

Solicitation Amendment No. 004

To: Prospective Bidder/Offeror:	Date:
Prospective Proposers	December 2, 2016
Project Title:	Project No.:
International Students Health Insurance Services	RFP 17-27

The Solicitation for International Students Health Insurance Services (Project # RFP 17-27) is hereby amended as set forth below:

- The proposal submittal due date has been extended from December 7, 2016 to **December 13, 2016 at 2:00 pm (local time)**.
- Additional data requested under Solicitation Amendment No. 3, Questions and Answers No. 1 posted on 11/29/16 are as follow:
 - Question #15 on page 2 of 8
 - Question #28 on page 4 of 8
 - Questions #56 and #57 on page 6 of 8
 - Questions #67 and #68 on page 7 of 8
- Clarification under Solicitation Amendment No. 3, Questions and Answers No. 1 posted on December 29, 2016 please disregard references to Exhibits 3, 10 and 9 in questions #2, #4 and #47 respectively, information was incorporated as part of attachments provided.

Except as provided herein, all terms and conditions of the solicitation remain unchanged and in full force and effect.

Company Name (Bidder/Offeror):	
Signed by:	Date:
Name (Type or Print):	Title:

**HOUSTON COMMUNITY COLLEGE
2015-2016 POLICY YEAR
TOP 25 PROVIDERS**

NAME OF PROVIDER	PAID
MHHS HERMANN HOSPITAL	\$1,347,038.38
M.D. ANDERSON CANCER CENTER	\$673,292.09
HOUSTON METHODIST - SUGARLAND	\$272,262.01
HOUSTON METHODIST HOSPITAL	\$269,337.70
HARRIS CNTY HOSPITAL DISTRICT	\$226,546.04
WEST HOUSTON MED CTR INC	\$137,781.86
ST. LUKE'S ESPISCOPAL HEALTH SYSTEM	\$120,727.01
PHYSICIANS REFERRAL SERVICE	\$109,547.13
KELSEY SEYBOLD CLINIC	\$95,366.23
TEXAS ONCOLOGY, P.A.	\$89,850.54
TEXAS CHILDRENS HOSP	\$89,353.46
VAIL VALLEY MEDICAL CTR	\$77,981.16
WOMANS HOSPITAL OF TX	\$68,861.20
ST JOSEPH MEDICAL CENTER, LLC	\$60,902.61
QUEST DIAGNOSTIC INC	\$56,663.65
LABORATORY CORP OF AMERICA HOLD	\$56,088.82
ACS PRIMARY CARE PHYS SW	\$52,848.25
UT PHYSICIANS	\$51,594.77
NATERA INC.	\$42,987.52
JABBOURY, MD KHALED W	\$42,136.85
TX ORTHOPEDIC HOSPITAL	\$39,189.48
MEMORIAL HERMANN-TEXAS MEDICAL	\$34,293.38
PREMIER HEALTHCARE EXCHANGE, INC.	\$30,756.51
ST LUKES THE WOODLANDS	\$29,470.90
CARDIOVASCULAR CTR OF HOUSTON	\$29,104.84

**HOUSTON COMMUNITY COLLEGE
2014-2015 POLICY YEAR
TOP 25 PROVIDERS**

NAME OF PROVIDER	PAID
MHHS HERMANN HOSPITAL	\$1,607,006.46
M.D. ANDERSON CANCER CENTER	\$482,462.38
WEST HOUSTON MED CTR INC	\$234,196.71
HOUSTON METHODIST HOSPITAL	\$144,476.52
WOMANS HOSPITAL OF TX	\$139,874.21
HOUSTON METHODIST - SUGARLAND	\$117,895.94
ST LUKES EPISCOPAL HOSP	\$92,030.32
PREMIER HEALTHCARE EXCHANGE, INC.	\$89,098.11
PHYSICIANS REFERRAL SERVICE	\$67,813.88
KELSEY SEYBOLD CLINIC	\$62,614.83
KENDALL MEDICAL CTR	\$60,031.06
MH KATY REHAB HOSPITAL	\$57,657.20
FIRST SURGICAL HOSPITAL	\$55,753.71
ST JOSEPH MEDICAL CENTER	\$51,687.37
JABBOURY, MD KHALED W	\$51,487.53
QUEST DIAGNOSTICS HOUSTON	\$41,324.65
TEXAS CHILDRENS HOSP	\$40,916.77
ORAL MAXILLOFACIAL SURGER - UT	\$39,799.86
ACS PRIMARY CARE PHY SW, PA	\$37,061.43
LABORATORY CORP OF AMERICA HOLD	\$36,045.77
ST LUKES SUGAR LAND HOSPITAL	\$32,203.80
UT PHYSICIANS-TRAUMA SERVICES	\$32,017.88
HOUSTON PHYSICIANS HOSPITAL	\$29,739.58
NACOGDOCHES MEDICAL CENTER	\$22,807.83
PHI AIR MEDICAL LLC	\$21,561.84

**HOUSTON COMMUNITY COLLEGE
2013-2014 POLICY YEAR
TOP 25 PROVIDERS**

NAME OF PROVIDER	PAID
MHHS HERMANN HOSPITAL	\$1,416,342.68
HOUSTON METHODIST HOSPITAL	\$108,976.53
KULVINDER BAJWA, MD	\$55,505.61
WEST HOUSTON MED CTR INC	\$54,586.60
ST. LUKE'S ESPISCOPAL HEALTH SYSTEM	\$54,413.28
OCHSNER FOUNDATION HOSPITAL	\$36,616.13
HOUSTON METHODIST WILLOWBROOK	\$34,580.36
ACS PRIMARY CARE PHYS SW PA	\$27,487.49
CENTER FOR MINIMALLY INVASIVE SURGERY	\$27,120.00
KELSEY SEYBOLD CLINIC	\$24,673.26
QUEST DIAGNOSTIC INC	\$24,339.47
LABORATORY CORP OF AMERICA HOLD	\$20,725.77
GREATER HOUSTON ANESTHESIOLOGY	\$20,022.60
HOUSTON PHYSICIANS' HOSPITAL	\$19,592.24
TEXAS ENT SPECIALISTS	\$18,420.27
PHYSICIANS ER MISSION BEND	\$17,682.70
HOUSTON NORTHWEST MEDICAL	\$13,514.48
FORT BEND SA SERVICES INC	\$13,221.60
EMG LLC-ELITE CARE EMERGENCY	\$13,077.34
NORTH CYPRESS MEDICAL CENTER	\$12,532.80
OB-GYN ASSOCIATES PA	\$12,296.08
PARK PLAZA HOSPITAL/ NUFIC	\$11,875.04
IMPLANTABLE PROVIDER GROUP INC	\$11,323.13
BRIAR FOREST-ELRIDGE MEDICAL CENTER	\$11,079.80
BRAYS BAYOU EMERGENCY PHYS, PLLC	\$10,885.98

Academic Year 2011-2012

REQUESTED CHARGE PAYMENT SUMMARY
CHH8020592 - HOUSTON COMMUNITY COLLEGE

COMPLETION DATES FROM 07/01/2011 THRU 10/31/2016

REPORT 4100

REPORT TOTALS

BENEFIT TYPE	NO. OF ADMITS	DAYS/ SERVICES	CHARGES	NOT COVERED CHARGES	DEDUCTIBLE	COINSURANCE	ESCROW WITHHELD	COB SAVINGS	PAYMENT AMOUNT
MISC HOSP		16	91,843.53	53,534.20	0.00	4,241.49	0.00	0.00	34,067.84
SURGERY		84	71,907.75	30,578.15	449.83	6,364.65	0.00	0.00	34,515.12
RX DRUGS		368	15,958.93	0.00	0.00	0.00	0.00	0.00	15,958.93
EMER ROOM		110	419,632.86	207,231.79	7,772.86	27,173.10	0.00	0.00	177,455.11
ANESTHESIA		18	23,052.00	17,742.56	0.00	0.00	0.00	0.00	5,309.44
AMB		8	18,676.20	6,406.90	300.00	3,083.79	0.00	0.00	8,885.51
ASST SURGEON		6	10,528.04	9,110.42	100.00	210.82	0.00	0.00	1,106.80
LABORATORY		1,579	112,854.65	70,421.74	3,795.35	6,605.65	0.00	0.00	32,031.91
XRAY		210	45,092.59	23,950.12	2,134.79	3,138.96	0.00	0.00	15,868.72
MED EQUIP		1	128.00	44.80	0.00	8.32	0.00	0.00	74.88
TEST&PROCEDS		98	57,533.47	23,001.86	1,318.91	5,115.32	0.00	0.00	28,097.38
CONSULTATION		10	2,672.02	1,078.82	500.00	118.31	0.00	0.00	974.89
DENT/PREV		8	804.00	471.00	50.00	0.00	0.00	0.00	283.00
DENT/MAJOR		6	2,130.00	1,675.00	0.00	91.00	0.00	0.00	364.00
AMB SRG CTR		23	274,166.33	90,511.33	121.29	15,596.59	0.00	0.00	167,937.12
ICU		3	7,228.00	4,561.00	0.00	266.70	0.00	0.00	2,400.30
MRI		10	24,232.75	15,994.56	400.00	783.81	0.00	0.00	7,054.38
REPATRIATION		1	3,726.00	0.00	0.00	0.00	0.00	0.00	3,726.00
INJECTION		1,210	8,206.03	5,168.00	277.85	326.62	0.00	0.00	2,433.56
EXP SCRIPTS		1	5,203.18	0.00	0.00	0.00	0.00	0.00	5,203.18
DENTAL/REST		6	1,330.00	496.25	50.00	156.75	0.00	0.00	627.00
MED SVC/PROC		26	88,031.47	0.00	0.00	0.00	0.00	0.00	88,031.47
ACCID DEATH		1	5,000.00	0.00	0.00	0.00	0.00	0.00	5,000.00
BRACES/APPS		1	199.38	71.59	0.00	12.78	0.00	0.00	115.01
CAT SCAN		17	24,635.00	7,130.62	187.28	2,490.11	0.00	0.00	14,826.99
CHILD HLT SV		2	155.00	155.00	0.00	0.00	0.00	0.00	0.00
DOCTOR EXP		755	145,382.81	56,515.97	22,484.02	9,457.50	0.00	0.00	56,925.32
GYNECOL EXAM		17	3,378.38	3,378.38	0.00	0.00	0.00	0.00	0.00
SEMI-PRVT RM		64	119,756.45	73,711.24	200.00	5,604.52	0.00	0.00	40,240.69
MAMMOGRAM		4	2,503.00	703.24	20.00	468.37	0.00	0.00	1,311.39
OP PRES DRUG		5	203.50	203.50	0.00	0.00	0.00	0.00	0.00
PAP SMEAR		19	1,773.55	821.65	773.90	25.60	0.00	0.00	152.40
PHYS THERAPY		69	3,389.00	2,650.75	0.00	137.10	0.00	0.00	601.15
ROUT NEW/NUR		2	5,716.00	0.00	100.00	561.60	0.00	0.00	5,054.40
INFUSION		2	235.00	23.50	0.00	21.15	0.00	0.00	190.35
REPORT TOTAL		4,760	1,597,264.87	707,343.94	41,036.08	92,060.61	0.00	0.00	756,824.24

Academic Year 2012-2013

REQUESTED CHARGE PAYMENT SUMMARY
CHH8020593 - HOUSTON COMMUNITY COLLEGE

COMPLETION DATES FROM 07/01/2012 THRU 10/31/2016

REPORT 4100

REPORT TOTALS

BENEFIT TYPE	NO. OF ADMITS	DAYS/ SERVICES	CHARGES	NOT COVERED CHARGES	DEDUCTIBLE	COINSURANCE	ESCROW WITHHELD	COB SAVINGS	PAYMENT AMOUNT
MISC HOSP		87	485,487.75	177,031.24	400.00	32,505.08	0.00	0.00	275,551.43
SURGERY		367	171,660.06	86,277.38	1,339.96	11,719.40	0.00	0.00	72,323.32
RX DRUGS		653	23,807.56	0.00	0.00	0.00	0.00	0.00	23,807.56
EMER ROOM		189	475,031.07	165,511.41	10,659.51	34,475.18	0.00	0.00	264,384.97
ANESTHESIA		889	55,386.20	39,703.98	300.00	0.00	0.00	0.00	15,382.22
AMB		9	11,826.36	1,122.90	100.42	2,450.72	0.00	0.00	8,152.32
ASST SURGEON		4	16,290.00	9,229.36	0.00	1,315.78	0.00	0.00	5,744.86
LABORATORY		1,864	164,506.98	89,376.74	5,497.02	13,167.19	0.00	0.00	56,466.03
XRAY		236	103,249.98	53,364.45	2,377.41	7,878.02	0.00	0.00	39,630.10
MED EQUIP		32	10,756.83	3,121.17	100.00	784.33	0.00	0.00	6,751.33
TEST&PROCEDS		126	31,422.39	10,939.67	614.28	3,358.36	0.00	0.00	16,510.08
CONSULTATION		26	8,437.18	2,630.61	567.02	799.43	0.00	0.00	4,440.12
DENT/PREV		16	1,909.00	451.00	200.00	0.00	0.00	0.00	1,258.00
AMB SRG CTR		21	354,180.77	223,401.84	400.00	15,944.28	0.00	0.00	114,434.65
ICU		9	18,391.00	16,572.40	100.00	171.86	0.00	0.00	1,546.74
MRI		22	62,196.75	31,938.16	238.75	5,117.18	0.00	0.00	24,902.66
MED SERVICES		20	2,236.00	2,236.00	0.00	0.00	0.00	0.00	0.00
INJECTION		188	10,177.90	6,821.40	732.14	386.08	0.00	0.00	2,238.28
DENTAL/REST		5	1,052.00	525.75	0.00	105.25	0.00	0.00	421.00
MED SVC/PROC		419	230,631.12	5,389.14	0.00	0.00	0.00	0.00	225,241.98
BRACES/APPS		3	1,650.00	1,608.56	0.00	4.14	0.00	0.00	37.30
CAT SCAN		31	19,974.03	6,019.13	575.15	2,458.21	0.00	0.00	10,921.54
DOCTOR EXP		745	197,712.26	108,948.86	20,049.68	11,513.24	0.00	0.00	57,200.48
SEMI-PRVT RM		82	137,481.50	81,617.47	140.00	7,030.45	0.00	0.00	48,693.58
MAMMOGRAM		15	4,874.26	2,043.88	571.72	289.66	0.00	0.00	1,969.00
OP PRES DRUG		1	130.99	130.99	0.00	0.00	0.00	0.00	0.00
PAP SMEAR		43	3,182.38	1,474.08	1,042.85	66.56	0.00	0.00	598.89
PHYS THERAPY		80	14,685.00	7,126.92	0.00	755.78	0.00	0.00	6,802.30
ROUT NEW/NUR		20	28,813.61	10,362.47	485.00	2,221.98	0.00	0.00	15,744.16
REPORT TOTAL		6,202	2,647,140.93	1,144,976.96	46,490.91	154,518.16	0.00	0.00	1,301,154.90

Academic Year 2013-2014

REQUESTED CHARGE PAYMENT SUMMARY
CHH8020594 - HOUSTON COMMUNITY COLLEGE

COMPLETION DATES FROM 07/01/2013 THRU 10/31/2016

REPORT 4100

REPORT TOTALS

BENEFIT TYPE	NO. OF ADMITS	DAYS/ SERVICES	CHARGES	NOT COVERED CHARGES	DEDUCTIBLE	COINSURANCE	ESCROW WITHHELD	COB SAVINGS	PAYMENT AMOUNT
MISC HOSP		164	1,531,512.93	473,567.78	0.00	99.40	0.00	0.00	1,057,845.75
SURGERY		361	385,644.15	234,530.98	1,130.21	3,095.11	0.00	0.00	146,887.85
EMER ROOM		271	697,111.35	206,592.13	15,651.41	6,020.96	0.00	0.00	468,846.85
ANESTHESIA		1,597	125,373.00	96,617.50	0.00	0.00	0.00	0.00	28,755.50
AMB		19	11,113.92	1,064.00	267.41	1,018.95	0.00	0.00	8,763.56
ASST SURGEON		6	23,833.82	6,712.80	0.00	2,345.36	0.00	0.00	14,775.66
LABORATORY		3,713	307,660.10	183,905.86	6,955.16	3,775.55	0.00	0.00	113,023.53
XRAY		582	117,905.17	56,217.25	3,367.55	920.00	0.00	0.00	57,400.37
MED EQUIP		210	30,015.07	7,174.32	100.15	123.60	0.00	0.00	22,617.00
TEST&PROCEEDS		233	48,537.47	20,542.97	409.62	1,011.80	0.00	0.00	26,573.08
CONSULTATION		49	15,787.26	7,316.21	1,171.42	114.47	0.00	0.00	7,185.16
DENT/PREV		22	2,164.00	1,013.40	200.00	0.00	0.00	0.00	950.60
DENT/MAJOR		3	1,566.00	1,514.00	50.00	0.40	0.00	0.00	1.60
AMB SRG CTR		35	521,102.78	179,617.65	241.00	17,558.08	0.00	0.00	323,686.05
ICU		60	242,481.00	166,121.24	0.00	0.00	0.00	0.00	76,359.76
MRI		35	98,862.70	42,781.31	303.06	1,554.85	0.00	0.00	54,223.48
IMMUNIZATION		224	15,112.37	4,676.30	0.00	354.11	0.00	0.00	10,081.96
MED SERVICES		2	100.00	100.00	0.00	0.00	0.00	0.00	0.00
INJECTION		182	11,988.27	5,205.47	536.50	70.72	0.00	0.00	6,175.58
DENTAL/REST		9	1,643.00	183.25	0.00	291.95	0.00	0.00	1,167.80
MED SVC/PROC		283	147,997.73	3,629.33	0.00	0.00	0.00	0.00	144,368.40
BRACES/APPS		14	4,932.67	1,209.18	0.00	0.00	0.00	0.00	3,723.49
CAT SCAN		69	75,129.78	29,181.96	369.00	2,924.80	0.00	0.00	42,654.02
CHEMO/RAD TH		2	25,602.50	7,680.74	0.00	0.00	0.00	0.00	17,921.76
DOCTOR EXP		1,651	304,226.68	128,268.39	35,448.94	6,666.33	0.00	0.00	133,843.02
GYNECOL EXAM		47	11,311.83	4,570.99	15.00	48.00	0.00	0.00	6,677.84
SEMI-PRVT RM		97	198,954.97	106,271.59	200.00	1,420.00	0.00	0.00	91,063.38
MAMMOGRAM		31	7,939.25	3,094.47	104.27	31.00	0.00	0.00	4,709.51
PAP SMEAR		76	7,016.27	3,007.42	334.43	112.91	0.00	0.00	3,561.51
PHYS THERAPY		228	56,554.24	17,575.84	100.00	1,105.95	0.00	0.00	37,772.45
ROUT NEW/NUR		32	146,221.93	41,819.21	538.20	0.00	0.00	0.00	103,864.52
REG NURSE		45	2,688.33	1,182.50	0.00	185.67	0.00	0.00	1,320.16
INFORMEDRX		28	93,885.93	0.00	0.00	0.00	0.00	0.00	93,885.93
INFUSION		77	7,791.98	4,725.84	0.00	0.00	0.00	0.00	3,066.14
REPORT TOTAL		10,457	5,279,768.45	2,047,671.88	67,493.33	50,849.97	0.00	0.00	3,113,753.27

Academic Year 2014-2015

REQUESTED CHARGE PAYMENT SUMMARY
CHH8020595 - HOUSTON COMMUNITY COLLEGE

COMPLETION DATES FROM 07/01/2014 THRU 10/31/2016

REPORT 4100

REPORT TOTALS

BENEFIT TYPE	NO. OF ADMITS	DAYS/ SERVICES	CHARGES	NOT COVERED CHARGES	DEDUCTIBLE	COINSURANCE	ESCROW WITHHELD	COB SAVINGS	PAYMENT AMOUNT
MISC HOSP		244	2,855,164.34	1,020,820.61	100.00	5,733.54	0.00	0.00	1,828,510.19
SURGERY		436	522,746.35	285,811.13	2,098.29	7,975.17	0.00	0.00	226,861.76
EMER ROOM		380	1,072,003.70	335,858.67	20,911.68	16,810.08	0.00	0.00	698,423.27
ANESTHESIA		1,371	248,431.20	213,978.30	100.00	0.00	0.00	0.00	34,352.90
AMB		106	86,936.39	33,608.63	100.00	8,268.12	0.00	0.00	44,959.64
ASST SURGEON		12	47,034.41	32,974.82	0.00	2,600.78	0.00	0.00	11,458.81
LABORATORY		8,112	806,676.00	392,715.42	10,329.12	9,979.64	0.00	0.00	393,651.82
XRAY		1,016	284,115.63	124,152.07	5,262.35	3,132.68	0.00	0.00	151,568.53
MED EQUIP		182	30,520.70	18,714.41	24.73	420.02	0.00	0.00	11,361.54
TEST&PROCEEDS		807	194,845.86	89,517.64	1,211.73	823.90	0.00	0.00	103,292.59
CONSULTATION		55	19,997.62	7,804.75	1,174.36	163.23	0.00	0.00	10,855.28
DENT/PREV		10	633.00	0.00	173.00	0.00	0.00	0.00	460.00
AMB SRG CTR		57	1,229,092.84	635,367.95	305.00	18,553.58	0.00	0.00	574,866.31
ICU		147	585,858.75	218,424.92	0.00	0.00	0.00	0.00	367,433.83
MRI		51	136,083.25	60,005.98	777.91	3,765.88	0.00	0.00	71,533.48
IMMUNIZATION		651	39,105.23	14,003.95	0.00	245.84	0.00	0.00	24,855.44
REPATRIATION		3	15,703.69	0.00	0.00	0.00	0.00	0.00	15,703.69
INJECTION		2,264	109,719.94	44,674.85	1,445.71	811.99	0.00	0.00	62,787.39
DENTAL/REST		3	685.00	180.00	0.00	101.00	0.00	0.00	404.00
MED SVC/PROC		676	225,417.70	17,617.18	0.00	0.00	0.00	0.00	207,800.52
ACCID DEATH		2	10,000.00	0.00	0.00	0.00	0.00	0.00	10,000.00
BRACES/APPS		17	3,097.20	1,538.16	0.00	12.73	0.00	0.00	1,546.31
CAT SCAN		92	84,050.73	47,271.35	804.04	1,468.94	0.00	0.00	34,506.40
CHEMO/RAD TH		155	62,531.30	12,730.30	0.00	0.00	0.00	0.00	49,801.00
DOCTOR EXP		3,246	700,901.80	293,586.64	69,286.17	7,876.77	0.00	0.00	330,152.22
GYNECOL EXAM		44	10,502.95	3,927.99	15.00	126.00	0.00	0.00	6,433.96
SEMI-PRVT RM		192	192,526.76	78,679.70	300.00	1,080.90	0.00	0.00	112,466.16
MAMMOGRAM		28	11,155.37	3,794.52	376.02	104.94	0.00	0.00	6,879.89
OP PRES DRUG		1	0.01	0.01	0.00	0.00	0.00	0.00	0.00
PAP SMEAR		50	4,176.47	2,156.18	44.22	0.00	0.00	0.00	1,976.07
PHYS THERAPY		901	154,918.12	82,945.22	840.37	2,861.65	0.00	0.00	68,270.88
ROUT NEW/NUR		21	70,574.98	46,414.61	772.40	0.00	0.00	0.00	23,387.97
INFORMEDRX		30	336,254.82	0.00	0.00	0.00	0.00	0.00	336,254.82
INFUSION		18	5,933.34	1,336.94	68.40	780.00	0.00	0.00	3,748.00
REPORT TOTAL		21,380	10,157,395.45	4,120,612.90	116,520.50	93,697.38	0.00	0.00	5,826,564.67

Academic Year 2015-2016

REQUESTED CHARGE PAYMENT SUMMARY
CHH8020596 - HOUSTON COMMUNITY COLLEGE

COMPLETION DATES FROM 07/01/2015 THRU 10/31/2016

REPORT 4100

REPORT TOTALS

BENEFIT TYPE	NO. OF ADMITS	DAYS/ SERVICES	CHARGES	NOT COVERED CHARGES	DEDUCTIBLE	COINSURANCE	ESCROW WITHHELD	COB SAVINGS	PAYMENT AMOUNT
MISC HOSP		328	2,411,548.22	1,019,298.37	152.32	8,090.31	0.00	0.00	1,384,007.22
SURGERY		561	681,720.37	352,468.12	3,010.22	12,587.24	0.00	0.00	313,654.79
VISION		14	1,749.95	902.28	100.00	299.07	0.00	0.00	448.60
EMER ROOM		436	1,552,004.03	658,792.22	24,111.00	22,268.04	0.00	0.00	846,832.77
ANESTHESIA		797	218,110.16	178,425.59	366.03	437.12	0.00	0.00	38,881.42
AMB		79	20,917.33	6,729.92	260.55	2,666.85	0.00	0.00	11,260.01
ASST SURGEON		8	17,479.00	8,642.55	0.00	1,093.00	0.00	0.00	7,743.45
LABORATORY		9,649	1,161,724.53	575,435.22	13,446.97	23,003.28	0.00	0.00	549,839.06
XRAY		1,036	388,562.29	148,073.13	6,611.47	3,062.72	0.00	0.00	230,814.97
MED EQUIP		967	51,642.16	30,941.04	122.50	1,962.02	0.00	0.00	18,616.60
TEST&PROCEDS		908	310,993.04	119,052.27	3,006.63	4,250.71	0.00	0.00	184,683.43
CONSULTATION		101	41,973.22	13,966.74	2,656.47	1,512.15	0.00	0.00	23,837.86
DENT/PREV		55	4,901.99	1,585.54	1,282.31	260.18	0.00	0.00	1,773.96
DENT/MAJOR		5	700.00	314.60	0.00	192.70	0.00	0.00	192.70
AMB SRG CTR		786	1,299,313.30	645,598.35	400.00	13,599.96	0.00	0.00	639,714.99
ICU		74	298,597.42	24,277.08	0.00	0.00	0.00	0.00	274,320.34
MRI		58	178,579.30	83,282.52	912.00	8,408.66	0.00	0.00	85,976.12
IMMUNIZATION		1,127	88,551.80	31,346.05	0.00	590.13	0.00	0.00	56,615.62
INJECTION		1,616	307,927.20	111,943.49	3,005.08	504.73	0.00	0.00	192,473.90
DENTAL/REST		35	7,664.00	4,465.44	109.00	748.71	0.00	0.00	2,340.85
MED SVC/PROC		1,139	220,907.59	26,214.40	0.00	0.00	0.00	0.00	194,693.19
BRACES/APPS		32	12,375.34	1,878.59	0.00	1,088.61	0.00	0.00	9,408.14
CAT SCAN		134	151,950.47	53,398.70	824.92	816.04	0.00	0.00	96,910.81
CHEMO/RAD TH		370	154,966.22	45,547.62	0.00	0.00	0.00	0.00	109,418.60
DENTAL INJUR		3	1,180.00	1,180.00	0.00	0.00	0.00	0.00	0.00
DOCTOR EXP		4,137	1,051,160.41	402,720.23	98,252.67	19,917.40	0.00	0.00	530,270.11
SEMI-PRVT RM		351	489,150.42	164,987.53	200.00	5,627.64	0.00	0.00	318,335.25
MAMMOGRAM		64	29,426.32	10,046.76	400.00	20.93	0.00	0.00	18,958.63
OP PRES DRUG		2	218.18	7.54	0.00	0.00	0.00	0.00	210.64
PAP SMEAR		19	1,472.59	543.37	0.00	13.00	0.00	0.00	916.22
PHYS THERAPY		562	131,710.25	54,003.55	354.82	828.84	0.00	0.00	76,523.04
ROUT NEW/NUR		67	232,462.41	108,741.68	1,761.76	352.15	0.00	0.00	121,606.82
INFORMEDRX		26	654,683.45	0.00	0.00	0.00	0.00	0.00	654,683.45
INFUSION		16	19,545.78	13,867.82	0.00	0.00	0.00	0.00	5,677.96
REPORT TOTAL		25,562	12,195,868.74	4,898,678.31	161,346.72	134,202.19	0.00	0.00	7,001,641.52

**HOUSTON COMMUNITY COLLEGE
OVER \$25,000 HIGH DOLLAR REPORTS
PAID AS OF NOVEMBER 1, 2016**

2012-2013

#1	\$25,637.56
#2	\$33,935.26
#3	\$30,134.91
#4	\$50,758.41
#5	\$58,061.80
#6	\$27,236.58
#7	\$37,241.36
#8	\$38,589.04
#9	\$54,724.62
#10	\$26,975.76

**HOUSTON COMMUNITY COLLEGE
OVER \$25,000 HIGH DOLLAR REPORTS
PAID AS OF NOVEMBER 1, 2016**

2013-2014

#1	\$29,471.01
#2	\$32,883.47
#3	\$35,329.65
#4	\$240,176.82
#5	\$43,523.87
#6	\$51,906.64
#7	\$39,575.94
#8	\$54,921.66
#9	\$32,223.00
#10	\$49,345.84
#11	\$84,652.20
#12	\$49,903.37
#13	\$502,849.86
#14	\$121,702.48
#15	\$149,733.38
#16	\$46,156.79
#17	\$42,475.87
#18	\$47,967.02
#19	\$104,385.82
#20	\$41,642.01
#21	\$43,691.02
#22	\$54,010.07

**HOUSTON COMMUNITY COLLEGE
OVER \$25,000 HIGH DOLLAR REPORTS
PAID AS OF NOVEMBER 1, 2016**

2014-2015

#1	\$33,956.36
#2	\$32,990.12
#3	\$48,715.70
#4	\$53,240.18
#5	\$33,285.87
#6	\$36,408.34
#7	\$42,154.08
#8	\$36,216.93
#9	\$41,431.91
#10	\$36,181.28
#11	\$29,079.52
#12	\$63,050.18
#13	\$36,181.52
#14	\$84,236.36
#15	\$214,571.32
#16	\$37,600.97
#17	\$43,951.52
#18	\$86,094.63
#19	\$31,051.67
#20	\$70,550.06
#21	\$33,055.90
#22	\$38,125.94
#23	\$29,037.59
#24	\$69,744.30
#25	\$29,313.82
#26	\$201,128.92
#27	\$25,892.26
#28	\$39,214.36
#29	\$37,132.39
#30	\$48,449.13
#31	\$25,470.55
#32	\$47,930.83
#33	\$28,637.15
#34	\$31,185.50
#35	\$764,961.71
#36	\$33,977.92
#37	\$45,984.60
#38	\$64,269.21
#39	\$915,176.35
#40	\$33,619.92
#41	\$28,361.68

**HOUSTON COMMUNITY COLLEGE
OVER \$25,000 HIGH DOLLAR REPORTS
PAID AS OF NOVEMBER 1, 2016**

2015-2016

#1	\$41,613.54
#2	\$30,397.61
#3	\$65,945.04
#4	\$25,553.43
#5	\$38,558.53
#6	\$74,967.35
#7	\$38,172.92
#8	\$29,496.85
#9	\$31,963.02
#10	\$39,623.89
#11	\$55,527.95
#12	\$30,881.17
#13	\$35,531.53
#14	\$445,819.04
#15	\$30,743.52
#16	\$43,826.19
#17	\$35,046.19
#18	\$76,384.21
#19	\$25,168.87
#20	\$93,244.53
#21	\$26,464.04
#22	\$288,857.23
#23	\$27,667.29
#24	\$235,700.95
#25	\$75,622.88
#26	\$33,924.77
#27	\$28,613.76
#28	\$53,808.53
#29	\$280,987.77
#30	\$94,116.19
#31	\$102,738.20
#32	\$45,070.19
#33	\$29,690.98
#34	\$38,758.75
#35	\$30,630.70
#36	\$447,654.65
#37	\$34,191.28
#38	\$63,046.64
#39	\$31,403.31
#40	\$73,575.35
#41	\$130,217.31

CORRECTED DATA (December 2, 2016)
International Student Insurance Data

2016 - 2017					
SEMESTERS & DATES	RATE	PREMIUMS COLLECTED¹	NO. of STUDENTS¹	REPATRIATION PREMIUMS²	REPAT NO. of STUDENTS²
2016 Fall Aug 16, 2016 - Jan 16, 2017	\$790	\$3,540,780	4482	unavailable	unavailable
2017 Spring/Sum Jan 17, 2017 - Aug 21, 2017	\$1,149	unavailable	unavailable	NA	NA
2017 Summer Jun 5, 2017 - Aug 21, 2017	\$409	unavailable	unavailable	NA	NA
TOTALS		\$3,540,780			
Notes:					
¹ Premiums and Enrollment data do not include any dependent coverage as dependent coverage is not available in 16/17.					
² Data for Repatriation includes students who were approved for a health insurance waiver but did not have repatriation/evacuation coverage and were charged \$48 for the year for the standalone repatriation policy.					

2015-2016					
SEMESTERS & DATES	RATE	PREMIUMS COLLECTED¹	NO. of STUDENTS¹	REPATRIATION PREMIUMS²	REPAT NO. of STUDENTS²
2015 Fall Aug 24, 2015 - Jan 18, 2016	\$563	\$2,367,415	4205	\$1,392	29
2016 Spring/Sum Jan 19, 2016 - Aug 23, 2016	\$789	\$3,458,187	4383	NA	NA
2016 Summer May 16, 2016- Aug 23, 2016	\$371	\$186,613	503	NA	NA
TOTALS		\$6,012,215		\$1,392	
Notes:					
¹ Premiums and Enrollment data include dependents: (rates for student, spouse, and children were uniform for 2015/16) Fall (22 spouse and 42 children); Spring (28 spouse, 46 children); Summer (4 spouse, 6 children)					
² Data for Repatriation includes students who were approved for a health insurance waiver but did not have repatriation/evacuation coverage and were charged \$48 for the year for the standalone repatriation policy.					

2014-2015					
SEMESTERS & DATES	RATE	PREMIUMS COLLECTED ¹	NO. of STUDENTS ²	REPATRIATION PREMIUMS ³	REPAT NO. of STUDENTS ³
2014 Fall Aug 25, 2014 - Jan 19, 2015	\$268	\$936,392	3494	\$3,264	68
2015 Spring/Sum Jan 20, 2015 - Aug 24, 2015	\$528	\$2,041,248	3866	NA	NA
2015 Summer May 18, 2015 - Aug 24, 2015	\$199	\$62,287	313	NA	NA
TOTALS⁴		\$3,039,927		\$3,264	
Notes:					
¹ Premiums data only includes students (dependent data unavailable)					
² Enrollment data only includes students (dependent enrollment data unavailable)					
³ Data for Repatriation includes students who were approved for a health insurance waiver but did not have repatriation/evacuation coverage and were charged \$48 for the year for the standalone repatriation policy.					
⁴ Total Premiums - an additional \$59,132 in premiums collected directly by the carrier for dependent coverage are not included (rates for student, spouse, and children were not uniform for 2014/15 - see plan brochure for details.)					

2013-2014					
SEMESTERS & DATES	RATE	PREMIUMS COLLECTED ¹	NO. of STUDENTS ²	REPATRIATION PREMIUMS ³	REPAT NO. of STUDENTS ³
2013 Fall Aug 26, 2013 - Jan 12, 2014	\$248	\$763,840	3080	\$2,448	51
2014 Spring/Sum Jan 13, 2014 - Aug 25, 2014	\$496	\$1,547,024	3119	NA	NA
2014 Summer Jun 2, 2014 - Aug 25, 2014	\$186	\$34,410	185	NA	NA
TOTALS⁴		\$2,345,274		\$2,448	
Notes:					
¹ Premiums data only includes students (dependent data unavailable)					
² Enrollment data only includes students (dependent enrollment data unavailable)					
³ Data for Repatriation includes students who were approved for a health insurance waiver but did not have repatriation/evacuation coverage and were charged \$48 for the year for the standalone repatriation policy.					
⁴ Total Premiums - an additional \$16,120 in premiums collected directly by the carrier for dependent coverage are not included (rates for student, spouse, and children were not uniform for 2013/14 - see plan brochure for details.)					

2012-2013					
SEMESTERS & DATES	RATE	PREMIUMS COLLECTED¹	NO. of STUDENTS²	REPATRIATION PREMIUMS³	REPAT NO. of STUDENTS³
2012 Fall Aug 27, 2012 - Jan 13, 2013	\$248	\$750,448	3026	\$2,304	48
2013 Spring/Sum Jan 14, 2013 - Aug 26, 2013	\$496	\$1,509,328	3043	NA	NA
2013 Summer Jun 3, 2013 - Aug 26, 2013	\$186	\$38,502	207	NA	NA
TOTALS⁴		\$2,298,278		\$2,304	
Notes:					
¹ Premiums data only includes students (dependent data unavailable)					
² Enrollment data only includes students (dependent enrollment data unavailable)					
³ Data for Repatriation includes students who were approved for a health insurance waiver but did not have repatriation/evacuation coverage and were charged \$48 for the year for the standalone repatriation policy.					
⁴ Total Premiums - an additional \$5,032 in premiums collected directly by the carrier for dependent coverage are not included (rates for student, spouse, and children were not uniform for 2012/13 - see plan brochure for details.)					