

ANNUAL STATEMENT FOR THE YEAR 2009 OF THE Preferred Health Partnership of Tennessee, Inc.

# **Statement of Actuarial Opinion**

TABLE of KEY II	NDICATORS			
This Opinion is:	X Unqualified	☐ Qualified	□ Adverse	$\Box$ Inconclusive
IDENTIFICATIO	N SECTION			
<b>X</b> Prescribed Wordin □ Revised Wordin		☐ Prescribed Word	ding with Addition	onal Wording
SCOPE SECTION	I			
X Prescribed Wordin  ☐ Revised Wordin		☐ Prescribed Word	ding with Addition	onal Wording
RELIANCE SECT	TION			
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OPINION SECTIO	ON			
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RELEVANT COM	MENTS			
☐ Revised Wordin	g			
☐ The Actuarial M	Iemorandum ind	cludes "Deviation f	rom Standard'' w	ording regarding conformity with an

Actuarial Standard of Practice



ANNUAL STATEMENT FOR THE YEAR 2009 OF THE Preferred Health Partnership of Tennessee, Inc.

## **Statement of Actuarial Opinion**

### **IDENTIFICATION SECTION**

I, Frank M. Amrine, Actuarial Director and Appointed Actuary, am an employee of Preferred Health Partnership of Tennessee, Inc. and a member of the American Academy of Actuaries. I was appointed on October 31, 2008 in accordance with the requirements of the annual statement instructions. I meet the Academy qualification standards for rendering the opinion.

### SCOPE SECTION

I have examined the assumptions and methods used in determining loss reserves, actuarial liabilities and related items listed below, as shown in the annual statement of the organization as prepared for filing with state regulatory officials, as of December 31, 2009.

A. Claims unpaid (Page 3, Line 1)	\$ 0	
B. Accrued medical incentive pool and bonus payments	\$ 0	
(Page 3, Line 2)		
C. Unpaid claims adjustment expenses (Page 3, Line 3)	\$ 0	
D. Aggregate health policy reserves (Page 3, Line 4)		
including unearned premium reserves and additional		
policy reserves from the Underwriting and Investment		
Exhibit – Part 2D	\$ 0	
E. Aggregate life policy reserves (Page 3, Line 5)	\$ 0	
F. Property / casualty unearned premium reserves	\$ 0	
(Page 3, Line 6)		
G. Aggregate health claim reserves (Page 3, Line 7)	\$	0
H. Any actuarial reserves or liabilities not included	\$	0
in the items above.		

### **RELIANCE SECTION**

The company has no asset or liability records or data that were relied upon in determining reserve liabilities. There are no entries, other than \$0, in the Underwriting and Investment Exhibit Part - 2B of the company's current annual statement.



ANNUAL STATEMENT FOR THE YEAR 2009 OF THE Preferred Health Partnership of Tennessee, Inc.

## **Statement of Actuarial Opinion**

#### **OPINION SECTION**

In my opinion, the amounts carried in the balance sheet on account of the items identified above:

- A. Are in accordance with accepted actuarial standards consistently applied and are fairly stated in accordance with sound actuarial principles,
- B. Are based on actuarial assumptions relevant to contract provisions and appropriate to the purpose for which the statement was prepared,
- C. Meet the requirements of the laws of the State of Tennessee, and are at least as great as the minimum aggregate amounts required by the state in which this statement is filed,
- D. Make a good and sufficient provision for all unpaid claims and other actuarial liabilities of the organization under the terms of its contacts and agreements,
- E. Are computed on the basis of assumptions and methods consistent with those used in computing the corresponding items in the annual statement of the preceding year-end,
- F. Include appropriate provision for all actuarial items that ought to be established.

The Underwriting and Investment Exhibit -- Part 2B was reviewed for reasonableness and consistency with the applicable Actuarial Standards of Practice.

Actuarial methods, considerations, and analyses used in forming my opinion conform to the relevant Standards of Practice as promulgated from time to time by the Actuarial Standards Board, which standards form the basis of this statement of opinion.

This opinion was prepared for, and is to be relied upon only by Preferred Health Partnership of Tennessee, Inc., Humana Inc., and the Insurance Division of the Tennessee Department of Commerce and Insurance.

Frank M. Amrine, FSA, MAAA Preferred Health Partnership of Tennessee, Inc. 500 W. Main Street, 8th Floor Louisville, KY 40202 (502) 580-2270

Date: February 22, 2010



### SUPPLEMENTAL COMPENSATION EXHIBIT

For the Year Ended December 31, 2009

(To Be Filed by March 1)
PART 1 - INTERROGATORIES

1.	The reporting insurer is a member of a group of insurers or other holding company system: Yes [ X ] No [ ] If yes, do the amounts below representation paid to each individual by or on behalf of all companies that are part of the group:  Yes [ X ]: or 2) allocation to each insurer: Yes [ ].	sent		
2.	Did any person while an officer, director, or trustee of the reporting entity receive directly or indirectly, during the period covered by this statement any commission on the business transactions of the reporting entity?	Yes [	] No [	X ]
3.	Except for retirement plans generally applicable to its staff employees, has the reporting entity any agreement with any person, other than contracts with its agents for the payment of commission whereby it agrees that for any service rendered or to be rendered, that he/she shall receive directly or indirectly, any salary, compensation or emolument that will extend beyond a period of 12 months from the date of the agreement?	Yes [	] No [	[ X ]

#### PART 2 - OFFICERS AND EMPLOYEES COMPENSATION

1	1 2 Annual Compensation			Compensation	
Name and Principal Position	Year	3 Salary	4 Bonus	5 All Other Compensation	6 Totals
Michael Benedict McCallister		4 000 000		44 000 204	12,110,30
				821.785	
President & CEO	2007	2.525,977	•••••••	16,461,473	3,789,09 18,987,45
Isaac Eleos Wussaw	m			4,375.282	5.045.28
. James Elmer Murray	2008				1.635.28
Officer	2007	1.479.315		5,200.972	6.680.28
- William J. Yait					804.97
Vice President		634.217	•••••	439.985	775.51
Tice Frestoent	2007	537.403	************************		4,581,2
James H. Bloem					553,4
Sr. VP. CFO & Treasurer	2008	1.304.665	*******	8,467 8,353	1.313.0
31. Fr. Gro d 116850161	2007	1.184.689			5.425.5
Thomas J. Liston	,— I			144.105	494,1
Sr. Vice President - Sr. Prod.		675.063		2,126.537	2.801.6
Or: The freshold - St. Free.	2007	629.552		1,394,939	2.024.4
Frank M. Amrine					464.6
Appointed Actuary		165.235		186.889	352.1
The state of the s	2007	200.942	•••••	173.325	374,2
George Renaudin				200 004	449,4
VP & Div. Leader - Southern Div.		230,000			412.8
The state of the s	2007		**********	102,000	
Larry D. Savage		307.407		114.302	421.7
Regional CEO		500 000			592.9
	2007	494 .030		8.099	502.1
Kathleen S. Pellegrino				140.305	421.3
Vice President & Asst. Secretary	2008	487.817			637.7
, , , , , , , , , , , , , , , , , , ,	2007	466.384		1,712.693	2,179.0
George B. Bauernfeind	2009	228,116			378.4
Vice President	2008	444 444	**-**		489,2
	2007	382.326		1,036.556	1,418,8

### PART 3 - DIRECTOR COMPENSATION

1 Name and Principal Position or Occupation	2 Compensation Paid or Deferred for Services as Director	3 All Other Compensation Paid or Deferred	4 Totals
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<u> </u>			
		•••••••••••••••••	
	••••••	••••••	