

COMMONWEALTH OF KENTUCKY  
BEFORE THE PUBLIC SERVICE COMMISSION

In the Matter of:

THE APPLICATION OF BULLOCK )  
PEN WATER DISTRICT FOR A )  
CERTIFICATE OF PUBLIC )  
CONVENIENCE AND NECESSITY )  
TO CONSTRUCT PROPOSED )  
WATERWORKS IMPROVEMENT )  
PROJECT AND FOR APPROVAL )  
OF PROPOSED PLAN OF FINANCING, )  
INCREASE IN RATES, NONRECURRING )  
CHARGES, AND TARIFF REVISIONS )

CASE NO. 2008-00170

O R D E R

On May 19, 2009, Commission Staff issued its second information request to Bullock Pen Water District (“Bullock Pen”). Items 3, 13, and 14 of this request sought information related to pro forma adjustments, fringe benefits, and health insurance available to Bullock Pen employees.

Bullock Pen responded to the information request on June 4, 2009. In its response, Bullock Pen attached documents that revealed its employees’ social security numbers and insurance subscriber identification numbers.

All material filed with the Commission is subject to public disclosure unless that material is classified as confidential.<sup>1</sup> The Commission follows the guidelines of

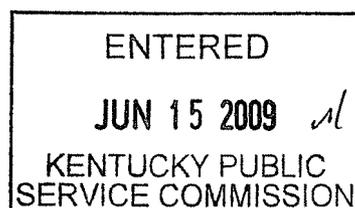
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<sup>1</sup> 807 KAR 5:001, Section 7(1).

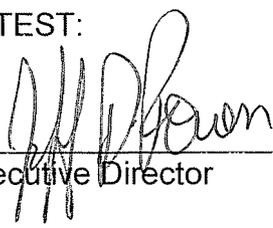
KRS 61.870 *et seq.* in determining what information should be classified as confidential.<sup>2</sup> KRS 61.878(1)(a) provides that confidentiality should be provided to “[p]ublic records containing information of a personal nature where the public disclosure thereof would constitute a clearly unwarranted invasion of personal privacy.” The Attorney General has regularly held that social security numbers and other identification numbers fall within this provision.<sup>3</sup> Accordingly, the Commission finds that the social security numbers and insurance subscriber identification numbers filed by Bullock Pen should be afforded confidential treatment.

The Commission, on its own motion, HEREBY ORDERS that the documents that revealed social security numbers and insurance subscriber identification numbers and that are attached to Bullock Pen’s data response filed on June 4, 2009 shall be placed in a confidential file and that a redacted copy, which is attached as an appendix to this Order, be placed in the main public case file.

By the Commission



ATTEST:

  
\_\_\_\_\_  
Executive Director

<sup>2</sup> 807 KAR 5:001, Section 7(2)(a).

<sup>3</sup> See Ky. OAG 09-055 (Mar. 26, 2009).

APPENDIX

APPENDIX TO AN ORDER OF THE KENTUCKY PUBLIC SERVICE  
COMMISSION IN CASE NO. 2008-00170 DATED **JUN 15 2009**

Group ID: 00001306  
SubGroup ID: 0000

Invoice Number: 055932468

Current Subscriber Details

SubGroup ID: 0000

SubGroup Name: Bullock Pen Water District

Subscriber	Subscriber ID	Plan	Volume	Subscriber	Dependent	Total
Bowling, Janet G		Health 3		\$789.93	\$789.93	\$1,579.86
Caldwell, Aaron E		Health 3		\$301.42	\$1,211.05	\$1,512.47
Catlett, William L		Health 3		\$378.52	\$1,482.81	\$1,861.33
Cook, Dianne K		Health 3		\$779.69	\$1,061.69	\$1,841.38
Duley, Michael R		Health 3		\$789.93	\$789.93	\$1,579.86
Epperson, Betty S		Health 3		\$655.13	\$543.52	\$1,198.65
Harp, Paul E		Health 3		\$246.96	\$0.00	\$246.96
Johnson, Amy G		Health 3		\$655.13	\$543.52	\$1,198.65
Mason, J M		Health 3		\$378.52	\$926.89	\$1,305.41
Ryan, Ernest L		Health 3		\$246.96	\$0.00	\$246.96
Simpson, Brian D		Health 3		\$378.52	\$1,198.65	\$1,577.17
Simpson, Gordon D		Health 3		\$789.93	\$789.93	\$1,579.86
Thomas, Rebecca		Health 3		\$685.87	\$815.28	\$1,501.15
Workman, Joshua A		Health 3		\$259.90	\$866.50	\$1,126.40
<b>Subtotal for 0000</b>				<b>\$7,336.41</b>	<b>\$11,019.70</b>	<b>\$18,356.11</b>



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Thomas, Rebecca		Health 3		\$685.87	\$815.28	\$1,501.15
Workman, Joshua A		Health 3		\$259.90	\$866.50	\$1,126.40
<b>Subtotal for 0000</b>				<b>\$7,336.41</b>	<b>\$11,019.70</b>	<b>\$18,356.11</b>

Employee is not responsible for paying any portion of his Health Insurance coverage.





# GROUP DETAIL COPY

Please retain this copy for your records.

PO BOX 710974  
Columbus, OH 43271-0974

SM001

DUE DATE
06/01/2009
FROM
06/01/2009
THROUGH
06/30/2009
GROUP NUMBER
509640
TOTAL DUE
\$791.14



2042 15 13

\*\*\*\*\*AUTO\*\*MIXED AADC 400  
BULLOCK PEN WATER DISTRICT  
PAULA MASSIE  
PO BOX 138  
CRITTENDEN, KY 41030-0188-88

Please Remit To:

DELTA DENTAL OF KENTUCKY  
PO BOX 710974  
Columbus, OH 43271-0974



CUSTOMER SERVICE: 1-800-955-2030

Page 1 of 3

TOTAL DUE
\$791.14
DUE DATE
06/01/2009

CONTRACT TYPE (CT)	
1. Employee	5. Employee / Child
2. Employee / Spouse	6. Employee / Children
3. Family	

BILLING CODES (BC)			
10. ADDITION	30. EFFECTIVE DATE CHANGE		
20. TERMINATION	40. STATUS CHANGE		

COBRA	MEMBER ID NUMBER	MEMBER NAME LAST, FIRST	CT	EFFECTIVE DATE	TERM DATE	BC	PREMIER ADJUSTMENT	PREMIER PREMIUM	CARE ADJUSTMENT	CARE PREMIUM	PPO ADJUSTMENT	PPO PREMIUM	AMOUNT DUE
	00000000												
		BOWLING, JANET	2	02/01/96				50.91					50.91
		CALDWELL, AARON	3	04/18/04				79.37					79.37
		CATLETT, WILLIAM	3	07/21/97				79.37					79.37
		COOK, DIANNE	5	02/01/97				47.91					47.91
		DULEY, MICHAEL	2	02/01/96				50.91					50.91
		EPPERSON, BETTY	6	12/01/07				47.91					47.91
		HARP, PAUL	1	07/01/08				24.96					24.96
		JOHNSON, AMY	6	02/01/06				47.91					47.91
		MASON, MICHAEL	3	11/01/99				79.37					79.37
		RYAN, ERNEST	1	04/01/05				24.96					24.96
		SIMPSON, BRIAN	3	10/02/97				79.37					79.37
		SIMPSON, GORDON	2	10/01/98				50.91					50.91
		THOMAS, REBECCA	5	02/19/09				47.91					47.91
		WORKMAN, JOSH	3	11/01/07				79.37					79.37

REC'D MAY 21 2009

PREMIUM	ADJUSTMENTS	NET BILLED	PAST DUE	TOTAL DUE
\$791.14		\$791.14		\$791.14

# Anthem Life

BULLOCK PEN WATER  
 Group Nbr: CL1020 -0000  
 Bill Group Nbr: 0000  
 Due Date: 05/01/2009  
 Region: CENTRAL

01704

**Beginning Balance** **\$0.00**

**Current Member Detail**

Reason Codes:    1- Left Employment        2-Temporary Absence        3-Dropping Benefit        4-Deceased  
                   5-Laid Off                                6-Disabled                    7-Retired                    8-Division Change  
                   9-Class Change                            E-No Longer Eligible (PT)    D-Delete                    N-Name Correction  
                   O-Other

\*0000034204704\*

Adj	Code	New Div/Cls	Eff Date	Insured Name	Employee #	Class	Plan	Benefit	Premium	Total Premium	
<input type="checkbox"/>				BOWLING, JANET G.	[REDACTED]	01	LIFE AD&D	10,000 10,000	\$7.30 \$0.60	\$7.90	
<input type="checkbox"/>				CALDWELL, AARON E.		01	LIFE AD&D	10,000 10,000	\$7.30 \$0.60	\$7.90	
<input type="checkbox"/>				CATLETT, WILLIAM L.		01	LIFE AD&D	10,000 10,000	\$7.30 \$0.60	\$7.90	
<input type="checkbox"/>				COOK, DIANNE K.		01	LIFE AD&D	10,000 10,000	\$7.30 \$0.60	\$7.90	
				DULEY, MICHAEL R.		01	LIFE AD&D	10,000 10,000	\$7.30 \$0.60	\$7.90	
<input type="checkbox"/>				EPPERSON, BETTY S.		01	LIFE AD&D	10,000 10,000	\$7.30 \$0.60	\$7.90	
<input type="checkbox"/>				HARP, PAUL		01	LIFE AD&D	10,000 10,000	\$7.30 \$0.60	\$7.90	
<input type="checkbox"/>				JOHNSON, AMY G		01	LIFE AD&D	10,000 10,000	\$7.30 \$0.60	\$7.90	
<input type="checkbox"/>				MASON, J M.		01	LIFE AD&D	10,000 10,000	\$7.30 \$0.60	\$7.90	
<input type="checkbox"/>				MILLER, REBECCA L.		01	LIFE AD&D	10,000 10,000	\$7.30 \$0.60	\$7.90	
<input type="checkbox"/>				RYAN, ERNEST L.		01	LIFE AD&D	10,000 10,000	\$7.30 \$0.60	\$7.90	
<input type="checkbox"/>				SIMPSON, BRIAN D.		01	LIFE AD&D	10,000 10,000	\$7.30 \$0.60	\$7.90	
<input type="checkbox"/>				SIMPSON, GORDON D		01	LIFE AD&D	10,000 10,000	\$7.30 \$0.60	\$7.90	
<input type="checkbox"/>				WORKMAN, JOSHUA A.		01	LIFE AD&D	10,000 10,000	\$7.30 \$0.60	\$7.90	
Summary							LIFE	140,000	\$102.20		
							AD&D	140,000	\$8.40	\$110.60	



PAID

**Current Period Premium Due** **\$110.60**

\*Indicates change from prior billing statement. (See Adjustment Detail)

William Catlett  
General Manager  
Bullock Pen Water District  
One Farrell Drive  
P. O. Box 188  
Crittenden, KY 41030

Honorable Thomas R Nienaber  
Attorney at Law  
Berger, Cox & Nienaber  
401 Madison Avenue  
Covington, KY 41011