

Attachment III

RECONCILIATION					
CARRIER NAME		STATE		CODE	
BIWEEKLY NET-TO-CARRIER RATES (2004 CONTRACT YEAR)					
		SELF	FAMILY	TOTAL	
1. Actual FEHBP Rates – 2004					
2. Special Benefits Loadings					
(a)					
(b)					
(c)					
(d)					
(e)					
3. FEHBP Rates Plus Special Loadings					
4. Standard Loadings					
(a) Extension of Coverage [.004x(3)]					
(b) Children's Loading					
(c) Medicare Loading					
4d. Subtotal					
4e. Enrollment Discrepancies Loading [.01x(4d)]					
5. Total FEHBP Rates - 2004*					
6. Contract Rate - 2004* Small Carriers Use Line C, Attachment I Here					
7. Difference ((5) - (6)) + = Underpayment to Carrier - = Overpayment to Carrier					
8. March 31, 2004 Enrollment					
9. Payment Due Carrier/(FEHBP)					
10. Brochure Printing Costs					
11. Outstanding Amount Due Carrier/(FEHB)					
12. Total Amount Due Carrier/(FEHBP)					

* - These rates are subject to audit in accordance with the carrier's contract with OPM