	3,017	\$0.00	\$0.00	\$189,910.66	\$0.00	\$189,910.66
10/2005	1,213	239	269	88	46	1,855	3,078	\$0.00	\$0.00	\$170,747.60	\$0.00	\$170,747.60
11/2005	1,254	259	279	91	48	1,931	3,210	\$0.00	\$0.00	\$189,585.13	\$0.00	\$189,585.13
12/2005	1,350	275	301	100	54	2,080	3,475	\$0.00	\$0.00	\$176,006.68	\$0.00	\$176,006.68
01/2006	1,491	296	334	100	56	2,277	3,788	\$0.00	\$0.00	\$202,167.03	\$0.00	\$202,167.03
02/2006	1,525	305	343	111	53	2,337	3,891	\$0.00	\$0.00	\$236,570.45	\$0.00	\$236,570.45
03/2006	1,592	335	391	111	62	2,491	4,240	\$0.00	\$0.00	\$212,263.42	\$0.00	\$212,263.42
04/2006	1,591	320	373	112	61	2,457	4,138	\$0.00	\$0.00	\$252,030.41	\$0.00	\$252,030.41
05/2006	1,546	298	353	105	58	2,360	3,928	\$0.00	\$0.00	\$254,995.24	\$0.00	\$254,995.24
06/2006	1,529	301	366	110	59	2,365	3,985	\$0.00	\$0.00	\$254,733.66	\$0.00	\$254,733.66
07/2006	1,635	329	404	114	66	2,548	4,329	\$0.00	\$0.00	\$243,602.68	\$0.00	\$243,602.68
08/2006	1,735	359	427	129	75	2,725	4,625	\$0.00	\$0.00	\$268,364.36	\$0.00	\$268,364.36
09/2006	1,795	368	423	128	77	2,791	4,703	\$0.00	\$0.00	\$285,748.82	\$0.00	\$285,748.82
10/2006	1,906	385	440	145	80	2,956	4,954	\$0.00	\$0.00	\$283,853.89	\$0.00	\$283,853.89
11/2006	1,941	405	457	144	85	3,032	5,114	\$0.00	\$0.00	\$315,023.37	\$0.00	\$315,023.37
12/2006	2,004	415	463	148	87	3,117	5,235	\$0.00	\$0.00	\$306,235.69	\$0.00	\$306,235.69
01/2007	2,057	418	466	144	85	3,170	5,290	\$0.00	\$0.00	\$338,841.64	\$0.00	\$338,841.64
02/2007	2,109	422	490	149	86	3,256	5,457	\$0.00	\$0.00	\$350,779.03	\$0.00	\$350,779.03
03/2007	2,108	423	497	156	86	3,270	5,493	\$0.00	\$0.00	\$330,229.99	\$0.00	\$330,229.99
04/2007	2,120	420	502	162	87	3,291	5,532	\$0.00	\$0.00	\$358,468.91	\$0.00	\$358,468.91
05/2007	2,179	429	510	166	89	3,373	5,653	\$0.00	\$0.00	\$369,144.02	\$0.00	\$369,144.02
06/2007	2,217	433	516	179	89	3,434	5,746	\$0.00	\$0.00	\$355,160.42	\$0.00	\$355,160.42
07/2007	2,154	427	509	175	94	3,359	5,653	\$0.00	\$0.00	\$373,356.80	\$0.00	\$373,356.80
08/2007	2,152	432	503	174	94	3,355	5,639	\$0.00	\$0.00	\$388,097.38	\$0.00	\$388,097.38
	42,381	8,523	9,886	3,130	1,723	65,643	110,173	\$0.00	\$0.00	\$6,705,917.28	\$0.00	\$6,705,917.28

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MEHIP -Non Profit

Premium and Expense Report by Rating Product Description

Reporting Period: Sept-2005 through Aug-2007

Rating Product Description: PPO COMP

DATE	SUBSCRIBER ONLY	SUBSCRIBER & SPOUSE	SUBSCRIBER, SPOUSE & CHILD	SUBSCRIBER & CHILD	SUBSCRIBER & CHILDREN	TOTAL CONTRACTS	TOTAL MEMBERS	MEDICAL CLAIMS	DENTAL CLAIMS	PHARMACY CLAIMS	CAPITATION	TOTAL PLAN PAID CLAIMS
01/2006	10	1	1	0	0	12	18	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
02/2006	9	1	1	0	0	11	17	\$1,319.56	\$0.00	\$0.00	\$0.00	\$1,319.56
03/2006	17	9	11	2	1	40	92	\$2,562.89	\$0.00	\$0.00	\$0.00	\$2,562.89
04/2006	16	8	11	2	1	38	89	\$1,798.85	\$0.00	\$0.00	\$0.00	\$1,798.85
05/2006	16	8	11	2	1	38	89	\$2,943.47	\$0.00	\$0.00	\$0.00	\$2,943.47
06/2006	16	9	11	2	1	39	91	\$20,949.27	\$0.00	\$0.00	\$0.00	\$20,949.27
07/2006	15	9	11	2	1	38	90	\$92,155.86	\$0.00	\$0.00	\$0.00	\$92,155.86
08/2006	15	9	12	2	1	39	93	\$33,502.56	\$0.00	\$0.00	\$0.00	\$33,502.56
09/2006	14	10	12	2	1	39	94	\$19,374.80	\$0.00	\$0.00	\$0.00	\$19,374.80
10/2006	14	11	10	2	1	38	90	\$13,217.93	\$0.00	\$0.00	\$0.00	\$13,217.93
11/2006	14	11	10	2	1	38	90	\$19,274.05	\$0.00	\$0.00	\$0.00	\$19,274.05
12/2006	13	9	10	2	1	35	84	\$55,188.01	\$0.00	\$0.00	\$0.00	\$55,188.01
01/2007	15	9	10	2	1	37	85	\$9,907.45	\$0.00	\$0.00	\$0.00	\$9,907.45
02/2007	16	9	9	2	1	37	80	\$25,129.94	\$0.00	\$0.00	\$0.00	\$25,129.94
03/2007	9	1	0	0	0	10	11	\$4,597.53	\$0.00	\$0.00	\$0.00	\$4,597.53
04/2007	9	1	0	0	0	10	11	\$40.33	\$0.00	\$0.00	\$0.00	\$40.33
05/2007	10	1	0	0	0	11	12	-\$256.30	\$0.00	\$0.00	\$0.00	-\$256.30
06/2007	10	1	0	0	0	11	12	\$3,401.18	\$0.00	\$0.00	\$0.00	\$3,401.18
07/2007	12	1	0	0	0	13	14	-\$1,543.15	\$0.00	\$0.00	\$0.00	-\$1,543.15
08/2007	11	1	0	0	0	12	13	\$991.33	\$0.00	\$0.00	\$0.00	\$991.33
	261	119	130	24	12	546	1,175	\$304,555.56	\$0.00	\$0.00	\$0.00	\$304,555.56

This report represents the Medical, Drug and Connecticut Dental costs only, retention fees will be used in calculation of the renewal.

Earned Premium is based on the group's billing rates and does not reflect any other financial obligations between Anthem and Client.

MEHIP -Non Profit

Premium and Expense Report by Rating Product Description

Reporting Period: Sept-2005 through Aug-2007

Rating Product Description: Riders

DATE	SUBSCRIBER ONLY	SUBSCRIBER & SPOUSE	SUBSCRIBER, SPOUSE & CHILD	SUBSCRIBER & CHILD	SUBSCRIBER & CHILDREN	TOTAL CONTRACTS	TOTAL MEMBERS	MEDICAL CLAIMS	DENTAL CLAIMS	PHARMACY CLAIMS	CAPITATION	TOTAL PLAN PAID CLAIMS
09/2005	0	0	0	0	0	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10/2005	19	2	4	2	1	28	45	\$428.75	\$0.00	\$0.00	\$0.00	\$428.75
11/2005	19	2	4	2	1	28	45	\$105.75	\$0.00	\$0.00	\$0.00	\$105.75
12/2005	20	2	4	2	1	29	46	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
01/2006	20	2	4	2	1	29	46	\$1,338.70	\$0.00	\$0.00	\$0.00	\$1,338.70
02/2006	21	2	4	2	1	30	47	\$3,662.23	\$0.00	\$0.00	\$0.00	\$3,662.23
03/2006	22	2	4	2	1	31	48	\$7,772.93	\$0.00	\$0.00	\$0.00	\$7,772.93
04/2006	22	2	4	2	1	31	48	\$17,343.55	\$0.00	\$0.00	\$0.00	\$17,343.55
05/2006	60	4	5	2	1	72	93	\$9,586.64	\$0.00	\$0.00	\$0.00	\$9,586.64
06/2006	62	4	15	4	2	87	144	\$13,343.96	\$0.00	\$0.00	\$0.00	\$13,343.96
07/2006	90	17	32	9	4	152	286	\$24,691.26	\$0.00	\$0.00	\$0.00	\$24,691.26
08/2006	92	18	32	10	5	157	297	\$16,085.50	\$0.00	\$0.00	\$0.00	\$16,085.50
09/2006	117	26	35	10	6	194	355	\$11,857.51	\$0.00	\$0.00	\$0.00	\$11,857.51
10/2006	183	35	48	17	11	294	516	\$18,400.14	\$0.00	\$0.00	\$0.00	\$18,400.14
11/2006	219	37	51	16	12	335	571	\$12,417.47	\$0.00	\$0.00	\$0.00	\$12,417.47
12/2006	246	38	51	17	13	365	605	\$19,985.55	\$0.00	\$0.00	\$0.00	\$19,985.55
01/2007	461	54	77	18	17	627	965	\$18,222.04	\$0.00	\$0.00	\$0.00	\$18,222.04
02/2007	461	55	76	17	17	626	966	\$21,888.71	\$0.00	\$0.00	\$0.00	\$21,888.71
03/2007	555	95	123	38	25	836	1,382	\$16,934.67	\$0.00	\$0.00	\$0.00	\$16,934.67
04/2007	625	109	137	48	32	951	1,580	\$16,999.84	\$0.00	\$0.00	\$0.00	\$16,999.84
05/2007	640	108	137	48	32	965	1,593	\$18,598.75	\$0.00	\$0.00	\$0.00	\$18,598.75
06/2007	639	108	137	49	33	966	1,599	\$11,825.30	\$0.00	\$0.00	\$0.00	\$11,825.30
07/2007	654	108	143	51	35	991	1,645	\$25,763.93	\$0.00	\$0.00	\$0.00	\$25,763.93
08/2007	648	107	146	51	34	986	1,645	\$33,179.48	\$0.00	\$0.00	\$0.00	\$33,179.48
	5,895	937	1,273	419	286	8,810	14,567	\$320,432.66	\$0.00	\$0.00	\$0.00	\$320,432.66

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Earned Premium is based on the group's billing rates and does not reflect any other financial obligations between Anthem and Client.

MEHIP -Non Profit

Premium and Expense Report by Rating Product Description

Reporting Period: Sept-2005 through Aug-2007

Rating Product Description: Traditional Drug

DATE	SUBSCRIBER ONLY	SUBSCRIBER & SPOUSE	SUBSCRIBER, SPOUSE & CHILD	SUBSCRIBER & CHILD	SUBSCRIBER & CHILDREN	TOTAL CONTRACTS	TOTAL MEMBERS	MEDICAL CLAIMS	DENTAL CLAIMS	PHARMACY CLAIMS	CAPITATION	TOTAL PLAN PAID CLAIMS
12/2005	4	1	1	0	0	6	10	\$0.00	\$0.00	\$217.12	\$0.00	\$217.12
01/2006	4	1	1	0	0	6	10	\$0.00	\$0.00	\$364.38	\$0.00	\$364.38
02/2006	4	1	1	0	0	6	10	\$0.00	\$0.00	\$100.45	\$0.00	\$100.45
03/2006	4	1	1	0	0	6	10	\$0.00	\$0.00	\$553.20	\$0.00	\$553.20
04/2006	4	1	1	0	0	6	10	\$0.00	\$0.00	\$636.03	\$0.00	\$636.03
05/2006	4	1	1	0	0	6	10	\$0.00	\$0.00	\$152.72	\$0.00	\$152.72
06/2006	4	1	1	0	0	6	10	\$0.00	\$0.00	\$555.20	\$0.00	\$555.20
07/2006	3	2	1	0	0	6	11	\$0.00	\$0.00	\$946.97	\$0.00	\$946.97
08/2006	3	2	1	0	0	6	11	\$0.00	\$0.00	\$453.95	\$0.00	\$453.95
09/2006	3	0	1	0	0	4	7	\$0.00	\$0.00	\$781.85	\$0.00	\$781.85
10/2006	3	0	1	0	0	4	7	\$0.00	\$0.00	\$526.37	\$0.00	\$526.37
11/2006	0	0	0	0	0	0	0	\$0.00	\$0.00	\$54.04	\$0.00	\$54.04
	40	11	11	0	0	62	106	\$0.00	\$0.00	\$5,342.28	\$0.00	\$5,342.28

This report represents the Medical, Drug and Connecticut Dental costs only, retention fees will be used in calculation of the renewal.

Earned Premium is based on the group's billing rates and does not reflect any other financial obligations between Anthem and Client.

MEHIP -Non Profit

Premium and Expense Report by Rating Product Description

Reporting Period: Sept-2005 through Aug-2007

Rating Product Description: Vision

DATE	SUBSCRIBER ONLY	SUBSCRIBER & SPOUSE	SUBSCRIBER, SPOUSE & CHILD	SUBSCRIBER & CHILD	SUBSCRIBER & CHILDREN	TOTAL CONTRACTS	TOTAL MEMBERS	MEDICAL CLAIMS	DENTAL CLAIMS	PHARMACY CLAIMS	CAPITATION	TOTAL PLAN PAID CLAIMS
09/2005	29	12	18	6	2	67	151	\$938.95	\$0.00	\$0.00	\$0.00	\$938.95
10/2005	28	13	19	6	2	68	156	\$560.40	\$0.00	\$0.00	\$0.00	\$560.40
11/2005	27	13	19	6	2	67	155	\$636.28	\$0.00	\$0.00	\$0.00	\$636.28
12/2005	26	13	20	6	2	67	157	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
01/2006	25	13	20	6	2	66	155	\$180.52	\$0.00	\$0.00	\$0.00	\$180.52
02/2006	25	13	20	6	2	66	155	\$507.75	\$0.00	\$0.00	\$0.00	\$507.75
03/2006	25	13	20	6	2	66	155	\$847.28	\$0.00	\$0.00	\$0.00	\$847.28
04/2006	25	13	20	6	2	66	155	\$31.34	\$0.00	\$0.00	\$0.00	\$31.34
05/2006	24	13	20	6	2	65	154	\$901.90	\$0.00	\$0.00	\$0.00	\$901.90
06/2006	24	14	19	6	2	65	153	\$538.09	\$0.00	\$0.00	\$0.00	\$538.09
07/2006	1	1	0	0	0	2	4	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
08/2006	0	0	0	0	0	0	0	\$203.15	\$0.00	\$0.00	\$0.00	\$203.15
10/2006	0	0	0	0	0	0	0	\$33.60	\$0.00	\$0.00	\$0.00	\$33.60
02/2007	0	0	0	0	0	0	0	\$84.00	\$0.00	\$0.00	\$0.00	\$84.00
	259	131	195	60	20	665	1,550	\$5,463.26	\$0.00	\$0.00	\$0.00	\$5,463.26

This report represents the Medical, Drug and Connecticut Dental costs only, retention fees will be used in calculation of the renewal.

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