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December 9, 2022

Henry Lipman, FACHE
Medicaid Director
NH Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301
Sent via email: henry.lipman@dhhs.nh.gov

Re: Amendment #9 - SFY 2023 Medicaid Care Management Program Capitation Rates

Dear Henry:

This letter provides the New Hampshire Department of Health and Human Services (DHHS) with Amendment #9 SFY 2023 managed care organization (MCO) capitation rates for the Medicaid Care Management (MCM) program including the following populations:

- Standard Medicaid, which also includes the Children's Health Insurance Program (CHIP) population
- Granite Advantage Health Care Program (GAHCP), New Hampshire's adult Medicaid expansion program

DHHS retained Milliman to calculate, document, and certify its capitation rate development. We developed the capitation rates using the methodology described in this letter.

Our role is to certify that the SFY 2023 MCO capitation rates produced by the rating methodology are actuarially sound to comply with Centers for Medicare and Medicaid Services (CMS) regulations. We developed actuarially sound capitation rates using published guidance from the American Academy of Actuaries (AAA), the Actuarial Standards Board (ASB), CMS, and federal regulations to ensure compliance with generally accepted actuarial practices and regulatory requirements.

This letter includes an abbreviated summary of the SFY 2023 capitation rate setting methodology and assumptions for discussion with the MCOs. Please see the May 20, 2022 rate report, provided as Attachment A, for additional details of the data, assumptions, and methodology underlying the development of the Amendment #8 SFY 2023 MCM capitation rates. The rate setting guide and checklist from Attachment A also apply to the rates documented in this letter. Attachment B contains the Actuarial Certification for the Amendment #9 SFY 2023 MCM capitation rates. Attachment C contains the data reliance letter.

AMENDMENT #9 PROGRAM CHANGES

The Amendment #9 SFY 2023 capitation rates reflect several program changes from the Amendment #8 SFY 2023 capitation rates presented in our May 20, 2022 certification. The changes are as follows:

- Updated acuity adjustments by population
- Consideration for changes in hospital outpatient cost to charge ratios
- Updated enrollment scenarios reflecting potential timing for the end of the public health emergency (PHE)
- Adjustments to projected state owned hospital expenditures
- Updated applied behavior analysis (ABA) services trends
- Implementation of reimbursement increases for freestanding and hospital based birthing services
- Inclusion of non-emergency medical transportation (NEMT) reimbursement changes
- Implementation of the October 2022 DRG weights
- Implementation of remote patient monitoring services effective January 1, 2023
- Inclusion of advanced lab tests for breast and ovarian cancer and non-alcoholic steatohepatitis (NASH)
- Updated list of carved out gene therapies
- Implementation of reimbursement increases for SUD residential code H0010

SFY 2023 CAPITATION RATE CHANGE

Table 1A below shows the statewide rate change by population from the Amendment #8 SFY 2023 capitation rates to the Amendment #9 SFY 2023 rates in this letter using current SFY 2023 DHHS population estimates and excludes directed payments. Exhibit A shows the rate change by rate cell.

Table 1A New Hampshire Department of Health and Human Services Medicaid Care Management Program SFY 2023 Capitation Rate Change Based on Projected SFY 2023 Enrollment by Rate Cell Excluding Directed Payments April PHE End Date			
Population	Amendment #8	Amendment #9	Rate Change
Standard Medicaid			
Base Population	\$349.04	\$348.81	-0.1%
CHIP	211.15	213.50	1.1%
Behavioral Health Population	1,459.07	1,431.84	-1.9%
Total Standard Medicaid	\$406.64	\$404.89	-0.4%
Granite Advantage Health Care Program			
Medically Frail	\$1,097.65	\$1,074.95	-2.1%
Non-Medically Frail	419.51	414.34	-1.2%
Behavioral Health Population	2,054.51	2,015.13	-1.9%
Total GAHCP	\$564.78	\$556.50	-1.5%
Grand Total	\$467.51	\$463.25	-0.9%

Table 1B below shows the statewide rate change by population from the Amendment #8 SFY 2023 capitation rates to the Amendment #9 SFY 2023 rates, including directed payments.

Table 1B New Hampshire Department of Health and Human Services Medicaid Care Management Program SFY 2023 Capitation Rate Change Based on Projected SFY 2023 Enrollment by Rate Cell Including Directed Payments April PHE End Date			
Population	Amendment #8	Amendment #9	Rate Change
Standard Medicaid			
Base Population	\$361.13	\$360.19	-0.3%
CHIP	216.61	218.32	0.8%
Behavioral Health Population	1,514.99	1,483.27	-2.1%
Total Standard Medicaid	\$420.82	\$418.10	-0.6%
Granite Advantage Health Care Program			
Medically Frail	\$1,150.99	\$1,113.50	-3.3%
Non-Medically Frail	432.57	423.65	-2.1%
Behavioral Health Population	2,097.00	2,050.34	-2.2%
Total GAHCP	\$583.49	\$570.08	-2.3%
Grand Total	\$483.43	\$476.60	-1.4%

The Amendment #9 SFY 2023 capitation rates include directed payments to community mental health centers (CMHCs) and critical access hospitals (both subject to CMS approval). While these amounts are included in the MCO capitation rates, MCOs are not at risk for the amount of these directed payments.

We project an overall MCO medical loss ratio (MLR) for at-risk services of 90.9% for the Standard Medicaid population and 90.2% for the GAHCP population in SFY 2023, which includes:

- An overall 7.6% administrative cost allowance for the Standard Medicaid population, and 8.3% for the GAHCP population
- A 1.5% risk margin applied as a percentage of revenue prior to the directed payments and the 2.0% premium tax allowance

The projected MLR for at-risk services excludes the impact of the directed payments and the 2.0% premium tax allowance in both the numerator and denominator of the MLR calculation, which is consistent with the treatment of directed payments and premium taxes in federal MLR calculations.

The Amendment #9 SFY 2023 MCM capitation rates do not include funding for the COVID-19 vaccines or vaccine counseling services. DHHS will continue to cover the vaccine administration and vaccine counseling costs under a non-risk arrangement for SFY 2023.

Table 2 shows a breakdown of the capitation rate changes by major rate component for the Amendment #9 SFY 2023 capitation rates compared to the Amendment #8 SFY 2023 capitation rates on a percentage and aggregate dollar basis. Please note, the various rate change components include the impact of attributed administrative allowance, risk / profit margin and premium tax beyond the service costs alone.

Table 2
New Hampshire Department of Health and Human Services
SFY 2023 MCM Capitation Rate Change by Component ¹
Based on Projected SFY 2023 Enrollment by Rate Cell
April 2023 PHE End Scenario

Rate Component	Standard Medicaid		GAHCP		Total	
	Rate Change	12 Month Dollar Impact	Rate Change	12 Month Dollar Impact	Rate Change	12 Month Dollar Impact
Covered Services and Fee Schedule Changes						
Remote patient monitoring services ⁴	0.0%	44,502	0.0%	14,051	0.0%	58,553
Birthing services reimbursement ³	0.4%	2,704,903	0.0%	266,587	0.2%	2,971,490
Advanced lab tests ⁴	0.0%	181,054	0.0%	74,476	0.0%	255,530
Ambulance emergency medical transportation rates ³	0.1%	1,028,020	0.1%	973,491	0.1%	2,001,511
Friends and family NEMT rates ⁴	0.0%	305,170	0.1%	463,202	0.1%	768,372
Chair car transportation rates ⁴	0.0%	178,968	0.0%	111,769	0.0%	290,737
State-owned hospital professional services ⁴	0.1%	624,648	0.0%	182,776	0.1%	807,424
SUD residential services ⁴	0.0%	72,426	0.1%	546,173	0.0%	618,600
Total program changes	0.7%	5,139,692	0.4%	2,632,525	0.6%	7,772,217
Other changes relative to Amendment #8 SFY 2023 rating assumptions						
SFY 2023 acuity adjustment compared to Amendment #8 acuity assumption ³	-0.2%	(\$1,270,728)	-1.3%	(\$8,519,200)	-0.7%	(\$9,789,928)
October 2022 DRG weights ⁴	0.0%	158,231	0.0%	193,003	0.0%	351,234
State-owned hospital staffing constraints ³	-0.4%	(3,272,851)	-0.2%	(1,087,774)	-0.3%	(4,360,625)
Applied behavioral analysis service trends ³	-0.1%	(712,628)	0.0%	3,762	-0.1%	(708,866)
Impact of enrollment increase on the PMPM value of fixed-dollar directed payments ³	-0.5%	(3,973,112)	-1.1%	(7,346,323)	-0.8%	(11,319,435)
Other ²	-0.1%	(915,576)	-0.1%	(857,612)	-0.1%	(1,773,188)
Total other changes	-1.3%	(9,986,664)	-2.7%	(17,614,143)	-2.0%	(27,600,807)
Total rate change for Amendment #9 relative to Amendment #8 rates	-0.6%	(\$4,846,972)	-2.3%	(\$14,981,619)	-1.4%	(\$19,828,591)

¹ The various rate change components include the impact of attributed administrative allowance, risk / profit margin, and premium tax beyond the service costs alone.

² The other change component can include items, such as changes in fee-for-service fees from SFY 2022 to SFY 2023, base data updates, refreshed financial items from MCOs, and modifications to program change effective dates among other things.

³ This change is retroactive to July 1, 2022. The fiscal impact represents a twelve-month period.

⁴ This change is effective after July 1, 2022. The fiscal impact represents less than a twelve-month period.

The composite capitation rates shown above are based on DHHS projections of MCO enrollment for SFY 2023, which include considerations for the unwind process following the end of the public health emergency (PHE) that DHHS expects to occur no earlier than April 2023. The enrollment projections by month are included in Exhibit F.

It should be emphasized that capitation rates are a projection of future costs for an efficient MCO based on a set of assumptions. Actual MCO costs will be dependent on each MCO's situation and the extent to which future experience conforms to the assumptions made in the capitation rate development calculations.

METHODOLOGY

The methodology used to develop the Amendment #9 SFY 2023 MCM capitation rates is consistent with the Amendment #8 capitation rates detailed in our May 20, 2022 report included in Attachment A.

The sections below provide details on all changes from the Amendment #8 SFY 2022 MCM capitation rates.

Detailed rate development exhibits are provided in Excel format in the attached "Appendices - SFY 2023 MCM Rates (12-09-22).xlsx" file.

Acuity Adjustment

In the original SFY 2023 rate certification, we included an acuity adjustment to account for the lower average acuity levels while enrollment redeterminations are voluntary during the PHE. Our intent was to retroactively calculate the final acuity adjustment based on the actual redetermination and disenrollment activity that would occur during SFY 2023. While the calculation of this adjustment would occur following SFY 2023, it would largely rely on activity (enrollment, redeterminations, and claims) that takes place during SFY 2023. As the PHE appears to be extended to mid-April, it seems likely there will not be sufficient redetermination activity to appropriately measure acuity differences between continuing and disenrolled individuals during SFY 2023.

In light of this, we are making a slight revision to the original acuity adjustment and removing the retrospective component of the adjustment. We now calculate the acuity adjustment on a prospective basis to capture observed acuity and emerging experience differences during recent periods. Specifically, we reviewed the following information to update our original acuity adjustment assumptions for Children, Adults, and Disabled Adults (we continue to set the acuity adjustment to 0.0% for Disabled Children, the Behavioral Health Population, and Dual Eligibles):

- January to June 2021 actual experience relative to estimates using projected CY 2019 data
- SFY 2022 actual experience relative to estimates using projected CY 2019 data
- Growth in the percentage of enrollees with no monthly claims from CY 2019 to SFY 2022

Since the SFY 2023 rates rely on CY 2019 base data, we use the analyses noted above to determine an appropriate adjustment factor that accounts for population acuity and emerging experience. However, we recognize that all observed differences relative to projected CY 2019 data are not driven solely by acuity. As such, we dampened the observed differences by 50%. We did not explicitly factor the growth in the percentage of enrollees with no monthly claims into the adjustment, but rather we relied on this information as additional support for our observations.

Based on our review, we updated the acuity adjustment factors as shown in Table 3 below.

Table 3 New Hampshire Department of Health and Human Services SFY 2023 Medicaid Care Management Program Acuity Adjustments		
Eligibility Grouping	Amendment #8 Assumption	Amendment #9 Assumption
Children ¹	-1.9%	-0.4%
Disabled Children	0.0%	0.0%
Adults ²	-1.9%	-3.4%
Disabled Adults ³	-1.9%	-4.3%
Behavioral Health Population	0.0%	0.0%
Dual Eligibles	0.0%	0.0%

¹ Includes Low Income Children - Age 1 to 18 Years, CHIP, and Foster Care / Adoption rate cells.

² Includes Low Income Adults and Granite Advantage - Non-Medically Frail rate cells.

³ Includes Elderly and Disabled Adults - Age 19 to 64, Elderly and Disabled Adults - Age 65+, and Granite Advantage - Medically Frail rate cells.

Exhibit D provides the details of our analysis.

We retained the 3.9% additional acuity adjustment for the Medically Frail rate cell from our May 20, 2022 rate report that reflected increased acuity during the CY 2018 and CY 2019 base period. This additional acuity adjustment is then combined with the -4.3% Disabled Adults acuity adjustment related to the end of the PHE discussed above to calculate the final -0.5% acuity adjustment for the Medically Frail rate cell.

Hospital Outpatient Cost to Charge Ratios

We reviewed the cost-to-charge ratios (CCRs) that underlie the FFS hospital outpatient payment methodology for SFY 2019 to SFY 2023 to understand how experience during the PHE may impact SFY 2023 reimbursement levels. We used the CY 2019 hospital outpatient billed charges by facility to evaluate the program-wide changes in CCRs from SFY 2019 to SFY 2023.

We observed the CCRs increased approximately 7.4% from SFY 2019 to SFY 2023 for hospitals with a CCR (i.e., excluding out-of-state hospitals or hospitals with other reimbursement structures). Included in this 7.4% increase is the 6.3% increase to hospital outpatient percentage of cost reimbursement due to the 3.1% Medicaid provider rate increases effective January 1, 2020 and January 1, 2021, as mandated by House Bill 4. In the rate development, we apply this 6.3% cost increase to all hospital outpatient costs regardless of the use of a CCR underlying the FFS reimbursement methodology.

The resulting CCR increase from SFY 2019 to SFY 2023 is approximately 0.5% after accounting for the House Bill 4 allowance. Consistent with historical observations, we expect modest annual fluctuations in reported CCRs due to cost changes, billed charge changes, volume changes, and other factors. Due to the limited CCR change observed between SFY 2019 and SFY 2023, we do not make further adjustments beyond the House Bill 4 reimbursement increase and the standard annual hospital operating cost trend.

Projected State Owned Hospital Expenditures

The Amendment #9 SFY 2023 MCM capitation rates include two changes related to projected expenditures at New Hampshire Hospital and Hampstead Hospital.

[New Hampshire Hospital Staffing Constraints](#)

Since July 1, 2022, New Hampshire Hospital (NHH) has been operating with 145 beds rather than its usual 193 beds due to staffing constraints, which represents about 75% of historical capacity. NHH and DHHS anticipate this same capacity level to continue through June 2023. As such, we applied an adjustment to reflect the decreased utilization at NHH.

[New Hampshire Hospital and Hampstead Hospital Professional Services](#)

Effective January 1, 2023, New Hampshire Hospital and Hampstead Hospital will begin billing MCOs for professional services provided to the MCM population. Reimbursement for professional services is expected to be set at Medicaid fee levels through June 30, 2023, and then increased to Medicare fee levels starting on July 1, 2023.

We used professional services claim information for commercial and Medicare patients provided by NHH to estimate the cost of professional services on a per admission basis. We estimate the per admission professional services cost to be \$1,570.93 under Medicaid fee-for-service reimbursement and \$2,835.30 under Medicare reimbursement.

Applied Behavioral Analysis Trend

For applied behavioral analysis (ABA) services, we reviewed historical data through June 2022 to develop separate utilization and unit cost trends. With MCOs expanding their ABA networks in recent years, we looked at the percentage of members with autism receiving ABA services over time to evaluate the change in utilization, as well as average ABA cost per member to estimate changes in unit cost. We selected an annual utilization trend of 21.7% (varies by rate cell) and a 0.0% annual trend for unit cost. We then trended SFY 2022 experience data at these annual rates to develop our projected SFY 2023 costs PMPM. The resulting annual trend rate from CY 2019 to SFY 2023 is 21.7% compared to the Amendment #8 assumption of 22.5%.

Freestanding and Hospital Based Birthing Services

Effective July 1, 2022, DHHS is increasing reimbursement for freestanding and hospital based birthing services as follows:

- Free-standing birthing centers receive an increased per diem rate to \$921.00, a 44.4% rate increase
- Neonatal DRGs (DRG 789 through 794) are increased by 25%
- Birthing-related DRGs (DRGs 768, 783-788, 795-797, 805-807) are increased by 34% for Critical Access Hospitals and 24% for Non-Critical Access Hospitals

We reviewed CY 2018 and CY 2019 encounter claims data and summarized paid amounts by facility type and DRG. We then applied the mandated increase by rate cell accordingly.

Additionally, we made an adjustment for the closure of Frisbie Memorial Hospital's birthing center. We assumed these deliveries would move to Portsmouth Regional Hospital, Wentworth Douglas Hospital, or other comparable hospitals, resulting in MCO reimbursement levels approximately 3.0% higher than the historical reimbursement level at Frisbie Memorial Hospital. We applied the increase in reimbursement by rate cell based on the distribution of historical CY 2018 and CY 2019 encounter claims at Frisbie's birthing center.

Transportation

The Amendment #9 SFY 2023 MCM capitation rates include allowances for increased reimbursement rates for certain NEMT services as follows:

- Ambulance Emergency Medical Transportation Rates: Effective July 1, 2022, an increase to set Emergency Medical Transportation rates equal to 50% of current Medicare rates for the following codes:
 - A0425
 - A0427
 - A0429
 - A0433
 - A0434

We applied the rate increase to the CY 2018 and CY 2019 MCO encounter data to estimate the impact of this rate increase.

- Friends and Family: Effective January 1, 2023, reimbursement will be increased to \$0.625 per mile for code A0090.

We applied the rate increase to the CY 2018 and CY 2019 MCO encounter data to estimate the impact of this rate increase. We adjusted our projections to reflect a three month ramp up period to allow for MCO and NEMT vendor communications with enrollees.

- Chair Car Transportation Rates: Effective January 1, 2023 the SFY 2023 capitation rates include additional funding for the following codes when they are used for chair car transportation:
 - A0100
 - S0215
 - A0130
 - S0209
 - T2005
 - T2049
 - A0428
 - A0380
 - A0426
 - A0390

This estimated SFY 2023 funding increase, roughly \$0.09 PMPM accounting for the January 1, 2023 effective date, is based on information provided by the MCOs regarding the updated fee schedule relative to their historical contracts with NEMT providers.

October 2022 DRG Weights

We updated the hospital inpatient unit cost trend using the actual 2023 DRG weights effective October 1, 2022. A review of the newly released weights suggests a 0.8% unit cost trend between SFY 2022 and SFY 2023 compared to our Amendment #8 assumption of 0.45% based on historical data.

Remote Patient Monitoring

Effective January 1, 2023, remote patient monitoring and store and forward services will be covered under the MCM contract. We reviewed emerging CY 2021 and CY 2022 claims experience for a Medicare enrolled population for select CPT codes provided by DHHS. We calculated the remote patient monitoring and store and forward services expenditures as a percentage of home health services spending. We determined these services represent about 0.5% of home health expenditures based on a review of emerging Medicare fee-for-service and Medicare Advantage data. Medicare began covering these services in 2019 and utilization has ramped up from 2019 to 2022. We used this same percentage across rate cells to develop a PMPM adjustment to the rates.

Advanced Laboratory Tests and DME Codes

The Amendment #9 SFY 2023 MCM capitation rates include allowances for new laboratory tests and additional DME codes effective January 1, 2023, as follows:

- Advanced Testing for Ovarian and Breast Cancer: The MyChoice CDx (0172U) lab test determines homologous recombination deficiency (HRD) status using somatic mutation analysis to detect variants in tumor suppressor genes BRCA1 and BRCA2 for breast and ovarian cancer. The resulting genomic instability score provides an algorithmic measurement of certain biomarkers valuable for selection of cancer treatment using Lynparza or Zejula.

We estimate the annual utilization for this laboratory test ranges from 150 to 230 tests, assuming that 20% to 35% of Medicaid enrollees with either breast or ovarian cancer will be provided the test.

We developed our utilization estimate by reviewing fee for service and encounter data for the MCM program to count the annual number of cases for breast and ovarian cancer. We determined approximately 0.3% of the New Hampshire Medicaid program population, or 780 members, are breast or ovarian cancer patients. We selected our testing percentage range assumption based on information from breastcancer.org citing that 24.1% of breast cancer patients and 30.9% of ovarian cancer patients are tested for a BCRA mutation. We used a +/- 5% range around these values as our testing percentage range.

The reimbursement on the fee schedule for this test is \$2,424.

- Multianalyte Assays with Algorithmic Analysis test (0014M): This test provides analysis of three biomarkers and carries out an algorithmic analysis using patient data and the lab test results to report a risk score for liver fibrosis and liver-related clinical events that could occur within five years.

NASH is a severe form of nonalcoholic fatty liver disease (NAFLD) characterized by chronic inflammation and liver cell injury. This service is important to identify patients with NASH who have a high risk of disease progression to cirrhosis and liver-related clinical events, including hepatic decompensation, Model for End-Stage Liver Disease (MELD) score ≥ 15 , liver transplantation, or death. NASH is a severe form of nonalcoholic fatty liver disease (NAFLD) characterized by chronic inflammation and liver cell injury.

In many cases, this test will replace a liver biopsy procedure. We reviewed the CY 2019 encounter claims data for liver biopsies performed in a professional setting. We determined the estimated impact of offering this test is not material due to the majority of liver biopsies being performed in a facility based setting, and therefore, not subject to a fee schedule based reimbursement. We made no further adjustments to the capitation rates for this new laboratory test.

- Other DME Codes: We also increased reimbursement for the following DME codes:
 - E0604 – Rental / Based on Utilization
 - A4281 – Tubing for Breast Pump, Replacement
 - A4282 – Adapter for Breast Pump, Replacement; Portable Vehicle Adapter – 9 volt
 - A4285 – Polycarbonate Bottle for use with Breast Pump, Replacement

The total funding for these DME codes is not material.

New Gene Therapy Carve-Outs

Effective July 1, 2022 DHHS will add two new gene therapies to the list of carved out drugs for the MCM program.

Zynteglo is a gene therapy that received Food and Drug Administration (FDA) approval on August 17, 2022 for the treatment of adult and pediatric patients with beta-thalassemia who require regular red blood cell transfusions. Zynteglo is anticipated to be a one-time treatment that will cost \$2.8 million with additional administration costs associated with required hospitalizations.

Skysona was approved by the FDA on September 16, 2022 for the treatment of the rare neurological disorder cerebral adrenoleukodystrophy (CALD). Skysona is expected to cost \$3 million per treatment.

Both medications will be covered on a fee-for-service basis for MCM enrollees.

SUD Residential Code H0010

Effective January 1, 2023, DHHS is increasing per diem reimbursement for SUD residential code H0010 to \$577.07. We applied the rate increase to the CY 2018 and CY 2019 MCO encounter data to estimate the impact of this rate increase. We adjusted our projections to reflect a three month ramp up period for implementation.

CAVEATS AND LIMITATIONS ON USE

Milliman has developed certain models to estimate the values included in this letter. The intent of the models was to estimate Amendment #9 SFY 2023 capitation rates. We have reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used fee-for-service (FFS) and MCO encounter cost and eligibility data for July 2017 through June 2022, MCO financial data, historical reimbursement information, TPL recoveries, current fee schedules, and other DHHS and MCO information to calculate the New Hampshire MCM program capitation rates shown in this letter. This data was provided by DHHS and participating MCOs. We did not audit this data and other information. If the underlying data or information is inaccurate or incomplete, the results of our analysis may likewise be inaccurate or incomplete. We performed a limited review of the data used directly in our analysis for reasonableness and consistency and did not find material defects in the data. If there are material defects in the data, it is possible they would be uncovered by a detailed, systematic review and comparison of the data to search for data values that are questionable, or for relationships that are materially inconsistent. Such a review was beyond the scope of our assignment. Please see the data reliance letter for a full list of the data relied upon to develop the SFY 2023 capitation rates.

We constructed several projection models to develop the capitation rates shown in this letter. Differences between the capitation rates and actual MCO experience will depend on the extent to which future experience conforms to the assumptions made in the capitation rate development calculations. It is certain that actual experience will not conform exactly to the assumptions used in the SFY 2023 capitation rates, due to differences in health care trend, managed care efficiency, provider reimbursement levels, and many other factors. Actual amounts will differ from projected amounts to the extent that actual experience is higher or lower than expected.



Milliman prepared this letter for the specific purpose of developing SFY 2023 MCM program capitation rates. This letter should not be used for any other purpose. The letter and the models used to develop the values in this letter have been prepared solely for the internal business use of, and is only to be relied upon by, the management of DHHS. We understand this letter may be shared with participating MCOs, CMS, and other interested parties. Milliman does not intend to benefit or create a legal duty to any third party recipient of its work. This letter should only be reviewed in its entirety.

The results of this letter are technical in nature and are dependent upon specific assumptions and methods. No party should rely on these results without a thorough understanding of those assumptions and methods. Such an understanding may require consultation with qualified professionals.

The authors of this letter are consulting actuaries for Milliman, members of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of their knowledge and belief, this letter is complete and accurate and has been prepared in accordance with generally recognized and accepted actuarial principles and practices.

The terms of Milliman's contract with the New Hampshire Department of Health and Human Services effective July 1, 2022, apply to this letter and its use.



Please call John Meerschaert, Greg Herrle, Sarah Wunder or me at 262 796 2250 if you have any questions.

Sincerely,

A handwritten signature in black ink that reads 'Mathieu Doucet'.

Mathieu Doucet, FSA, MAAA
Senior Consulting Actuary

MD/jf

Attachments (Provided in Excel)



December 9, 2022

**New Hampshire Department of Health and Human Services
Capitated Contracts Ratesetting
Actuarial Certification
SFY 2023 Medicaid Care Management Program Capitation Rates**

I, John D. Meerschaert, am associated with the firm of Milliman, Inc., am a member of the American Academy of Actuaries, and meet its Qualification Standards for Statements of Actuarial Opinion. I was retained by the New Hampshire Department of Health and Human Services (DHHS) to perform an actuarial certification of the Medicaid Care Management program capitation rates for SFY 2023 for filing with the Centers for Medicare and Medicaid Services (CMS). I reviewed the calculated capitation rates and am familiar with the relevant requirements of 42 CFR 438; the CMS "Attachment A, PAHP, PIHP and MCO Contracts Financial Review Documentation for At-risk Capitated Contracts Ratesetting;" the 2022 to 2023 Medicaid Managed Care Rate Development Guide; and Actuarial Standard of Practice (ASOP) 49.

I examined the actuarial assumptions and actuarial methods used in setting the capitation rates for SFY 2023. To the best of my information, knowledge and belief, the capitation rates offered by DHHS are in compliance with the relevant requirements of 42 § CFR 438.3(c), 438.3(e), 438.4, 438.5, 438.6, and 438.7. The attached actuarial report describes the capitation rate setting methodology.

In my opinion, the capitation rates are actuarially sound, as defined in Actuarial Standard of Practice (ASOP) 49, were developed in accordance with generally accepted actuarial principles and practices, and are appropriate for the populations to be covered and the services to be furnished under the contract.

In making my opinion, I relied upon the accuracy of the underlying claims and eligibility data records prepared by DHHS, as well as encounter data, financial data summaries, and other information prepared by the participating MCOs. A copy of the reliance letter received from DHHS is attached and constitutes part of this opinion. I did not audit the data and calculations, but did review them for reasonableness and consistency and did not find material defects. In other respects, my examination included such review of the underlying assumptions and methods used and such tests of the calculations as I considered necessary.

The capitation rates developed may not be appropriate for any specific MCO. Any MCO will need to review the rates in relation to the benefits provided. Each MCO should compare the rates with its own experience, expenses, capital and surplus, and profit requirements prior to agreeing to contract with DHHS. The MCO may require rates above, equal to, or below the actuarially sound capitation rates.

Actuarial methods, considerations, and analyses used in forming my opinion conform to the appropriate Standards of Practice as promulgated from time-to-time by the Actuarial Standards Board, whose standards form the basis of this Statement of Opinion.

It should be emphasized that capitation rates are a projection of future costs based on a set of assumptions. Actual costs will be dependent on each contracted MCO's situation and experience.

This Opinion assumes the reader is familiar with the New Hampshire Medicaid program, Medicaid eligibility rules, and actuarial rating techniques. The Opinion is intended for the State of New Hampshire and the Centers for Medicare and Medicaid Services and should not be relied on by other parties. The reader should be advised by actuaries or other professionals competent in the area of actuarial rate projections of the type in this Opinion, so as to properly interpret the projection results.

John D. Meerschaert
Member, American Academy of Actuaries
December 9, 2022



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF MEDICAID SERVICES

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May 19, 2022

Mr. John D. Meerschaert, F.S.A.
Milliman, Inc.
15800 Bluemound Road, Suite 100
Brookfield, WI 53005

Re: *Actuarial Certification of SFY 2023 Capitation Rates for New Hampshire Medicaid Care Management Program Capitation Rates*

Dear Mr. Meerschaert:

I, Henry Lipman, Medicaid Director for the New Hampshire Department of Health and Human Services, hereby affirm that the data prepared and submitted to Milliman, Inc. (Milliman) for the purpose of certifying the SFY 2023 New Hampshire Medicaid Care Management (MCM) program capitation rates were prepared under my direction, and to the best of my knowledge and belief are accurate and complete. This data includes:

1. Computer files supporting the SFY 2023 capitation rate calculation, including, but not limited to:
 - Technical Definition for NH MCM Data Book Services Scope V3.doc
 - Reference Files.xls
 - NH Provider Type Codes and Descriptions.xls
 - Eligibility Category Detail.xlsx
 - Medicaid CAHs.xls
 - OP-RHC-FQHC Reimbursement Process as of 2-5-13.doc
 - Provider Payment Algorithms2011.docx
 - QA LOG Care management 111412012 w corrected date at top.xlsx
 - Medicaid Extract and Claims Information.doc
 - NH+Medicaid+rebranded+detailed+FQHC+Provider+Manual+2-1-18.pdf
 - Newborn Reporting Procedures Guidance Statement 20121130.doc
 - NH Care Management Contract Exhibit A 031612.pdf
 - NH MCM Rate Cells Definition 2014-02-20.xls
 - Community Mental Health Agreement 1.22.15.pdf
 - Fiscal Impact Change of Scope & LAL SFY19.xlsx
 - FY20_21 Provider Rate Increases by Senate Bill and Milliman Exh 1.xlsx
 - NHM PDL 20220328.xlsx
 - PG02+PG09 Provider Numbers.xlsx
 - DME MP for Analysis 09_01_2020.xlsx
 - Initial Estimate Funding ALL MCOs (Pmts 0722-0623).xlsx
 - Neuro Psych (96131-96139) Utilization 2021.10.05.xlsx

- Rate Increase Impacts-Peristeen A4459 & catheters.xlsx
- Metric_Quantity_Request with MMIS Units.xlsx

2. Fee schedule files:

1) CY/SFY/FFY 2018 fee schedules:

- 2018 DRG Rate Sheet.xls
- SFY 18 Hosp IP & OP.xls
- 2018 NH Fee Schedule Covered Procedures 02232018.xlsx
- 2018 NH Fee Schedule Manually Priced Procedures 02232018.xlsx
- 2018 Medicaid Rates for Diagnostic and Physician Rates-20190108.xlsx
- 2018 ASC Fee Schedule.xls
- 2018 Hospice Rates worksheet-Final.xlsx
- FQHC Based Rate SFY 2018.xls
- SFY18 RATE CHANGE LOG.xlsx
- 2019 FISCAL IMPACT - Hospice Rates FINAL.xlsx

2) CY/SFY/FFY 2019 fee schedules:

- 2019 DRG Rate Sheet.xls
- Fee Schedule 1-8-19.xlsx
- Hospice Rates PDF File for Providers - Eff 10_1_2018.pdf
- Report of Covered Procedures - 20190110.xlsx
- Report of Manually Priced Procedures - 20190110.xlsx

3) CY/SFY/FFY 2023 fee schedules:

- SFY23 RATE CHANGE LOG.xlsx
- FFY22 DRG Rate Sheet .xlsx
- Covered proedures Fee schedule as of 01012021.xlsx
- Manual Priced Procedures 01012021.xlsx
- 2022 Hospice Rates.xlsx
- ASC Rates_20220125_Fee Sched_1.26.22.xlsx
- J Code CSR Attachment - 22020405.xlsx

3. January 2015 – October 2021 Medicaid eligibility data and claims from MMIS and MCO encounter files, including:

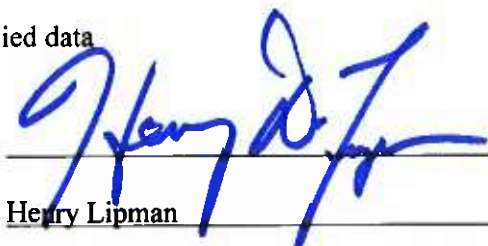
- Biweekly claims data (facility, professional and drug).
- Biweekly enrollment data
- Provider reference files.
- Supplemental eligibility/ineligibility files
- Additional FFS Hospice claims:
 - SFY 2018 Hospice data for Milliman.xlsx
 - 2020_3_4_Hospice_SFY2019 Data for Milliman.xlsx

Mr. John D. Meerschaert, F.S.A.

May 19, 2022

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- Additional FFS CTS claims:
 - CTS FFS Encounter Data.csv
 - CTS PAP Encounter Data.csv
 - Additional BDAS claims:
 - tblWITS_SFY18_SvcInMedicaidSpan.xlsx
 - Plan Selection Period info:
 - Fee for Service Spans for Andrew 1-1-2018 to current.xls
 - IMD Claims:
 - NHH_Medicaid_2016-2019.xlsx
4. Other supporting documentation, including:
- MCO contract
 - Financial Reconciliation data from participating health plans
 - MCO administrative cost survey results
 - ATECH services details
 - Behavioral Health Crisis Treatment Center (BHCTC) implementation and termination schedule
 - DRF identification process
 - Hospital directed payment details
 - Community Residential Service expansion details
 - Mobile Crisis Response Team and Emergency Services identification process
 - Home and Community Based Services directed payment details
 - Genetic Testing for Hospitals details
 - Fiscal impact and appropriation amounts for various legislative provisions
 - Other computer files
 - Conversations concerning supplied data



Henry Lipman

Medicaid Director

May 19, 2022

MILLIMAN REPORT

State of New Hampshire Department of Health and Human Services

State Fiscal Year (SFY) 2023 Capitation Rate Development for Medicaid Care Management Program

May 20, 2022

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APPENDICES

Capitation Rate Development Exhibits (Provided in Excel)

Appendices – SFY 2023 MCM Rates.xlsx

Fiscal Impact Exhibits (Provided in Excel)

Exhibit A: Comparison of Amendment #8 SFY 2023 Capitation Rates to Amendment #7 SFY 2022 Capitation Rates

Exhibit B: Estimated Fiscal Impact of Medicaid Care Management Program

Other Exhibits (Provided in Excel)

Exhibit C: Boston Children’s Hospital Funding Development
Exhibit D: Acuity Adjustment Development
Exhibit E: Community Mental Health Center Cost Component Summary
Exhibit F: Enrollment Projections
Exhibit G: Pharmacy Efficiency Savings
Exhibit H: List of NDCs for Carved-Out Prescription Drugs
Exhibit I: Rate Cell Logic Letter
Exhibit J: Summary of Preferred Drug List Analysis

Actuarial Certification

Exhibit K: Actuarial Certification of SFY 2023 New Hampshire Medicaid Care Management Capitation Rates

Reliance Letter

I. EXECUTIVE SUMMARY

This report documents the development of the state fiscal year (SFY) 2023 managed care organization (MCO) capitation rates for New Hampshire's Medicaid Care Management (MCM) program, including the following populations:

- Standard Medicaid, which also includes the Children's Health Insurance Program (CHIP) population
- Granite Advantage Health Care Program (GAHCP), which is New Hampshire's adult Medicaid expansion program

The New Hampshire Department of Health and Human Services (DHHS) retained Milliman to calculate, document, and certify its capitation rate development. We developed the capitation rates using the methodology described in this report. The SFY 2023 capitation rates are included in Amendment #8 to the MCM program contracts with the three managed care organizations (MCOs).

Our role is to certify that the SFY 2023 capitation rates produced by the rating methodology are actuarially sound to comply with Centers for Medicare and Medicaid Services (CMS) regulations. We developed actuarially sound capitation rates using published guidance from the American Academy of Actuaries (AAA), the Actuarial Standards Board (ASB), CMS, and federal regulations to ensure compliance with generally accepted actuarial practices and regulatory requirements.

SFY 2023 PROGRAM CHANGES

The SFY 2023 capitation rates reflect several program changes from the SFY 2022 capitation rates presented in our December 1, 2021 certification. The changes are as follows:

- Inclusion of hospital admissions at New Hampshire Hospital for age 21 to 64 adults as an at-risk service included in the monthly capitation rates
- Transition of all hospital admission costs for Hampstead Hospital from the inpatient psychiatric admission kick payment to the monthly capitation rates
- Implementation of a minimum fee schedule for admissions at New Hampshire and Hampstead Hospitals
- Inclusion of targeted pharmacy savings through review of several pharmacy efficiency measures
- Implementation of a retroactive acuity adjustment as part of the risk mitigation strategy

COVID-19 CONSIDERATIONS IN SFY 2023 RATE DEVELOPMENT

As of the time of this report, the impact on SFY 2023 capitation rates due to the COVID-19 pandemic and public health emergency (PHE) is difficult to predict. As such, a minimum and maximum medical loss ratio (MLR) will be in effect in SFY 2023 to reflect the uncertainty in the capitation rates due to COVID-19. The minimum and maximum MLR provision is described in more detail in Section III.

In addition, explicit adjustments for COVID-19 are made in the rate development for the following issues, as described in Section IV:

- Medicaid enrollment is projected to decrease through March 31, 2023 and remain flat from April 1, 2023 through the end of the fiscal year. The SFY 2023 capitation rates in Amendment #8 of the MCM contract reflect this updated enrollment distribution, and the preliminary acuity adjustment factor for each rate cell has been updated to reflect the lower enrollment estimates used in Amendment #8 vs. Amendment #7.
- Due to the uncertainty surrounding the unwind process following the end of the PHE, DHHS will implement a non-budget neutral retrospective acuity adjustment. This adjustment will capture the relative acuity of the actual individuals enrolled during SFY 2023 during the continuing PHE and through the redetermination process. The preliminary acuity factor included in this report will be updated retroactively to account for the actual PHE end date, the redetermination process, and relative acuity levels.

- The capitation rates do not include provisions for expected vaccination administration fees related to COVID-19 in SFY 2023 as these costs remain carved out of the MCM program.
- Since the start of the COVID-19 pandemic and PHE, service utilization levels in the New Hampshire Medicaid program have lagged behind CY 2019 utilization by rate cell and on an aggregate basis. The SFY 2023 capitation rates assume SFY 2023 utilization levels will be consistent with CY 2019. As such, we did not apply utilization trend from CY 2019 to SFY 2023 with the exception of ABA services. This utilization projection is supported by our review of historical quarterly PMPM amounts that indicate emerging costs through June 2021 were below CY 2019 even with the known provider rate increases and acuity differences. We also reviewed DHHS summaries of emerging encounter data through January 2022 show similar cost reductions compared to CY 2019. We will continue to monitor emerging experience and revisit this assumption for the planned January 2023 rate amendment.

The SFY 2023 capitation rates do not include any explicit adjustments for the following issues. The net impact of these issues is implicitly included in the assumption that SFY 2023 service utilization will be consistent with CY 2019 service utilization on an aggregate basis. The MCM program risk mitigation provisions protect DHHS and the MCOs from material overpayments or underpayments.

- COVID-19 testing and treatment cost: The prevalence of COVID-19 infection rates in SFY 2023 is dependent on many variables that make it difficult to predict to include an estimate for the cost of testing for and treating individuals with COVID-19 including, but not limited to:
 - The take-up rate and timing of COVID-19 vaccinations
 - The emergence of COVID-19 variants and the efficacy of vaccines on these variants
 - The implementation of social distancing measures
- To our knowledge, there is not a publicly available model that includes COVID-19 infection rate or hospital admissions through June 2023. In addition, the publicly available models have materially changed short-term and long-term projections of COVID-19 prevalence in reaction to emerging data. While we have reviewed historical MCM data for the cost of testing and treating COVID-19 in CY 2021, given the unpredictable patterns of COVID-19 prevalence to date in New Hampshire and the changing national models there is a range of potential impacts on the SFY 2023 rates.
- Deferred and foregone services: The most significant fiscal impact of COVID-19 to date has been the deferral of non-essential services, either through government-enacted policies, the impact of social distancing on the administration of services, or personal choice. We reviewed MCM emerging claims data incurred through February 2022 by population type (to remove the impact of membership mix changes). As of February 2022, there was still measurable reductions in claim costs for each population compared to the PMPMs prior to the pandemic in CY 2019. However, it is difficult to use this historical data to project the impact of deferred services for SFY 2023 for many reasons.
 - Utilization by service category has varied in CY 2020 and 2021 as the level of COVID-19 diagnoses and hospital admissions has changed in New Hampshire over the course of the pandemic. Therefore, the unknown future prevalence of COVID-19 will be a key variable in future service utilization changes relative to pre-pandemic levels.
 - In the MCM data we reviewed it is difficult to isolate the impact of deferred services from changes in utilization due to other drivers, such as member acuity changes or change in service mix.
- Service Mix Changes: In response to the pandemic, the mix of services used to treat patients has changed, such as the use of telehealth services. It is unknown if these provider and patient changes will persist after the end of the pandemic.

SFY 2023 CAPITATION RATE CHANGE

Table 1A below shows the statewide rate change by population from the Amendment #7 SFY 2022 capitation rates to the Amendment #8 SFY 2023 rates in this report using current DHHS enrollment estimates and **excludes directed**

payments. DHHS has been paying the MCOs the rates included in Amendment #7. Exhibit A shows a summary of the rate change by rate cell.

The rate change is shown including and excluding mental health admissions to New Hampshire Hospital (NHH) of less than 60 days for age 21 to 64 population. The SMI/SED 1115 waiver amendment to the Substance Use Disorder Treatment and Recovery Access (SUD-TRA) 1115 demonstration will allow DHHS to receive federal matching funds for these Institution for Mental Disease (IMD) services. As such, these admissions to New Hampshire Hospital will now be included as an at-risk service for MCOs. In the past, DHHS has covered these services using state general funds, and therefore, including them as a Medicaid results in roughly \$15 million of additional services subject to federal matching.

Table 1A
New Hampshire Department of Health and Human Services
Medicaid Care Management Program
SFY 2023 Capitation Rate Change
Based on Projected SFY 2023 Enrollment by Rate Cell
Excluding Directed Payments

Population	SFY 2022	SFY 2023		Percentage Change	
		Excluding Impact of SMI/SED 1115 Waiver Amendment	Total	Excluding Impact of SMI/SED 1115 Waiver Amendment	Total
Standard Medicaid					
Base Population	\$328.56	\$344.83	\$346.28	5.0%	5.4%
CHIP	192.68	213.67	214.07	10.9%	11.1%
Behavioral Health Population	1,381.53	1,408.40	1,461.70	1.9%	5.8%
Total Standard Medicaid	\$384.19	\$401.87	\$406.85	4.6%	5.9%
Granite Advantage Health Care Program					
Medically Frail	\$1,091.37	\$1,093.39	\$1,097.65	0.2%	0.6%
Non-Medically Frail	418.97	418.07	419.51	-0.2%	0.1%
Behavioral Health Population	1,933.60	1,951.04	2,033.26	0.9%	5.2%
Total GAHCP	\$563.17	\$563.42	\$568.33	0.0%	0.9%
Grand Total	\$441.88	\$453.94	\$458.90	2.7%	3.8%

Table 1B below shows the statewide rate change by population from the Amendment #7 SFY 2022 capitation rates to the Amendment #8 SFY 2023 rates, **including directed payments.**

Table 1B
New Hampshire Department of Health and Human Services
Medicaid Care Management Program
SFY 2023 Capitation Rate Change
Based on Projected SFY 2023 Enrollment by Rate Cell
Including Directed Payments

Population	SFY 2022	SFY 2023		Percentage Change	
		Excluding Impact of SMI/SED 1115 Waiver Amendment	Total	Excluding Impact of SMI/SED 1115 Waiver Amendment	Total
Standard Medicaid					
Base Population	\$352.95	\$356.71	\$358.17	1.1%	1.5%
CHIP	198.39	219.27	219.67	10.5%	10.7%
Behavioral Health Population	1,470.78	1,464.33	1,517.68	-0.4%	3.2%
Total Standard Medicaid	\$410.57	\$416.00	\$420.98	1.3%	2.5%
Granite Advantage Health Care Program					
Medically Frail	\$1,144.47	\$1,146.77	\$1,150.99	0.2%	0.6%
Non-Medically Frail	432.79	431.13	432.57	-0.4%	-0.1%
Behavioral Health Population	2,001.29	1,992.81	2,075.12	-0.4%	3.7%
Total GAHCP	\$583.63	\$582.21	\$587.11	-0.2%	0.6%
Grand Total	\$466.35	\$469.57	\$474.53	0.7%	1.8%

The SFY 2023 capitation rates include directed payments to community mental health centers (CMHCs) and critical access hospitals (both subject to CMS approval). The HCBS directed payment that was in place during SFY 2022 was eliminated for SFY 2023. While these amounts are included in the MCO capitation rates, MCOs are not at risk for the amount of these directed payments.

We project an overall MCO medical loss ratio (MLR) for at-risk services of 90.8% for the Standard Medicaid population and 90.1% for the GAHCP population in SFY 2023, which includes:

- An overall 7.7% administrative cost allowance for the Standard Medicaid population, and 8.4% for the GAHCP population
- A 1.5% risk margin applied as a percentage of revenue prior to the directed payments and the premium tax allowance

The projected MLR for at-risk services excludes the impact of the directed payments and the 2.0% premium tax allowance in both the numerator and denominator of the MLR calculation, which is consistent with the treatment of directed payments and premium taxes in federal MLR calculations.

The SFY 2023 MCM capitation rates do not include funding for the COVID-19 vaccines. DHHS will continue to cover the vaccine administration costs under a non-risk arrangement for SFY 2023.

Table 2 shows a breakdown of the capitation rate changes by major rate component for the Amendment #8 SFY 2023 capitation rates compared to the Amendment #7 SFY 2022 capitation rates on a percentage and aggregate dollar basis. Please note, the various rate change components include the impact of attributed administrative allowance, risk / profit margin and premium tax beyond the service costs alone.

Table 2
New Hampshire Department of Health and Human Services
SFY 2023 MCM Capitation Rate Change by Component ¹
Based on Projected SFY 2023 Enrollment by Rate Cell

Rate Component	Standard Medicaid		GAHCP		Total	
	Rate Change	12 Month Dollar Impact	Rate Change	12 Month Dollar Impact	Rate Change	12 Month Dollar Impact
Inclusion of IMD admissions of less than 60 days for age 21-64 population as a covered Medicaid service through SMI/SED 1115 waiver amendment to the SUD-TRA 1115 demonstration						
Newly covered New Hampshire Hospital (NHH) admissions repriced at NHH minimum fee schedule	1.1%	\$7,703,888	0.8%	\$3,755,578	1.0%	\$11,459,465
Reversal of IMD exclusion for other impacted services	0.1%	\$672,069	0.0%	\$163,043	0.1%	\$835,112
Total impact of SMI/SED 1115 waiver amendment	1.2%	\$8,375,957	0.8%	\$3,918,620	1.1%	\$12,294,578
Other program changes						
New Hampshire and Hampstead Hospitals – repricing to minimum fee schedule for services historically covered by MCM program	0.5%	\$3,450,993	0.1%	\$365,521	0.3%	\$3,816,514
Community residential services – additional beds	0.1%	745,993	0.0%	121,129	0.1%	867,123
Preliminary SFY 2023 acuity adjustment compared to SFY 2022 acuity assumption	0.7%	4,769,045	1.5%	7,211,955	1.0%	11,981,000
Total other program changes	1.3%	\$8,966,032	1.6%	\$7,698,605	1.4%	\$16,664,636
Other changes relative to SFY 2022 rating assumptions						
Non-pharmacy utilization trends	-1.1%	(7,844,706)	-1.1%	(5,248,839)	-1.1%	(13,093,545)
Opioid addiction treatment trend adjustment	-0.5%	(3,146,990)	-0.8%	(3,909,040)	-0.6%	(7,056,031)
Inpatient and outpatient hospital unit cost trends	0.5%	3,184,479	0.6%	2,980,746	0.5%	6,165,225
Applied behavioral analysis service trends	1.1%	7,450,166	0.0%	5,939	0.6%	7,456,105
Pharmacy trends	2.4%	16,751,556	0.3%	1,296,337	1.6%	18,047,893
Preferred drug list (PDL) adjustment	-0.1%	(1,000,190)	-0.9%	(4,036,173)	-0.4%	(5,036,363)
Pharmacy savings initiatives	0.0%	121,825	0.1%	406,868	0.0%	528,693
J Code fee schedule changes	0.1%	1,033,584	0.2%	991,855	0.2%	2,025,439
Boston Children's Hospital risk pool funding level	0.3%	1,955,549	0.0%	34,726	0.2%	1,990,275
Other	0.3%	2,227,495	0.0%	(21,256)	0.2%	2,206,240
Total Other Changes	3.0%	\$20,732,768	-1.6%	(\$7,498,837)	1.1%	\$13,233,931
Total rate change for SFY 2023 relative to SFY 2022 rates (prior to directed payment changes)						
	5.5%	\$38,074,756	0.9%	\$4,118,388	3.6%	\$42,193,145
Directed payment changes						
Removal of HCBS directed payment	-3.3%	(23,012,503)	-0.7%	(3,377,214)	-2.3%	(26,389,717)
Impact of enrollment decrease on the PMPM value of fixed-dollar directed payments ²	0.4%	2,431,500	0.4%	2,047,234	0.4%	4,478,733
Total directed payment changes	-3.0%	(\$20,581,003)	-0.3%	(\$1,329,981)	-1.9%	(\$21,910,984)
Total rate change for SFY 2023 relative to SFY 2022 rates (after directed payment changes)						
	2.5%	\$17,493,753	0.6%	\$2,788,408	1.8%	\$20,282,161

¹ The various rate change components include the impact of attributed administrative allowance, risk / profit margin, and premium tax beyond the service costs alone.

² The SFY 2023 directed payments remain at \$33 million for critical access hospitals and \$5 million for CMHCs. Lower projected enrollment for SFY 2023 compared to SFY 2022 results in higher PMPM amounts to fund the directed payments.

The composite capitation rates shown above are based on DHHS' initial projections of MCO enrollment for SFY 2023, which include considerations for the unwind process following the end of the PHE with enrollment returning to pre-PHE levels by March 2023. The enrollment projections by month are included in Exhibit F. Future rate amendments will incorporate updated enrollment estimates that capture additional available information related to the end of the PHE.

We note, the SFY 2023 component changes in Table 2 are expressed relative to the same components in the SFY 2022 rates. As such, the pharmacy savings and preliminary acuity adjustment show increases even though both components result in a reduction to projected SFY 2023 costs. The pharmacy savings analysis identified less opportunity for savings in SFY 2023 than SFY 2022. Similarly, the preliminary acuity adjustment reduces costs by a lower amount in SFY 2023 than SFY 2022 largely due to the current estimate of enrollment timing and trajectory during the PHE unwind.

SFY 2023 CAPITATION RATES

Table 3 shows statewide capitation rates for the base population that DHHS will pay to MCOs for each member meeting these rate cell criteria. Note, the base population rate cells exclude the behavioral health population and the GAHCP populations, which have separate rate cells as shown in Tables 4 and 5. The rate changes by rate cell are shown in the accompanying Excel workbooks.

Table 3 New Hampshire Department of Health and Human Services Medicaid Care Management Program SFY 2023 Base Population Capitation Rates¹	
Base Population Rate Cell	SFY 2023
Low Income Children and Adults	
0 to 11 months	\$350.35
1 to 18	189.00
19+	494.04
CHIP	185.02
Foster Care / Adoption	374.07
Severely Disabled Children	1,808.17
Elderly and Disabled Adults – 19 to 64	1,324.83
Elderly and Disabled Adults – 65+	1,059.06
Dual Eligibles	322.91
Newborn Kick Payment	4,721.98
Neonatal Abstinence Syndrome Kick Payment	9,707.32
Maternity Kick Payment	2,875.73

¹ Excludes the behavioral health population, and GAHCP populations.

Table 4 shows the statewide capitation rates for the behavioral health population that DHHS will pay to the MCOs for each member meeting these rate cell criteria. The behavioral health population includes all Standard Medicaid and GAHCP population members eligible for enhanced behavioral health services.

Table 4 New Hampshire Department of Health and Human Services Medicaid Care Management Program SFY 2023 Behavioral Health Population Capitation Rates ¹	
Behavioral Health Population Rate Cells	SFY 2023
Severe / Persistent Mental Illness – Medicaid Only	\$2,553.10
Severe / Persistent Mental Illness – Dual Eligibles	1,939.34
Severe Mental Illness – Medicaid Only	1,698.74
Severe Mental Illness – Dual Eligibles	1,158.41
Low Utilizer – Medicaid Only	1,567.60
Low Utilizer – Dual Eligibles	686.42
Serious Emotionally Disturbed Child	1,154.84

¹ Excludes the base population, GAHCP Medically Frail, and GAHCP Non-Medically Frail populations.

Table 5 shows the statewide capitation rates for the GAHCP Medically Frail and Non-Medically Frail populations that DHHS will pay to the MCOs for each member meeting these rate cell criteria.

Table 5 New Hampshire Department of Health and Human Services Medicaid Care Management Program SFY 2023 GAHCP Population Capitation Rates ¹	
GAHCP Rate Cell	SFY 2023
Medically Frail	\$1,150.99
Non-Medically Frail	432.57

¹ Excludes the behavioral health population.

Table 6 shows the kick payments DHHS will pay to the MCOs for each hospital inpatient psychiatric admission. While the SFY 2022 psychiatric admission kick payments included services provided at New Hampshire Hospital and Hampstead Hospital, such services are now captured in the monthly capitation rates and are excluded from Table 6 below.

Table 6 New Hampshire Department of Health and Human Services Medicaid Care Management Program SFY 2023 Hospital Inpatient Psychiatric Admission Kick Payments ¹	
Psychiatric Kick Payment	SFY 2023
Peer Group 01 and 07	\$3,681.70
Peer Group 02	2,836.28
Peer Group 06	17,606.39
Peer Group 09	8,000.60

¹ Does not apply to dual eligibles or admissions for adults at New Hampshire Hospital.

It should be emphasized that capitation rates are a projection of future costs for an efficient MCO based on a set of assumptions. Actual MCO costs will be dependent on each MCO's situation and the extent to which future experience conforms to the assumptions made in the capitation rate development calculations.

REPORT STRUCTURE

The accompanying Excel workbooks document the development of the SFY 2023 capitation rates for all populations. Exhibit A shows a comparison of the Amendment #8 SFY 2023 capitation rates to the Amendment #7 SFY 2022 capitation rates documented in our December 1, 2021 rate certification. Exhibit B shows the fiscal impact of the

Amendment #8 SFY 2023 capitation rates based on projected SFY 2023 member months. The actuarial certification of the SFY 2023 New Hampshire MCM program capitation rates is included as Exhibit K.

Section II provides an overview of the methodology, including a summary of methodology changes. Section III documents the capitation rate base data and medical cost projections. Section IV summarizes final capitation rate adjustments for all rate cells, including various program adjustments and the administrative / margin allowance. Section V of the report provides information regarding the assignment of service categories. Section VI discusses issues related to the CMS rate setting checklist. Section VII includes comments on items related to the 2022-2023 Medicaid Managed Care Rate Development Guide.

DATA RELIANCE AND IMPORTANT CAVEATS

Milliman has developed certain models to estimate the values included in this report. The intent of the models was to estimate SFY 2023 capitation rates. We have reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOPs).

The models rely on data and information as input to the models. We used fee-for-service (FFS) and MCO encounter cost and eligibility data for January 2018 through October 2021, MCO financial data, historical reimbursement information, TPL recoveries, current fee schedules, and other DHHS and MCO information to calculate the New Hampshire MCM program capitation rates shown in this report. This data was provided by DHHS and participating MCOs. We did not audit this data and other information. If the underlying data or information is inaccurate or incomplete, the results of our analysis may likewise be inaccurate or incomplete. We performed a limited review of the data used directly in our analysis for reasonableness and consistency and did not find material defects in the data. If there are material defects in the data, it is possible they would be uncovered by a detailed, systematic review and comparison of the data to search for data values that are questionable or for relationships that are materially inconsistent. Such a review was beyond the scope of our assignment. Please see the data reliance letter for a full list of the data relied upon to develop the SFY 2023 capitation rates.

We constructed several projection models to develop the capitation rates shown in this report. Differences between the capitation rates and actual MCO experience will depend on the extent to which future experience conforms to the assumptions made in the capitation rate development calculations. It is certain that actual experience will not conform exactly to the assumptions used in the SFY 2023 capitation rates due to differences in health care trend, managed care efficiency, provider reimbursement levels, and many other factors. Actual amounts will differ from projected amounts to the extent that actual experience is higher or lower than expected.

Milliman prepared this report for the specific purpose of developing SFY 2023 MCM program capitation rates. The report and the models used to develop the values in this report should not be used for any other purpose. This report has been prepared solely for the internal business use of, and is only to be relied upon by, the management of DHHS. We understand this report may be shared with participating MCOs, CMS, and other interested parties. Milliman does not intend to benefit or create a legal duty to any third party recipient of its work. This report should only be reviewed in its entirety.

The results of this report are technical in nature and are dependent upon specific assumptions and methods. No party should rely on these results without a thorough understanding of those assumptions and methods. Such an understanding may require consultation with qualified professionals.

The authors of this report are consulting actuaries for Milliman, members of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of their knowledge and belief, this report is complete and accurate and has been prepared in accordance with generally recognized and accepted actuarial principles and practices.

The terms of Milliman's contract with the New Hampshire Department of Health and Human Services effective July 1, 2017 apply to this report and its use.

II. METHODOLOGY OVERVIEW

This section of the report provides an overview of the SFY 2023 New Hampshire MCM program capitation rate methodology and highlights program changes effective for SFY 2023.

BASE DATA

We developed the SFY 2023 capitation rates using enrollment data, FFS claims, and MCO encounter claims.

We summarized the following base data sources by rate cell and service category:

- CY 2018 and CY 2019 MCO encounter experience for the Standard Medicaid population and the GAHCP Medically Frail population.
- March 2019 to December 2019 MCO encounter experience for the GAHCP Non-Medically Frail population. We selected the March 2019 to December 2019 time period due to claims ramp-up in January 2019 and February 2019.

We used two years of base data for most rate cells to increase the credibility of the rate development calculation, particularly for smaller rate cells. The base experience period is collected from the following sources:

- We obtained MCO encounter data and sub-capitated expenditures directly from the participating MCOs. The SFY 2023 capitation rates include sub-capitated expenditures for services not capitated through an affiliated organization. For related entities, the SFY 2023 rates include actual encounter payments to providers for those services, when available. We removed administrative payments made by the MCOs to related parties from the encounter data. Actual MCO encounter data is used for all CMHC services. The MCOs also provided summarized provider incentive payments and settlements made outside of the claims data and these items were included in the base data.
- We obtained eligibility and MCM enrollment information from DHHS.

We believe the encounter data is of appropriate quality and completeness to use as the primary basis for developing actuarially sound rates for the New Hampshire MCM program. We validated the MCO encounter data using the following process:

- We compared the submitted encounter data to quarterly financial data summaries provided by the MCOs. The quarterly financial data summaries included FFS and sub-capitated payments made by the MCOs to providers by rate cell, broad service category, and quarter. The financial data was not audited but is certified by each MCO as accurate and complete.
- DHHS and Milliman provided an opportunity for MCOs to play a significant role in the base data validation for the SFY 2023 capitation rate development process. As we worked on the development of the SFY 2023 capitation rates, we provided MCOs with a series of detailed data summaries in order to further our understanding of the data, complete the validation process, and offer more transparency on the process leading to the capitation rates.
- Through this detailed review process, Milliman, DHHS, and the MCOs validated the encounter data for use in the capitation rate setting process.

Table 7 below shows a summary of the encounter data reconciliation to the financial statement information provided by the MCOs. Overall, the CY 2018 and CY 2019 base encounter data is about 0.4% lower than financial summaries provided by MCOs.

Table 7
New Hampshire Department of Health and Human Services
Medicaid Care Management Program
CY 2018 and CY 2019 Data Validation Summary

Quarter	Dollar Difference	Percentage Difference
1Q2018	(\$112,053)	-0.1%
2Q2018	39,862	0.0%
3Q2018	(1,514,174)	-1.2%
4Q2018	(1,222,374)	-0.9%
1Q2019	(1,270,878)	-0.7%
2Q2019	(2,472,969)	-1.3%
3Q2019	926,640	0.5%
4Q2019	(225,491)	-0.1%
CY 2018	(\$2,808,739)	-0.48%
CY 2019	(3,042,698)	-0.40%
Grand Total	(\$5,851,438)	-0.44%

In recent years, the MCM program capitation rate development process has generally relied upon base data from the two most recent complete state fiscal years. However, the impact of the COVID-19 pandemic on costs beginning in early 2020 presents challenges to using SFY 2020 and SFY 2021 base period for setting capitation rates. CY 2018 and CY 2019 reflect the most recent available claims data with sufficient payment runout prior to the impact of the COVID-19 pandemic. As we used the CY 2018 and CY 2019 base period data to project SFY 2023 costs, we also analyzed 2020 and 2021 data through October, to the extent it is useable, to help inform rate development assumptions and understand more recent costs. In an email dated May 11, 2022, CMS approved the state's request for an exception to the base data standards in accordance with 42 CFR § 438.5(c)(3) for SFY 2023 rate development purposes.

Consistent with the SFY 2022 rate development, we continue to rely solely on encounter data due to the decreasing impact of the FFS experience on the MCM capitation rates in recent years. However, we continue to apply an adjustment factor developed from FFS data to reflect the portion of the base experience data historically attributed to FFS. The adjustment factor is discussed in more detail later in this report.

A few years ago, DHHS discovered MCO payment issues related to crossover claims for skilled nursing facility (SNF) services. SNF claims are not a covered service under the MCM program. Using claim number information provided by MCOs, we identified approximately \$330,000 in the CY 2018 and CY 2019 base experience data attributed to improperly paid services, and we removed these claims from the capitation rate development process.

It is our understanding that Community Mental Health Centers (CMHCs) originally did not completely report certifications for GAHCP members eligible for enhanced behavioral health services, due to the lack of a capitation arrangement between the MCOs and CMHCs. As a result, the number of certifications received by DHHS increased rapidly beginning in June 2020.

To correct this issue and accurately assign rate cells for GAHCP members in the base data, we re-processed the enrollment data and assumed any GAHCP individual with a behavioral health certification in December 2020 should have had the certification in prior months. This change results in the reassignment of member months from GAHCP program rate cells to the behavioral health rate cells.

Consistent with the SFY 2022 capitation rates, the claims and enrollment base data for GAHCP members with behavioral health certifications is excluded from rate development due to underreported CMHC expenditures. Therefore, the base experience data for the behavioral rate cells is unchanged.

We did not identify any material concerns with the quality or availability of the data with respect to total claims in aggregate or our ability to allocate encounter data to major service categories. Our data reconciliation efforts are consistent with Actuarial Standard of Practice #23 on data quality.

The base experience data used in the development of the capitation rates does not include services invalidated by courts of law, or by changes in federal statutes, regulations, or approvals.

METHODOLOGY OVERVIEW

We used the following methodology to develop the New Hampshire MCM program capitation rates:

1. Summarize CY 2018 and CY 2019 MCO encounter experience data for the Standard Medicaid and GAHCP Medically Frail eligible population and the March 2019 to December 2019 MCO encounter data for the GAHCP Non-Medically Frail population.
2. Project estimated statewide SFY 2023 MCM program medical costs for all covered services by rate cell.
3. Blend the projected SFY 2023 costs based on CY 2018 and CY 2019 encounter data.
4. Adjust SFY 2023 projected medical costs for all rate cells for benefits not included in the base experience data, expected administrative expenses, margin, and premium tax.

Sections III and IV of this report document the rate setting methodology in detail.

COMMUNITY MENTAL HEALTH CENTER COST COMPONENT SUMMARY

Exhibit E provides DHHS and the MCOs with a summary of the CMHC cost component included in the SFY 2023 MCM capitation rates. This information can be used by MCOs and CMHCs to set a baseline for contract negotiations.

RETROACTIVE ACUITY ADJUSTMENT

Due to the uncertainty surrounding the unwind process following the end of the PHE, DHHS will implement a non-budget neutral retrospective acuity adjustment. During its call with the National Association of Medicaid Directors on April 8, 2022, CMS indicated states should work to appropriately capture population acuity before, during, and after redetermination, and that a retroactive acuity adjustment would be an appropriate way to handle the unknown acuity related to the PHE unwind. As such, we include a preliminary acuity assumption that will be updated following the contract year to reflect the actual population enrolled throughout SFY 2023.

We specifically intend to assign each enrolled individual a risk score to capture how the average risk of the departed population (those who disenroll following redetermination) compares to the continuing population (those who meet eligibility requirements during redetermination). Since all continuing members will meet largely the same eligibility requirements that existed in the CY 2018 and CY 2019 base period, it is appropriate to use this base period as a starting point to estimate the SFY 2023 costs of the continuing population. The retroactive acuity adjustment factor will then adjust the rates to account for the average SFY 2023 acuity by capturing the number of member months associated with departed members and their relative acuity compared to continuing members at the rate cell level.

In the initial rate development, we use DHHS' membership projections that include the PHE unwind, and we assume Standard Medicaid departed members will have a relative acuity of 0.750, while GAHCP departed members will have a relative acuity of 0.900. We selected these relativities, which are intended to be preliminary placeholders, because they produce an aggregate acuity adjustment impact on the rates that is generally consistent with the enrollment-based adjustment included in the SFY 2022 rates.

The inclusion of a retrospective acuity adjustment helps to mitigate the risk surrounding the end of the PHE by calculating final rates based on the actual enrolled population. This approach allows the MCOs to be at-risk for the actual members they cover.

The current enrollment projections provided by DHHS assume a return to pre-COVID-19 enrollment and acuity levels by March 1, 2023. In the event HHS continues to extend the PHE continues or a majority of redeterminations are not complete in time to accurately capture the relative acuity of the departed and continuing cohorts, we will consider re-evaluating the methodology to retroactively capture the acuity of the enrolled members in SFY 2023.

RISK ADJUSTMENT

The SFY 2023 capitation rates will use an actuarially sound prospective risk adjustment model to adjust the rates for each participating MCO in a manner that is budget-neutral to the state. A brief description of the methodology is provided below. The SFY 2023 risk adjustment process will be consistent with the current methodology in use for SFY

2022. We do not anticipate any modifications will be made for SFY 2023 other than updating to version 6.5 of the CDPS+Rx risk weights.

The risk adjustment process will use the CDPS+Rx model to assign scored individuals to a demographic category and disease categories based on their medical claims and drug utilization during the study period. Only a single incidence of an International Classification of Disease Code (ICD) or drug is necessary to establish a CDPS+Rx disease category. We will exclude diagnosis codes related to radiology and laboratory services to avoid including false positive diagnostic indicators for tests run on an individual.

CDPS uses ICD-10 diagnosis codes to assess risk and assigns each member to one or more of 58 possible medical condition categories from 19 major diagnostic categories. Each member is also assigned to one of 11 age / gender categories. All of the 19 major diagnostic categories are "hierarchical" categories in that only the single most severe diagnosis within the major category is counted. This counting rule simplifies the model and strengthens its resistance to additional coding. Single counting within major categories is intended to avoid encouraging a proliferation of different diagnoses reported for a single disease process just to increase payment. However, as with most models, CDPS considers not only a person's single most serious diagnosis, but also diagnoses from other major categories.

The CDPS+Rx model includes the full set of diagnosis categories from the CDPS model, as well as 15 MRX categories from the Medicaid Rx model that are embedded within the CDPS hierarchy. The researchers at UCSD who developed the CDPS+Rx model decided to limit the MRX categories to the 15 that added predictive power to the diagnostic model (i.e., both relatively common and significant predictors of cost) and that were relatively less susceptible to variations in practice patterns.

We will use version 6.5 of the risk weights to score individuals with at least six months of eligibility and claims experience in the base data. Each scored individual receives a demographic relative cost weight and can have multiple disease categories assigned depending on that individual's health status. For each scored member, the weights for all of the disease categories assigned are combined with their demographic information to calculate a total individual risk score. We will continue to calculate customized risk adjustment weights to reflect the emerging cost to the treat the opioid addiction population.

Additionally, each scored member with less than 12 months of experience in the base data period will also be assigned a durational adjustment to compensate for missing diagnoses due to shorter enrollment durations, similar to a missing data adjustment. This additional adjustment will contribute to a more equitable allocation of resources as ACNH's members build up Medicaid experience to be used in the base experience data period for risk adjustment.

Finally, each unscored member will be assigned a demographic-only risk weight that considers the historical costs of unscored members. This provision of the risk adjustment methodology reflects the relative risk of unscored populations compared to scored populations within a rate cell. We are currently evaluating a separate adjustment for members that are auto-assigned to an MCO vs. members who choose an MCO.

For the SFY 2023 contract period, we will continue using the actual enrollment by MCO in each quarter to calculate risk scores in order to capture actual membership changes for each MCO.

For each MCO, the unadjusted plan factors for scored members are derived by performing a weighted average of the cost weights using the count of scored adults and children associated with each CDPS+Rx category. The budget neutral plan factor for scored members is calculated by dividing each individual MCO's unadjusted plan factor by the total population's unadjusted plan factor.

Similarly, the demographic only risk scores for the unscored population is normalized, by rate cell, across MCOs. We will analyze historical cost differences between scored and unscored members and introduce an adjustment to reflect any observed differences (i.e., if unscored members are shown to be less expensive than scored members, we will adjust risk scores accordingly).

The final risk score for each MCO and rate cell will be the weighted average risk scores between the scored and unscored population. These final risk scores will be used to adjust payments made to MCOs.

RISK PROTECTION STRUCTURE

The risk mitigation structure described below is consistent with the structure included in the SFY 2022 capitation rates.

Boston Children's Hospital Risk Pool

Historical spend at Boston Children's Hospital (BCH) has varied significantly between the two MCOs in CY 2018 and CY 2019. With the recent addition of a third MCO, there is additional uncertainty related to the distribution of BCH services among the MCOs.

In order to better allocate funds across MCOs for children's specialty services provided at BCH, DHHS created a budget-neutral risk pool to redistribute funds at the end of each contract period based on actual expenditure levels. Inpatient and outpatient facility services provided at BCH will qualify for the risk pool calculation. Below we outline the approach for developing and administering this risk pool:

- At the beginning of each contract period, Milliman and DHHS will calculate the BCH funding level as a PMPM amount by rate cell and estimate the total risk pool amount based on projected enrollment. This amount will be true-up at the end of the contract period based on actual enrollment by rate cell and risk adjustment results.
- At the end of the contract period, Milliman and DHHS will collect detailed BCH encounter claims data. Milliman and DHHS will calculate final BCH paid claim amounts by MCO.
- The final risk pool amount will then be reallocated based on a distribution of paid claims at BCH across MCOs.
- All funds will be allocated. In the case of a surplus, an MCO may receive funds in excess of their actual expenditures. In the case of a deficit, a MCO may receive less funds than their actual expenditures.
- Since the capitation rates fund these services using actual historical paid claims rather than relative to the Medicaid fee schedule, the settlement of the risk pool will also use actual paid claims rather than re-priced claims.

In order to avoid unintended interactions between the risk pool funding reallocation process and the stop-loss provision of the MCO contract, the high-cost patient stop-loss calculation will exclude BCH claims.

High-Cost Patient Stop-Loss

Effective September 1, 2015, DHHS implemented a stop-loss arrangement for high-cost patients where DHHS will share 50% of the cost above \$500,000 for members that have total expenses valued at Medicaid fee levels above that threshold. In order to avoid unintended interactions between the BCH risk pool funding reallocation process and the stop-loss provision of the MCO contract, the high-cost patient stop-loss excludes BCH claims.

The stop-loss attachment point of \$500,000 is indexed annually at a rate of 3.0% from its inception in SFY 2016 and rounded to the nearest \$1,000. The SFY 2023 attachment point will be \$615,000. The indexing of the attachment point addresses historical inflation and recent provider reimbursement increases and maintains a level of MCO risk consistent with program goals.

Minimum and Maximum MLR Provision

On page 9 of the *2022-2023 Medicaid Managed Care Rate Development Guide*, "CMS recommends all states implement a 2-sided risk mitigation strategy for rating periods impacted by the public health emergency." Due to population and cost uncertainty related to the ongoing PHE and the anticipated enrollment redetermination process, we understand DHHS intends to maintain the minimum and maximum medical loss ratio (MLR) provision for SFY 2023. The minimum and maximum MLR provision will continue to use the "regular" MLR definition (not the federal MLR definition) consistent with the rate setting process.

The MCM capitation rates reflect a target MLR, which measures the projected medical service costs as a percentage of the total at-risk MCO capitation rates. The minimum MLR will limit MCO gains if the actual MLR is lower than the minimum MLR. The maximum MLR will limit MCO losses if the actual MLR is higher than the maximum MLR. The

target MLR for at-risk services is 90.8% for Standard Medicaid and 90.1% for GAHCP based on the SFY 2023 projected enrollment distribution. Please note, each program's target MLR may change in future rate amendments as a result of changes to underlying assumptions, such as enrollment projections, emerging utilization experience, and the retroactive acuity adjustment.

The minimum MLR is set on a program-wide basis for each major population, such that maximum profit achievable is 4%, which is equal to the 1.5% target margin plus the amount between the target MLR and the minimum MLR (2.5%). Based on the target MLRs in this report, the minimum MLR will be 88.3% for the Standard Medicaid population and 87.6% for the GAHCP population. The maximum MLR is also set on a program-wide basis for each major population 3.5% above the target MLR, such that MCOs will have a maximum loss of 2.0%. Based on the target MLRs in this report, the maximum MLR will be 94.3% for the Standard Medicaid population and 93.6% for the GAHCP population. The final minimum and maximum MLRs for Standard Medicaid and GAHCP will be updated for the final retroactive acuity factor and any other changes implemented in the expected January 1, 2023 contract amendment.

There are several operational requirements related to administering the minimum and maximum MLR settlement:

- The settlement will be done separately for the Standard Medicaid and GAHCP populations.
- The retroactive acuity adjustment will apply to the rates prior to the MLR settlement and prior to other risk mitigation provisions.
- Other MCM program risk mitigation provisions will apply prior to the minimum and maximum MLR settlement (i.e., Boston Children's Hospital risk pool, high-cost patient stop-loss arrangement, and prospective risk adjustment).
- The numerator of each MCO's actual MLR will include all payments made to providers, such as fee-for-service payments, sub-capitation payments, incentive payments, and settlement payments. The numerator of each MCO's actual MLR will not include costs related to quality improvement activities or fraud, waste, and abuse prevention.
- Payments and revenue related to directed payments and premium taxes will be excluded from the numerator and denominator of each MCO's actual MLR.
- Payments related to the withhold and incentive program will be excluded from the minimum and maximum MLR settlement.
- The minimum and maximum MLR settlement will occur after the contract year is closed and sufficient paid claims runout is available.

III. MEDICAL COST PROJECTIONS

This section of the report describes the projection of the MCO encounter data for all rate cells.

We used the following methodology to project the encounter data used in the calculation of the medical component of the capitation rates:

1. Summarize base period MCO encounter experience data for the population eligible for and the services covered by the MCM program.
2. Apply adjustments to the base data to project SFY 2023 medical costs.
3. Blend the projected base period experience data.

Each of the above steps is described in detail below.

STEP 1: SUMMARIZE BASE EXPERIENCE DATA

In this step, we summarize the encounter base experience by rate cell and service category for the populations eligible to enroll in the MCM program.

Base Data

We summarized detailed CY 2018 and CY 2019 MCO encounter claims data for the Standard Medicaid and GAHCP Medically Frail eligible population and the March 2019 to December 2019 MCO encounter data for the GAHCP Non-Medically Frail population with the following specifications:

- The cost and utilization data reflect the claim header information for claims paid at the header level and line item detail for claims paid at the detail level
- Claims for FQHC and RHC providers reflect their normal prospective per encounter rates
- Prescription drug claims reflect gross ingredient cost and dispensing fees prior to any pharmacy rebates
- We excluded all Part D covered drugs for dual eligibles
- We no longer exclude claims and eligibility data for the portion of any month when an individual had a stay longer than 15 days in an institution for mental disease (IMD). However, we continue to exclude stays over 60 days.
- We excluded hemophilia and certain other high-cost drugs (i.e., Carbaglu, Ravicti, and Zolgensma), as they are carved out of the MCM program
- We excluded encounter data for the GAHCP behavioral health population due to completion concerns and discrepancies with the current benefit package

Non-Covered Services Adjustment

MCOs are allowed to provide services not explicitly covered under the MCM program to beneficiaries' in-lieu of a covered service. As part of the capitation rate development process, the encounter data must be adjusted to remove any portion of the cost of in-lieu of services that exceeds the cost of the corresponding covered service.

MCOs currently provide Medical Nutrition and Diabetes Self-Management services defined by Procedure Codes 97802, 97803, and G0108 with an average unit cost of \$19.88 per unit using staff nutritionists for the Standard Medicaid population. For the GAHCP population, the average unit cost is \$18.99 per unit using staff nutritionists. Alternatively, these services would be provided as a covered service by a physician in an office setting at the cost of \$35.71 per unit (based on the Medicaid fee for 99202-office visit). This comparison shows that Medical Nutrition and Diabetes Self-Management services are cost effective. Therefore, we did not make any adjustment to the base period data for non-covered services.

Retroactive Eligibility and Enrollment Lag

Recipient enrollment in the FFS program can and does occur retroactively. When an individual applies and qualifies for Medicaid coverage, DHHS reimburses claims that occurred during the retroactive qualification period prior to their application. DHHS backdates the eligibility of the individual to accommodate the retroactive coverage.

The MCOs do not cover these retroactive enrollment periods. Retroactive claims were included in the FFS data provided by DHHS. The enrollment data provided by DHHS excluded retroactive enrollment periods; therefore, a special adjustment was not necessary because we only summarized claims for individuals with non-retroactive enrollment records. As a result, the FFS claims included in this analysis are reflective of the claims and time period that MCOs will cover. Additionally, the encounter data already excludes the retroactive eligibility period and enrollment lag so no adjustments were needed.

Eligibility Category Assignment

We grouped Medicaid enrollees into the SFY 2023 rate cell structure using the following hierarchy based on their eligibility status on the first day of each eligibility span:

- Behavioral health rate cells
- GAHCP rate cells
- Standard Medicaid rate cells

The behavioral health rate cells are structured around the target populations eligible for enhanced behavioral health services at the CMHCs. These individuals were historically identified through the following modifier codes found on CMHC FFS claims:

- Modifier 1 is HW for all BBH eligible patients
- Modifier 2 is U1 for Severe / Persistent Mental Illness (SPMI)
- Modifier 2 is U2 for Severe Mental Illness (SMI)
- Modifier 2 is U5 for Low Utilizer
- Modifier 2 is U6 for Serious Emotionally Disturbed Child (SED)
- Modifier 2 is U7 for Serious Emotionally Disturbed Child, Interagency Involvement (SED-I)

To identify the behavioral health population enrolled in an MCO, we used a separate data file provided by DHHS that includes behavioral health certification information for each individual. We separated each group into rate cells based on Medicare eligibility as follows:

- Severe / Persistent Mental Illness (SPMI) – Medicaid Only
- Severe / Persistent Mental Illness (SPMI) – Dual Eligibles
- Severe Mental Illness (SMI) – Medicaid Only
- Severe Mental Illness (SMI) – Dual Eligibles
- Low Utilizers – Medicaid Only
- Low Utilizers – Dual Eligibles
- Serious Emotionally Disturbed Child (SED) – Medicaid Only and Dual Eligibles

The GAHCP population rates cells are defined using the MGIM and MGIA eligibility categories for the Medically Frail and Non-Medically Frail populations, respectively.

We identified and classified all other Standard Medicaid population using the eligibility codes found in the enrollment file. Please refer to our rate cell logic letter dated January 16, 2020 for more details.

The various eligibility groups have been further segmented into rate cells based on analysis of the per capita costs of various population sub-groups. These sub-groups were defined by age within the covered eligibility categories and grouped into rate cells based on similarities in average costs. There are three additional kick payments made for maternity costs and newborn costs.

The population identification is done on a first of eligibility span basis, consistent with capitation rate payment from MMIS under the next day enrollment process.

We also proactively assigned “Pending Duals” to their respective dual rate cell. Based on DHHS’ review of several cases, DHHS ultimately retroactively assigns a dual eligible status to these individuals in more than 90% of cases.

The eligibility category assignment process is consistent with the guidance provided in the Actuarial Standards of Practice #12 for risk classification.

Maternity Kick Payment Definition

The maternity kick payment includes all facility and professional claims associated with deliveries. Maternity kick payment cases are counted as women who have either a maternity delivery DRG or a physician maternity delivery claim (or both). The maternity kick payment only includes women already enrolled in Medicaid at time of delivery.

The maternity kick payment cases are distributed in the following manner:

- Both a maternity delivery DRG and a physician claim = 87%
- A maternity delivery physician claim only = 12%
- A maternity delivery DRG only = 1%

We used the following criteria to identify claims information to calculate the maternity kick payment.

- Hospital inpatient services with DRG codes of:
 - Prior to DRG version 37: 765 – 768, 774 – 775
 - DRG version 37: 783 – 788, 796 – 798, 805 – 807
- Hospital outpatient and professional services with a primary diagnosis code of:
 - ICD10: O60 – O82, and Z37

This would include delivery related anesthesia services (CPT-4 codes 00850, 00857, 00946, 00955, 01960, 01961, 01967, 01968), as long as a relevant primary diagnosis code is present.

- Delivery and post-partum care services (CPT-4 codes 59400, 59409, 59410, 59430, 59510, 59514, 59515, 59610, 59612, 59614, 59618, 59620, 59622)

Prenatal and postpartum services are not included in the maternity kick payment. These services are included in the rate cell corresponding to the person receiving the services. For global reimbursement CPT-4 codes, such as 59400, 59510, 59610, and 59618, we allocated the total allowed and paid amounts to prenatal and delivery services using RBRVS ratios corresponding to the codes without prenatal care: 59410, 59515, 59614, and 59622, respectively. The prenatal care allocation is then assigned to the corresponding monthly rate cell.

Neonatal Abstinence Syndrome Kick Payment Definition

The neonatal abstinence syndrome (NAS) kick payment is provided for babies who have a diagnosis code of P96.1 (ICD10) in their birth month on an inpatient claim. The regular newborn kick payment is provided for all other babies.

Hospital Inpatient Psychiatric Admission Kick Payment Definition

Effective July 1, 2021, DHHS transferred the funding for hospital inpatient psychiatric admissions to a kick payment structure designed to promote the expansion of Designated Receiving Facility (DRF) bed capacity to eliminate emergency department psychiatric boarding. MCOs receive a per admission kick payment from DHHS for every applicable hospital inpatient psychiatric admission.

The hospital inpatient psychiatric admission kick payment structure includes four different kick payments corresponding to the hospital peer group assigned to the admission in New Hampshire's FFS payment structure:

- Peer Group 01 and 07
- Peer Group 02
- Peer Group 06
- Peer Group 09

The hospital inpatient psychiatric admission kick payment amounts are developed from CY 2018 and CY 2019 DRG distributions for DRGs 880 to 887 in conjunction with the most recent DRG table. Within each peer group, we calculated a composite base DRG price using this distribution and per admit price. The hospital inpatient psychiatric admission kick payment amounts include a 1.5% allowance for risk margin and a 2.0% allowance for premium tax. Related administrative costs are funded through the administrative allowance included in the monthly rate cell capitation payments.

The hospital inpatient psychiatric admission kick payments do not apply to dually eligible members or any admissions at New Hampshire Hospital or Hampstead Hospital. These admissions are funded through the regular monthly capitation rates.

[Clarification Regarding Application of DRF Minimum Fee Schedule Arrangement](#)

Effective July 1, 2021, DHHS implemented a minimum fee schedule arrangement that mandates MCOs pay all DRF admissions at a rate no less than the applicable New Hampshire Medicaid fee-for-service DRG fee schedule. All DRF admissions are categorized under Peer Group 06.

STEP 2: APPLY ADJUSTMENTS TO THE BASE EXPERIENCE DATA TO PROJECT SFY 2023 MEDICAL COSTS

In this step, we apply adjustment factors to reflect differences between the base period data and the projected SFY 2023 MCM program medical costs. We explain each adjustment factor in detail below.

Appendices B1 through B2 show adjusted and trended values for each rate cell along with the detailed adjustment factors by service category.

IBNR Adjustment

We set completion factors (CFs) by eligibility category and major service category for claims incurred in the base experience period to 1.000, since the majority of services have a significant amount of run-out for both CY 2018 and CY 2019 claims experience.

We applied a 1.05 underreporting adjustment to the encounter base experience data for CMHC services only. We developed the underreporting adjustment in order to correct for data reporting issues between the CMHCs and MCOs as we understand there is not an actual reduction in services provided by the CMHCs.

Reimbursement Adjustment

We reviewed the MCO provider reimbursement levels in the base experience period as a percentage of Medicaid fees to better understand MCO provider contracts and payment levels. We determined that payment levels in the base experience period were relatively consistent with previous assumptions. We maintained historical reimbursement levels compared to Medicaid fees for all services.

[Hospital Inpatient Services](#)

We used the DRG rate table effective October 2021 in conjunction with admit distributions by rate cell to develop reimbursement adjustment factors. We also made a trend adjustment to account for known changes in reimbursement levels in SFY 2023. For hospital inpatient services, we estimated an October 2022 DRG weight update of 0.45%, which we intend to update in the January amendment to capture the actual October 2022 information. We applied the 0.45% DRG weight increase as a 0.34% adjustment to trend, since it impacts only the last nine months of SFY 2023. Table 8 shows a summary of the impact of the hospital inpatient pricing adjustment for each of the base data periods:

Table 8
New Hampshire Department of Health and Human Services
Medicaid Care Management Program
Impact of Repricing for Hospital Inpatient Services
Average Impact for All Rate Cells Combined

Base Period Data	Total Impact
Standard Medicaid Encounter Year 1	1.0882
Standard Medicaid Encounter Year 2	1.0643
Medically Frail Encounter Year 1	1.0926
Medically Frail Encounter Year 2	1.0659
Non-Medically Frail Encounter Year 2	1.0670

We set the funding level for BCH hospital inpatient services consistent with the CY 2019 experience of \$10.8 million annually, then adjusted for incurred but not reported claims liability using BCH inpatient services specific completion patterns and trended to SFY 2023 for hospital operating cost increases. We adjusted the base data to include a number of recent retrospective MCO claims payments to BCH, as well as more recent BCH experience from the latest encounter data information through October 2021. We also made a 2.1% adjustment to reflect enrollment growth in the updated enrollment projections for SFY 2023 compared to the base period data.

Please refer to Exhibit C for more details.

Table 9 below shows a summary of unadjusted hospital inpatient paid claims experience at BCH from CY 2018 to CY 2020:

Table 9	
New Hampshire Department of Health and Human Services	
Medicaid Care Management Program	
Hospital Inpatient Service Paid Claims at Boston Children's Hospital	
FFS and MCO Encounter Data	
Base Period Data	Total Paid
CY 2018	\$8,383,807
CY 2019	10,829,050
CY 2020	13,417,174

The hospital inpatient reimbursement factors are adjusted to reflect erroneous payments made during the base period by one of the MCOs to St. Joseph of Nashua Hospital and Mass General Hospital for facility services.

Hospital Outpatient Services

We applied a 1.063 reimbursement adjustment for hospital outpatient services for all populations to account for the 3.1% Medicaid provider rate increase effective January 1, 2020 and January 1, 2021, as mandated by House Bill 4, Section 348. We address increases to cost-based reimbursement in the trend development section of this report. We also address cost-based settlements, including enhanced payments to Boston Children's Hospital, in the hospital outpatient cost settlement adjustment section of this report.

For BCH outpatient services we also set the funding at level consistent with the CY 2019 experience of \$4.2 million annually, then adjusted for incurred but not reported claims liability using BCH inpatient services specific completion patterns and trended to SFY 2023 for hospital operating cost increases. Please refer to Exhibit C for more details. We adjusted the base data to include a number of recent retrospective MCO claims payments to BCH, as well as more recent BCH experience from the latest encounter data information through October 2021. We also made a 2.1% adjustment to reflect enrollment growth in the updated enrollment projections for SFY 2023 compared to the base period data.

Table 10 below shows a summary of unadjusted hospital outpatient paid claims experience at BCH from CY 2018 to CY 2020:

Table 10
New Hampshire Department of Health and Human Services
Medicaid Care Management Program
Hospital Outpatient Service Paid Claims at Boston Children’s Hospital
FFS and MCO Encounter Data

Base Period Data	Total Paid
CY 2018	\$2,668,550
CY 2019	4,204,125
CY 2020	3,540,528

The hospital outpatient reimbursement factors are adjusted to reflect erroneous payments made during the base period by one of the MCOs to St. Joseph of Nashua Hospital and Mass General Hospital for facility services.

[Professional and Other Services](#)

The reimbursement adjustment factors for professional and other services are based on a comparison of the Medicaid fees effective during the base period to the most recent fee schedules as of January 1, 2022. We also incorporated known fee changes not included in the current fee schedules. For each CPT and HCPCS code, we compared the current FFS amount to the corresponding amount in the fee schedules effective on the date of service. We then summarized the data by rate cell and service category to obtain the adjustment factors. The most significant changes are related to the 3.1% Medicaid provider rate increase effective January 1, 2020 and January 1, 2021, and the DME minimum fee schedule (described in a separate section below).

Table 11 shows a summary of the impact of the reimbursement change for professional and other services. There is additional variation by rate cell based on the services used by the population in each rate cell.

Table 11
New Hampshire Department of Health and Human Services
Medicaid Care Management Program
Impact of Repricing for Professional and Other Services
Average Impact for All Rate Cells Combined

Base Period Data	Total Impact
Standard Medicaid Encounter Year 1	1.0952
Standard Medicaid Encounter Year 2	1.0843
Medically Frail Encounter Year 1	1.0992
Medically Frail Encounter Year 2	1.0790
Non-Medically Frail Encounter Year 2	1.0732

Please refer to Section IV of this report for details on other fee schedule changes not included in the reimbursement adjustment.

[Minimum DME Fee Schedule](#)

Effective January 1, 2020, DHHS implemented a minimum DME fee schedule to help create a sustainable environment for the local DME providers. The minimum fee schedule was set at 80% of the current Medicaid DME fee schedule. We used average unit cost from the CY 2020 encounter data to reprice the CY 2018 and CY 2019 base experience data at the HCPCS code level. The CY 2020 data reflects all recent changes to the DME fee schedule and is a reliable source to use to estimate the impact of the minimum fee schedule.

The DME minimum fee schedule also includes a number of codes previously priced manually as part of a DHHS effort to reduce the number of manually priced codes.

DHHS completed and submitted a pre-print as required by 438.6(c), which is pending approval from CMS.

Federally Qualified Health Center Services

We adjusted claims for Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) to reflect the most recent per encounter rate at each facility as of July 1, 2022. The actual rate increase is 2.1% from the July 1, 2021 encounter rates to the SFY 2023 encounter rates for most FQHCs and RHCs.

Medical Trend from Base Period to SFY 2023

Since the start of the COVID-19 pandemic and PHE, service utilization levels in the New Hampshire Medicaid program have lagged behind CY 2019 utilization by rate cell and on an aggregate basis. The SFY 2023 capitation rates assume SFY 2023 utilization levels will be consistent with CY 2019. As such, we did not apply utilization trend from CY 2019 to SFY 2023 with the exception of ABA services. This utilization projection is supported by our review of historical quarterly PMPM amounts that indicate emerging costs through June 2021 were below CY 2019 even with the known provider rate increases and acuity differences. We also reviewed DHHS summaries of emerging encounter data through January 2022 that show similar cost reductions compared to CY 2019. We will continue to monitor emerging experience and revisit this assumption for the planned January 2023 rate amendment.

Table 12 below summarizes the annual medical trend rate assumptions by major service category:

Table 12 New Hampshire Department of Health and Human Services Medicaid Care Management Program Annual Trends from Base Period to SFY 2023		
Service Category	Utilization Trend CY 2018 to CY 2019 Only	Unit Cost Trend
Hospital Inpatient	0.00%	0.34% ¹
Hospital Outpatient	2.00%	3.10%
Professional	1.00%	0.00%
Community Mental Health Center	1.00%	0.00%
Other Services	1.00%	0.00%

¹ Unit cost trend for hospital inpatient services is applied as a one-time allowance for the expected 0.45% increase in DRG reimbursement on October 1, 2022 (not as an annual trend rate).

Although hospital inpatient, professional, and other services are repriced using the October 1, 2021 DRG rate table and the CY 2022 fee schedule, we also made a trend adjustment to account for expected changes in reimbursement levels in SFY 2023. For hospital inpatient services, we estimated the expected October 2022 DRG weight update to increase 0.45% based on our review of historical DRG weights. We applied the 0.45% DRG weight increase as a 0.34% adjustment since it impacts only the last nine months of SFY 2023. For professional and other services, we assumed no fee schedule changes would be implemented through June 2023 other than those discussed in this report.

Hospital outpatient reimbursement changes are tied to changes in each hospital's operating cost. We developed the 3.1% annual trend for hospital outpatient services by reviewing the average annual change in the Bureau of Labor Statistics (BLS) Producer Price Index (PPI) for hospital services from CY 2018 to October 2021 (Series ID PCU622---622---). The Hospital PPI is a measure of hospital revenue changes that can also be used as a proxy for operating cost changes because the national average operating margins for hospitals are relatively stable from year to year.

Note, the utilization and unit cost trends in Table 12 exclude trends related to the opioid addiction treatment population, which are shown as a separate adjustment and are described later in this report.

For Applied Behavioral Analysis (ABA) services, we reviewed historical data through June 2021 to develop separate utilization and unit cost trends. With MCOs expanding their ABA networks in recent years, we looked at changes in utilization and cost for members with autism receiving ABA services over time. We selected an overall utilization trend of 17.4% (varies by rate cell) and a 4.4% trend for unit cost. We then trended Q2 2021 experience data at these annual rates to develop our projected SFY 2023 costs PMPM. The resulting annual PMPM trend rate from CY 2019 to SFY 2023 is 21.7%.

Table 13 below shows the rate cell specific ABA trends used.

Table 13 New Hampshire Department of Health and Human Services Medicaid Care Management Program ABA Annual Trends from Base Period to SFY 2023		
Service Category	Utilization Trend	Unit Cost Trend
Low Income Children	17.6%	3.7%
CHIP	18.7%	4.6%
Foster Care / Adoption	18.0%	5.0%
Severely Disabled Children	17.9%	6.9%
Elderly and Disabled Adults	-4.4%	-0.7%
Duals	-7.4%	-0.5%
SED Children	25.9%	4.4%

Prescription Drug Trend from Base Period to SFY 2023

Pharmacy trend assumptions are based on a combination of historical New Hampshire Medicaid data analysis, Milliman research on utilization and cost trends, and publicly available trend reports and forecasts.

Our prescription drug trend model uses January 2018 to October 2021 experience (March 2019 to October 2021 for GAHCP Non-Medically Frail) as the base period for our projections. Given the constantly changing prescription drug market, it is critical to project trends using the most current available data.

The final trends are calculated as the ratio of the average drug costs in the projection period compared to the average drug costs in the rate setting base period. Trends were calculated for brand, generic, and specialty drugs, separately for utilization and unit cost. Projected values are estimated using the prescription drug base period data as a starting point and applying anticipated shifts and trends. Each component of pharmacy trend is documented below.

Since hemophilia and other high-cost drugs (i.e., Carbaglu, Ravicti, and Zolgensma) are carved out of the MCM program for SFY 2023, we excluded these drugs from our prescription drug trend development. Exhibit H contains a list of NDCs for the excluded drugs.

Tables 14A and 14B show a summary of annual PMPM prescription drug trends by eligibility grouping.

Table 14A New Hampshire Department of Health and Human Services Medicaid Care Management Program Annual PMPM Prescription Drug Trends CY 2018 to CY 2019					
Eligibility Grouping	Generic	Brand	Specialty	Hepatitis C	Total
Low Income Children	-3.4%	-7.2%	39.3%	-82.2%	12.3%
Low Income Adults	14.5%	-6.7%	23.9%	-47.5%	-2.6%
Foster Care / Adoption	-11.5%	4.4%	15.5%	0.0%	1.0%
Severely Disabled Children	0.0%	29.5%	45.1%	0.0%	31.6%
Elderly and Disabled Adults	10.9%	1.0%	2.7%	-12.7%	2.5%
Behavioral Health Adult	-4.6%	-12.2%	0.8%	-54.3%	-12.8%
SED Children	-6.8%	-6.2%	-4.0%	0.0%	-5.9%
Duals	0.2%	12.8%	0.0%	0.0%	4.0%
Medically Frail	29.6%	6.8%	44.2%	-18.8%	13.7%
Non-Medically Frail	N/A	N/A	N/A	N/A	N/A

Table 14B
New Hampshire Department of Health and Human Services
Medicaid Care Management Program
Annual PMPM Prescription Drug Trends
CY 2019 to SFY 2023

Eligibility Grouping	Generic	Brand	Specialty	Hepatitis C	Total
Low Income Children	1.2%	1.4%	15.8%	63.8%	9.1%
Low Income Adults	3.9%	-1.4%	12.0%	-9.9%	3.2%
Foster Care / Adoption	-3.2%	5.0%	16.6%	0.0%	6.5%
Severely Disabled Children	13.9%	9.8%	4.7%	0.0%	7.9%
Elderly and Disabled Adults	1.0%	3.2%	9.3%	-18.6%	4.4%
Behavioral Health Adult	-1.8%	4.0%	9.9%	-17.9%	3.8%
SED Children	-6.5%	-0.1%	22.0%	0.0%	4.6%
Duals	-0.3%	1.4%	0.0%	0.0%	13.0%
Medically Frail	4.3%	0.0%	11.9%	-25.1%	2.3%
Non-Medically Frail	5.4%	4.4%	9.8%	-9.9%	5.3%

Working with CY 2020 and CY 2021 data presented a number of challenges that required several data and process adjustments. We observed suppressed prescription drug utilization during CY 2020 and CY 2021 for many rate cells due to the pandemic, but we do not expect these reductions to continue when the PHE ends and enrollment returns to pre-PHE levels. We also observed a shift in prescribing patterns that increased the number of 90-day supply prescriptions, making the differentiation between utilization and unit cost trends less clear. As such, we developed PMPM trends for prescription drugs and then applied a 0% utilization trend accompanied by a unit cost trend equal to the PMPM trend. This anticipates that utilization in SFY 2023 will not materially vary from the base period (beyond what is captured separately in the acuity adjustment) and recognizes the pandemic may have had an effect on prescription drug utilization counts. Table 15 shows the resulting actual and projected PMPM by eligibility grouping and calendar year.

Table 15
New Hampshire Department of Health and Human Services
Medicaid Care Management Program
Annual Calendar Year Prescription Drug PMPM Actual Amounts and Projections

Eligibility Grouping	2018	2019	2020	2021	2022 (proj)	2023 (proj)
Low Income Children	\$31.81	\$35.69	\$38.82	\$39.27	\$46.65	\$49.92
Low Income Adults	\$95.66	\$100.91	\$96.92	\$100.91	\$113.15	\$120.08
Foster Care / Adoption	\$78.11	\$78.86	\$71.94	\$79.83	\$96.01	\$100.83
Severely Disabled Children	\$257.17	\$338.50	\$361.62	\$388.81	\$425.84	\$455.42
Elderly and Disabled Adults	\$393.91	\$406.20	\$439.80	\$442.71	\$468.95	\$496.85
Behavioral Health Adults	\$381.73	\$355.30	\$365.70	\$401.91	\$412.56	\$430.57
SED Children	\$96.10	\$90.45	\$99.45	\$95.54	\$102.95	\$108.25
Duals	\$1.11	\$1.16	\$1.45	\$1.41	\$1.74	\$1.84
Medically Frail	\$209.85	\$254.56	\$282.04	\$268.46	\$294.96	\$314.66
Non-Medically Frail	\$0.00	\$91.92	\$101.66	\$106.38	\$110.97	\$117.86

Managed Care Savings Adjustment

Due to the change in the care management requirements in the MCO contract effective January 1, 2021, we used the same managed care savings adjustment factors as in the SFY 2022 capitation rates. These savings assumptions are based on information the MCOs presented in their responses to the 2018 MCM program request for proposal (RFP).

The RFP responses included projected savings for utilization management, care coordination and care management, and behavioral health related managed care activities. Effective January 1, 2021, the contract changed from requiring 15% of the MCM population to enroll in a care management program to only requiring 3% to enroll. As such, we only considered 20% of total savings projected by the MCOs for the care coordination and care management component of

their RFP responses. This results in total estimated SFY 2023 savings of approximately \$3.00 PMPM, relative to the historical MCM encounter data.

Preferred Drug List Adjustment

Effective September 1, 2019, management of the PDL moved from MCO control to DHHS control. The State PDL includes a listing for approximately 84 therapeutic classes defined by DHHS. Approximately 78% of the total drug spend is in therapeutic classes managed in the PDL. We summarized the MCO encounter data across 495 therapeutic classes covering approximately 5,913 different medications. For each medication within a particular therapeutic class, we calculated the average cost per script, as well as its market share within that therapeutic class. We implemented shifting adjustments for off-formulary, non-preferred, and preferred drug modeling categories based on how we expect the state to manage the PDL in the future. Each adjustment applies to the market share within each therapeutic class, or cost per script, in projecting total gross drug spend.

As a result of the change in PDL control, the gross drug cost decreases compared to the previous MCO-controlled PDLs. State controlled PDLs in other states typically include brand name drugs almost exclusively, which results in a higher gross prescription drug cost than under a MCO controlled PDL. However, DHHS' PDL includes several generic options in drug classes with high expenditures because state law requires generics to be offered.

The PDL adjustment includes the impact of utilization shifts from the brand drug to new generic alternatives resulting from patent loses when the generic alternative is included on the PDL. Our utilization shift assumptions are based on Milliman research of how quickly historic brand utilization converts to generic in each month after a patent expires. Similarly, we used assumptions for what the cost of the new generic drug would be relative to the current brand drug price.

The biosimilar Semglee (insulin glargine-yfgn) recently launched in November of 2022. The manufacturer launched the same drug at two different price points:

1. Semglee-yfgn that is priced at ~80% of brand Lantus cost.
2. insulin glargine-yfgn that is priced at ~34% of brand Lantus cost.

The state PDL also recently updated to prefer insulin glargine-yfgn, and non-prefer Semglee-yfgn. To account for this new product, we shifted 7.5% of total utilization for Lantus to this new biosimilar drug.

The PDL adjustment also includes an allowance for MCO supplemental rebates. The MCOs have historically reported approximately 3.25% of gross cost as supplemental rebate revenue for a PDL fully controlled by the MCOs. Based on more recent MCO data, we estimate that MCO supplemental rebates will decrease in aggregate to 1.1% after the PDL changes to state control.

Table 16 shows the PDL adjustment factors in aggregate by rate cell grouping and year:

Table 16 New Hampshire Department of Health and Human Services Medicaid Care Management Program Preferred Drug List Adjustment		
Rate Cell Grouping	CY 2018	CY 2019
Low Income Children ¹	0.984	0.995
Low Income Adults	0.931	0.937
Foster Care / Adoption	0.989	0.976
Severely Disabled Children	0.979	0.986
Elderly and Disabled Adults	0.956	0.965
Dual Eligibles	1.000	1.000
SPMI / SMI / LU	0.954	0.959
Serious Emotionally Disturbed Child	0.989	0.993
Medically Frail	0.939	0.943
Non-Medically Frail	N/A	0.959

¹ Low Income Children includes CHIP.

The adjustment factors include utilization shifts from the brand drug to new generic alternatives for brand drugs that lost their patent between the base experience period and the PDL effective date if the generic equivalent is on the PDL. Our utilization shift assumptions are based on Milliman research of how quickly historic brand utilization converts to generic in each month after a patent expires. Similarly, we used assumptions for what the cost of the new generic drug would be relative to the current brand drug price. The overall impact of the PDL adjustment is a 1.2% decrease to total MCM service costs.

Exhibit J provides a summary of the PDL analysis for selected therapeutic classes.

Medicare Covered Opioid Treatment Adjustment

Effective January 1, 2020 Medicare began paying for Opioid Treatment Programs (OTPs) through bundled payments for opioid use disorder (OUD) treatment services, including medication-assisted treatment (MAT), toxicology testing, and counseling. We estimated the reduction in cost to the MCM program by modeling the Medicaid coordination of benefit with Medicare consistent with guidance issued by DHHS to the MCOs.

High-Cost Patient Stop-Loss Adjustment

Effective September 1, 2015, DHHS implemented a stop-loss arrangement for high-cost patients where DHHS shares 50% of the cost above \$500,000 for members that have total expenses valued at Medicaid fee levels above that threshold. In order to avoid unintended interactions between the BCH risk pool funding reallocation process and the stop-loss provision of the MCO contract, the high-cost patients stop-loss excludes BCH claims.

The stop-loss attachment point of \$500,000 is indexed annually at a rate of 3.0% from its inception in SFY 2016 and rounded to the nearest \$1,000. The SFY 2023 attachment point will be \$615,000. The indexing of the attachment point addresses historical inflation and recent provider reimbursement increases and maintains a level of MCO risk consistent with program goals.

The resulting adjustment factors reduce the base experience data by about 0.05% to reflect the MCO liability under the stop-loss agreement. This program helps to reduce the variability of MCO financial results due to large cases. To evaluate the impact of this arrangement, we did not use claims re-priced at Medicaid fee levels, since the majority of expenses leading to those large cases were for prescribed medicine.

STEP 3: BLEND THE PROJECTED YEAR 1 AND YEAR 2 DATA

In this step, we blend the projected SFY 2023 medical cost for each rate cell based on actual membership in the base experience period. Blending the two base year projections increases the credibility of the capitation rates, particularly for rate cells with low enrollment. The blending process also reduces the year-to-year fluctuations in rate changes.

Opioid Addiction Treatment Trend Adjustment

We also made a trend adjustment to the base experience data underlying the MCM capitation rates to account for the estimated increase in both prevalence and cost of treatment for the opioid addiction treatment population.

Based on our review of SFY 2015 through October 2021 MCO encounter data, we determined the proportion of the total population with opioid addiction has started to decrease for several rate cells. This decreasing percentage results in adjustments of less than 1.00 for several rate cells. We believe the proposed adjustment factors properly address the funding of opioid addiction treatment in the SFY 2023 capitation rates based on available information.

Table 17 below shows the opioid addiction treatment cost trend adjustment factors:

Table 17
New Hampshire Department of Health and Human Services
Medicaid Care Management Program
Total Opioid Addiction Treatment Cost Trend Adjustment

Rate Cell Cohort	Adjustment Factors
Low Income Children - Age 0-11 Months	0.9765
Low Income Children - Age 1-18 Years	0.9990
Low Income Adults	0.9626
CHIP	1.0028
Foster Care / Adoption	0.9994
Severely Disabled Children	0.9999
Elderly and Disabled Adults - Age 19-64	1.0002
Elderly and Disabled Adults - Age 65+	0.9990
Dual Eligibles	0.9910
Severe / Persistent Mental Illness - Medicaid Only	1.0069
Severe / Persistent Mental Illness - Dual Eligibles	0.9985
Severe Mental Illness - Medicaid Only	0.9937
Severe Mental Illness - Dual Eligibles	0.9984
Low Utilizer - Medicaid Only	0.9966
Low Utilizer - Dual Eligibles	0.9975
Serious Emotionally Disturbed Child	0.9999
Medically Frail	0.9926
Non-Medically Frail	0.9795

We adjusted the opioid addiction trend factors to reflect the cost of BCH services that are projected outside of the main base experience period data. This adjustment was necessary since the original opioid addiction trend factors were developed as a global adjustment that applies to all service costs.

FFS Data Adjustment

Consistent with the SFY 2022 capitation rates, we continue to rely solely on encounter data due to the decreasing impact of the FFS experience on the MCM capitation rates in recent years. However, we continue to apply an adjustment factor developed from FFS data to reflect the portion of the base experience data historically attributed to FFS for the managed care eligible population that are newly enrolled and in their MCO selection period. Beginning January 1, 2019, DHHS implemented the "next day" enrollment process. Under this new passive enrollment, a newly Medicaid eligible member is enrolled in an MCO on the day following Medicaid eligibility confirmation.

The adjustment is meant to reflect the impact this data would have on the capitation rates without including all the detailed information through the rate setting process. The overall impact of this adjustment is 0.9984.

Preliminary and Retroactive Acuity Adjustment

For the acuity adjustment, we intend to assign each enrolled individual a risk score to capture how the average risk of the departed population (those who disenroll following redetermination) compares to the continuing population (those who meet eligibility requirements during redetermination). Since all continuing members will meet largely the same eligibility requirements that existed in the CY 2018 and CY 2019 base period, it is appropriate to use this base period as a starting point to estimate the SFY 2023 costs of the continuing population. The retroactive acuity adjustment factor will then adjust the rates to account for the average SFY 2023 acuity by capturing the number of member months associated with departed members and their relative acuity compared to continuing members at the rate cell level.

In the initial rate development, we use DHHS' initial membership projections that include the PHE unwind, and we assume Standard Medicaid departed members will have a relative acuity of 0.750, while GAHCP departed members will have a relative acuity of 0.900. We selected these relativities, which are intended to be preliminary placeholders,

because they produce an aggregate acuity adjustment impact on the rates that is generally consistent with the enrollment-based adjustment included in the SFY 2022 rates.

At this time, we only apply the preliminary acuity adjustment to Low Income Children and Adults, CHIP, Foster Care / Adoption, Elderly and Disabled Adults, and the GAHCP rate cells. We do not anticipate applying a retroactive acuity adjustment to the other rate cells based on the nature of services they receive (e.g., Medicare crossover, CMHC) and / or the limited enrollment growth during the PHE. However, we intend to review the other rate cells as additional redetermination and risk score information is known.

The attached Exhibit D demonstrates the calculation of each rate cell's preliminary acuity factor using the following:

- Estimated total SFY 2023 member months
- Estimated departed SFY 2023 member months
- Estimated continuing SFY 2023 member months
- Preliminary estimated acuity of departed cohort

The enrollment projections provided by DHHS assume a return to pre-COVID-19 enrollment and acuity levels by March 1, 2023.

In the event HHS continues to extend the PHE continues or a majority of redeterminations are not complete in time to accurately capture the relative acuity of the departed and continuing cohorts, we will consider re-evaluating the methodology to retroactively capture the acuity of the enrolled members in SFY 2023.

[Additional Acuity Adjustment for the Medically Frail Population](#)

Milliman and DHHS continue to review emerging medical loss ratio (MLR) experience for the Medically Frail population. Our review indicated a difference in acuity between the base data period and the emerging experience, which warranted an adjustment to the base period data.

We compared the MCOs' actual MLR during CY 2018 and CY 2019 to their September 2019 to December 2019 MLR. The resulting acuity adjustment increases the experience by 3.9% for the combined CY 2018 and CY 2019 base experience period. This acuity adjustment for the Medically Frail population is then combined with the preliminary acuity adjustment related to the end of the PHE discussed above.

IV. FINAL CAPITATION RATE ADJUSTMENTS

This section of the report describes the final adjustments to calculate the New Hampshire MCM program capitation rates from the projected SFY 2023 medical costs developed in Section III of this report.

CALCULATE FINAL PROJECTED MEDICAL COSTS

In this step, we use PMPM adjustments to account for specific changes to the projected service costs, such as adding (removing) benefits to (from) the base experience data, capturing program savings or other initiatives, and moving services to a directed payment. These adjustments include:

- Expanded mental health services under the Community Mental Health Agreement
- Facility specific FQHC adjustments
- Behavioral Health Crisis Treatment Center
- Assistive Technical Devices (ATECH)
- New Hampshire and Hampstead Hospitals
- Boston Children Hospital risk pool
- Community Residential Services
- Home visiting benefit
- Genetic testing allowance per HB 600
- Mobile Crisis Response Team and Emergency Services carve out
- Additional fee schedule changes and benefit updates
- Targeted pharmacy savings

Appendix D shows the details of our calculations.

Expanded Mental Health Services

DHHS is continuing its expansion of mental health service capacity consistent with the Community Mental Health Agreement (CMHA). The SFY 2023 capitation rates include approximately \$15.1 million of funding for additional Medicaid-funded services related to mobile crisis teams, crisis apartments, adult ACT teams, and supported employment.

We developed the PMPM add-on by rate cell using the rate cell structure for SFY 2023 and the CMHC expenditures by rate cell to allocate the CMHA funding. However, we changed our allocation method to include Serious Emotionally Disturbed Child in the funding distribution. Originally, the funds were meant to increase adult services. However, after multiple conversations with CMHCs and DHHS, we determined the funding was impacting the service levels for all behavioral health rate cells.

Facility Specific FQHC Adjustments

As of April 1, 2018, White Mountain Community Center is classified as a Federally Qualified Health Center Look-Alike (LAL) with a per encounter rate of \$176.09 for SFY 2023. We estimated the impact of the change in classification by repricing all encounters at this facility at the per encounter rate. We only repriced services subject to the per encounter rate payment as defined in the FQHC provider manual, Volume II dated January 1, 2018.

We estimate the impact of this change for SFY 2023 to be \$6,200.

Behavioral Health Crisis Treatment Center

On November 1, 2018, DHHS began operating a Behavioral Health Crisis Treatment Center (BHCTC) to serve any individuals in need of acute psychiatric treatment. The Behavioral Health Crisis Treatment Center provides services to adults ranging from crisis intervention, individual and group psychotherapy, and psychoeducational services.

Effective December 31, 2021, Riverbend's Behavioral Health Crisis Treatment Center (BHCTC) services contract ended with related services continuing through the State's redesigned Rapid Response/Mobile Crisis Response Program. We removed all BHCTC funding from the SFY 2023 MCM rates.

Assistive Technical Devices (ATECH) Adjustment

Effective October 1, 2018, providers bill all ATECH services to the State Plan, rather than to the Waiver. Previously, some ATECH specialty services were billed through the Waiver and DHHS discovered a duplication in State Plan and Waiver services.

We summarized all ATECH Waiver services for relevant providers and CPT codes during the base experience period to develop rate cell specific adjustments.

The impact of the ATECH adjustment is about \$4,900 annually across all populations.

New Hampshire and Hampstead Hospitals

Effective July 1, 2022, DHHS is implementing its SMI/SED 1115 waiver amendment to the Substance Use Disorder Treatment and Recovery Access (SUD-TRA) 1115 Demonstration. This waiver amendment will allow DHHS to claim federal matching for many Medicaid enrollees residing in an Institution for Mental Disease (IMD) for mental health treatment. As such, DHHS will begin providing Medicaid payments for individuals ages 21 to 64 receiving mental health services in an IMD under the standard fee-for-service Medicaid and Medicaid managed care programs. As such, these admissions to New Hampshire Hospital will now be included as an at-risk service for MCOs. All IMD stays longer than 60 days are excluded from the rate development since these stays do not qualify for the waiver.

We reviewed CY 2019 admissions at New Hampshire Hospital using data provided by DHHS, excluding all admissions over 60 days, and repriced each claim at the SFY 2023 per diem of \$1,506. As a result, the SFY 2023 rates include additional an estimated \$10,392,000 for these services.

We also included an allowance to reflect the per diem increase to \$1,506 (SFY 2023) from \$1,346 (CY 2019) for the populations already included in the MCM capitation rates (under 21 years old, 65+ year old). This adds \$541,000 to the SFY 2023 capitation rates. We also repriced historical claims data for Hampstead hospital using the same \$1,506 per diem, which is a SFY 2023 increase of \$2,875,000.

For SFY 2023, all admissions to both New Hampshire and Hampstead Hospital will be covered under a minimum fee schedule directed payment of \$1,506 per diem.

All expenditures for these two facilities are included in the capitation rates and are no longer part of the psychiatric admission kick payment.

Boston Children Hospital Risk Pool

Expenditures at BCH have varied significantly among the MCOs over the last few years. In order to better allocate funds across MCOs for services provided at BCH, DHHS created a budget-neutral risk pool to redistribute funds at the end of each contract period based on actual expenditure levels. Inpatient and outpatient facility services provided at BCH will qualify for risk pool calculation.

We set the funding level for BCH hospital inpatient and outpatient services consistent with the CY 2019 experience of \$15.0 million adjusted for retrospective payments and carved-out services (e.g., Zolgensma). We then adjusted the base period data for incurred but not reported claims liability using BCH inpatient services specific completion patterns and trended to SFY 2023 for hospital operating cost increases for a total annual projected inpatient and outpatient funding of \$17.1 million.

The BCH risk pool also includes an additional \$3.2 million to account for the following:

- Pediatric claims incurred at Massachusetts General Hospital (MGH) anticipated to move to BCH following one MCO's removal of MGH from their network
- Pediatric claims incurred at Tufts Hospital anticipated to move to BCH following the closure of Tufts' pediatric unit
- Contractual adjustments related to new contract provisions with one of the MCOs

The projected funding also reflects enrollment growth in the updated enrollment projections for SFY 2023.

Community Residential Services Minimum Fee Schedule

Effective July 1, 2021, DHHS implemented a minimum fee schedule for community residential services and increasing payments consistent with the current per diem rate for transitional housing services of \$232.79. The recent increase in per diem rates is reflected in the reimbursement adjustment discussed above. However, we also allocated roughly \$958,000 in funding to reflect fourteen new beds available beginning July 1, 2022.

Home Visiting Benefit

Effective July 1, 2021, eligibility and service unit restrictions for pregnant women and for infants age 0-1 were removed following the passage of House Bill 2 (which amends RSA 167:68-a, *Home Visiting Programs*); existing eligibility and service restrictions for children ages 1-21 remain unchanged. The annual funding for this benefit is \$1,500,000 for SFY 2023.

Genetic Testing Allowance

House Bill 600 instructed DHHS to set up reimbursement for newborn genetic screening tests performed by hospitals. The bill provides a mechanism for hospitals to receive compensation to offset the cost for purchasing filter papers and administration in support of the newborn screening program. This new reimbursement was effective November 20, 2021.

The Amendment #8 SFY 2023 capitation rates include a \$75 allowance for each pediatric genetic testing performed by hospitals. The two newborn kick payments are updated to include a \$75 payment to cover the average cost of genetic tests previously borne by hospitals.

Mobile Crisis Response Team and Emergency Services Carve Out

Effective July 1, 2021, DHHS implemented a redesign of its mobile crisis response team (MCRT) infrastructure in order to provide enhanced regional delivery of mental health services for children, youth, and adults with a centralized portal and single source phone-based access point for behavioral health crises. This mental health access point provides an integrated point of entry for local and regional information for mental health and substance use crisis services. DHHS is factoring in the current regional infrastructure, which includes, but is not limited to, the Doorway program, Integrated Delivery Networks, and Regional Public Health Networks, to determine how to leverage and centralize access points for individuals and families.

Funding for MCRT and emergency services continues to be carved out of the MCM program until DHHS has a better understanding of actual utilization of these services. As a result, we removed roughly \$3.4M from the projected SFY 2023 experience in Appendix D, which is based on the historical costs for these services provided by the MCOs.

MCRT services are defined as those having a combination of the HW and U9 modifiers while emergency services are defined using HCPCS codes 90839, 90840, H2011 and S9484.

Additional Fee Schedule Changes and New Benefits

The Amendment #8 SFY 2023 capitation rates include a number of fee schedule updates as follows:

- **J-Code Repricing:** Effective July 1, 2022 several J-codes will be updated to reflect new pricing points. These changes account for an additional \$1,800,000 in funding for SFY 2023.
- **Peristeen Pumps:** Effective January 1, 2022, DHHS began covering the cost of peristeen pumps for eligible members. The Peristeen pump is a transanal irrigation system for people who suffer from fecal incontinence and constipation. DHHS estimated that four children and fifteen adults would be candidates for this device. DHHS also assumed an annual supply of 270 catheters (three boxes) per user, since these devices are used every other day. Based on this information, we estimate the benefit will cost approximately \$138,000 per year. We used the distribution of members with a neurogenic bowel dysfunction diagnosis by rate cell to allocate the estimated funding.

- **Breast Milk Storage Bags:** Effective October 1, 2021 breast pumping bags are covered at a cost of \$0.24 per unit. DHHS estimates the cost of this benefit to be about \$280,200 annually. We used the distribution of newborn deliveries by rate cell to allocate the total cost of this benefit.

Targeted Pharmacy Savings Adjustment

The SFY 2023 capitation rates include additional adjustments for targeted pharmacy savings initiatives. We summarized CY 2019 pharmacy data to identify potentially inefficient prescribing and dispensing patterns. We applied the pharmacy analyses in a stepwise process to ensure savings were not duplicated across analyses. We also applied a clinically appropriate offset to each analysis to account for situations where payment of the claim was justified. These situations may include clinically accepted off-label utilization, prior authorization, or third-party liability, among others. The pharmacy efficiency analyses include a clinical claims review, opioid analysis, and fraud, waste and abuse analysis. Lastly, we excluded all nursing facility members from these pharmacy efficiency analyses.

Table 18 below shows the overall potentially inefficient prescribing and dispensing for each pharmacy efficiency measure.

Table 18				
New Hampshire Department of Health and Human Services				
Medicaid Care Management Program				
Pharmacy Efficiency Measures – Calendar Year 2019 Basis				
Pharmacy Efficiency Measure	Identified Inefficient Spend	Clinically Appropriate Adjustment	Adjusted Dollars	PMPM
Age Limit	105,521	20%	84,417	0.04
Quantity Limit	615,376	20%	492,301	0.25
Medication Possession Ratio	46,800	20%	37,440	0.02
Therapeutic Duplication – Asthma / COPD, Corticosteroids	58,660	20%	46,928	0.02
Therapeutic Duplication – Asthma / COPD, Long-Acting Beta Agonists	4,492	20%	3,593	0.00
Therapeutic Duplication – Asthma / COPD, Long-Acting Muscarinic Antagonists	6,339	20%	5,071	0.00
Therapeutic Duplication – Autoimmune	13,168	20%	10,535	0.01
Therapeutic Duplication – HIV	190,054	20%	152,043	0.08
Opioid – Concurrent Utilization	44,533	10%	40,080	0.02
Opioid Use Disorder	34,445	10%	31,001	0.02
Opioid Agonists	4,812	10%	4,331	0.00
Total	1,124,202		907,740	0.45

Details by rate cell are provided in Exhibit G.

CALCULATE FINAL CAPITATION RATES BY RATE CELL

In this step, we apply adjustment factors to reflect third party liability recoveries, an allowance for MCO administration / margin, inclusion of directed payments, and an allowance for state premium tax. Appendix E shows the details of our calculations.

Third Party Liability Recoveries and Other Transactional Adjustment

MCOs are expected to pursue and collect third party liability (TPL) recoveries from other payers. DHHS believes there is substantial opportunity for the MCOs to enhance their recovery, provider overpayment, coordination of benefits, and subrogation efforts. In other established Medicaid programs, we typically see a range of 0.5% to 1.5% in savings for these programs. Based on our understanding of current efforts, we included a TPL savings adjustment of 0.75% in the SFY 2023 rates. We believe these assumptions represent reasonably achievable levels of savings in this program. DHHS will continue to monitor TPL recoveries in the MCM program.

The aggregate adjustment factor for TPL and other transactional adjustments is 0.9925 for SFY 2023.

Fraud, Waste and Abuse Adjustment

The SFY 2023 MCM capitation rates do not include additional considerations for fraud, waste, and abuse adjustments beyond what is reflected in the base period data.

MCO Administration / Margin Allowance

Effective January 1, 2021, several parts of the MCO contract were restructured to remove certain administrative requirements. We adjusted the administrative allowance for the contract changes and additional DHHS expectations for administrative efficiency.

The composite MCO administration / margin allowance is \$42.48 PMPM across all MCM program populations, which represents 9.5% of MCO revenue prior to the directed payments and the premium tax allowance. The administration / margin allowance provides for 8.0% of revenue for administrative expenses (\$35.78 PMPM) and 1.5% for profit and risk margin (\$6.70 PMPM).

Table 19 below shows a summary of the administration / margin allowance by population.

Table 19 New Hampshire Department of Health and Human Services Medicaid Care Management Program Composite MCO Administration / Margin Allowance SFY 2023 Contract Period			
Population	MCO Administration Allowance	Risk / Profit Margin	Total Allowance
Standard Medicaid Population			
Base Population	\$27.09	\$5.07	\$32.17
CHIP	15.83	2.57	18.40
Behavioral Health Population	95.14	21.32	116.46
Standard Medicaid – PMPM	\$30.71	\$5.95	\$36.67
Standard Medicaid – Percentage of At-Risk Revenue¹	7.7%	1.5%	9.2%
GAHCP Population			
Medically Frail	\$76.36	\$16.14	\$92.50
Non-Medically Frail	\$37.94	\$6.17	44.11
Behavioral Health Population	138.74	29.32	168.06
GAHCP – PMPM	\$46.43	\$8.26	\$54.69
GAHCP – Percentage of At-Risk Revenue¹	8.4%	1.5%	9.9%
Total			
Total – PMPM	\$35.78	\$6.70	\$42.48
Total – Percentage of At-Risk Revenue¹	8.0%	1.5%	9.5%

¹Excluding Directed Payments and Premium Tax.

The administration allowance for the Medically Frail population is consistent with the Elderly and Disabled Adults Standard Medicaid rate cell on a percent of revenue basis. Similarly, the non-Medically Frail administration allowance is consistent with the Low Income Adults Standard Medicaid rate cell on a percent of revenue basis.

We developed the aggregate administrative cost target on a PMPM basis from the information gathered from participating MCOs and supplemented by Milliman-developed administrative cost benchmarks trended to SFY 2023. The SFY 2023 MCM program administrative allowance is consistent with the 31st percentile of Milliman's benchmarks plus a PBM administrative fee component of \$2.89 PMPM based on information provided by the MCOs.

Milliman's benchmarks are derived from a database of administrative cost, staffing, productivity, and quality information developed using data collected from more than 100 commercial health plans, Medicare Advantage Plans, Medicaid managed care organizations, third party administrators, and other organizations that administer health insurance benefits. The benchmark information and model are updated annually and validated using administrative costs reported by Medicaid MCOs in their annual financial statements. We use this database to develop customized benchmarks that can provide a basis for evaluating the administrative efficiency and effectiveness (e.g., staffing, cost, productivity, and

quality) of an organization. The benchmark tool is structured around eight functional areas, 22 activities, and over 80 tasks inherent to typical health plan activities.

We also used Milliman's *Medicaid risk-based managed care: Analysis of Administrative Costs for 2020*¹ Research Report to benchmark the non-benefit cost allowance included in the SFY 2023 MCM capitation rates. We compared the SFY 2023 MCM administration allowance to administrative costs reported by Medicaid MCOs in their 2019 financial statements, excluding amounts for taxes and fees. The SFY 2023 MCM program administrative allowance is consistent with the 35th percentile of the reported results included in the research report after adjusting for trends in administrative costs.

CMHC Directed Payment

The SFY 2023 MCM capitation rates include a prorated directed payment of \$5 million annually to the CMHCs across all programs and populations (MCM and GAHCP), pending approval by CMS. MCOs are required to pay these amounts directly to CMHCs according to criteria approved by CMS.

The directed payment is targeted to all Medicaid beneficiaries in the behavioral health population (members identified as SPMI, SMI, low utilizer, and SED children). We developed the PMPM directed payment by rate cell using the CMHC expenditures to allocate the total directed payment amount. Since these amounts are to be paid directly to the providers by the MCOs, we did not include an additional allowance for administrative expense or risk margin. Please see Appendix E for the rate cell specific PMPM amount for the CMHC directed payment.

DHHS has submitted the appropriate 438.6(c) pre-print and is awaiting approval from CMS.

Critical Access Hospital Directed Payment

The SFY 2023 capitation rates also include an estimated directed payment to New Hampshire critical access hospitals, pending approval by CMS. The funding amount for qualifying hospitals is \$33 million. MCOs are required to pay these amounts directly to hospitals according to criteria approved by CMS.

The directed payments is directly tied to actual hospital services provided: the number of inpatient discharges and outpatient visits reported by qualifying providers to New Hampshire MCOs. DHHS and CMS will be able to tie each payment to a specific service provided to a specific beneficiary through the data consistent with the managed care rule. Payment amounts are a uniform dollar increase initially determined by dividing the projected quality pool amount by the number of projected inpatient discharges and outpatient visits for SFY 2023. To determine the final uniform dollar amount for the qualified directed payments for inpatient discharges and the uniform dollar amount for qualified directed payments for outpatient visits, DHHS will apply weights based on the relative costs of those services and use actual utilization to ensure the quality and access pool is fully distributed.

The hospital directed payments will be made to qualifying providers out of a quality and access pool for each of the hospital classes. We developed the PMPM directed payment funding by rate cell (excluding kick payments) using the hospital inpatient and outpatient expenditures to allocate the total directed payment amount.

Since these amounts are to be paid directly to the providers by the MCOs, we did not include an additional allowance for administrative expense or risk margin. Please see Appendix E for the rate cell specific PMPM amount for the hospital directed payment.

DHHS has submitted the appropriate 438.6(c) pre-print and is awaiting approval from CMS.

Premium Tax Allowance

The capitation rates include an allowance for the 2.0% premium tax collected by the New Hampshire Insurance Department.

Withhold and Incentive Arrangement

DHHS has implemented a withhold and incentive arrangement for the SFY 2023 contract period through which DHHS will withhold 2% of the MCO rate. The terms of the withhold and incentive arrangement are outlined in the contract with

¹ <https://us.milliman.com/en/insight/medicaid-managed-care-financial-results-for-2020>

the MCOs. As required by CMS, the incentive will not exceed 5% of the capitation rates. The capitation rates shown in this report do not reflect the withhold provision. The withhold and incentive arrangement will be implemented in a retrospective manner, such that 100% of the capitation payments are made and funds will be recouped in the event that an MCO does not meet all criteria to earn back the calculated withhold amount.

The MCO contract includes the following language regarding incentive payments included in the withhold and incentive program:

- “Insofar as the withhold incentive is capped at one hundred five percent (105%) of approved Capitation Payments, and the design of the Withhold and Incentive Program is to maintain withhold funds in the program, should there be a remaining amount in withheld funds within the program, additional incentives shall be available through performance metrics determined by the State so that all funds will be disbursed before the end of the contract term in accordance with separate guidance.”

Furthermore, the SFY 2023 capitation rates as documented in this report are actuarially sound, since unearned withhold amounts would be returned to the program in the form of incentive payments to higher-performing MCOs. As a result, the withhold will not increase or decrease the aggregate capitation rate paid in the MCM program.

Any incentive payments made to higher-performing MCOs will not impact the minimum or maximum MLR provision of the contract.

ANTICIPATED FUTURE AMENDMENT

DHHS is considering one or more amendments to the SFY 2023 MCM capitation rates to account for the following items:

- Update to the preliminary acuity adjustment factors to reflect the actual end date of the PHE, updated enrollment projections, and New Hampshire’s unwind redetermination plan
- Review of final cost-to-charge ratios that underlie the FFS hospital outpatient payment methodology
- Adjustment for additional beds at Hampstead Hospital
- Update to actual hospital inpatient DRG risk weights effective October 1, 2022
- Review of emerging utilization data to better inform trends
- Review of emerging NEMT and ABA claims data to better inform trends
- Other legislative changes

V. SERVICE CATEGORY ASSIGNMENT

This section of the report provides information about the service category assignment used to create the cost models included in the New Hampshire MCM program capitation rate development. This information can be used by participating MCOs to monitor their experience in a format and detail similar to the rate development process.

To prepare the attached cost models, we grouped claims into service categories. The service category assignment described below does not account for excluded or limited services. The next few paragraphs detail how the claim level detail is assigned to the service categories shown in Appendices A and B.

HOSPITAL INPATIENT

Hospital inpatient services are those items and services, provided under the direction of a physician, furnished to a patient who is admitted to a general acute care or psychiatric medical facility for facility and professional services on a continuous basis that is expected to last for a period greater than 24 hours. An admission occurs when the Severity of Illness / Intensity of Services criteria set forth by the review contractor and approved by DHHS is met. Among other services, hospital inpatient services encompass a full range of necessary diagnostic, therapeutic care including surgical, medical, general nursing, radiological, and rehabilitative services in emergency or non-emergency conditions. Additional hospital inpatient services would include miscellaneous hospital services, medical supplies, and equipment.

The hospital inpatient claims are assigned a service category based on Diagnostic Related Group (DRG) codes from version 37. Milliman's algorithm classifies hospital inpatient claims using the following groupings of CMS v24 DRG codes:

Table 20 New Hampshire Department of Health and Human Services Medicaid Care Management Program Hospital Inpatient Service Groupings by DRG Code	
Service Category	Diagnosis Related Group
Medical	'052'-'103','121'-'125','146'-'159','175'-'208','280'-'316','368'-'395','432'-'446','533'-'566','592'-'607','637'-'645','682'-'700','722'-'730','754'-'761','789'-'794','808'-'816','834'-'849','862'-'872','913'-'923','933'-'935','945'-'951','963'-'965','974'-'977'
Surgical	'001'-'042','113'-'117','129'-'139','163'-'168','215'-'265','326'-'358','405'-'425','453'-'517','573'-'585','614'-'630','652'-'675','707'-'718','734'-'750','799'-'804','820'-'830','853'-'858','876'-'876','901'-'909','927'-'929','939'-'941','955'-'959','969'-'970','981'-'989'
Maternity Delivery	'786-788', '796-798', '805-807'
Maternity Non-Delivery	'769'-'770', '776'-'782'
Newborn	'795'
Psychiatric	'880'-'887'
Alcohol and Drug Abuse	'894'-'897'
Other	'998'-'999'

HOSPITAL OUTPATIENT

Hospital outpatient services are defined as those preventive, diagnostic, therapeutic, rehabilitative, surgical, and emergency services received by a patient through an outpatient / ambulatory care facility for the treatment of a disease or injury for a period of time generally not exceeding 24 hours. Outpatient / ambulatory care facilities include hospital outpatient departments, diagnostic / treatment centers, ambulatory surgical centers, emergency rooms, end stage renal disease (ESRD) clinics, and outpatient pediatric AIDS clinics (OPAC). Costs include facility charges only and do not include professional charges unless performed by staff of the facility and billed on a UB-92 (hospital) claims form. All facility-billed items not part of an inpatient admission are considered hospital outpatient services.

The hospital outpatient claims are assigned a service category based on revenue codes. Milliman's algorithm classifies hospital outpatient claims using the following groupings of revenue codes:

Table 21
New Hampshire Department of Health and Human Services
Medicaid Care Management Program
Hospital Outpatient Service Groupings by Revenue Code

Service Category	Revenue Code
Emergency Room	'0450'-'0459'
Surgery	'0360'-'0369','0481','0490'-'0499','0750'-'0759','0790'-'0799'
Radiology	'0320'-'0330','0333','0339'-'0349','0350'-'0359','0400'-'0403','0404','0409','0610'-'0619'
Pathology / Lab	'0300'-'0319','0923','0925'
Pharmacy	'0250'-'0269','0331'-'0332','0335','0630'-'0637'
Cardiovascular	'0480','0482'-'0489','0730'-'0739'
PT / OT / ST	'0420'-'0449','0470'-'0479','0530'-'0539','0930'-'0932','0951'-'0952'
Psychiatric	'0513','0900'-'0905','0907'-'0919'
Alcohol and Drug Abuse	'0906', '0944'-'0945'
Other	'0001','0220'-'0249','0270'-'0279','0280'-'0289','0290'-'0299','0370'-'0379','0380'-'0399','0410'-'0419','0460'-'0469','0500'-'0509','0510'-'0512','0514'-'0521','0523','0526','0528','0529','0550'-'0569','0600'-'0609','0621'-'0624','0650','0655'-'0659','0670'-'0729','0740'-'0749','0760'-'0769','0770'-'0789','0800'-'0809','0810'-'0819','0820'-'0859','0860'-'0861','0880'-'0889','0920'-'0922','0924','0929','0940'-'0943','0946'-'0947','0948','0949','0990'-'0999','2100'-'3109'

PROFESSIONAL

Professional services are assigned to a service category using a condensed version of Milliman's *Health Cost Guidelines™ (HCGs)* grouping logic and other categories defined by DHHS. Professional services include the full range of preventive care services, primary care medical services, and physician specialty services. All services must be medically necessary and appropriate for the treatment of a specific diagnosis, as needed for the prevention, diagnostic, therapeutic care, and treatment of the specific condition. Physician services are performed at physician's offices, patients' homes, clinics, and skilled nursing facilities. Technical services performed in a physician's office are considered part of the professional services delivered in an ambulatory setting unless designated as a separate service.

COMMUNITY MENTAL HEALTH CENTER

Community Mental Health Center services are split into detailed service categories in order to provide more comprehensive medical cost information for the populations eligible for enhanced mental health services through the CMHCs. We reviewed the CMHC expenditures for those eligible for enhanced mental health services and developed the following service categories with the help of DHHS staff:

Table 22
New Hampshire Department of Health and Human Services
Medicaid Care Management Program
Community Mental Health Center Service Groupings by CPT Code

Service Category	CPT Code
Case Management	T1016
Long Term Support Service	H0034, H2011, H2015, H2019, H2020, T1027
Partial Hospital	H2001, H2018
Psychotherapy	90875, 90801, 90804, 90806, 90808, 90816, 90818, 90821, 90832, 90833, 90834, 90836, 90837, 90839, 90840, 90846, 90847, 90853
Evidence Based Practice	H2027
Medication Management	90805, 90807, 90809, 90817, 90819, 90862, H2010, M0064, T1001
Emergency Service 24/7	S9484
APRTP	S9485
Supported Employment	H2023

PHARMACY

The pharmacy category includes pharmaceuticals as ordered by licensed prescribers and obtained at an outpatient pharmacy. Prescription drugs are identified by the presence of a National Drug Code (NDC) in the claims file. We used Medi-Span information to separate prescription drug expenditures into generic, single source brand, multi-source brand, specialty, Hepatitis C, and other scripts. We used a definition of specialty drugs consistent with Milliman's HCGs.

OTHER

The other service categories includes the following services:

- Home health services including intermittent skilled nursing, home health aide, physical, occupational and speech therapy services, and physician ordered supplies
- Emergency transportation, or acute care situation where normal transportation would potentially endanger the life of the patient
- Durable medical equipment that provides therapeutic benefits or enables a recipient to perform certain tasks that he or she would be unable to undertake otherwise due to certain medical conditions and / or illnesses

Other services are also assigned a service category using CPT codes. Other, unidentifiable services are assigned an "unknown" category of service.

VI. CMS RATE SETTING CHECKLIST ISSUES

This section of the report lists each item in the November 10, 2014 CMS checklist and discusses how DHHS addresses each issue and / or directs the reader to other parts of this report. CMS uses the rate setting checklist to review and approve a state's Medicaid capitation rates.

AA.1.0 – Overview of Rates Being Paid Under the Contract

The SFY 2023 managed care organization (MCO) capitation rates for the Medicaid Care Management program are developed using CY 2018 and CY 2019 MCO encounter data and FFS data for the MCO eligible population, along with other information. The GAHCP Non-Medically Frail rate cell uses March 2019 to December 2019 encounter data due to the transition of this population to the MCM program effective January 1, 2019. DHHS sets rates by rate cell for all MCOs.

Please refer to this report for background on the program and more details around the rate development.

AA.1.1 – Actuarial Certification

The Actuarial Certification of the SFY 2023 MCM capitation rates is shown in Exhibit K. The SFY 2023 MCM capitation rates have been developed in accordance with generally accepted actuarial principles and practices and are appropriate for the populations to be covered and the services to be furnished under the contract.

AA.1.2 – Projection of Expenditures

Exhibit B includes a projection of total expenditures based on estimated enrollment and SFY 2023 capitation rates.

AA.1.3 – Risk Contracts

The MCM program contract meets the criteria of a risk contract.

AA.1.4 – Modifications

The SFY 2023 rates documented in this report are the original capitation rates for the MCM population for the SFY 2023 MCM contract period. These SFY 2023 capitation rates are included in Amendment #8 to the MCM program contracts with the three MCOs.

Note: There is no AA.1.5 on the Rate Setting Checklist.

AA.1.6 – Limit on Payment to Other Providers

It is our understanding no payment is made to a provider other than the participating MCOs for services available under the contract.

AA.1.7 – Risk and Profit

The SFY 2023 MCM capitation rates include a targeted margin of 1.5% for risk, profit, and contribution to reserves. We believe that this margin is appropriate given the variability of expenses under the program.

AA.1.8 – Family Planning Enhanced Match

DHHS claims enhanced match for family planning services for the population covered under this program.

AA.1.9 – Indian Health Service (IHS) Facility Enhanced Match

DHHS does not claim enhanced match for Indian Health Services for the population covered under this program.

AA.1.10 – Newly Eligible Enhanced Match

The GAHCP population is part of the newly eligible Medicaid population. Therefore, the rates for those rate cells are eligible for the enhanced Federal match under Section 1905(y). Capitation rates for the Medically Frail and Non-Medically Frail populations are developed separately from the Standard Medicaid populations. The GAHCP population eligible for enhanced behavioral health services receive the same capitation payment as similar members in the Standard Medicaid population.

AA.1.11 – Retroactive Adjustments

The SFY 2023 rates documented in this report are the original capitation rates for the SFY 2023 MCM contracts.

AA.2.0 – Based Only Upon Services Covered Under the State Plan

The CY 2018 and CY 2019 MCO encounter experience data includes a cost effective non-covered service that qualifies as an in-lieu of service and meets cost effectiveness requirements. Please see Section III of this report for more details.

AA.2.1 – Provided Under the Contract to Medicaid-Eligible Individuals

The SFY 2023 capitation rate development methodology relies on MCO encounter data for all MCM eligible populations.

AA.2.2 – Data Sources

The SFY 2023 capitation rates are developed using CY 2018 and CY 2019 MCO encounter and eligibility data. The GAHCP Non-Medically Frail rate cell uses March 2019 to December 2019 encounter data due to the transition of this population to the MCM program effective January 1, 2019.

Please refer to Sections II and III of this report for more details.

AA.3.0 – Adjustments to Base Year Data

All adjustments to the base year data are discussed in this report. In addition, each item in the checklist is addressed in items AA.3.1 – AA.3.17 below.

AA.3.1 – Benefit Differences

The base data used to calculate the capitation rates includes the services covered under the MCM contract.

Section IV of this report documents the development of PMPM add-ons for services that were not offered under the MCM contract in the base period but are part of the MCM contract for SFY 2023.

Please refer to Section IV of this report for more details.

AA.3.2 – Administrative Cost Allowance Calculations

The capitation rates include explicit administrative allowances by rate cell. Please see Section IV in the report for more details regarding the administrative allowance calculation.

AA.3.3 – Special Populations' Adjustments

The SFY 2023 capitation rates methodology does not include an adjustment for special populations as the base FFS and encounter data used to calculate the capitation rates is consistent with the eligible population.

AA.3.4 – Eligibility Adjustments

The base data only reflects experience for time periods where members were eligible to enroll in an MCO.

AA.3.5 – Third Party Liability (TPL)

The managed care organizations are responsible for the collection of any TPL recoveries. The capitation rates include an adjustment to reflect additional TPL recoveries that are not reflected in the base year FFS data portion.

AA.3.6 – Indian Health Care Provider Payments

The MCOs are responsible for the entirety of any IHC payments, which are fully reflected in the claims data.

AA.3.7 – DSH Payments

DSH payments are not included in the capitation rates.

AA.3.8 – FQHC and RHC Reimbursement

The MCOs are responsible for the entirety of the FQHC and RHC encounter payments, which are fully reflected in the claims data.

AA.3.9 – Graduate Medical Education (GME)

GME payments are not included as part of the capitation rates.

AA.3.10 – Copayments, Coinsurance, and Deductibles in Capitated Rates

The MCM population with an income over 100% of FPL must pay a \$1 / \$2 preferred / non-preferred copay for prescription drugs. The FFS and MCO encounter data reflect the copayment collection.

AA.3.11 – Medical Cost / Trend Inflation

Section III of this report documents the trend assumptions used to project the base period costs to SFY 2023.

AA.3.12 – Utilization Adjustments

Utilization trend is included in AA.3.11.

AA.3.13 – Utilization and Cost Assumptions

The utilization and cost assumptions are appropriate for the population to be covered.

AA.3.14 – Post-Eligibility Treatment of Income (PETI)

Long-term care services that are subject to patient liability are excluded from the MCM population capitation rates.

AA.3.15 – Incomplete Data Adjustment

The capitation rates include an adjustment to reflect IBNR claims and underreported CMHC claims. Please refer to Section III of this report for more information on the development of these adjustment factors.

AA.3.16 – Primary Care Rate Enhancement

The SFY 2023 capitation rates are priced at levels consistent with current MCO reimbursement levels with considerations for expected MCM fee schedule changes.

AA.3.17 – Health Homes

Not Applicable.

AA.4.0 – Establish Rate Category Groupings

The SFY 2023 capitation rates use several rate cells developed from Medicaid eligibility categories to designate the eligible population. Please see Section II of this report and Exhibit I for more details.

There are also separate maternity and newborn kick payments.

AA.4.1 – Eligibility Categories

The eligibility categories included in the SFY 2023 capitation rates are defined in Section II of this report.

AA.4.2 – Age

Age is used for certain rate category groupings.

AA.4.3 – Gender

Gender is not used as a rating variable.

AA.4.4 – Locality / Region

Region is not used as a rating variable.

AA.4.5 – Risk Adjustments

The MCM population capitation rates will use an actuarially sound risk adjustment model to adjust the rates for each participating MCO. Section II of this report includes an overview of the risk adjustment methodology.

We will provide a separate report documenting the development of the MCO Adjusted Risk Factors that will be applied to the SFY 2023 capitation rates.

AA.5.0 – Data Smoothing

We did not perform any data smoothing.

AA.5.1 – Cost-Neutral Data Smoothing Adjustment

We did not perform any data smoothing.

AA.5.2 – Data Distortion Assessment

Our review of the base FFS and MCO encounter data did not detect any material distortions or outliers.

AA.5.3 – Data Smoothing Techniques

We determined that a data smoothing mechanism resulting from data distortions was not required.

AA.5.4 – Risk Adjustments

The MCM population capitation rates will use an actuarially sound risk adjustment model to adjust the rates for each participating MCO. Section II of this report includes an overview of the risk adjustment methodology.

We will provide a separate report documenting the development of the MCO Adjusted Risk Factors that will be applied to the SFY 2023 capitation rates.

AA.6.0 – Stop-Loss, Reinsurance, or Risk Sharing Arrangements

DHHS administers a stop-loss arrangement for high-cost patients where DHHS shares 50% of the cost above \$615,000 for members that have total expenses for capitated services valued at Medicaid fee levels above that threshold. The

stop-loss provision will exclude claims incurred at Boston Children's Hospital, due to the creation of a separate risk pool for those services.

The stop-loss adjustment factors reduce the base experience data by about 0.05% to reflect the MCO liability under the stop-loss agreement. This change is intended to be budget neutral to DHHS and the MCOs. It helps to reduce the variability of MCO financial results due to large cases.

The SFY 2023 MCM capitation rates also feature a risk pool for Boston Children's Hospital services described in Section II of this report.

AA.6.1 – Commercial Reinsurance

DHHS does not require entities to purchase commercial reinsurance.

AA.6.2 – Stop-Loss Program

DHHS administers a stop-loss arrangement for high-cost patients where DHHS shares 50% of the cost above \$615,000 for member that have total expenses for capitated services valued at Medicaid fee levels above that threshold. The stop-loss provision will exclude claims incurred at Boston Children's Hospital due to the creation of a separate risk pool for those services.

The adjustment factors reduce the base experience data by about 0.05% to reflect the MCO liability under the stop-loss agreement. This change is intended to be budget neutral to DHHS and the MCOs. It helps to reduce the variability of MCO financial results due to large cases.

AA.6.3 – Risk Corridor Program

The SFY 2023 MCM capitation rates also feature a minimum and maximum MLR provision, similar to a risk corridor, as described in Section II of this report.

AA.7.0 – Incentive Arrangements

The MCO contract includes a withhold and incentive program in which unearned withheld dollars will be used to finance an incentive pool that is available for additional incentive payments to be made to high-performing MCOs. The amount of an incentive pool awarded to a particular MCO will not exceed 5.0% of the MCO's qualifying capitation revenue.

Please refer to the Withhold and Incentive Program policy included in the MCO contract for more details.

AA.7.1 – Electronic Health Records (EHR) Incentive Payments

DHHS has not implemented incentive payments related to EHRs for the SFY 2023 contract period.

VII. RESPONSE TO 2022-2023 MEDICAID CARE RATE DEVELOPMENT GUIDE (APRIL 2022)

SECTION I. MEDICAID MANAGED CARE RATES

1. General Information

A. Rate Development Standards

- i. The SFY 2023 capitation rates do not include rate ranges.
- ii. The rate certification included herein is for the SFY 2023 contract period.
- iii. This rate certification submission was prepared in accordance with 42 CFR §438.4, 438.5, 438.6, and 438.7.
 - a. The actuarial certification report signed by John Meerschaert, FSA, MAAA certifies that the final capitation rates meet the standards in 42 CFR §438.3(c), 438.3(e), 438.4, 438.5, 438.6, and 438.7. The certification can be found in Exhibit K.
 - b. The final and certified capitation rates for all rate cells can be found in Exhibit A.
 - c. The items requested can be found in Sections I through IV of this report.
- iv. Differences in capitation rates for covered populations are based on valid rate development standards and are not based on the rate of federal financial participation associated with the covered population.
- v. Each rate cell is developed independently to be actuarially sound and does not cross-subsidize payments for another rate cell.
- vi. The effective dates of changes to the Medicaid program are consistent with the assumptions used to develop the capitation rates.
- vii. The capitation rates are developed in a way that the MCO can reasonably achieve a medical loss ratio of at least 85% for the rate year.
- viii. The SFY 2023 capitation rates do not include rate ranges.
- ix. The SFY 2023 capitation rates do not include rate ranges.
- x. The rate certification submission demonstrates that the capitation rates were developed using generally accepted actuarial practices and principles.
 - a. All adjustment to the capitation rates reflect reasonable, appropriate, and attainable costs.
 - b. No adjustments to the rates are performed outside of the initial rate setting process beyond those outlined in Section III of the report.
 - c. The final contracted rates in each cell match the capitation rates in the certification.
- xi. The capitation rates included in this submission are certified for all time periods in which they are effective. No rates for a previous time period are used for a future time period.
- xii. Section I includes documentation of the COVID-19 considerations in the SFY 2023 capitation rate development.
- xiii. This rate certification conforms to the procedure for rate certifications for rate and contract amendments.

B. Appropriate Documentation

- i. The SFY 2023 capitation rates do not include rate ranges.
- ii. We believe the attached report properly documents all the elements included in the rate certification and provides CMS enough detail to determine that regulation standards are met.

Please see Sections I through IV of this report for the following details:

- a. Data used, including citations to studies, research papers, other states' analyses, or similar secondary data sources.
 - b. Assumptions made, including any basis or justification for the assumption.
 - c. Methods for analyzing data and developing assumptions and adjustments.
- iii. This capitation rate certification includes a specific rate for each rate cell developed from specific assumptions for each rate cell. All assumptions and adjustments underlying the certified capitation rates are properly documented.
 - iv. The SFY 2023 capitation rates do not include rate ranges.
 - v. We detail within our responses in this guide the section of our report where each item described in the 2022 to 2023 Medicaid Managed Care Rate Development Guide can be found.
 - vi. Differences in capitation rates for covered populations are based on valid rate development standards and are not based on the rate of federal financial participation associated with the covered population.
 - vii. DHHS claims enhanced match for family planning services for the population covered under this program. All other services and populations included in this rate certification are subject to the regular state FMAP except for the newly eligible population as described in Section III.
 - viii. Please see Sections I and II of this report for the requested documentation.
 - ix. Section IV outlines the anticipated rate amendment details.
 - x. Section I includes documentation of the COVID-19 considerations in the SFY 2023 capitation rate development.

2. Data

A. Rate Development Standards

- i. Our report includes a thorough description of the data used and shows compliance with 42 CFR §438.5(c).
 - a. DHHS provided Milliman with validated encounter data and financial reports for at least the three most recent and complete years prior to the rating period.
 - b. The rate development methodology uses current MCO encounter data. In an email dated May 11, 2022, CMS approved the state's request for an exception to the base data standards in accordance with 42 CFR § 438.5(c)(3) for SFY 2023 rate development purposes.
 - c. The data used is derived from the Medicaid population served under the Medicaid Care Management program.
 - d. The rate development methodology uses recent MCO encounter data. In an email dated May 11, 2022, CMS approved the state's request for an exception to the base data standards in accordance with 42 CFR § 438.5(c)(3) for SFY 2023 rate development purposes.

B. Appropriate Documentation

- i. Milliman requested and received a full claims and enrollment database from DHHS and the MCOs. This information is summarized in Appendices A1-A2.
- ii. A detailed description of the data used in the rate development methodology can be found in Section III of this report. Section III also includes comments on the availability and quality of the data used for rate development.
- iii. The rate certification and attached report thoroughly describe any material adjustments, and the basis for the adjustments, that are made to the data. Please see Section III and IV of this report for more details.

3. Projected Benefit Costs

A. Rate Development Standards

- i. The final capitation rates shown in Exhibit A are based only upon services described in 42 CFR §438.3(c)(1)(ii) and 438.3(e).
- ii. Each projected benefit cost trend assumption is reasonable and developed in accordance with generally accepted actuarial principles and practices using actual experience of the Medicaid population and consideration of other factors that may affect projected benefit cost trends through the rating period.
- iii. Please refer to Section III of this report for the details related to the treatment of in lieu of services.

New Hampshire's Substance Use Disorder Treatment and Recovery Access 1115 Demonstration Waiver allows for the coverage of substance use disorder (SUD) services provided in an IMD. The SMI/SED 1115 waiver amendment to the Substance Use Disorder Treatment and Recovery Access (SUD-TRA) 1115 demonstration will allow DHHS to receive federal matching funds for these Institution for Mental Disease (IMD) services.

B. Appropriate Documentation

- i. The various Appendices and Exhibits included in this report document the final projected benefit costs by relevant level of detail and is consistent with how the State makes payments to the plans.
- ii. Please refer to Section III of this report for the methodology and assumptions used to project contract period benefit costs. Section II of the report highlights key methodological changes since the previous rate development.
- iii. The rate certification includes a section on projected benefit cost trends in compliance with 42 CFR §438.7(b)(2). See Step 2 of Section III for details related to the development of projected benefit cost trends.
- iv. This certification does not include additional services deemed by the state to be necessary to comply with the parity standards of the Mental Health Parity and Addiction Equity Act.
- v. Please refer to Section III of this report for the details related to the treatment of in lieu of services.
- vi. Section III includes a description of how retrospective eligibility periods are accounted for in rate development.
- vii. Section I documents the impact on projected costs for all material changes to covered benefits or services since the last rate certification.
- viii. The rate certification includes an estimated impact of each covered benefit or service change on the amount of projected benefit costs and a description of the data, assumptions, and methodologies used to develop the adjustment for each change related to covered benefits or services.

4. Special Contract Provisions Related to Payment

A. Incentive Arrangements

i. Rate Development Standards

The SFY 2023 capitation rate methodology does include an incentive arrangement. Total payments under the incentive arrangement will not exceed 105 percent of the approved capitation payments under the contract that are attributable to the enrollees or services covered by the incentive arrangements. Please refer to the Withhold and Incentive Program policy included in the MCO contract for more details.

ii. Appropriate Documentation

The SFY 2023 capitation rate methodology does include an incentive arrangement. Total payments under the incentive arrangement will not exceed 105 percent of the approved capitation payments under the contract that are attributable to the enrollees or services covered by the incentive arrangements. Please refer to the Withhold and Incentive Program policy included in the MCO contract for more details.

B. Withhold Arrangements

i. Rate Development Standards

The SFY 2023 capitation rate methodology does include a withhold arrangement. Please refer to the Withhold and Incentive Program policy included in the MCO contract for more details.

ii. Appropriate Documentation

The SFY 2023 capitation rate methodology does include a withhold arrangement. Please refer to the Withhold and Incentive Program policy included in the MCO contract for more details.

C. Risk Sharing Mechanism

i. Rate Development Standards

Section III of the report documents the High-Cost Patient Stop-Loss Adjustment, minimum / maximum MLR provisions, and the Boston Children's Hospital risk pool.

ii. Appropriate Documentation

Section III of the report documents the High-Cost Patient Stop-Loss Adjustment, minimum / maximum MLR provisions, and the Boston Children's Hospital risk pool.

D. State Directed Payments

i. Rate Development Standards

Section IV of the report documents the directed payments and minimum fee schedule items and are pending CMS approval. There are no additional directed payments in the program that are not addressed in the certification. The directed payment are in compliance with 42 C.F.R. § 438.6(c),

ii. Appropriate Documentation

Please review tables 1 to 3 below for the requested information.

Table 1
New Hampshire Department of Health and Human Services
State Directed Payments

Control name of the state directed payment	Type of payment	Brief description	Is the payment included as a rate adjustment or separate payment term?
CMHC Directed Payment	Medicaid-specific delivery system reform or performance improvement initiative	Payments are made to CMHCs who achieve various quality measures.	Separate payment term
Hospital Directed Payment	Uniform percentage increase for network providers that provide a particular service under the contract	Payment made to critical access hospitals (CAH) tied to actual hospital services provided; the number of inpatient discharges and outpatient visits.	Separate payment term
DME Minimum Fee Schedule	Minimum fee schedule	The minimum fee schedule for DME services is set at 80% of the current Medicaid fee schedule.	Rate adjustment
Designated Receiving Facility Minimum Fee Schedule	Minimum Fee Schedule	The minimum fee schedule for DRF services is set at the current Medicaid fee schedule.	Rate adjustment
Community Residential Minimum Fee Schedule	Minimum fee schedule	The maintenance of effort (MOE) requirement is incorporated into the MCM program effective 7/1/2021. There are concerns that the return of this risk on the capitation rates in conjunction with the emergency department boarding crisis will disincentivize the CMHCs to support capacity expansion. Therefore, reimbursement for community residential services is moved to a directed payment.	Rate adjustment
New Hampshire Hospital and Hampstead Hospitals	Minimum fee schedule	The minimum fee schedule for admissions at these hospitals is set at \$1,506 per day for SFY 2023.	Rate adjustment

Table 2
New Hampshire Department of Health and Human Services
State Directed Payment – Rate Adjustments

Control name of the state directed payment	Rate cells affected	Impact	Description of the adjustment	Confirmation the rates are consistent with the preprint	For maximum fee schedules, provide the information requested
DME Minimum Fee Schedule	All rate cells	Please See Appendices B1 and B2 for the reimbursement factor adjustment related to DME services	Implemented as a reimbursement adjustment to bring the base encounter data in line with the minimum fee schedule.	The directed payment is consistent with the pre-print.	Not a maximum fee schedule
Designated Receiving Facility Minimum Fee Schedule	All rate cells	Please see Exhibit A	Implemented as a reimbursement adjustment to the hospital inpatient psychiatric admission kick payment for Peer Group 06.	Minimum fee schedule set equal to the Medicaid fee schedule; therefore, no pre-print is required.	Not a maximum fee schedule
Community Residential Minimum Fee Schedule	All rate cells	Please see Appendix D	Adjusted historical expenditure to account for new fee schedule minimum.	Minimum fee schedule set equal to the Medicaid fee schedule; therefore, no pre-print is required.	Not a maximum fee schedule
New Hampshire Hospital and Hampstead Hospitals	All rate cells	Please see Appendix D	Adjusted historical expenditure to account for new fee schedule minimum.	Minimum fee schedule set equal to the Medicaid fee schedule; therefore, no pre-print is required.	Not a maximum fee schedule

Table 3 New Hampshire Department of Health and Human Services State Directed Payment – Separate Payments					
Control name of the state directed payment	Aggregate amount included in the certification	Statement that the actuary is certifying the separate payment term	The magnitude on a PMPM basis	Confirmation the rate development is consistent with the preprint	Confirmation that the state and actuary will submit required documentation at the end of the rating period (as applicable)
CMHC Directed Payment	\$5,000,000	We certify the amount of the separate payment term disclosed in the certification.	Please refer to Appendix E for the PMPM impact by rate cell.	The directed payment is consistent with the pre-print.	The state and its actuary will submit required documentation at the end of the rating period.
Hospital Directed Payment	\$33,000,000	We certify the amount of the separate payment term disclosed in the certification.	Please refer to Appendix E for the PMPM impact by rate cell.	The directed payment is consistent with the pre-print.	The state and its actuary will submit required documentation at the end of the rating period.

E. Pass-Through Payments

i. Rate Development Standards

The SFY 2023 capitation rate methodology does not include any pass-through payments.

ii. Appropriate Documentation

The SFY 2023 capitation rate methodology does not include any pass-through payments.

5. Projected Non-Benefit Costs

A. Rate Development Standards

- i. The development of the non-benefit component of the SFY 2023 rates is compliant with 42 CFR §438.5(e) and includes reasonable, appropriate, and attainable expenses related to MCO administration, taxes, licensing and regulatory fees, contribution to reserves, risk margin, and cost of capital.
- ii. The non-benefit costs included in the SFY 2023 capitation rates are developed as a target PMPM and applied using percentages of projected benefit costs that vary by rate cell grouping.

B. Appropriate Documentation

- i. Please refer to Section IV of this report for a detailed description of the data and methodology used to develop of the projected non-benefit costs included in the capitation rates. The report includes a description of changes made since the last rate development.
- ii. The projected non-benefit costs include appropriate consideration for administrative costs, taxes, licensing and regulatory fees, other assessments and fees, contribution to reserves, risk margin, and cost of capital.
- iii. MCOs provided non-benefit cost data as part of the data validation and reconciliation to financial statements efforts. We reviewed this information for general reasonableness and to understand the operations of the MCOs. The targeted PMPM administrative allowance was negotiated with the MCOs and compared to national benchmarks adjusted for New Hampshire's contractual requirements.

6. Risk Adjustment and Acuity Adjustment

A. Rate Development Standards

- i. The SFY 2023 capitation rates will use the risk adjustment arrangement described in Section II of this report.
- ii. The risk adjustment arrangement described in Section II has been developed in accordance with generally accepted actuarial principles and practices and is budget neutral to the state in total.
- iii. Section III of this report documents the trend adjustment for opioid addiction population treatment costs to reflect the increased acuity of the covered population Section III also documents the acuity adjustment applied for the Medically Frail population.

Sections II and III of this report document preliminary and retroactive acuity adjustments related to the end of the PHE and related enrollment levels. Due to the uncertainty surrounding the unwind process following the end of the PHE, DHHS will implement a non-budget neutral retrospective acuity adjustment. This adjustment will capture the relative acuity of the actual individuals enrolled during SFY 2023 during the continuing PHE and through the redetermination process. The preliminary acuity factor included in this report will be updated retroactively to account for the actual PHE end date, the redetermination process, and relative acuity levels.

B. Appropriate Documentation

- i. The SFY 2023 capitation rates will use the risk adjustment arrangement described in Section II of this report.
- ii. The SFY 2023 capitation rate methodology does not include any retrospective risk adjustment components.
- iii. Proposed changes to the risk adjustment methodology will be documented in a separate correspondence. The risk adjustment process is and will remain budget neutral to the state in total.
- iv. Please see Sections II and III of this report for the requested documentation regarding the trend adjustment for opioid addiction population treatment costs to reflect the increased acuity of the covered population, the acuity adjustment for the Medically Frail population, and the preliminary and retroactive acuity adjustment.

SECTION II. MEDICAID MANAGED CARE RATES WITH LONG-TERM SERVICES AND SUPPORTS

This certification does not include rates for managed long-term services and supports (MLTSS).

SECTION III. NEW ADULT GROUP CAPITATION RATES

This section includes the documentation for the rates for the new adult group under 1902(a)(10)(A)(i)(VIII) of the Social Security Act.

1. Data

- A. A detailed description of the data can be found in Sections II and III of this report.
- B. The Medically Frail and Non-Medically Frail populations were covered starting in September 2014. The SFY 2023 rates are based on CY 2018 and CY 2019 encounter data for the Medically Frail population and March 2019 to December 2019 encounter data for the Non-Medically Frail population, which is the most recent data available for these populations.

2. Projected Benefit Costs

- A. Our report includes a thorough discussion of issues related to the projected benefit costs for the new adult group:
 - i. We relied on data for the Medically Frail and Non-Medically Frail populations available from previous rating periods. The rates are based on the data time periods noted above. The base data, methodology, and assumptions used to calculate the SFY 2023 capitation rates is generally similar to the methodology used to calculate the SFY 2022 capitation rates.
 - ii. Not applicable – the new adult group was covered in previous rating periods.
 - iii. We made an adjustment for acuity to reflect of the impact of the COVID-19 pandemic and PHE and another adjustment to reflect observed acuity differences between the base period data and emerging experience for the Medically Frail population. We did not make any adjustments for pent-up demand, adverse selection, and demographic differences to either Medically Frail or Non-Medically Frail populations.
- B. Table 2 in Section I of the report quantifies the impact of program changes implemented for SFY 2023.

3. Projected Non-Benefit Costs

- A. The methodology used to develop the SFY 2023 non-benefit costs is consistent with those used to develop the SFY 2022 non-benefits costs. We increased the non-benefit cost allowance for all rate cells to reflect new MCO contract requirement.
- B. Please refer to Section IV of this report for more details on the development of the non-benefit costs for the Medically Frail and Non-Medically Frail populations and how these assumptions compare to the Standard Medicaid population.

4. Final Certified Rates

- A. Please refer to Tables 1 and 2 in Section I of the report for a comparison of the SFY 2023 capitation rates to the SFY 2022 capitation rates.

5. Risk Mitigation Strategy

- A. The SFY 2023 capitation rate for the new adult group will use the same risk adjustment, minimum loss ratio requirement with remittance, High-Cost Patient Stop-Loss arrangement, and Boston Children's Hospital risk pool, as the Standard Medicaid population, as described in Section II of this report. Moreover, DHHS is implementing a minimum and maximum MLR provision for the SFY 2023 contract period to address the uncertainty of future medical costs due to the COVID-19 pandemic and the public health emergency.

- B. DHHS is implementing a minimum and maximum MLR provision for the SFY 2023 contract period to address the uncertainty of future medical costs due to the COVID-19 pandemic and the public health emergency. Refer to Section II of the report for the detailed provisions of the MLR provisions.

EXHIBIT I

State of New Hampshire Department of Health and Human Services Medicaid Care Management Program Rate Cell Assignment Logic

State of New Hampshire Department of Health and Human Services
SFY 2023 Capitation Rate Development for Medicaid Care Management Program

May 20, 2022

This report assumes that the reader is familiar with the State of New Hampshire's Medicaid program, its benefits, and rate setting principles. This report was prepared solely to provide assistance to DHHS to set SFY 2023 capitation rates for the Medicaid Care Management program. It may not be appropriate for other purposes. Milliman does not intend to benefit and assumes no duty or liability to other parties who receive this work. This material should only be reviewed in its entirety.



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January 16, 2020

Mr. Henry D. Lipman, FACHE
Medicaid Director
New Hampshire Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301

Re: SFY 2021 Rate Cell Recommendation

Dear Henry:

At your request, we are providing the New Hampshire Department of Health and Human Services (DHHS) with a recommendation for a rate cell structure for the Medicaid Care Management (MCM) program for contract year SFY 2021 and beyond.

RATE CELL ASSIGNMENT LOGIC

The proposed structure has two major changes from the SFY 2020 MCM rate cell structure.

1. The behavioral health rate cells will contain both Standard Medicaid and Granite Advantage individuals. We moved the behavioral health rate cells to first priority in the hierarchy, above the expansion population rate cells. We expect this change will help facilitate the contracting arrangement between community mental health centers (CMHCs) and managed care organizations (MCOs) for all individuals with enhanced behavioral health needs. We also renamed the "Medicaid – Only" rate cells to "Non-Dual" for clarity.
2. The new rate cell for the Children's Health Insurance Program (CHIP) population will allow for easier Federal Medical Assistance Percentages (FMAP) reporting and claiming by DHS.

Table 1 below shows the rate cell definitions for the Standard Medicaid and Granite Advantage Health Care Program (GAHCP) populations, which includes rate cell assignment using the following hierarchy:

- Behavioral health rate cells
- Expansion population rate cells
- All other rate cells



Table 1
New Hampshire Department of Health and Human Services
Medicaid Care Management Program
SFY 2021 Rate Cell Definitions

Rate Cell	Age / Gender Categories	Eligibility Category	Dual Status Code*	Other Criteria
Hierarchy: First Priority				
Severe / Persistent Mental Illness – Dual Eligibles	All	Any except MGIA or MGIM	Y	CMHC certification code U1
Severe / Persistent Mental Illness – Non-Dual Eligibles	All	Any	N	CMHC certification code U1
Severe Mental Illness –Dual Eligibles	All	Any except MGIA or MGIM	Y	CMHC certification code U2
Severe Mental Illness – Non-Dual Eligibles	All	Any	N	CMHC certification code U2
Low Utilizer – Dual Eligibles	All	Any except MGIA or MGIM	Y	CMHC certification code U5
Low Utilizer – Non-Dual Eligibles	All	Any	N	CMHC certification code U5
Serious Emotionally Disturbed Child	All	Any	All	CMHC certification code U6 or U7
Hierarchy: Second Priority				
Granite Advantage – Medically Frail	All	MGIM	All	
Granite Advantage – Non-Medically Frail	All	MGIA	All	
Hierarchy: Third Priority				
Low Income Children and Adults	Separate rate cells for the following age groups: 0 to 11 months** 1 to 18 19 +	MAEM, MAEN, MAER, MAES, MAEU, MAFR, MAFU, MCER, MCEU, MCFR, MCFU, MCN, MCRA, MCRF, ME12, ME4, MMER, MMEU, MMFR, MMFU, MMRA, MMRF, MP C, MP P, MPQC, MPQP, MCIS, MGIC, MGIF, MGIN, MGIP, MGIW	N	
CHIP	All	MCIE, MGIE	All	
Foster Care / Adoption	All	MCP1, MCP2, MCPI, MCPN, MMP2, MMPN	N	
Severely Disabled Children	All	MAAB, MCAB, MCDC, MCHC, MMAB, MMDC, MMHC, MSPB, MSPP	N	Age <19 for category codes MAAB, MCAB, MMAB, MSPB, MSPP
Disabled Adults	Separate rate cells for the following age groups: 19 to 64 65+	MAAA, MAAB, MAAD, MBCC, MCAA, MCAB, MCAD, MEAD, MAAA, MMAB, MMAD, MSPB, MSPP	N	Age 19+ for category code MAAB, MCAB, MMAB, MSPB, MSPP (includes 18 year olds in other eligibility categories)
Dual Eligibles	All	Any	Y	
Kick Payments				
Newborn Kick Payment		Any	N	First two months of life
Neonatal Abstinence Syndrome Newborn Kick Payment		Any	N	Same as newborn criteria with diagnosis code requirement
Maternity Kick Payment		Any	N	Service description below

* Dual eligibility status determined by Dual Status indicator “Y” and the presence of a Medicaid Eligibility Category code and excludes SLMB and QMB Only.

** The Low Income Children and Adults – 0 to 11 Months rate cell also includes the first month of life (excluding the birth month) for babies born prior to Medicaid enrollment (and, therefore, excluded from the newborn kick payment).

The neonatal abstinence syndrome (NAS) kick payment is provided for babies who have a diagnosis code of P96.1 (ICD10) or 779.5 (ICD9) in their birth month on an inpatient claim. The regular newborn kick payment is provided for all other newborns.

The maternity kick payment includes the following services:

- Hospital inpatient services with MS-DRG codes of 765 to 768, 774 to 775
- Hospital outpatient and professional services with a primary diagnosis code of:

ICD9: v27.0 - v27.9, 650, and 651.01 - 669.92 (with the 5th digit being 1 or 2)
ICD10: O60 - O82, and Z37

This includes delivery related anesthesia services (CPT-4 codes 00850, 00857, 00946, 00955, 01960, 01961, 01967, 01968), as long as a relevant primary diagnosis code is present.

- Delivery and post-partum care services (CPT-4 codes 59400, 59409, 59410, 59430, 59510, 59514, 59515, 59610, 59612, 59614, 59618, 59620, 59622)

The maternity kick payment includes all facility and professional claims associated with deliveries. Prenatal and postpartum services are not included in the maternity kick payment.

CAVEATS AND LIMITATIONS ON USE

This letter is designed to assist DHHS with reviewing rate cell assignment logic for the SFY 2021 MCM capitation rates. This information may not be appropriate, and should not be used, for other purposes.

The information contained in this letter has been prepared for DHHS. To the extent that the information contained in this letter is provided to third parties, this letter should be distributed in its entirety. Any user of this information must possess a certain level of expertise in actuarial science and healthcare modeling, so as not to misinterpret the information presented.

Milliman makes no representations or warranties regarding the contents of this letter to third parties. Likewise, third parties are instructed that they are to place no reliance upon this letter prepared for DHHS by Milliman that would result in the creation of any duty or liability under any theory of law by Milliman or its employees to third parties. Other parties receiving this letter must rely upon their own experts in drawing conclusions about the information presented.

Guidelines issued by the American Academy of Actuaries require actuaries to include their professional qualifications in all actuarial communications. I am a member of the American Academy of Actuaries, and I meet the qualification standards for performing the analyses in this letter.

The terms of Milliman's contract with DHHS effective July 1, 2017 apply to this letter and its use.





Mr. Henry Lipman
NH Department of Health and Human Services
January 16, 2020
Page 4 of 4

Henry, please call me at 262 784 2250 if you have any questions.

Sincerely,

A handwritten signature in black ink that reads "Mathieu Doucet".

Mathieu Doucet, FSA, MAAA
Consulting Actuary

MD/laa

EXHIBIT K

State of New Hampshire Department of Health and Human Services Medicaid Care Management Program SFY 2023 Actuarial Certification

State of New Hampshire Department of Health and Human Services
SFY 2023 Capitation Rate Development for Medicaid Care Management Program

May 20, 2022

This report assumes that the reader is familiar with the State of New Hampshire's Medicaid program, its benefits, and rate setting principles. This report was prepared solely to provide assistance to DHHS to set SFY 2023 capitation rates for the Medicaid Care Management program. It may not be appropriate for other purposes. Milliman does not intend to benefit and assumes no duty or liability to other parties who receive this work. This material should only be reviewed in its entirety.



May 20, 2022

**New Hampshire Department of Health and Human Services
Capitated Contracts Ratesetting
Actuarial Certification
SFY 2023 Medicaid Care Management Program Capitation Rates**

I, John D. Meerschaert, am associated with the firm of Milliman, Inc., am a member of the American Academy of Actuaries, and meet its Qualification Standards for Statements of Actuarial Opinion. I was retained by the New Hampshire Department of Health and Human Services (DHHS) to perform an actuarial certification of the Medicaid Care Management program capitation rates for SFY 2023 for filing with the Centers for Medicare and Medicaid Services (CMS). I reviewed the calculated capitation rates and am familiar with the relevant requirements of 42 CFR 438; the CMS "Attachment A, PAHP, PIHP and MCO Contracts Financial Review Documentation for At-risk Capitated Contracts Ratesetting;" the 2022 to 2023 Medicaid Managed Care Rate Development Guide; and Actuarial Standard of Practice (ASOP) 49.

I examined the actuarial assumptions and actuarial methods used in setting the capitation rates for SFY 2023. To the best of my information, knowledge and belief, the capitation rates offered by DHHS are in compliance with the relevant requirements of 42 § CFR 438.3(c), 438.3(e), 438.4, 438.5, 438.6, and 438.7. The attached actuarial report describes the capitation rate setting methodology.

In my opinion, the capitation rates are actuarially sound, as defined in Actuarial Standard of Practice (ASOP) 49, were developed in accordance with generally accepted actuarial principles and practices, and are appropriate for the populations to be covered and the services to be furnished under the contract.

In making my opinion, I relied upon the accuracy of the underlying claims and eligibility data records prepared by DHHS, as well as encounter data, financial data summaries, and other information prepared by the participating MCOs. A copy of the reliance letter received from DHHS is attached and constitutes part of this opinion. I did not audit the data and calculations, but did review them for reasonableness and consistency and did not find material defects. In other respects, my examination included such review of the underlying assumptions and methods used and such tests of the calculations as I considered necessary.

The capitation rates developed may not be appropriate for any specific MCO. Any MCO will need to review the rates in relation to the benefits provided. Each MCO should compare the rates with its own experience, expenses, capital and surplus, and profit requirements prior to agreeing to contract with DHHS. The MCO may require rates above, equal to, or below the actuarially sound capitation rates.

Actuarial methods, considerations, and analyses used in forming my opinion conform to the appropriate Standards of Practice as promulgated from time-to-time by the Actuarial Standards Board, whose standards form the basis of this Statement of Opinion.

It should be emphasized that capitation rates are a projection of future costs based on a set of assumptions. Actual costs will be dependent on each contracted MCO's situation and experience.

This Opinion assumes the reader is familiar with the New Hampshire Medicaid program, Medicaid eligibility rules, and actuarial rating techniques. The Opinion is intended for the State of New Hampshire and the Centers for Medicare and Medicaid Services and should not be relied on by other parties. The reader should be advised by actuaries or other professionals competent in the area of actuarial rate projections of the type in this Opinion, so as to properly interpret the projection results.

John D. Meerschaert
Member, American Academy of Actuaries
May 20, 2022

RELIANCE LETTER

State of New Hampshire Department of Health and Human Services
SFY 2023 Capitation Rate Development for Medicaid Care Management Program

May 20, 2022

This report assumes that the reader is familiar with the State of New Hampshire's Medicaid program, its benefits, and rate setting principles. This report was prepared solely to provide assistance to DHHS to set SFY 2023 capitation rates for the Medicaid Care Management program. It may not be appropriate for other purposes. Milliman does not intend to benefit and assumes no duty or liability to other parties who receive this work. This material should only be reviewed in its entirety.



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF MEDICAID SERVICES

Lori A. Shibinette
Commissioner

Henry D. Lipman
Director

129 PLEASANT STREET, CONCORD, NH 03301
1-844-ASK-DHHS (1-844-275-3447)
Fax: 603-271-8431 TDD Access: 1-800-735-2964
www.dhhs.nh.gov

May 19, 2022

Mr. John D. Meerschaert, F.S.A.
Milliman, Inc.
15800 Bluemound Road, Suite 100
Brookfield, WI 53005

Re: *Actuarial Certification of SFY 2023 Capitation Rates for New Hampshire Medicaid Care Management Program Capitation Rates*

Dear Mr. Meerschaert:

I, Henry Lipman, Medicaid Director for the New Hampshire Department of Health and Human Services, hereby affirm that the data prepared and submitted to Milliman, Inc. (Milliman) for the purpose of certifying the SFY 2023 New Hampshire Medicaid Care Management (MCM) program capitation rates were prepared under my direction, and to the best of my knowledge and belief are accurate and complete. This data includes:

1. Computer files supporting the SFY 2023 capitation rate calculation, including, but not limited to:
 - Technical Definition for NH MCM Data Book Services Scope V3.doc
 - Reference Files.xls
 - NH Provider Type Codes and Descriptions.xls
 - Eligibility Category Detail.xlsx
 - Medicaid CAHs.xls
 - OP-RHC-FQHC Reimbursement Process as of 2-5-13.doc
 - Provider Payment Algorithms2011.docx
 - QA LOG Care management 111412012 w corrected date at top.xlsx
 - Medicaid Extract and Claims Information.doc
 - NH+Medicaid+rebranded+detailed+FQHC+Provider+Manual+2-1-18.pdf
 - Newborn Reporting Procedures Guidance Statement 20121130.doc
 - NH Care Management Contract Exhibit A 031612.pdf
 - NH MCM Rate Cells Definition 2014-02-20.xls
 - Community Mental Health Agreement 1.22.15.pdf
 - Fiscal Impact Change of Scope & LAL SFY19.xlsx
 - FY20_21 Provider Rate Increases by Senate Bill and Milliman Exh 1.xlsx
 - NHM PDL 20220328.xlsx
 - PG02+PG09 Provider Numbers.xlsx
 - DME MP for Analysis 09_01_2020.xlsx
 - Initial Estimate Funding ALL MCOs (Pmts 0722-0623).xlsx
 - Neuro Psych (96131-96139) Utilization 2021.10.05.xlsx

- Rate Increase Impacts-Peristeen A4459 & catheters.xlsx
- Metric_Quantity_Request with MMIS Units.xlsx

2. Fee schedule files:

1) CY/SFY/FFY 2018 fee schedules:

- 2018 DRG Rate Sheet.xls
- SFY 18 Hosp IP & OP.xls
- 2018 NH Fee Schedule Covered Procedures 02232018.xlsx
- 2018 NH Fee Schedule Manually Priced Procedures 02232018.xlsx
- 2018 Medicaid Rates for Diagnostic and Physician Rates-20190108.xlsx
- 2018 ASC Fee Schedule.xls
- 2018 Hospice Rates worksheet-Final.xlsx
- FQHC Based Rate SFY 2018.xls
- SFY18 RATE CHANGE LOG.xlsx
- 2019 FISCAL IMPACT - Hospice Rates FINAL.xlsx

2) CY/SFY/FFY 2019 fee schedules:

- 2019 DRG Rate Sheet.xls
- Fee Schedule 1-8-19.xlsx
- Hospice Rates PDF File for Providers - Eff 10_1_2018.pdf
- Report of Covered Procedures - 20190110.xlsx
- Report of Manually Priced Procedures - 20190110.xlsx

3) CY/SFY/FFY 2023 fee schedules:

- SFY23 RATE CHANGE LOG.xlsx
- FFY22 DRG Rate Sheet .xlsx
- Covered proedures Fee schedule as of 01012021.xlsx
- Manual Priced Procedures 01012021.xlsx
- 2022 Hospice Rates.xlsx
- ASC Rates_20220125_Fee Sched_1.26.22.xlsx
- J Code CSR Attachment - 22020405.xlsx

3. January 2015 – October 2021 Medicaid eligibility data and claims from MMIS and MCO encounter files, including:

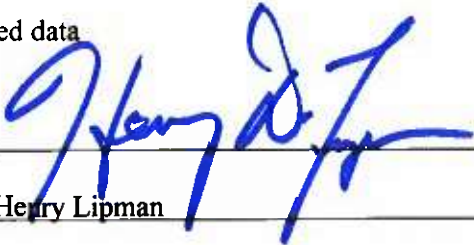
- Biweekly claims data (facility, professional and drug).
- Biweekly enrollment data
- Provider reference files.
- Supplemental eligibility/ineligibility files
- Additional FFS Hospice claims:
 - SFY 2018 Hospice data for Milliman.xlsx
 - 2020_3_4_Hospice_SFY2019 Data for Milliman.xlsx

Mr. John D. Meerschaert, F.S.A.

May 19, 2022

Page 3 of 3

- Additional FFS CTS claims:
 - CTS FFS Encounter Data.csv
 - CTS PAP Encounter Data.csv
 - Additional BDAS claims:
 - tblWITS_SFY18_SvcInMedicaidSpan.xlsx
 - Plan Selection Period info:
 - Fee for Service Spans for Andrew 1-1-2018 to current.xls
 - IMD Claims:
 - NHH_Medicaid_2016-2019.xlsx
4. Other supporting documentation, including:
- MCO contract
 - Financial Reconciliation data from participating health plans
 - MCO administrative cost survey results
 - ATECH services details
 - Behavioral Health Crisis Treatment Center (BHCTC) implementation and termination schedule
 - DRF identification process
 - Hospital directed payment details
 - Community Residential Service expansion details
 - Mobile Crisis Response Team and Emergency Services identification process
 - Home and Community Based Services directed payment details
 - Genetic Testing for Hospitals details
 - Fiscal impact and appropriation amounts for various legislative provisions
 - Other computer files
 - Conversations concerning supplied data



Henry Lipman

Medicaid Director

May 19, 2022

For more information about Milliman,
please visit us at:

milliman.com



Milliman is among the world's largest providers of actuarial and related products and services. The firm has consulting practices in life insurance and financial services, property & casualty insurance, healthcare, and employee benefits. Founded in 1947, Milliman is an independent firm with offices in major cities around the globe.

milliman.com

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Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Low Income Children - Age 0-11 Months

Member Months: 47,865

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$880,490	247	1,076	61.9	269.8	\$3,564.74	\$18.40
Surgical	261,151	32	194	8.0	48.6	8,160.96	5.46
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Well Newborn	528	1	2	0.3	0.5	527.60	0.01
Psychiatric	0	0	0	0.0	0.0	0.00	0.00
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$1,142,168	280	1,272	70.2	318.9	\$4,079.17	\$23.86
Hospital Outpatient							
Emergency Room	\$863,979		3,505		878.7	\$246.50	\$18.05
Surgery	200,328		214		53.7	936.11	4.19
Radiology	180,149		823		206.3	218.89	3.76
Pathology	50,106		4,207		1,054.7	11.91	1.05
Pharmacy	65,217		11,416		2,862.1	5.71	1.36
Cardiovascular	16,215		141		35.3	115.00	0.34
PT/OT/ST	67,417		2,218		556.1	30.40	1.41
Psychiatric	0		0		0.0	0.00	0.00
Substance Abuse	0		0		0.0	0.00	0.00
Other	531,028		11,213		2,811.2	47.36	11.09
	\$1,974,440		33,737		8,458.1	\$58.52	\$41.25
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$12,467		41		10.3	\$304.07	\$0.26
Office Visits	848,053		15,630		3,918.5	54.26	17.72
Preventive Medicine	922,037		47,180		11,828.3	19.54	19.26
Maternity	0		0		0.0	0.00	0.00
Certified Midwife	2,017		56		14.0	36.01	0.04
PT/OT/ST	24,467		931		233.4	26.28	0.51
Psychiatric and Substance Abuse	423		11		2.8	38.43	0.01
Radiology and Pathology	68,027		5,039		1,263.3	13.50	1.42
Home Health and Private Duty Nursing	276,125		8,409		2,108.2	32.84	5.77
Ambulance	85,229		5,021		1,258.8	16.97	1.78
Non-Emergency Transportation	74,717		1,563		391.9	47.80	1.56
Opioid Treatment Program	0		0		0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	902,636		6,628		1,661.7	136.19	18.86
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	0		0		0.0	0.00	0.00
Durable Medical Equipment	1,330,922		537,249		134,691.7	2.48	27.81
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	1,219,659		39,044		9,788.6	31.24	25.48
	\$5,766,780		666,802		167,171.5	\$8.65	\$120.48
Prescription Drugs							
Generic Scripts	\$160,832		11,904		2,984.4	\$13.51	\$3.36
Single-Source Brand	158,282		915		229.4	172.99	3.31
Multi-Source Brand	20,343		156		39.1	130.41	0.43
Specialty	592,077		146		36.6	4,055.32	12.37
Hepatitis C	0		0		0.0	0.00	0.00
Other	14		3		0.8	4.64	0.00
	\$931,547		13,124		3,290.3	\$70.98	\$19.46
Community Mental Health Center							
Case Management	\$0		0		0.0	\$0.00	\$0.00
Long Term Support Service	0		0		0.0	0.00	0.00
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	0		0		0.0	0.00	0.00
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	0		0		0.0	0.00	0.00
Emergency Service 24/7	0		0		0.0	0.00	0.00
APRTP	0		0		0.0	0.00	0.00
Supported Employment Services	0		0		0.0	0.00	0.00
Other	0		0		0.0	0.00	0.00
	\$0		0		0.0	\$0.00	\$0.00
All Services	\$9,814,935	280	714,935	70.2	179,238.7	\$13.73	\$205.06

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Low Income Children - Age 1-18 Years

Member Months: 729,792

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$1,749,195	454	1,963	7.5	32.3	\$3,852.85	\$2.40
Surgical	1,062,053	128	640	2.1	10.5	8,297.29	1.46
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	30,217	8	25	0.1	0.4	3,777.17	0.04
Well Newborn	2,149	4	7	0.1	0.1	537.20	0.00
Psychiatric	1,826,403	327	1,982	5.4	32.6	5,585.33	2.50
Alcohol and Drug Abuse	19,219	4	43	0.1	0.7	4,804.73	0.03
Other	0	0	0	0.0	0.0	0.00	0.00
	\$4,689,236	925	4,660	15.2	76.6	\$5,069.44	\$6.43
Hospital Outpatient							
Emergency Room	\$7,631,451		22,465		369.4	\$339.70	\$10.46
Surgery	2,602,307		2,683		44.1	969.92	3.57
Radiology	2,487,659		10,429		171.5	238.53	3.41
Pathology	913,166		81,865		1,346.1	11.15	1.25
Pharmacy	1,700,893		205,474		3,378.6	8.28	2.33
Cardiovascular	66,701		812		13.4	82.14	0.09
PT/OT/ST	858,692		26,719		439.3	32.14	1.18
Psychiatric	202,104		841		13.8	240.31	0.28
Substance Abuse	898		8		0.1	112.29	0.00
Other	4,081,418		152,813		2,512.7	26.71	5.59
	\$20,545,290		504,109		8,289.1	\$40.76	\$28.15
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$266,864		845		13.9	\$315.82	\$0.37
Office Visits	6,942,743		124,357		2,044.8	55.83	9.51
Preventive Medicine	2,772,104		110,533		1,817.5	25.08	3.80
Maternity	59,952		268		4.4	223.65	0.08
Certified Midwife	1,004		37		0.6	27.12	0.00
PT/OT/ST	2,258,091		70,742		1,163.2	31.92	3.09
Psychiatric and Substance Abuse	3,582,491		92,543		1,521.7	38.71	4.91
Radiology and Pathology	869,194		66,476		1,093.1	13.08	1.19
Home Health and Private Duty Nursing	1,889,624		149,301		2,455.0	12.66	2.59
Ambulance	467,793		31,973		525.7	14.63	0.64
Non-Emergency Transportation	912,139		18,826		309.6	48.45	1.25
Opioid Treatment Program	307		30		0.5	10.22	0.00
Federally Qualified and Rural Health Clinics	5,549,533		39,875		655.7	139.17	7.60
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	563		24		0.4	23.47	0.00
Durable Medical Equipment	3,261,882		1,339,259		22,021.5	2.44	4.47
Applied Behavioral Analysis	2,836,623		198,849		3,269.7	14.27	3.89
Other	6,183,633		439,548		7,227.5	14.07	8.47
	\$37,854,539		2,683,486		44,124.6	\$14.11	\$51.87
Prescription Drugs							
Generic Scripts	\$6,884,254		225,905		3,714.6	\$30.47	\$9.43
Single-Source Brand	6,245,400		30,643		503.9	203.81	8.56
Multi-Source Brand	1,790,352		8,056		132.5	222.24	2.45
Specialty	8,588,935		1,489		24.5	5,768.26	11.77
Hepatitis C	0		0		0.0	0.00	0.00
Other	1,810		66		1.1	27.43	0.00
	\$23,510,751		266,159		4,376.5	\$88.33	\$32.22
Community Mental Health Center							
Case Management	\$644,294		1,835		30.2	\$351.11	\$0.88
Long Term Support Service	331,450		5,552		91.3	59.70	0.45
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	250,487		3,024		49.7	82.83	0.34
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	80		3		0.0	26.64	0.00
Emergency Service 24/7	94		4		0.1	23.46	0.00
APRTP	10,431		19		0.3	549.00	0.01
Supported Employment Services	0		0		0.0	0.00	0.00
Other	436,114		3,241		53.3	134.56	0.60
	\$1,672,950		13,678		224.9	\$122.31	\$2.29
All Services	\$88,272,766	925	3,472,092	15.2	57,091.7	\$25.42	\$120.96

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Low Income Adults

Member Months: 124,392

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$1,672,375	488	2,177	47.1	210.0	\$3,427.00	\$13.44
Surgical	1,383,386	179	1,232	17.3	118.9	7,728.41	11.12
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	284,490	118	317	11.4	30.6	2,410.93	2.29
Well Newborn	20,402	32	70	3.1	6.8	637.57	0.16
Psychiatric	396,213	77	545	7.4	52.6	5,145.62	3.19
Alcohol and Drug Abuse	163,662	71	532	6.8	51.3	2,305.09	1.32
Other	0	0	0	0.0	0.0	0.00	0.00
	\$3,920,528	965	4,873	93.1	470.1	\$4,062.72	\$31.52
Hospital Outpatient							
Emergency Room	\$4,612,049		8,044		776.0	\$573.35	\$37.08
Surgery	1,348,164		1,545		149.0	872.60	10.84
Radiology	1,916,824		10,028		967.4	191.15	15.41
Pathology	882,166		69,143		6,670.2	12.76	7.09
Pharmacy	968,466		208,733		20,136.3	4.64	7.79
Cardiovascular	129,916		836		80.6	155.40	1.04
PT/OT/ST	337,832		11,599		1,118.9	29.13	2.72
Psychiatric	39,913		302		29.1	132.16	0.32
Substance Abuse	26,337		232		22.4	113.52	0.21
Other	1,878,692		69,028		6,659.1	27.22	15.10
	\$12,140,359		379,490		36,609.1	\$31.99	\$97.60
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$128,718		422		40.7	\$305.02	\$1.03
Office Visits	2,376,773		41,715		4,024.2	56.98	19.11
Preventive Medicine	940,175		22,569		2,177.2	41.66	7.56
Maternity	1,268,542		4,945		477.0	256.54	10.20
Certified Midwife	29,592		164		15.8	180.92	0.24
PT/OT/ST	199,194		8,861		854.8	22.48	1.60
Psychiatric and Substance Abuse	2,402,881		26,424		2,549.1	90.94	19.32
Radiology and Pathology	1,666,819		62,334		6,013.3	26.74	13.40
Home Health and Private Duty Nursing	152,874		3,780		364.7	40.44	1.23
Ambulance	280,106		14,427		1,391.8	19.42	2.25
Non-Emergency Transportation	2,271,082		153,227		14,781.7	14.82	18.26
Opioid Treatment Program	1,544,437		151,119		14,578.3	10.22	12.42
Federally Qualified and Rural Health Clinics	2,430,268		18,257		1,761.2	133.12	19.54
Adult Medical Day Care	13,520		609		58.7	22.20	0.11
Personal Care	1,549		287		27.7	5.40	0.01
Durable Medical Equipment	605,390		41,770		4,029.5	14.49	4.87
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	2,847,864		216,880		20,922.3	13.13	22.89
	\$19,159,783		767,789		74,068.1	\$24.95	\$154.03
Prescription Drugs							
Generic Scripts	\$2,481,704		156,354		15,083.4	\$15.87	\$19.95
Single-Source Brand	3,672,688		14,053		1,355.7	261.35	29.53
Multi-Source Brand	2,624,090		12,848		1,239.4	204.24	21.10
Specialty	3,311,392		956		92.2	3,463.80	26.62
Hepatitis C	2,181,340		106		10.2	20,578.68	17.54
Other	385		22		2.1	17.50	0.00
	\$14,271,600		184,339		17,783.1	\$77.42	\$114.73
Community Mental Health Center							
Case Management	\$46,558		130		12.5	\$358.14	\$0.37
Long Term Support Service	95,524		1,190		114.8	80.27	0.77
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	162,903		3,567		344.1	45.67	1.31
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	1,598		60		5.8	26.64	0.01
Emergency Service 24/7	94		4		0.4	23.46	0.00
APRTP	30,744		56		5.4	549.00	0.25
Supported Employment Services	0		0		0.0	0.00	0.00
Other	190,672		2,578		248.7	73.96	1.53
	\$528,093		7,585		731.7	\$69.62	\$4.25
All Services	\$50,020,363	965	1,344,076	93.1	129,662.1	\$37.22	\$402.12

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: CHIP

Member Months: 154,555

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$139,691	55	166	4.3	12.9	\$2,539.84	\$0.90
Surgical	88,305	16	67	1.2	5.2	5,519.09	0.57
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	2,712	1	1	0.1	0.1	2,711.98	0.02
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	367,648	56	514	4.3	39.9	6,565.14	2.38
Alcohol and Drug Abuse	12,390	2	38	0.2	3.0	6,195.00	0.08
Other	0	0	0	0.0	0.0	0.00	0.00
	\$610,747	130	786	10.1	61.0	\$4,698.05	\$3.95
Hospital Outpatient							
Emergency Room	\$1,271,846		3,409		264.7	\$373.08	\$8.23
Surgery	476,840		534		41.5	892.96	3.09
Radiology	506,989		2,167		168.3	233.96	3.28
Pathology	179,120		16,587		1,287.9	10.80	1.16
Pharmacy	145,087		37,653		2,923.5	3.85	0.94
Cardiovascular	22,657		247		19.2	91.73	0.15
PT/OT/ST	218,361		7,088		550.3	30.81	1.41
Psychiatric	39,228		155		12.0	253.08	0.25
Substance Abuse	0		0		0.0	0.00	0.00
Other	792,110		26,590		2,064.5	29.79	5.13
	\$3,652,237		94,430		7,331.8	\$38.68	\$23.63
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$57,184		184		14.3	\$310.78	\$0.37
Office Visits	1,605,267		29,159		2,264.0	55.05	10.39
Preventive Medicine	680,091		28,999		2,251.6	23.45	4.40
Maternity	3,751		14		1.1	274.72	0.02
Certified Midwife	253		7		0.5	36.21	0.00
PT/OT/ST	681,587		20,382		1,582.5	33.44	4.41
Psychiatric and Substance Abuse	640,755		13,275		1,030.7	48.27	4.15
Radiology and Pathology	191,117		15,284		1,186.7	12.50	1.24
Home Health and Private Duty Nursing	265,283		33,931		2,634.5	7.82	1.72
Ambulance	65,407		4,683		363.6	13.97	0.42
Non-Emergency Transportation	141,467		1,759		136.6	80.42	0.92
Opioid Treatment Program	0		0		0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	737,150		5,742		445.8	128.38	4.77
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	94		4		0.3	23.47	0.00
Durable Medical Equipment	646,040		192,764		14,966.7	3.35	4.18
Applied Behavioral Analysis	612,065		41,924		3,255.1	14.60	3.96
Other	1,267,320		86,870		6,744.8	14.59	8.20
	\$7,594,832		474,981		36,878.7	\$15.99	\$49.14
Prescription Drugs							
Generic Scripts	\$1,375,311		45,005		3,494.3	\$30.56	\$8.90
Single-Source Brand	1,486,815		6,679		518.6	222.61	9.62
Multi-Source Brand	276,017		1,710		132.8	161.41	1.79
Specialty	2,332,314		400		31.1	5,830.79	15.09
Hepatitis C	0		0		0.0	0.00	0.00
Other	111		6		0.5	18.57	0.00
	\$5,470,569		53,800		4,177.2	\$101.68	\$35.40
Community Mental Health Center							
Case Management	\$80,223		226		17.5	\$354.97	\$0.52
Long Term Support Service	51,500		1,148		89.1	44.86	0.33
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	36,999		434		33.7	85.25	0.24
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	0		0		0.0	0.00	0.00
Emergency Service 24/7	0		0		0.0	0.00	0.00
AP RTP	0		0		0.0	0.00	0.00
Supported Employment Services	0		0		0.0	0.00	0.00
Other	73,323		578		44.9	126.86	0.47
	\$242,046		2,386		185.3	\$101.44	\$1.57
All Services	\$17,570,431	130	626,383	10.1	48,633.9	\$28.05	\$113.68

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Foster Care / Adoption

Member Months: 20,976

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$76,177	24	71	13.7	40.6	\$3,174.04	\$3.63
Surgical	15,552	3	5	1.7	2.9	5,184.07	0.74
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	306,226	40	464	22.9	265.4	7,655.65	14.60
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$397,955	67	540	38.3	308.9	\$5,939.63	\$18.97
Hospital Outpatient							
Emergency Room	\$263,976		603		345.0	\$437.77	\$12.58
Surgery	98,371		106		60.6	928.03	4.69
Radiology	87,090		413		236.3	210.87	4.15
Pathology	41,746		3,563		2,038.3	11.72	1.99
Pharmacy	19,225		7,847		4,489.1	2.45	0.92
Cardiovascular	5,182		48		27.5	107.97	0.25
PT/OT/ST	72,316		2,280		1,304.3	31.72	3.45
Psychiatric	527		6		3.4	87.82	0.03
Substance Abuse	0		0		0.0	0.00	0.00
Other	199,894		6,265		3,584.1	31.91	9.53
	\$788,327		21,131		12,088.6	\$37.31	\$37.58
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$8,721		31		17.7	\$281.31	\$0.42
Office Visits	261,450		4,567		2,612.7	57.25	12.46
Preventive Medicine	86,916		3,687		2,109.3	23.57	4.14
Maternity	2,615		4		2.3	655.39	0.12
Certified Midwife	0		0		0.0	0.00	0.00
PT/OT/ST	111,678		3,807		2,177.9	29.33	5.32
Psychiatric and Substance Abuse	287,521		4,392		2,512.6	65.46	13.71
Radiology and Pathology	49,707		2,619		1,498.3	18.98	2.37
Home Health and Private Duty Nursing	761,166		18,985		10,860.9	40.09	36.29
Ambulance	32,294		2,160		1,235.7	14.95	1.54
Non-Emergency Transportation	46,203		1,257		719.1	36.76	2.20
Opioid Treatment Program	0		0		0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	165,920		1,254		717.4	132.31	7.91
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	0		0		0.0	0.00	0.00
Durable Medical Equipment	384,776		185,445		106,089.2	2.07	18.34
Applied Behavioral Analysis	128,775		8,585		4,911.3	15.00	6.14
Other	260,051		17,577		10,055.4	14.79	12.40
	\$2,587,793		254,370		145,519.8	\$10.17	\$123.37
Prescription Drugs							
Generic Scripts	\$686,824		20,660		11,819.2	\$33.24	\$32.74
Single-Source Brand	384,852		1,694		969.1	227.19	18.35
Multi-Source Brand	149,925		375		214.5	399.80	7.15
Specialty	419,290		132		75.5	3,176.44	19.99
Hepatitis C	0		0		0.0	0.00	0.00
Other	22		3		1.7	7.33	0.00
	\$1,640,913		22,864		13,080.0	\$71.77	\$78.23
Community Mental Health Center							
Case Management	\$50,856		146		83.5	\$348.33	\$2.42
Long Term Support Service	20,264		284		162.5	71.35	0.97
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	21,360		306		175.1	69.80	1.02
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	0		0		0.0	0.00	0.00
Emergency Service 24/7	0		0		0.0	0.00	0.00
APRTP	0		0		0.0	0.00	0.00
Supported Employment Services	0		0		0.0	0.00	0.00
Other	48,284		393		224.8	122.86	2.30
	\$140,763		1,129		645.9	\$124.68	\$6.71
All Services	\$5,555,752	67	300,034	38.3	171,643.2	\$18.52	\$264.86

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Severely Disabled Children

Member Months: 11,180

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$333,372	39	303	41.9	325.2	\$8,547.99	\$29.82
Surgical	151,327	10	34	10.7	36.5	15,132.70	13.54
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	13,230	2	13	2.1	14.0	6,614.80	1.18
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$497,928	51	350	54.7	375.7	\$9,763.30	\$44.54
Hospital Outpatient							
Emergency Room	\$86,129		180		193.2	\$478.49	\$7.70
Surgery	86,501		82		88.0	1,054.89	7.74
Radiology	129,661		286		307.0	453.36	11.60
Pathology	29,623		2,570		2,758.4	11.53	2.65
Pharmacy	26,645		6,806		7,305.0	3.91	2.38
Cardiovascular	4,338		46		49.4	94.30	0.39
PT/OT/ST	125,073		3,787		4,064.7	33.03	11.19
Psychiatric	237		4		4.3	59.31	0.02
Substance Abuse	0		0		0.0	0.00	0.00
Other	112,739		2,574		2,762.7	43.80	10.08
	\$600,944		16,335		17,532.7	\$36.79	\$53.75
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$4,995		22		23.6	\$227.03	\$0.45
Office Visits	184,552		2,396		2,571.7	77.02	16.51
Preventive Medicine	19,909		746		800.7	26.69	1.78
Maternity	0		0		0.0	0.00	0.00
Certified Midwife	0		0		0.0	0.00	0.00
PT/OT/ST	315,426		13,620		14,618.6	23.16	28.21
Psychiatric and Substance Abuse	98,286		4,711		5,056.4	20.86	8.79
Radiology and Pathology	34,214		2,173		2,332.3	15.74	3.06
Home Health and Private Duty Nursing	3,973,413		312,544		335,459.6	12.71	355.40
Ambulance	26,687		3,162		3,393.8	8.44	2.39
Non-Emergency Transportation	79,367		4,661		5,002.7	17.03	7.10
Opioid Treatment Program	0		0		0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	14,479		128		137.4	113.12	1.30
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	100		8		8.6	12.50	0.01
Durable Medical Equipment	1,572,676		942,747		1,011,868.9	1.67	140.67
Applied Behavioral Analysis	632,222		45,776		49,132.3	13.81	56.55
Other	670,226		20,108		21,582.3	33.33	59.95
	\$7,626,551		1,352,802		1,451,989.0	\$5.64	\$682.14
Prescription Drugs							
Generic Scripts	\$533,203		15,690		16,840.4	\$33.98	\$47.69
Single-Source Brand	397,242		1,693		1,817.1	234.64	35.53
Multi-Source Brand	745,502		1,075		1,153.8	693.49	66.68
Specialty	1,207,571		296		317.7	4,079.63	108.01
Hepatitis C	0		0		0.0	0.00	0.00
Other	268		3		3.2	89.21	0.02
	\$2,883,787		18,757		20,132.3	\$153.74	\$257.94
Community Mental Health Center							
Case Management	\$12,893		36		38.6	\$358.14	\$1.15
Long Term Support Service	22,474		924		991.7	24.32	2.01
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	2,280		27		29.0	84.45	0.20
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	0		0		0.0	0.00	0.00
Emergency Service 24/7	0		0		0.0	0.00	0.00
AP RTP	0		0		0.0	0.00	0.00
Supported Employment Services	0		0		0.0	0.00	0.00
Other	6,521		63		67.6	103.50	0.58
	\$44,168		1,050		1,127.0	\$42.06	\$3.95
All Services	\$11,653,378	51	1,389,294	54.7	1,491,156.6	\$8.39	\$1,042.32

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Elderly and Disabled Adults - Age 19-64

Member Months: 76,828

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$5,080,452	1,072	7,793	167.4	1,217.2	\$4,739.23	\$66.13
Surgical	3,048,274	363	3,020	56.7	471.7	8,397.45	39.68
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	11,842	5	10	0.8	1.6	2,368.46	0.15
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	460,093	98	768	15.3	120.0	4,694.82	5.99
Alcohol and Drug Abuse	177,284	61	536	9.5	83.7	2,906.29	2.31
Other	0	0	0	0.0	0.0	0.00	0.00
	\$8,777,944	1,599	12,127	249.8	1,894.2	\$5,489.65	\$114.25
Hospital Outpatient							
Emergency Room	\$4,021,987		5,623		878.3	\$715.27	\$52.35
Surgery	1,518,876		2,043		319.1	743.45	19.77
Radiology	2,092,134		7,434		1,161.1	281.43	27.23
Pathology	606,124		51,178		7,993.6	11.84	7.89
Pharmacy	3,135,167		297,716		46,501.1	10.53	40.81
Cardiovascular	149,840		1,157		180.7	129.51	1.95
PT/OT/ST	509,828		17,848		2,787.7	28.57	6.64
Psychiatric	9,509		91		14.2	104.49	0.12
Substance Abuse	7,636		68		10.6	112.29	0.10
Other	2,410,480		68,804		10,746.7	35.03	31.37
	\$14,461,580		451,962		70,593.2	\$32.00	\$188.23
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$184,620		628		98.1	\$293.98	\$2.40
Office Visits	2,169,682		35,718		5,578.9	60.74	28.24
Preventive Medicine	212,085		8,207		1,281.9	25.84	2.76
Maternity	25,556		99		15.5	257.68	0.33
Certified Midwife	178		7		1.1	25.38	0.00
PT/OT/ST	301,743		13,560		2,118.0	22.25	3.93
Psychiatric and Substance Abuse	1,124,413		15,866		2,478.2	70.87	14.64
Radiology and Pathology	970,578		39,043		6,098.2	24.86	12.63
Home Health and Private Duty Nursing	5,067,181		298,047		46,552.8	17.00	65.95
Ambulance	554,479		32,680		5,104.4	16.97	7.22
Non-Emergency Transportation	2,166,935		120,212		18,776.3	18.03	28.20
Opioid Treatment Program	734,590		71,878		11,226.8	10.22	9.56
Federally Qualified and Rural Health Clinics	1,366,789		9,519		1,486.8	143.59	17.79
Adult Medical Day Care	211,997		11,153		1,742.0	19.01	2.76
Personal Care	1,333,730		246,676		38,529.0	5.41	17.36
Durable Medical Equipment	2,865,219		1,247,272		194,814.9	2.30	37.29
Applied Behavioral Analysis	55,344		4,828		754.1	11.46	0.72
Other	4,695,954		318,415		49,734.1	14.75	61.12
	\$24,041,073		2,473,808		386,391.1	\$9.72	\$312.92
Prescription Drugs							
Generic Scripts	\$4,422,341		261,892		40,905.7	\$16.89	\$57.56
Single-Source Brand	11,184,768		32,923		5,142.3	339.73	145.58
Multi-Source Brand	4,984,389		12,918		2,017.7	385.85	64.88
Specialty	11,446,184		1,773		276.9	6,455.83	148.98
Hepatitis C	1,421,400		69		10.8	20,600.01	18.50
Other	786		73		11.4	10.77	0.01
	\$33,459,868		309,648		48,364.8	\$108.06	\$435.52
Community Mental Health Center							
Case Management	\$56,944		159		24.8	\$358.14	\$0.74
Long Term Support Service	102,508		1,766		275.8	58.05	1.33
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	135,594		2,365		369.4	57.33	1.76
Evidence Based Practice	398		15		2.3	26.54	0.01
Medication Management	5,835		176		27.5	33.16	0.08
Emergency Service 24/7	446		19		3.0	23.46	0.01
AP RTP	21,411		39		6.1	549.00	0.28
Supported Employment Services	2,840		107		16.7	26.54	0.04
Other	191,024		2,627		410.3	72.72	2.49
	\$517,001		7,273		1,136.0	\$71.08	\$6.73
All Services	\$81,257,467	1,599	3,254,818	249.8	508,379.3	\$24.97	\$1,057.65

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Elderly and Disabled Adults - Age 65+

Member Months: 12,505

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$1,115,255	252	1,733	241.8	1,663.1	\$4,425.62	\$89.19
Surgical	490,617	65	576	62.4	552.8	7,547.96	39.23
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	46,010	7	361	6.7	346.4	6,572.80	3.68
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$1,651,882	324	2,670	310.9	2,562.2	\$5,098.40	\$132.10
Hospital Outpatient							
Emergency Room	\$537,069		594		570.0	\$904.16	\$42.95
Surgery	166,864		256		245.7	651.81	13.34
Radiology	404,417		1,501		1,440.4	269.43	32.34
Pathology	103,006		10,227		9,814.2	10.07	8.24
Pharmacy	297,998		32,796		31,472.3	9.09	23.83
Cardiovascular	24,833		262		251.4	94.78	1.99
PT/OT/ST	65,907		2,609		2,503.7	25.26	5.27
Psychiatric	0		0		0.0	0.00	0.00
Substance Abuse	0		0		0.0	0.00	0.00
Other	502,812		7,594		7,287.5	66.21	40.21
	\$2,102,905		55,839		53,585.3	\$37.66	\$168.17
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$62,368		273		262.0	\$228.45	\$4.99
Office Visits	333,980		5,418		5,199.3	61.64	26.71
Preventive Medicine	32,790		1,182		1,134.3	27.74	2.62
Maternity	0		0		0.0	0.00	0.00
Certified Midwife	0		0		0.0	0.00	0.00
PT/OT/ST	24,742		1,018		976.9	24.30	1.98
Psychiatric and Substance Abuse	13,983		312		299.4	44.82	1.12
Radiology and Pathology	153,374		6,631		6,363.4	23.13	12.27
Home Health and Private Duty Nursing	742,268		8,553		8,207.8	86.78	59.36
Ambulance	96,321		3,720		3,569.9	25.89	7.70
Non-Emergency Transportation	173,149		9,981		9,578.2	17.35	13.85
Opioid Treatment Program	12,939		1,266		1,214.9	10.22	1.03
Federally Qualified and Rural Health Clinics	276,233		2,054		1,971.1	134.49	22.09
Adult Medical Day Care	392,865		20,146		19,332.9	19.50	31.42
Personal Care	0		0		0.0	0.00	0.00
Durable Medical Equipment	265,862		134,547		129,116.6	1.98	21.26
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	818,483		32,312		31,007.9	25.33	65.45
	\$3,399,356		227,413		218,234.5	\$14.95	\$271.85
Prescription Drugs							
Generic Scripts	\$563,967		51,890		49,795.7	\$10.87	\$45.10
Single-Source Brand	1,656,591		6,414		6,155.1	258.28	132.48
Multi-Source Brand	402,368		1,002		961.6	401.57	32.18
Specialty	588,867		170		163.1	3,463.92	47.09
Hepatitis C	61,921		3		2.9	20,640.31	4.95
Other	68		17		16.3	4.01	0.01
	\$3,273,782		59,496		57,094.7	\$55.03	\$261.80
Community Mental Health Center							
Case Management	\$358		2		1.9	\$179.07	\$0.03
Long Term Support Service	3,021		36		34.5	83.91	0.24
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	2,142		27		25.9	79.32	0.17
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	0		0		0.0	0.00	0.00
Emergency Service 24/7	0		0		0.0	0.00	0.00
APRTP	0		0		0.0	0.00	0.00
Supported Employment Services	0		0		0.0	0.00	0.00
Other	10,711		475		455.8	22.55	0.86
	\$16,232		540		518.2	\$30.06	\$1.30
All Services	\$10,444,157	324	345,958	310.9	331,994.9	\$30.19	\$835.22

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Dual Eligibles

Member Months: 166,049

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$3,373,261	2,271	11,617	164.1	839.5	\$1,485.36	\$20.31
Surgical	995,234	523	4,630	37.8	334.6	1,902.93	5.99
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	11,479	7	19	0.5	1.4	1,639.87	0.07
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	497,597	156	2,191	11.3	158.3	3,189.73	3.00
Alcohol and Drug Abuse	96,645	33	416	2.4	30.1	2,928.62	0.58
Other	0	0	0	0.0	0.0	0.00	0.00
	\$4,974,216	2,990	18,873	216.1	1,363.9	\$1,663.62	\$29.96
Hospital Outpatient							
Emergency Room	\$3,157,450		7,743		559.6	\$407.78	\$19.02
Surgery	1,248,442		4,803		347.1	259.93	7.52
Radiology	1,037,809		11,503		831.3	90.22	6.25
Pathology	188,630		31,957		2,309.5	5.90	1.14
Pharmacy	2,215,318		554,844		40,097.5	3.99	13.34
Cardiovascular	159,580		2,351		169.9	67.88	0.96
PT/OT/ST	374,665		28,109		2,031.4	13.33	2.26
Psychiatric	55,980		1,355		97.9	41.31	0.34
Substance Abuse	5,165		46		3.3	112.29	0.03
Other	2,770,017		143,640		10,380.6	19.28	16.68
	\$11,213,056		786,351		56,828.0	\$14.26	\$67.53
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$105,435		870		62.9	\$121.19	\$0.63
Office Visits	1,616,906		66,847		4,830.9	24.19	9.74
Preventive Medicine	130,962		7,206		520.8	18.17	0.79
Maternity	24,570		273		19.8	89.88	0.15
Certified Midwife	445		13		0.9	34.26	0.00
PT/OT/ST	106,779		12,084		873.3	8.84	0.64
Psychiatric and Substance Abuse	949,302		24,968		1,804.4	38.02	5.72
Radiology and Pathology	511,531		49,416		3,571.2	10.35	3.08
Home Health and Private Duty Nursing	2,124,101		169,697		12,263.7	12.52	12.79
Ambulance	1,274,824		109,521		7,914.9	11.64	7.68
Non-Emergency Transportation	4,316,868		196,285		14,185.1	21.99	26.00
Opioid Treatment Program	598,760		58,587		4,234.0	10.22	3.61
Federally Qualified and Rural Health Clinics	249,878		2,616		189.1	95.52	1.50
Adult Medical Day Care	245,835		15,538		1,122.9	15.82	1.48
Personal Care	5,002,878		925,946		66,916.3	5.40	30.13
Durable Medical Equipment	2,659,244		2,423,769		175,160.9	1.10	16.01
Applied Behavioral Analysis	1,680		112		8.1	15.00	0.01
Other	3,997,652		651,569		47,087.6	6.14	24.08
	\$23,917,650		4,715,317		340,766.5	\$5.07	\$144.04
Prescription Drugs							
Generic Scripts	\$163,795		45,752		3,306.4	\$3.58	\$0.99
Single-Source Brand	12,773		1,042		75.3	12.26	0.08
Multi-Source Brand	6,490		483		34.9	13.44	0.04
Specialty	0		0		0.0	0.00	0.00
Hepatitis C	0		0		0.0	0.00	0.00
Other	480		63		4.6	7.61	0.00
	\$183,538		47,340		3,421.2	\$3.88	\$1.11
Community Mental Health Center							
Case Management	\$58,449		159		11.5	\$367.60	\$0.35
Long Term Support Service	133,702		2,797		202.1	47.80	0.81
Partial Hospital	2,006		21		1.5	95.52	0.01
Psychotherapy	95,425		3,296		238.2	28.95	0.57
Evidence Based Practice	335		24		1.7	13.95	0.00
Medication Management	7,613		279		20.2	27.29	0.05
Emergency Service 24/7	117		5		0.4	23.46	0.00
AP RTP	23,933		43		3.1	556.57	0.14
Supported Employment Services	4,501		163		11.8	27.61	0.03
Other	217,110		7,553		545.8	28.74	1.31
	\$543,190		14,340		1,036.3	\$37.88	\$3.27
All Services	\$40,831,649	2,990	5,582,221	216.1	403,416.0	\$7.31	\$245.90

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Newborn Kick Payment

Member Months: 2,296

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$4,721,086	996	6,823	433.8	2,971.7	\$4,740.05	\$2,056.22
Surgical	49,579	4	36	1.7	15.7	12,394.86	21.59
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Well Newborn	803,787	1,311	2,805	571.0	1,221.7	613.11	350.08
Psychiatric	0	0	0	0.0	0.0	0.00	0.00
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$5,574,452	2,311	9,664	1,006.5	4,209.1	\$2,412.14	\$2,427.90
Hospital Outpatient							
Emergency Room	\$85,118		291		126.7	\$292.50	\$37.07
Surgery	6,070		14		6.1	433.56	2.64
Radiology	14,689		97		42.2	151.43	6.40
Pathology	8,022		1,022		445.1	7.85	3.49
Pharmacy	1,014		472		205.6	2.15	0.44
Cardiovascular	3,360		27		11.8	124.43	1.46
PT/OT/ST	1,393		25		10.9	55.73	0.61
Psychiatric	0		0		0.0	0.00	0.00
Substance Abuse	0		0		0.0	0.00	0.00
Other	109,575		1,278		556.6	85.74	47.72
	\$229,241		3,226		1,405.1	\$71.06	\$99.84
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$0		0		0.0	\$0.00	\$0.00
Office Visits	92,782		1,815		790.5	51.12	40.41
Preventive Medicine	249,024		5,738		2,499.1	43.40	108.46
Maternity	0		0		0.0	0.00	0.00
Certified Midwife	549		13		5.7	42.26	0.24
PT/OT/ST	351		12		5.2	29.24	0.15
Psychiatric and Substance Abuse	0		0		0.0	0.00	0.00
Radiology and Pathology	19,049		1,372		597.6	13.88	8.30
Home Health and Private Duty Nursing	63,509		791		344.5	80.29	27.66
Ambulance	47,851		2,132		928.6	22.44	20.84
Non-Emergency Transportation	4,428		195		84.9	22.71	1.93
Opioid Treatment Program	0		0		0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	171,970		1,040		453.0	165.36	74.90
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	0		0		0.0	0.00	0.00
Durable Medical Equipment	20,979		10,534		4,588.0	1.99	9.14
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	813,114		12,114		5,276.1	67.12	354.14
	\$1,483,605		35,756		15,573.2	\$41.49	\$646.17
Prescription Drugs							
Generic Scripts	\$4,160		499		217.3	\$8.34	\$1.81
Single-Source Brand	2,005		23		10.0	87.15	0.87
Multi-Source Brand	151		10		4.4	15.10	0.07
Specialty	102		1		0.4	101.69	0.04
Hepatitis C	0		0		0.0	0.00	0.00
Other	7		2		0.9	3.40	0.00
	\$6,424		535		233.0	\$12.01	\$2.80
Community Mental Health Center							
Case Management	\$0		0		0.0	\$0.00	\$0.00
Long Term Support Service	0		0		0.0	0.00	0.00
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	0		0		0.0	0.00	0.00
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	0		0		0.0	0.00	0.00
Emergency Service 24/7	0		0		0.0	0.00	0.00
AP RTP	0		0		0.0	0.00	0.00
Supported Employment Services	0		0		0.0	0.00	0.00
Other	0		0		0.0	0.00	0.00
	\$0		0		0.0	\$0.00	\$0.00
All Services	\$7,293,722	2,311	49,181	1,006.5	21,420.3	\$148.30	\$3,176.71

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Neonatal Abstinence Syndrome Kick Payment

Member Months: 144

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$848,923	168	1,492	1,166.7	10,361.1	\$5,053.11	\$5,895.30
Surgical	15,395	2	20	13.9	138.9	7,697.51	106.91
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	0	0	0	0.0	0.0	0.00	0.00
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$864,318	170	1,512	1,180.6	10,500.0	\$5,084.22	\$6,002.21
Hospital Outpatient							
Emergency Room	\$3,726		14		97.2	\$266.12	\$25.87
Surgery	397		1		6.9	397.44	2.76
Radiology	1,056		8		55.6	132.00	7.33
Pathology	548		54		375.0	10.14	3.80
Pharmacy	8		4		27.8	2.06	0.06
Cardiovascular	326		3		20.8	108.83	2.27
PT/OT/ST	0		0		0.0	0.00	0.00
Psychiatric	0		0		0.0	0.00	0.00
Substance Abuse	0		0		0.0	0.00	0.00
Other	3,874		52		361.1	74.50	26.90
	\$9,935		136		944.4	\$73.05	\$69.00
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$0		0		0.0	\$0.00	\$0.00
Office Visits	6,675		131		909.7	50.95	46.35
Preventive Medicine	21,342		511		3,548.6	41.76	148.21
Maternity	0		0		0.0	0.00	0.00
Certified Midwife	0		0		0.0	0.00	0.00
PT/OT/ST	325		13		90.3	25.02	2.26
Psychiatric and Substance Abuse	0		0		0.0	0.00	0.00
Radiology and Pathology	1,814		131		909.7	13.85	12.60
Home Health and Private Duty Nursing	12,161		137		951.4	88.76	84.45
Ambulance	5,847		161		1,118.1	36.32	40.60
Non-Emergency Transportation	1,197		46		319.4	26.03	8.32
Opioid Treatment Program	0		0		0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	12,968		83		576.4	156.24	90.06
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	0		0		0.0	0.00	0.00
Durable Medical Equipment	7,819		3,523		24,465.3	2.22	54.30
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	103,711		2,184		15,166.7	47.49	720.21
	\$173,859		6,920		48,055.6	\$25.12	\$1,207.36
Prescription Drugs							
Generic Scripts	\$528		67		465.3	\$7.88	\$3.66
Single-Source Brand	207		3		20.8	69.07	1.44
Multi-Source Brand	17		2		13.9	8.67	0.12
Specialty	0		0		0.0	0.00	0.00
Hepatitis C	0		0		0.0	0.00	0.00
Other	0		0		0.0	0.00	0.00
	\$752		72		500.0	\$10.45	\$5.22
Community Mental Health Center							
Case Management	\$0		0		0.0	\$0.00	\$0.00
Long Term Support Service	0		0		0.0	0.00	0.00
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	0		0		0.0	0.00	0.00
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	0		0		0.0	0.00	0.00
Emergency Service 24/7	0		0		0.0	0.00	0.00
AP RTP	0		0		0.0	0.00	0.00
Supported Employment Services	0		0		0.0	0.00	0.00
Other	0		0		0.0	0.00	0.00
	\$0		0		0.0	\$0.00	\$0.00
All Services	\$1,048,865	170	8,640	1,180.6	60,000.0	\$121.40	\$7,283.78

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Maternity Kick Payment

Member Months: 2,897

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$68,485	32	78	11.0	26.9	\$2,140.14	\$23.64
Surgical	4,990	1	2	0.3	0.7	4,990.37	1.72
Maternity Delivery	5,595,058	2,349	6,436	810.8	2,221.6	2,381.89	1,931.33
Maternity Non-Delivery	57,196	31	69	10.7	23.8	1,845.03	19.74
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	0	0	0	0.0	0.0	0.00	0.00
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$5,725,729	2,413	6,585	832.9	2,273.0	\$2,372.87	\$1,976.43
Hospital Outpatient							
Emergency Room	\$36,715		37		12.8	\$992.30	\$12.67
Surgery	2,304		4		1.4	575.91	0.80
Radiology	6,583		61		21.1	107.91	2.27
Pathology	4,891		443		152.9	11.04	1.69
Pharmacy	5,913		1,147		395.9	5.16	2.04
Cardiovascular	0		0		0.0	0.00	0.00
PT/OT/ST	0		0		0.0	0.00	0.00
Psychiatric	0		0		0.0	0.00	0.00
Substance Abuse	0		0		0.0	0.00	0.00
Other	39,155		854		294.8	45.85	13.52
	\$95,561		2,546		878.8	\$37.53	\$32.99
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$0		0		0.0	\$0.00	\$0.00
Office Visits	4,269		93		32.1	45.90	1.47
Preventive Medicine	3,136		352		121.5	8.91	1.08
Maternity	1,503,452		3,311		1,143.1	454.01	518.97
Certified Midwife	17,412		58		20.2	297.95	6.01
PT/OT/ST	0		0		0.0	0.00	0.00
Psychiatric and Substance Abuse	0		0		0.0	0.00	0.00
Radiology and Pathology	6,975		319		110.1	21.87	2.41
Home Health and Private Duty Nursing	1,271		38		13.1	33.44	0.44
Ambulance	11,438		835		288.2	13.70	3.95
Non-Emergency Transportation	0		0		0.0	0.00	0.00
Opioid Treatment Program	0		0		0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	9,233		58		20.1	158.27	3.19
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	0		0		0.0	0.00	0.00
Durable Medical Equipment	0		0		0.0	0.00	0.00
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	38,631		2,452		846.4	15.75	13.33
	\$1,595,817		7,517		2,594.8	\$212.29	\$550.85
Prescription Drugs							
Generic Scripts	\$0		0		0.0	\$0.00	\$0.00
Single-Source Brand	0		0		0.0	0.00	0.00
Multi-Source Brand	0		0		0.0	0.00	0.00
Specialty	0		0		0.0	0.00	0.00
Hepatitis C	0		0		0.0	0.00	0.00
Other	0		0		0.0	0.00	0.00
	\$0		0		0.0	\$0.00	\$0.00
Community Mental Health Center							
Case Management	\$0		0		0.0	\$0.00	\$0.00
Long Term Support Service	0		0		0.0	0.00	0.00
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	0		0		0.0	0.00	0.00
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	0		0		0.0	0.00	0.00
Emergency Service 24/7	0		0		0.0	0.00	0.00
APRTP	0		0		0.0	0.00	0.00
Supported Employment Services	0		0		0.0	0.00	0.00
Other	0		0		0.0	0.00	0.00
	\$0		0		0.0	\$0.00	\$0.00
All Services	\$7,417,108	2,413	16,648	832.9	5,746.7	\$445.52	\$2,560.27

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Severe/Persistent Mental Illness - Non-Dual

Member Months: 15,659

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$696,809	171	854	131.0	654.4	\$4,074.91	\$44.50
Surgical	624,061	62	562	47.5	430.7	10,065.49	39.85
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	6,889	4	11	3.1	8.4	1,722.29	0.44
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	822,722	223	1,291	170.9	989.3	3,689.33	52.54
Alcohol and Drug Abuse	30,129	12	99	9.2	75.9	2,510.73	1.92
Other	0	0	0	0.0	0.0	0.00	0.00
	\$2,180,609	472	2,817	361.7	2,158.7	\$4,619.94	\$139.25
Hospital Outpatient							
Emergency Room	\$1,308,298		2,081		1,594.7	\$628.69	\$83.55
Surgery	285,183		357		273.6	798.83	18.21
Radiology	351,654		1,431		1,096.6	245.74	22.46
Pathology	134,489		11,397		8,733.7	11.80	8.59
Pharmacy	180,084		46,713		35,797.1	3.86	11.50
Cardiovascular	35,630		198		151.7	179.95	2.28
PT/OT/ST	86,618		3,348		2,565.6	25.87	5.53
Psychiatric	18,098		113		86.6	160.16	1.16
Substance Abuse	5,887		52		39.8	113.21	0.38
Other	300,369		14,073		10,784.4	21.34	19.18
	\$2,706,310		79,763		61,123.9	\$33.93	\$172.82
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$35,398		124		95.0	\$285.47	\$2.26
Office Visits	502,683		8,343		6,393.4	60.25	32.10
Preventive Medicine	52,036		1,927		1,476.7	27.00	3.32
Maternity	16,499		95		72.7	173.81	1.05
Certified Midwife	217		7		5.4	30.95	0.01
PT/OT/ST	49,887		2,138		1,638.4	23.33	3.19
Psychiatric and Substance Abuse	378,200		5,764		4,417.1	65.61	24.15
Radiology and Pathology	222,188		10,154		7,781.2	21.88	14.19
Home Health and Private Duty Nursing	191,037		6,684		5,122.1	28.58	12.20
Ambulance	163,090		7,900		6,053.9	20.64	10.41
Non-Emergency Transportation	629,910		39,725		30,442.0	15.86	40.23
Opioid Treatment Program	136,733		13,379		10,252.6	10.22	8.73
Federally Qualified and Rural Health Clinics	330,465		2,399		1,838.4	137.75	21.10
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	39,486		7,318		5,607.9	5.40	2.52
Durable Medical Equipment	296,952		83,753		64,181.5	3.55	18.96
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	811,204		48,209		36,943.5	16.83	51.80
	\$3,855,985		237,919		182,321.8	\$16.21	\$246.24
Prescription Drugs							
Generic Scripts	\$1,585,159		85,973		65,882.7	\$18.44	\$101.23
Single-Source Brand	3,319,268		7,911		6,062.3	419.58	211.97
Multi-Source Brand	941,955		2,781		2,131.1	338.71	60.15
Specialty	2,706,585		1,034		792.4	2,617.59	172.84
Hepatitis C	472,045		21		16.1	22,478.33	30.14
Other	1,115		43		33.0	25.94	0.07
	\$9,026,127		97,763		74,917.6	\$92.33	\$576.41
Community Mental Health Center							
Case Management	\$4,361,787		12,179		9,333.0	\$358.14	\$278.54
Long Term Support Service	4,199,955		155,932		119,493.7	26.93	268.21
Partial Hospital	193,483		2,008		1,538.8	96.36	12.36
Psychotherapy	1,009,563		16,666		12,771.5	60.58	64.47
Evidence Based Practice	52,650		3,069		2,351.8	17.16	3.36
Medication Management	64,395		2,160		1,655.2	29.81	4.11
Emergency Service 24/7	64,374		2,744		2,102.8	23.46	4.11
AP RTP	77,409		141		108.1	549.00	4.94
Supported Employment Services	318,055		11,984		9,183.6	26.54	20.31
Other	494,212		6,919		5,302.2	71.43	31.56
	\$10,835,884		213,802		163,840.5	\$50.68	\$691.98
All Services	\$28,604,916	472	632,064	361.7	484,362.6	\$45.26	\$1,826.71

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Severe/Persistent Mental Illness - Dual

Member Months: 22,217

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$456,422	309	1,994	166.9	1,077.0	\$1,477.09	\$20.54
Surgical	90,311	62	341	33.5	184.2	1,456.62	4.07
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	405,420	146	1,506	78.9	813.4	2,776.85	18.25
Alcohol and Drug Abuse	27,861	15	137	8.1	74.0	1,857.43	1.25
Other	0	0	0	0.0	0.0	0.00	0.00
	\$980,014	532	3,978	287.4	2,148.7	\$1,842.13	\$44.11
Hospital Outpatient							
Emergency Room	\$683,010		2,060		1,112.7	\$331.56	\$30.74
Surgery	213,975		714		385.7	299.68	9.63
Radiology	149,077		2,030		1,096.5	73.44	6.71
Pathology	36,316		5,725		3,092.3	6.34	1.63
Pharmacy	168,933		60,938		32,915.0	2.77	7.60
Cardiovascular	18,489		350		189.0	52.83	0.83
PT/OT/ST	60,317		5,085		2,746.6	11.86	2.71
Psychiatric	22,611		377		203.6	59.98	1.02
Substance Abuse	3,304		29		15.7	113.93	0.15
Other	395,208		26,883		14,520.6	14.70	17.79
	\$1,751,239		104,191		56,277.6	\$16.81	\$78.83
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$26,367		190		102.6	\$138.77	\$1.19
Office Visits	326,354		13,326		7,197.9	24.49	14.69
Preventive Medicine	21,639		1,060		572.5	20.41	0.97
Maternity	2,947		34		18.2	87.67	0.13
Certified Midwife	0		0		0.0	0.00	0.00
PT/OT/ST	21,363		2,856		1,542.6	7.48	0.96
Psychiatric and Substance Abuse	775,708		13,464		7,272.4	57.61	34.92
Radiology and Pathology	86,147		8,364		4,517.7	10.30	3.88
Home Health and Private Duty Nursing	52,919		1,261		681.1	41.97	2.38
Ambulance	163,318		9,880		5,336.6	16.53	7.35
Non-Emergency Transportation	963,968		49,310		26,634.2	19.55	43.39
Opioid Treatment Program	132,329		12,948		6,993.7	10.22	5.96
Federally Qualified and Rural Health Clinics	24,445		389		210.1	62.84	1.10
Adult Medical Day Care	42,657		1,390		750.8	30.69	1.92
Personal Care	203,081		37,505		20,257.9	5.41	9.14
Durable Medical Equipment	195,861		160,550		86,719.3	1.22	8.82
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	615,399		97,617		52,726.7	6.30	27.70
	\$3,654,501		410,144		221,534.5	\$8.91	\$164.49
Prescription Drugs							
Generic Scripts	\$25,557		7,094		3,831.7	\$3.60	\$1.15
Single-Source Brand	507		110		59.4	4.61	0.02
Multi-Source Brand	465		27		14.6	17.21	0.02
Specialty	0		0		0.0	0.00	0.00
Hepatitis C	0		0		0.0	0.00	0.00
Other	61		12		6.5	5.05	0.00
	\$26,590		7,243		3,912.2	\$3.67	\$1.20
Community Mental Health Center							
Case Management	\$6,662,227		17,873		9,653.9	\$372.75	\$299.88
Long Term Support Service	9,295,560		323,590		174,783.5	28.73	418.41
Partial Hospital	541,369		5,480		2,960.0	98.79	24.37
Psychotherapy	760,384		22,108		11,941.4	34.39	34.23
Evidence Based Practice	124,226		6,392		3,452.6	19.43	5.59
Medication Management	141,176		4,606		2,487.9	30.65	6.35
Emergency Service 24/7	96,838		4,085		2,206.5	23.71	4.36
AP RTP	182,904		320		172.8	571.58	8.23
Supported Employment Services	839,375		30,337		16,386.2	27.67	37.78
Other	361,722		10,288		5,556.9	35.16	16.28
	\$19,005,780		425,079		229,601.7	\$44.71	\$855.48
All Services	\$25,418,124	532	950,635	287.4	513,474.6	\$26.74	\$1,144.11

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Severe Mental Illness - Non-Dual

Member Months: 7,588

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$406,091	117	631	185.0	997.9	\$3,470.86	\$53.52
Surgical	196,344	28	221	44.3	349.5	7,012.28	25.88
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	13,977	5	16	7.9	25.3	2,795.38	1.84
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	248,946	60	384	94.9	607.3	4,149.10	32.81
Alcohol and Drug Abuse	43,343	16	152	25.3	240.4	2,708.92	5.71
Other	0	0	0	0.0	0.0	0.00	0.00
	\$908,700	226	1,404	357.4	2,220.3	\$4,020.80	\$119.75
Hospital Outpatient							
Emergency Room	\$700,092		1,128		1,783.9	\$620.65	\$92.26
Surgery	143,145		172		272.0	832.24	18.86
Radiology	159,859		774		1,224.0	206.54	21.07
Pathology	76,921		5,948		9,406.4	12.93	10.14
Pharmacy	91,439		19,981		31,598.6	4.58	12.05
Cardiovascular	25,429		122		192.9	208.44	3.35
PT/OT/ST	52,174		1,672		2,644.2	31.20	6.88
Psychiatric	13,394		80		126.5	167.43	1.77
Substance Abuse	7,066		67		106.0	105.47	0.93
Other	177,438		6,615		10,461.2	26.82	23.38
	\$1,446,959		36,559		57,815.6	\$39.58	\$190.69
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$9,911		40		63.3	\$247.77	\$1.31
Office Visits	247,759		4,105		6,491.8	60.36	32.65
Preventive Medicine	34,587		840		1,328.4	41.18	4.56
Maternity	27,213		116		182.7	235.58	3.59
Certified Midwife	43		1		1.6	42.72	0.01
PT/OT/ST	12,592		560		885.6	22.49	1.66
Psychiatric and Substance Abuse	339,261		3,647		5,767.5	93.02	44.71
Radiology and Pathology	150,204		5,792		9,159.7	25.93	19.79
Home Health and Private Duty Nursing	95,441		8,377		13,247.7	11.39	12.58
Ambulance	85,915		3,696		5,845.0	23.25	11.32
Non-Emergency Transportation	470,591		23,308		36,860.0	20.19	62.02
Opioid Treatment Program	122,538		11,990		18,961.4	10.22	16.15
Federally Qualified and Rural Health Clinics	180,451		1,225		1,937.3	147.31	23.78
Adult Medical Day Care	11,397		492		778.1	23.16	1.50
Personal Care	863		160		253.0	5.40	0.11
Durable Medical Equipment	97,526		13,207		20,886.0	7.38	12.85
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	450,293		27,076		42,818.9	16.63	59.34
	\$2,336,584		104,632		165,467.8	\$22.33	\$307.93
Prescription Drugs							
Generic Scripts	\$463,230		27,627		43,690.3	\$16.77	\$61.05
Single-Source Brand	838,568		2,179		3,445.9	384.84	110.51
Multi-Source Brand	278,301		1,198		1,894.6	232.31	36.68
Specialty	746,678		196		310.0	3,809.58	98.40
Hepatitis C	560,567		23		36.4	24,372.48	73.87
Other	1		1		1.6	1.30	0.00
	\$2,887,345		31,224		49,378.7	\$92.47	\$380.51
Community Mental Health Center							
Case Management	\$1,456,555		4,067		6,431.7	\$358.14	\$191.95
Long Term Support Service	477,695		18,320		28,971.9	26.08	62.95
Partial Hospital	1,038		11		17.4	94.33	0.14
Psychotherapy	529,462		8,387		13,263.5	63.13	69.78
Evidence Based Practice	23,367		1,038		1,641.5	22.51	3.08
Medication Management	13,112		446		705.3	29.40	1.73
Emergency Service 24/7	5,255		224		354.2	23.46	0.69
AP RTP	75,213		137		216.7	549.00	9.91
Supported Employment Services	92,253		3,477		5,498.6	26.53	12.16
Other	208,530		2,383		3,768.6	87.51	27.48
	\$2,882,480		38,490		60,869.4	\$74.89	\$379.87
All Services	\$10,462,069	226	212,309	357.4	335,751.7	\$49.28	\$1,378.76

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Severe Mental Illness - Dual

Member Months: 3,766

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$64,977	49	180	156.1	573.6	\$1,326.05	\$17.25
Surgical	27,827	17	127	54.2	404.7	1,636.90	7.39
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	1,340	1	2	3.2	6.4	1,340.00	0.36
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	23,153	11	74	35.1	235.8	2,104.84	6.15
Alcohol and Drug Abuse	22,787	7	78	22.3	248.6	3,255.24	6.05
Other	0	0	0	0.0	0.0	0.00	0.00
	\$140,084	85	461	270.9	1,469.0	\$1,648.04	\$37.20
Hospital Outpatient							
Emergency Room	\$125,418		452		1,440.3	\$277.47	\$33.30
Surgery	37,008		153		487.5	241.88	9.83
Radiology	36,461		391		1,245.9	93.25	9.68
Pathology	9,784		1,517		4,834.0	6.45	2.60
Pharmacy	34,522		11,677		37,209.6	2.96	9.17
Cardiovascular	2,815		47		149.8	59.89	0.75
PT/OT/ST	10,318		859		2,737.3	12.01	2.74
Psychiatric	12,935		175		557.6	73.91	3.43
Substance Abuse	0		0		0.0	0.00	0.00
Other	60,288		3,770		12,013.4	15.99	16.01
	\$329,549		19,041		60,675.5	\$17.31	\$87.51
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$4,423		28		89.2	\$157.96	\$1.17
Office Visits	63,344		2,513		8,007.8	25.21	16.82
Preventive Medicine	13,817		300		956.0	46.06	3.67
Maternity	3,505		19		60.4	184.84	0.93
Certified Midwife	0		0		0.0	0.00	0.00
PT/OT/ST	3,756		390		1,242.8	9.63	1.00
Psychiatric and Substance Abuse	80,771		1,155		3,680.5	69.93	21.45
Radiology and Pathology	24,386		1,859		5,923.8	13.12	6.48
Home Health and Private Duty Nursing	6,992		983		3,132.4	7.11	1.86
Ambulance	30,577		1,658		5,283.3	18.44	8.12
Non-Emergency Transportation	236,468		13,789		43,939.6	17.15	62.79
Opioid Treatment Program	60,963		5,965		19,007.9	10.22	16.19
Federally Qualified and Rural Health Clinics	9,986		82		261.3	121.79	2.65
Adult Medical Day Care	1,948		178		567.2	10.94	0.52
Personal Care	105,944		19,652		62,622.5	5.39	28.13
Durable Medical Equipment	36,500		20,955		66,774.6	1.74	9.69
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	106,707		21,698		69,142.2	4.92	28.34
	\$790,088		91,224		290,691.5	\$8.66	\$209.81
Prescription Drugs							
Generic Scripts	\$3,403		640		2,039.4	\$5.32	\$0.90
Single-Source Brand	1,042		7		22.3	148.81	0.28
Multi-Source Brand	4		2		6.4	1.96	0.00
Specialty	0		0		0.0	0.00	0.00
Hepatitis C	0		0		0.0	0.00	0.00
Other	23		9		28.7	2.52	0.01
	\$4,471		658		2,096.8	\$6.80	\$1.19
Community Mental Health Center							
Case Management	\$777,477		2,086		6,647.2	\$372.71	\$206.46
Long Term Support Service	316,550		11,864		37,805.5	26.68	84.06
Partial Hospital	2,340		24		76.5	97.48	0.62
Psychotherapy	163,988		4,240		13,511.1	38.68	43.55
Evidence Based Practice	20,643		1,072		3,416.0	19.26	5.48
Medication Management	4,401		160		509.9	27.51	1.17
Emergency Service 24/7	2,465		105		334.6	23.48	0.65
APRTP	40,980		71		226.2	577.18	10.88
Supported Employment Services	76,244		2,753		8,772.6	27.69	20.25
Other	60,807		1,309		4,171.2	46.45	16.15
	\$1,465,894		23,684		75,470.7	\$61.89	\$389.26
All Services	\$2,730,086	85	135,068	270.9	430,403.4	\$20.21	\$724.97

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Low Utilizer - Non-Dual

Member Months: 1,227

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$22,739	6	17	58.7	166.3	\$3,789.86	\$18.53
Surgical	11,898	2	4	19.6	39.1	5,949.01	9.70
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	7,382	2	34	19.6	332.6	3,691.15	6.02
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$42,019	10	55	97.8	538.0	\$4,201.95	\$34.25
Hospital Outpatient							
Emergency Room	\$66,969		102		997.7	\$656.56	\$54.59
Surgery	27,294		28		273.9	974.80	22.25
Radiology	30,809		128		1,252.0	240.70	25.11
Pathology	10,890		909		8,891.1	11.98	8.88
Pharmacy	13,548		4,162		40,709.3	3.26	11.04
Cardiovascular	2,605		27		264.1	96.49	2.12
PT/OT/ST	8,503		264		2,582.2	32.21	6.93
Psychiatric	2,637		11		107.6	239.77	2.15
Substance Abuse	1,572		14		136.9	112.29	1.28
Other	22,237		627		6,132.8	35.47	18.13
	\$187,066		6,272		61,347.7	\$29.83	\$152.48
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$5,720		20		195.6	\$286.01	\$4.66
Office Visits	34,571		575		5,624.2	60.12	28.18
Preventive Medicine	4,535		383		3,746.2	11.84	3.70
Maternity	117		7		68.5	16.71	0.10
Certified Midwife	0		0		0.0	0.00	0.00
PT/OT/ST	2,508		110		1,075.9	22.80	2.04
Psychiatric and Substance Abuse	50,288		812		7,942.3	61.93	40.99
Radiology and Pathology	14,991		658		6,436.0	22.78	12.22
Home Health and Private Duty Nursing	10,432		1,478		14,456.6	7.06	8.50
Ambulance	6,713		241		2,357.3	27.86	5.47
Non-Emergency Transportation	37,085		2,673		26,145.1	13.87	30.23
Opioid Treatment Program	13,981		1,368		13,380.7	10.22	11.40
Federally Qualified and Rural Health Clinics	24,552		191		1,868.2	128.54	20.01
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	7,678		1,414		13,831.5	5.43	6.26
Durable Medical Equipment	11,533		1,336		13,067.7	8.63	9.40
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	53,832		2,368		23,161.9	22.73	43.88
	\$278,536		13,634		133,357.7	\$20.43	\$227.03
Prescription Drugs							
Generic Scripts	\$136,826		6,075		59,420.8	\$22.52	\$111.53
Single-Source Brand	245,609		656		6,416.5	374.40	200.20
Multi-Source Brand	25,306		115		1,124.8	220.05	20.63
Specialty	140,942		69		674.9	2,042.64	114.88
Hepatitis C	0		0		0.0	0.00	0.00
Other	0		0		0.0	0.00	0.00
	\$548,683		6,915		67,637.0	\$79.35	\$447.23
Community Mental Health Center							
Case Management	\$255,712		714		6,983.8	\$358.14	\$208.43
Long Term Support Service	27,955		1,251		12,236.3	22.35	22.79
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	38,284		660		6,455.6	58.01	31.21
Evidence Based Practice	345		13		127.2	26.54	0.28
Medication Management	7,390		269		2,631.1	27.47	6.02
Emergency Service 24/7	141		6		58.7	23.46	0.11
APRTP	0		0		0.0	0.00	0.00
Supported Employment Services	6,635		250		2,445.3	26.54	5.41
Other	28,624		410		4,010.3	69.82	23.33
	\$365,086		3,573		34,948.2	\$102.18	\$297.58
All Services	\$1,421,390	10	30,449	97.8	297,828.5	\$46.68	\$1,158.57

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Low Utilizer - Dual

Member Months: 2,080

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$31,712	25	127	144.2	732.8	\$1,268.50	\$15.25
Surgical	24,792	12	165	69.2	952.0	2,065.98	11.92
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	4,020	3	33	17.3	190.4	1,340.00	1.93
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$60,524	40	325	230.8	1,875.2	\$1,513.10	\$29.10
Hospital Outpatient							
Emergency Room	\$41,771		149		859.7	\$280.34	\$20.08
Surgery	23,185		90		519.3	257.61	11.15
Radiology	16,412		179		1,032.8	91.69	7.89
Pathology	3,348		612		3,531.1	5.47	1.61
Pharmacy	10,887		33,023		190,532.7	0.33	5.23
Cardiovascular	1,749		33		190.4	52.99	0.84
PT/OT/ST	4,341		437		2,521.4	9.93	2.09
Psychiatric	172		6		34.6	28.67	0.08
Substance Abuse	0		0		0.0	0.00	0.00
Other	29,780		2,237		12,906.8	13.31	14.32
	\$131,647		36,766		212,128.6	\$3.58	\$63.30
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$4,798		25		144.2	\$191.90	\$2.31
Office Visits	31,227		1,281		7,391.0	24.38	15.01
Preventive Medicine	3,673		103		594.3	35.66	1.77
Maternity	0		0		0.0	0.00	0.00
Certified Midwife	0		0		0.0	0.00	0.00
PT/OT/ST	3,189		426		2,457.9	7.48	1.53
Psychiatric and Substance Abuse	22,882		369		2,129.0	62.01	11.00
Radiology and Pathology	8,900		848		4,892.7	10.50	4.28
Home Health and Private Duty Nursing	86		4		23.1	21.45	0.04
Ambulance	12,773		519		2,994.5	24.61	6.14
Non-Emergency Transportation	54,433		2,384		13,755.0	22.83	26.17
Opioid Treatment Program	5,498		538		3,104.1	10.22	2.64
Federally Qualified and Rural Health Clinics	2,334		27		155.8	86.46	1.12
Adult Medical Day Care	5,992		124		715.4	48.32	2.88
Personal Care	0		0		0.0	0.00	0.00
Durable Medical Equipment	20,949		17,874		103,127.5	1.17	10.07
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	67,440		14,130		81,525.8	4.77	32.43
	\$244,173		38,652		223,010.3	\$6.32	\$117.40
Prescription Drugs							
Generic Scripts	\$1,584		535		3,086.8	\$2.96	\$0.76
Single-Source Brand	479		11		63.5	43.57	0.23
Multi-Source Brand	34		1		5.8	34.08	0.02
Specialty	0		0		0.0	0.00	0.00
Hepatitis C	0		0		0.0	0.00	0.00
Other	0		0		0.0	0.00	0.00
	\$2,097		547		3,156.0	\$3.83	\$1.01
Community Mental Health Center							
Case Management	\$395,254		1,062		6,127.4	\$372.18	\$190.04
Long Term Support Service	78,917		3,232		18,647.7	24.42	37.94
Partial Hospital	5,316		56		323.1	94.94	2.56
Psychotherapy	33,425		940		5,423.5	35.56	16.07
Evidence Based Practice	1,141		43		248.1	26.54	0.55
Medication Management	9,943		356		2,054.0	27.93	4.78
Emergency Service 24/7	422		18		103.9	23.46	0.20
APRTP	5,220		9		51.9	580.02	2.51
Supported Employment Services	49,799		1,816		10,477.8	27.42	23.94
Other	26,777		764		4,408.0	35.05	12.87
	\$606,216		8,296		47,865.4	\$73.07	\$291.47
All Services	\$1,044,657	40	84,586	230.8	488,035.5	\$12.35	\$502.28

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Serious Emotionally Disturbed Child

Member Months: 72,959

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$190,827	46	167	7.6	27.5	\$4,148.41	\$2.62
Surgical	160,966	15	121	2.5	19.9	10,731.07	2.21
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	4,469	2	6	0.3	1.0	2,234.27	0.06
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	3,519,946	409	3,989	67.3	656.1	8,606.23	48.25
Alcohol and Drug Abuse	17,762	2	24	0.3	3.9	8,881.20	0.24
Other	0	0	0	0.0	0.0	0.00	0.00
	\$3,893,970	474	4,307	78.0	708.4	\$8,215.13	\$53.37
Hospital Outpatient							
Emergency Room	\$1,484,069		3,549		583.7	\$418.17	\$20.34
Surgery	309,369		328		53.9	943.20	4.24
Radiology	294,504		1,483		243.9	198.59	4.04
Pathology	160,890		13,401		2,204.2	12.01	2.21
Pharmacy	63,190		25,269		4,156.2	2.50	0.87
Cardiovascular	9,694		145		23.8	66.86	0.13
PT/OT/ST	148,376		4,842		796.4	30.64	2.03
Psychiatric	123,064		372		61.2	330.82	1.69
Substance Abuse	0		0		0.0	0.00	0.00
Other	539,182		16,843		2,770.3	32.01	7.39
	\$3,132,339		66,232		10,893.6	\$47.29	\$42.93
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$34,314		112		18.4	\$306.38	\$0.47
Office Visits	1,052,311		17,896		2,943.5	58.80	14.42
Preventive Medicine	319,877		11,262		1,852.3	28.40	4.38
Maternity	4,397		36		5.9	123.35	0.06
Certified Midwife	182		7		1.2	26.01	0.00
PT/OT/ST	346,321		12,862		2,115.5	26.93	4.75
Psychiatric and Substance Abuse	241,456		4,073		669.9	59.28	3.31
Radiology and Pathology	163,501		10,840		1,782.9	15.08	2.24
Home Health and Private Duty Nursing	154,648		24,749		4,070.6	6.25	2.12
Ambulance	188,095		15,095		2,482.8	12.46	2.58
Non-Emergency Transportation	236,278		10,520		1,730.3	22.46	3.24
Opioid Treatment Program	0		0		0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	734,042		4,923		809.7	149.10	10.06
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	0		0		0.0	0.00	0.00
Durable Medical Equipment	325,797		166,771		27,429.9	1.95	4.47
Applied Behavioral Analysis	146,114		10,009		1,646.2	14.60	2.00
Other	1,109,242		66,986		11,017.6	16.56	15.20
	\$5,056,576		356,141		58,576.8	\$14.20	\$69.31
Prescription Drugs							
Generic Scripts	\$2,998,736		92,025		15,136.0	\$32.59	\$41.10
Single-Source Brand	2,046,832		7,948		1,307.3	257.53	28.05
Multi-Source Brand	329,285		1,541		253.5	213.68	4.51
Specialty	1,610,991		307		50.5	5,247.53	22.08
Hepatitis C	0		0		0.0	0.00	0.00
Other	384		10		1.6	38.44	0.01
	\$6,986,228		101,831		16,748.8	\$68.61	\$95.76
Community Mental Health Center							
Case Management	\$17,293,669		48,296		7,943.6	\$358.08	\$237.03
Long Term Support Service	8,083,935		353,717		58,178.2	22.85	110.80
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	8,408,169		94,768		15,587.1	88.72	115.25
Evidence Based Practice	53		2		0.3	26.54	0.00
Medication Management	6,980		262		43.1	26.64	0.10
Emergency Service 24/7	18,486		788		129.6	23.46	0.25
APRTP	9,333		17		2.8	549.00	0.13
Supported Employment Services	1,991		75		12.3	26.54	0.03
Other	1,192,853		13,059		2,147.9	91.34	16.35
	\$35,015,469		510,984		84,044.9	\$68.53	\$479.94
All Services	\$54,084,581	474	1,039,495	78.0	170,972.6	\$52.03	\$741.30

Appendix A1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2018 MCO Encounter Base Experience Data

Eligibility Category: Granite Advantage - Medically Frail

Member Months: 71,345

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$3,248,455	781	4,759	131.4	800.5	\$4,159.35	\$45.53
Surgical	2,722,248	294	2,672	49.5	449.4	9,259.35	38.16
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	5,906	3	8	0.5	1.3	1,968.56	0.08
Well Newborn	515	1	1	0.2	0.2	515.30	0.01
Psychiatric	934,077	178	1,374	29.9	231.1	5,247.62	13.09
Alcohol and Drug Abuse	877,819	310	3,214	52.1	540.6	2,831.68	12.30
Other	0	0	0	0.0	0.0	0.00	0.00
	\$7,789,021	1,567	12,028	263.6	2,023.1	\$4,970.66	\$109.17
Hospital Outpatient							
Emergency Room	\$3,533,745		6,082		1,023.0	\$581.02	\$49.53
Surgery	1,053,196		1,521		255.8	692.44	14.76
Radiology	1,706,320		5,978		1,005.5	285.43	23.92
Pathology	524,959		39,484		6,641.1	13.30	7.36
Pharmacy	2,054,776		302,111		50,814.3	6.80	28.80
Cardiovascular	146,282		828		139.3	176.67	2.05
PT/OT/ST	367,447		13,193		2,219.0	27.85	5.15
Psychiatric	112,675		603		101.4	186.86	1.58
Substance Abuse	74,768		665		111.9	112.43	1.05
Other	1,548,988		50,078		8,423.0	30.93	21.71
	\$11,123,157		420,543		70,734.3	\$26.45	\$155.91
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$128,562		443		74.5	\$290.21	\$1.80
Office Visits	1,857,811		31,242		5,254.8	59.47	26.04
Preventive Medicine	185,244		6,293		1,058.5	29.44	2.60
Maternity	33,404		146		24.6	228.02	0.47
Certified Midwife	626		11		1.9	56.91	0.01
PT/OT/ST	212,257		9,260		1,557.5	22.92	2.98
Psychiatric and Substance Abuse	4,321,094		40,588		6,826.8	106.46	60.57
Radiology and Pathology	1,416,024		45,587		7,667.6	31.06	19.85
Home Health and Private Duty Nursing	810,213		31,710		5,333.5	25.55	11.36
Ambulance	421,765		20,192		3,396.2	20.89	5.91
Non-Emergency Transportation	3,025,336		175,281		29,481.8	17.26	42.40
Opioid Treatment Program	1,628,292		159,347		26,801.8	10.22	22.82
Federally Qualified and Rural Health Clinics	1,450,268		9,753		1,640.4	148.70	20.33
Adult Medical Day Care	24,020		1,194		200.8	20.12	0.34
Personal Care	31,582		5,853		984.5	5.40	0.44
Durable Medical Equipment	1,195,856		150,264		25,274.0	7.96	16.76
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	3,279,404		220,116		37,023.0	14.90	45.97
	\$20,021,758		907,280		152,602.4	\$22.07	\$280.63
Prescription Drugs							
Generic Scripts	\$2,225,008		141,192		23,748.1	\$15.76	\$31.19
Single-Source Brand	4,874,044		15,884		2,671.6	306.85	68.32
Multi-Source Brand	2,918,298		13,591		2,286.0	214.72	40.90
Specialty	5,568,705		1,623		273.0	3,431.12	78.05
Hepatitis C	3,626,789		177		29.8	20,490.33	50.83
Other	405		31		5.2	13.05	0.01
	\$19,213,248		172,498		29,013.7	\$111.38	\$269.30
Community Mental Health Center							
Case Management	\$104,935		293		49.3	\$358.14	\$1.47
Long Term Support Service	160,247		2,678		450.4	59.84	2.25
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	168,960		4,996		840.3	33.82	2.37
Evidence Based Practice	456		27		4.5	16.90	0.01
Medication Management	4,798		157		26.4	30.56	0.07
Emergency Service 24/7	727		31		5.2	23.46	0.01
AP RTP	61,199		115		19.3	532.17	0.86
Supported Employment Services	3,052		115		19.3	26.54	0.04
Other	303,409		4,418		743.1	68.68	4.25
	\$807,784		12,830		2,158.0	\$62.96	\$11.32
All Services	\$58,954,968	1,567	1,525,179	263.6	256,531.5	\$38.65	\$826.34

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Low Income Children - Age 0-11 Months

Member Months: 47,995

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$867,084	333	1,157	83.3	289.3	\$2,603.86	\$18.07
Surgical	212,743	27	111	6.8	27.8	7,879.37	4.43
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Well Newborn	580	1	1	0.3	0.3	580.42	0.01
Psychiatric	0	0	0	0.0	0.0	0.00	0.00
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$1,080,407	361	1,269	90.3	317.3	\$2,992.82	\$22.51
Hospital Outpatient							
Emergency Room	\$851,806		3,252		813.1	\$261.93	\$17.75
Surgery	137,968		158		39.5	873.21	2.87
Radiology	183,765		835		208.8	220.08	3.83
Pathology	56,139		4,282		1,070.6	13.11	1.17
Pharmacy	64,513		6,513		1,628.4	9.91	1.34
Cardiovascular	14,442		181		45.3	79.79	0.30
PT/OT/ST	54,497		1,705		426.3	31.96	1.14
Psychiatric	0		0		0.0	0.00	0.00
Substance Abuse	0		0		0.0	0.00	0.00
Other	551,985		9,689		2,422.5	56.97	11.50
	\$1,915,114		26,615		6,654.4	\$71.96	\$39.90
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$9,707		30		7.5	\$323.58	\$0.20
Office Visits	810,171		15,754		3,938.9	51.43	16.88
Preventive Medicine	952,995		47,833		11,959.4	19.92	19.86
Maternity	0		0		0.0	0.00	0.00
Certified Midwife	3,025		88		22.0	34.38	0.06
PT/OT/ST	23,427		905		226.3	25.89	0.49
Psychiatric and Substance Abuse	352		9		2.3	39.15	0.01
Radiology and Pathology	101,332		6,577		1,644.4	15.41	2.11
Home Health and Private Duty Nursing	234,348		4,271		1,067.9	54.87	4.88
Ambulance	95,854		5,226		1,306.6	18.34	2.00
Non-Emergency Transportation	68,106		1,406		351.5	48.44	1.42
Opioid Treatment Program	0		0		0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	985,022		6,986		1,746.7	141.00	20.52
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	0		0		0.0	0.00	0.00
Durable Medical Equipment	1,478,410		616,585		154,160.9	2.40	30.80
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	1,612,720		43,194		10,799.5	37.34	33.60
	\$6,375,470		748,864		187,233.8	\$8.51	\$132.83
Prescription Drugs							
Generic Scripts	\$148,424		11,211		2,803.0	\$13.24	\$3.09
Single-Source Brand	95,400		607		151.8	157.17	1.99
Multi-Source Brand	22,190		106		26.5	209.34	0.46
Specialty	316,197		108		27.0	2,927.75	6.59
Hepatitis C	0		0		0.0	0.00	0.00
Other	141		12		3.0	11.79	0.00
	\$582,352		12,044		3,011.3	\$48.35	\$12.13
Community Mental Health Center							
Case Management	\$0		0		0.0	\$0.00	\$0.00
Long Term Support Service	0		0		0.0	0.00	0.00
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	0		0		0.0	0.00	0.00
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	0		0		0.0	0.00	0.00
Emergency Service 24/7	0		0		0.0	0.00	0.00
APRTP	0		0		0.0	0.00	0.00
Supported Employment Services	0		0		0.0	0.00	0.00
Other	0		0		0.0	0.00	0.00
	\$0		0		0.0	\$0.00	\$0.00
All Services	\$9,953,343	361	788,792	90.3	197,216.7	\$12.62	\$207.38

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Low Income Children - Age 1-18 Years

Member Months: 727,538

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$1,382,287	413	1,388	6.8	22.9	\$3,346.94	\$1.90
Surgical	1,091,815	113	462	1.9	7.6	9,662.08	1.50
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	17,780	6	16	0.1	0.3	2,963.37	0.02
Well Newborn	1,081	2	5	0.0	0.1	540.66	0.00
Psychiatric	1,698,565	287	1,884	4.7	31.1	5,918.35	2.33
Alcohol and Drug Abuse	58,113	16	159	0.3	2.6	3,632.06	0.08
Other	0	0	0	0.0	0.0	0.00	0.00
	\$4,249,642	837	3,914	13.8	64.6	\$5,077.23	\$5.84
Hospital Outpatient							
Emergency Room	\$8,074,420		22,163		365.6	\$364.32	\$11.10
Surgery	2,236,292		2,281		37.6	980.40	3.07
Radiology	2,403,438		10,486		173.0	229.20	3.30
Pathology	974,236		80,805		1,332.8	12.06	1.34
Pharmacy	1,404,650		179,479		2,960.3	7.83	1.93
Cardiovascular	89,077		823		13.6	108.23	0.12
PT/OT/ST	898,060		27,606		455.3	32.53	1.23
Psychiatric	110,958		402		6.6	276.02	0.15
Substance Abuse	0		0		0.0	0.00	0.00
Other	4,167,013		123,096		2,030.3	33.85	5.73
	\$20,358,144		447,141		7,375.1	\$45.53	\$27.98
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$464,530		1,231		20.3	\$377.36	\$0.64
Office Visits	6,593,515		124,881		2,059.8	52.80	9.06
Preventive Medicine	2,874,922		114,457		1,887.9	25.12	3.95
Maternity	45,406		198		3.3	228.80	0.06
Certified Midwife	1,618		17		0.3	97.11	0.00
PT/OT/ST	2,488,675		77,110		1,271.9	32.27	3.42
Psychiatric and Substance Abuse	3,878,406		107,177		1,767.8	36.19	5.33
Radiology and Pathology	963,139		70,467		1,162.3	13.67	1.32
Home Health and Private Duty Nursing	2,350,926		150,792		2,487.2	15.59	3.23
Ambulance	485,342		36,387		600.2	13.34	0.67
Non-Emergency Transportation	928,076		20,012		330.1	46.38	1.28
Opioid Treatment Program	675		66		1.1	10.22	0.00
Federally Qualified and Rural Health Clinics	6,140,579		43,023		709.6	142.73	8.44
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	525		7		0.1	75.00	0.00
Durable Medical Equipment	3,666,883		1,428,863		23,567.6	2.57	5.04
Applied Behavioral Analysis	4,274,869		277,048		4,569.6	15.43	5.88
Other	6,437,903		467,653		7,713.5	13.77	8.85
	\$41,595,990		2,919,389		48,152.3	\$14.25	\$57.17
Prescription Drugs							
Generic Scripts	\$7,074,052		233,121		3,845.1	\$30.34	\$9.72
Single-Source Brand	6,094,399		23,838		393.2	255.66	8.38
Multi-Source Brand	957,374		3,906		64.4	245.10	1.32
Specialty	12,042,936		1,769		29.2	6,807.77	16.55
Hepatitis C	0		0		0.0	0.00	0.00
Other	1,334		105		1.7	12.71	0.00
	\$26,170,097		262,739		4,333.6	\$99.60	\$35.97
Community Mental Health Center							
Case Management	\$699,004		1,820		30.0	\$384.07	\$0.96
Long Term Support Service	365,803		5,212		86.0	70.18	0.50
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	252,387		2,898		47.8	87.09	0.35
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	108		4		0.1	27.06	0.00
Emergency Service 24/7	119		5		0.1	23.90	0.00
APRTP	6,551		11		0.2	595.53	0.01
Supported Employment Services	0		0		0.0	0.00	0.00
Other	462,677		3,355		55.3	137.91	0.64
	\$1,786,649		13,305		219.5	\$134.28	\$2.46
All Services	\$94,160,521	837	3,646,488	13.8	60,145.1	\$25.82	\$129.42

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Low Income Adults

Member Months: 133,084

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$2,388,694	688	2,764	62.0	249.2	\$3,471.94	\$17.95
Surgical	1,584,216	200	1,461	18.0	131.7	7,921.08	11.90
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	295,486	126	312	11.4	28.1	2,345.12	2.22
Well Newborn	29,867	35	61	3.2	5.5	853.35	0.22
Psychiatric	384,674	111	464	10.0	41.8	3,465.53	2.89
Alcohol and Drug Abuse	266,773	88	639	7.9	57.6	3,031.52	2.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$4,949,711	1,248	5,701	112.5	514.1	\$3,966.11	\$37.19
Hospital Outpatient							
Emergency Room	\$5,388,709		8,560		771.8	\$629.52	\$40.49
Surgery	1,500,116		1,631		147.1	919.75	11.27
Radiology	2,070,750		11,364		1,024.7	182.22	15.56
Pathology	1,049,198		79,703		7,186.7	13.16	7.88
Pharmacy	1,153,532		240,317		21,669.0	4.80	8.67
Cardiovascular	133,910		821		74.0	163.11	1.01
PT/OT/ST	364,303		12,268		1,106.2	29.70	2.74
Psychiatric	18,448		169		15.2	109.16	0.14
Substance Abuse	19,106		168		15.1	113.73	0.14
Other	2,289,129		75,907		6,844.4	30.16	17.20
	\$13,987,201		430,908		38,854.3	\$32.46	\$105.10
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$119,939		467		42.1	\$256.83	\$0.90
Office Visits	2,390,297		44,991		4,056.8	53.13	17.96
Preventive Medicine	1,037,239		19,822		1,787.3	52.33	7.79
Maternity	1,367,924		5,294		477.4	258.37	10.28
Certified Midwife	46,416		221		19.9	209.84	0.35
PT/OT/ST	200,931		8,951		807.1	22.45	1.51
Psychiatric and Substance Abuse	3,186,477		30,972		2,792.7	102.88	23.94
Radiology and Pathology	1,916,133		67,905		6,122.9	28.22	14.40
Home Health and Private Duty Nursing	136,366		3,312		298.6	41.17	1.02
Ambulance	267,581		16,436		1,482.0	16.28	2.01
Non-Emergency Transportation	2,296,233		151,769		13,684.8	15.13	17.25
Opioid Treatment Program	1,580,381		154,633		13,943.0	10.22	11.88
Federally Qualified and Rural Health Clinics	2,728,352		19,852		1,790.0	137.43	20.50
Adult Medical Day Care	1,707		100		9.0	17.07	0.01
Personal Care	0		0		0.0	0.00	0.00
Durable Medical Equipment	885,364		48,131		4,339.9	18.39	6.65
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	3,475,558		287,293		25,904.8	12.10	26.12
	\$21,636,896		860,150		77,558.4	\$25.15	\$162.58
Prescription Drugs							
Generic Scripts	\$3,133,709		170,725		15,394.0	\$18.36	\$23.55
Single-Source Brand	4,193,868		12,905		1,163.6	324.98	31.51
Multi-Source Brand	1,802,872		7,961		717.8	226.46	13.55
Specialty	4,299,808		1,303		117.5	3,299.93	32.31
Hepatitis C	1,199,308		89		8.0	13,475.37	9.01
Other	745		46		4.1	16.19	0.01
	\$14,630,309		193,029		17,405.1	\$75.79	\$109.93
Community Mental Health Center							
Case Management	\$77,127		199		17.9	\$387.57	\$0.58
Long Term Support Service	102,029		1,388		125.2	73.51	0.77
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	166,931		3,129		282.1	53.35	1.25
Evidence Based Practice	80		3		0.3	26.54	0.00
Medication Management	2,751		103		9.3	26.71	0.02
Emergency Service 24/7	332		14		1.3	23.72	0.00
AP RTP	39,901		67		6.0	595.53	0.30
Supported Employment Services	259		9		0.8	28.79	0.00
Other	232,555		3,033		273.5	76.67	1.75
	\$621,965		7,945		716.4	\$78.28	\$4.67
All Services	\$55,826,081	1,248	1,497,733	112.5	135,048.3	\$37.27	\$419.48

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: CHIP

Member Months: 165,409

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$348,974	85	270	6.2	19.6	\$4,105.57	\$2.11
Surgical	316,888	26	229	1.9	16.6	12,188.01	1.92
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	3,000	1	2	0.1	0.1	2,999.82	0.02
Well Newborn	534	1	2	0.1	0.1	533.97	0.00
Psychiatric	325,908	122	366	8.9	26.6	2,671.37	1.97
Alcohol and Drug Abuse	30,795	4	103	0.3	7.5	7,698.75	0.19
Other	0	0	0	0.0	0.0	0.00	0.00
	\$1,026,098	239	972	17.3	70.5	\$4,293.30	\$6.20
Hospital Outpatient							
Emergency Room	\$1,491,489		3,715		269.5	\$401.48	\$9.02
Surgery	532,009		526		38.2	1,011.42	3.22
Radiology	544,214		2,352		170.6	231.38	3.29
Pathology	205,035		17,483		1,268.3	11.73	1.24
Pharmacy	211,529		38,927		2,824.1	5.43	1.28
Cardiovascular	16,583		186		13.5	89.16	0.10
PT/OT/ST	224,365		7,023		509.5	31.95	1.36
Psychiatric	32,124		80		5.8	401.55	0.19
Substance Abuse	0		0		0.0	0.00	0.00
Other	912,987		25,550		1,853.6	35.73	5.52
	\$4,170,334		95,842		6,953.1	\$43.51	\$25.21
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$95,433		254		18.4	\$375.72	\$0.58
Office Visits	1,572,017		30,092		2,183.1	52.24	9.50
Preventive Medicine	753,353		30,575		2,218.1	24.64	4.55
Maternity	2,578		9		0.7	276.85	0.02
Certified Midwife	239		8		0.6	29.92	0.00
PT/OT/ST	751,654		22,445		1,628.3	33.49	4.54
Psychiatric and Substance Abuse	822,085		22,172		1,608.5	37.08	4.97
Radiology and Pathology	233,780		17,624		1,278.6	13.26	1.41
Home Health and Private Duty Nursing	253,389		23,941		1,736.9	10.58	1.53
Ambulance	83,124		5,784		419.6	14.37	0.50
Non-Emergency Transportation	163,348		2,129		154.5	76.73	0.99
Opioid Treatment Program	0		0		0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	964,255		7,425		538.7	129.87	5.83
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	0		0		0.0	0.00	0.00
Durable Medical Equipment	861,653		239,127		17,348.1	3.60	5.21
Applied Behavioral Analysis	967,867		66,548		4,827.9	14.54	5.85
Other	1,513,840		93,755		6,801.7	16.15	9.15
	\$9,038,616		561,888		40,763.6	\$16.09	\$54.64
Prescription Drugs							
Generic Scripts	\$1,468,074		48,599		3,525.7	\$30.21	\$8.88
Single-Source Brand	1,438,380		5,729		415.6	251.07	8.70
Multi-Source Brand	155,951		893		64.8	174.64	0.94
Specialty	3,771,514		480		34.8	7,857.32	22.80
Hepatitis C	30,780		1		0.1	30,779.72	0.19
Other	417		17		1.2	24.54	0.00
	\$6,865,116		55,719		4,042.3	\$123.21	\$41.50
Community Mental Health Center							
Case Management	\$83,914		216		15.7	\$388.49	\$0.51
Long Term Support Service	56,245		884		64.1	63.63	0.34
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	47,550		563		40.8	84.46	0.29
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	0		0		0.0	0.00	0.00
Emergency Service 24/7	0		0		0.0	0.00	0.00
AP RTP	6,551		11		0.8	595.53	0.04
Supported Employment Services	0		0		0.0	0.00	0.00
Other	59,653		455		33.0	131.11	0.36
	\$253,913		2,129		154.5	\$119.26	\$1.54
All Services	\$21,354,077	239	716,550	17.3	51,983.9	\$29.80	\$129.10

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Foster Care / Adoption

Member Months: 23,159

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$94,537	30	88	15.5	45.6	\$3,151.24	\$4.08
Surgical	55,465	10	32	5.2	16.6	5,546.53	2.39
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	468,468	58	621	30.1	321.8	8,077.03	20.23
Alcohol and Drug Abuse	2,465	1	2	0.5	1.0	2,464.71	0.11
Other	0	0	0	0.0	0.0	0.00	0.00
	\$620,935	99	743	51.3	385.0	\$6,272.07	\$26.81
Hospital Outpatient							
Emergency Room	\$277,510		618		320.2	\$449.05	\$11.98
Surgery	110,871		124		64.3	894.12	4.79
Radiology	135,627		502		260.1	270.17	5.86
Pathology	45,266		3,563		1,846.2	12.70	1.95
Pharmacy	21,875		7,026		3,640.5	3.11	0.94
Cardiovascular	5,199		77		39.9	67.52	0.22
PT/OT/ST	79,705		2,308		1,195.9	34.53	3.44
Psychiatric	22,366		73		37.8	306.39	0.97
Substance Abuse	0		0		0.0	0.00	0.00
Other	212,964		6,096		3,158.6	34.94	9.20
	\$911,383		20,387		10,563.5	\$44.70	\$39.35
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$19,185		58		30.1	\$330.77	\$0.83
Office Visits	264,021		4,795		2,484.5	55.06	11.40
Preventive Medicine	99,578		4,055		2,101.1	24.56	4.30
Maternity	16		1		0.5	15.98	0.00
Certified Midwife	34		1		0.5	33.60	0.00
PT/OT/ST	129,267		4,276		2,215.6	30.23	5.58
Psychiatric and Substance Abuse	386,633		8,174		4,235.4	47.30	16.69
Radiology and Pathology	57,851		2,914		1,509.9	19.85	2.50
Home Health and Private Duty Nursing	662,232		15,987		8,283.7	41.42	28.59
Ambulance	32,510		2,916		1,510.9	11.15	1.40
Non-Emergency Transportation	29,675		852		441.5	34.83	1.28
Opioid Treatment Program	0		0		0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	211,300		1,563		809.9	135.19	9.12
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	0		0		0.0	0.00	0.00
Durable Medical Equipment	461,634		195,293		101,191.3	2.36	19.93
Applied Behavioral Analysis	145,212		9,197		4,765.4	15.79	6.27
Other	411,211		20,708		10,729.9	19.86	17.76
	\$2,910,357		270,790		140,310.1	\$10.75	\$125.67
Prescription Drugs							
Generic Scripts	\$686,613		21,650		11,218.0	\$31.71	\$29.65
Single-Source Brand	503,102		1,608		833.2	312.87	21.72
Multi-Source Brand	91,855		240		124.4	382.73	3.97
Specialty	544,962		112		58.0	4,865.73	23.53
Hepatitis C	0		0		0.0	0.00	0.00
Other	58		16		8.3	3.62	0.00
	\$1,826,589		23,626		12,241.8	\$77.31	\$78.87
Community Mental Health Center							
Case Management	\$60,993		157		81.3	\$388.49	\$2.63
Long Term Support Service	36,643		583		302.1	62.85	1.58
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	19,933		232		120.2	85.92	0.86
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	0		0		0.0	0.00	0.00
Emergency Service 24/7	0		0		0.0	0.00	0.00
APRTP	0		0		0.0	0.00	0.00
Supported Employment Services	0		0		0.0	0.00	0.00
Other	37,588		281		145.6	133.76	1.62
	\$155,157		1,253		649.2	\$123.83	\$6.70
All Services	\$6,424,421	99	316,799	51.3	164,149.7	\$20.28	\$277.40

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Severely Disabled Children

Member Months: 10,785

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$161,361	34	164	37.8	182.5	\$4,745.91	\$14.96
Surgical	52,597	7	35	7.8	38.9	7,513.91	4.88
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	42,032	6	39	6.7	43.4	7,005.36	3.90
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$255,990	47	238	52.3	264.8	\$5,446.61	\$23.74
Hospital Outpatient							
Emergency Room	\$91,379		181		201.4	\$504.86	\$8.47
Surgery	41,860		53		59.0	789.81	3.88
Radiology	119,467		224		249.2	533.34	11.08
Pathology	30,341		2,242		2,494.5	13.53	2.81
Pharmacy	45,876		6,145		6,837.1	7.47	4.25
Cardiovascular	4,102		50		55.6	82.05	0.38
PT/OT/ST	118,424		3,617		4,024.4	32.74	10.98
Psychiatric	8,652		33		36.7	262.18	0.80
Substance Abuse	0		0		0.0	0.00	0.00
Other	89,856		1,932		2,149.6	46.51	8.33
	\$549,958		14,477		16,107.6	\$37.99	\$50.99
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$7,335		24		26.7	\$305.61	\$0.68
Office Visits	169,630		2,140		2,381.0	79.27	15.73
Preventive Medicine	20,473		811		902.3	25.24	1.90
Maternity	0		0		0.0	0.00	0.00
Certified Midwife	0		0		0.0	0.00	0.00
PT/OT/ST	279,507		12,958		14,417.5	21.57	25.92
Psychiatric and Substance Abuse	73,134		4,580		5,095.9	15.97	6.78
Radiology and Pathology	27,355		1,420		1,579.9	19.26	2.54
Home Health and Private Duty Nursing	3,928,373		260,248		289,560.9	15.09	364.24
Ambulance	71,206		11,309		12,582.8	6.30	6.60
Non-Emergency Transportation	173,233		4,398		4,893.4	39.39	16.06
Opioid Treatment Program	0		0		0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	18,877		166		184.7	113.71	1.75
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	6,421		1,190		1,324.0	5.40	0.60
Durable Medical Equipment	1,472,017		1,190,718		1,324,834.0	1.24	136.48
Applied Behavioral Analysis	441,295		34,607		38,504.9	12.75	40.92
Other	473,015		16,019		17,823.3	29.53	43.86
	\$7,161,870		1,540,588		1,714,111.4	\$4.65	\$664.05
Prescription Drugs							
Generic Scripts	\$535,357		16,009		17,812.2	\$33.44	\$49.64
Single-Source Brand	749,920		1,732		1,927.1	432.98	69.53
Multi-Source Brand	599,314		794		883.4	754.80	55.57
Specialty	1,766,230		316		351.6	5,589.33	163.76
Hepatitis C	0		0		0.0	0.00	0.00
Other	22		13		14.5	1.68	0.00
	\$3,650,843		18,864		20,988.7	\$193.53	\$338.50
Community Mental Health Center							
Case Management	\$24,864		65		72.3	\$382.52	\$2.31
Long Term Support Service	29,292		986		1,097.1	29.71	2.72
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	4,014		45		50.1	89.20	0.37
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	0		0		0.0	0.00	0.00
Emergency Service 24/7	94		4		4.5	23.46	0.01
APRTP	0		0		0.0	0.00	0.00
Supported Employment Services	0		0		0.0	0.00	0.00
Other	6,671		59		65.6	113.07	0.62
	\$64,935		1,159		1,289.5	\$56.03	\$6.02
All Services	\$11,683,596	47	1,575,326	52.3	1,752,762.1	\$7.42	\$1,083.30

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Elderly and Disabled Adults - Age 19-64

Member Months: 73,573

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$4,244,205	956	5,721	155.9	933.1	\$4,439.55	\$57.69
Surgical	2,787,563	280	3,084	45.7	503.0	9,955.58	37.89
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	6,471	3	9	0.5	1.5	2,157.13	0.09
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	540,427	97	707	15.8	115.3	5,571.41	7.35
Alcohol and Drug Abuse	187,863	72	410	11.7	66.9	2,609.20	2.55
Other	0	0	0	0.0	0.0	0.00	0.00
	\$7,766,529	1,408	9,931	229.7	1,619.8	\$5,516.00	\$105.56
Hospital Outpatient							
Emergency Room	\$4,165,285		5,563		907.3	\$748.75	\$56.61
Surgery	1,726,839		2,063		336.5	837.05	23.47
Radiology	2,389,277		8,291		1,352.3	288.18	32.48
Pathology	608,971		50,321		8,207.5	12.10	8.28
Pharmacy	3,001,760		352,234		57,450.7	8.52	40.80
Cardiovascular	173,503		1,073		175.0	161.70	2.36
PT/OT/ST	443,516		14,938		2,436.4	29.69	6.03
Psychiatric	34,858		150		24.5	232.39	0.47
Substance Abuse	10,025		89		14.5	112.64	0.14
Other	2,365,388		71,687		11,692.4	33.00	32.15
	\$14,919,423		506,409		82,597.2	\$29.46	\$202.78
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$167,604		635		103.6	\$263.94	\$2.28
Office Visits	1,944,446		35,233		5,746.6	55.19	26.43
Preventive Medicine	253,324		8,540		1,392.9	29.66	3.44
Maternity	17,205		80		13.0	216.25	0.23
Certified Midwife	0		0		0.0	0.00	0.00
PT/OT/ST	275,618		12,170		1,985.0	22.65	3.75
Psychiatric and Substance Abuse	1,222,810		16,096		2,625.3	75.97	16.62
Radiology and Pathology	1,077,329		40,862		6,664.7	26.37	14.64
Home Health and Private Duty Nursing	4,166,815		226,509		36,944.5	18.40	56.64
Ambulance	489,959		27,820		4,537.5	17.61	6.66
Non-Emergency Transportation	2,028,900		120,401		19,637.9	16.85	27.58
Opioid Treatment Program	708,557		69,330		11,308.0	10.22	9.63
Federally Qualified and Rural Health Clinics	1,295,121		8,904		1,452.3	145.45	17.60
Adult Medical Day Care	158,590		8,422		1,373.7	18.83	2.16
Personal Care	1,164,091		215,336		35,122.1	5.41	15.82
Durable Medical Equipment	3,010,074		1,289,519		210,325.4	2.33	40.91
Applied Behavioral Analysis	6,950		1,271		207.3	5.47	0.09
Other	4,809,450		365,564		59,624.9	13.16	65.37
	\$22,796,845		2,446,692		399,064.7	\$9.32	\$309.85
Prescription Drugs							
Generic Scripts	\$5,054,709		259,232		42,281.7	\$19.50	\$68.70
Single-Source Brand	11,789,638		29,941		4,883.5	393.76	160.24
Multi-Source Brand	3,518,673		7,976		1,300.9	441.16	47.83
Specialty	11,343,439		1,867		304.5	6,075.76	154.18
Hepatitis C	1,247,687		91		14.8	13,710.85	16.96
Other	232		65		10.6	3.57	0.00
	\$32,954,379		299,172		48,796.1	\$110.15	\$447.92
Community Mental Health Center							
Case Management	\$62,765		163		26.6	\$385.06	\$0.85
Long Term Support Service	98,831		1,558		254.1	63.43	1.34
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	148,682		2,955		482.0	50.32	2.02
Evidence Based Practice	623		47		7.7	13.25	0.01
Medication Management	6,132		189		30.8	32.44	0.08
Emergency Service 24/7	331		14		2.3	23.62	0.00
AP RTP	53,002		89		14.5	595.53	0.72
Supported Employment Services	1,411		52		8.5	27.13	0.02
Other	214,692		2,821		460.1	76.10	2.92
	\$586,468		7,888		1,286.6	\$74.35	\$7.97
All Services	\$79,023,644	1,408	3,270,092	229.7	533,364.4	\$24.17	\$1,074.09

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Elderly and Disabled Adults - Age 65+

Member Months: 12,753

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$1,196,490	283	1,682	266.3	1,582.6	\$4,227.88	\$93.82
Surgical	877,034	66	461	62.1	433.8	13,288.40	68.77
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	54,907	2	52	1.9	48.9	27,453.31	4.31
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$2,128,431	351	2,195	330.3	2,065.3	\$6,063.91	\$166.89
Hospital Outpatient							
Emergency Room	\$623,306		637		599.4	\$978.50	\$48.87
Surgery	220,009		297		279.5	740.77	17.25
Radiology	385,493		1,535		1,444.3	251.14	30.23
Pathology	116,138		11,337		10,667.2	10.24	9.11
Pharmacy	297,510		45,825		43,117.7	6.49	23.33
Cardiovascular	34,356		316		297.3	108.72	2.69
PT/OT/ST	71,425		2,738		2,576.2	26.09	5.60
Psychiatric	0		0		0.0	0.00	0.00
Substance Abuse	0		0		0.0	0.00	0.00
Other	492,073		8,154		7,672.3	60.35	38.58
	\$2,240,309		70,839		66,653.9	\$31.63	\$175.66
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$63,868		363		341.6	\$175.94	\$5.01
Office Visits	316,640		5,789		5,447.0	54.70	24.83
Preventive Medicine	34,499		1,231		1,158.3	28.03	2.71
Maternity	0		0		0.0	0.00	0.00
Certified Midwife	0		0		0.0	0.00	0.00
PT/OT/ST	34,838		1,489		1,401.0	23.40	2.73
Psychiatric and Substance Abuse	12,651		244		229.6	51.85	0.99
Radiology and Pathology	146,866		6,834		6,430.3	21.49	11.52
Home Health and Private Duty Nursing	650,955		9,771		9,193.7	66.62	51.04
Ambulance	111,277		5,043		4,745.1	22.07	8.73
Non-Emergency Transportation	159,969		8,317		7,825.6	19.23	12.54
Opioid Treatment Program	11,344		1,110		1,044.4	10.22	0.89
Federally Qualified and Rural Health Clinics	291,428		2,106		1,981.6	138.38	22.85
Adult Medical Day Care	389,696		19,501		18,348.9	19.98	30.56
Personal Care	2,188		103		96.9	21.24	0.17
Durable Medical Equipment	294,968		176,096		165,692.5	1.68	23.13
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	943,993		54,688		51,457.1	17.26	74.02
	\$3,465,181		292,685		275,393.6	\$11.84	\$271.71
Prescription Drugs							
Generic Scripts	\$715,114		52,648		49,537.6	\$13.58	\$56.07
Single-Source Brand	1,734,238		6,212		5,845.0	279.18	135.98
Multi-Source Brand	253,230		576		542.0	439.64	19.86
Specialty	656,762		143		134.6	4,592.74	51.50
Hepatitis C	0		0		0.0	0.00	0.00
Other	57		22		20.7	2.58	0.00
	\$3,359,401		59,601		56,079.9	\$56.36	\$263.41
Community Mental Health Center							
Case Management	\$1,942		5		4.7	\$388.49	\$0.15
Long Term Support Service	420		5		4.7	83.91	0.03
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	2,962		41		38.6	72.24	0.23
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	0		0		0.0	0.00	0.00
Emergency Service 24/7	0		0		0.0	0.00	0.00
APRTP	0		0		0.0	0.00	0.00
Supported Employment Services	0		0		0.0	0.00	0.00
Other	5,067		58		54.6	87.37	0.40
	\$10,391		109		102.6	\$95.33	\$0.81
All Services	\$11,203,714	351	425,429	330.3	400,295.2	\$26.34	\$878.48

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Dual Eligibles

Member Months: 172,429

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$3,304,019	2,314	11,980	161.0	833.7	\$1,427.84	\$19.16
Surgical	1,102,978	635	5,466	44.2	380.4	1,736.97	6.40
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	10,909	8	18	0.6	1.3	1,363.60	0.06
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	281,343	122	1,525	8.5	106.1	2,306.09	1.63
Alcohol and Drug Abuse	71,317	36	261	2.5	18.2	1,981.02	0.41
Other	0	0	0	0.0	0.0	0.00	0.00
	\$4,770,566	3,115	19,250	216.8	1,339.7	\$1,531.48	\$27.67
Hospital Outpatient							
Emergency Room	\$3,616,634		8,217		571.9	\$440.14	\$20.97
Surgery	1,177,986		4,514		314.1	260.96	6.83
Radiology	1,135,676		12,411		863.7	91.51	6.59
Pathology	189,048		33,330		2,319.6	5.67	1.10
Pharmacy	2,010,992		714,956		49,756.6	2.81	11.66
Cardiovascular	165,341		2,472		172.0	66.89	0.96
PT/OT/ST	428,049		38,109		2,652.2	11.23	2.48
Psychiatric	74,674		1,434		99.8	52.07	0.43
Substance Abuse	3,981		35		2.4	113.73	0.02
Other	2,903,062		139,477		9,706.8	20.81	16.84
	\$11,705,442		954,955		66,459.1	\$12.26	\$67.89
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$96,759		901		62.7	\$107.39	\$0.56
Office Visits	1,350,018		62,248		4,332.1	21.69	7.83
Preventive Medicine	128,939		5,742		399.6	22.46	0.75
Maternity	23,571		144		10.0	163.60	0.14
Certified Midwife	112		5		0.3	22.50	0.00
PT/OT/ST	109,152		14,665		1,020.6	7.44	0.63
Psychiatric and Substance Abuse	1,166,225		25,278		1,759.2	46.14	6.76
Radiology and Pathology	473,236		41,845		2,912.2	11.31	2.74
Home Health and Private Duty Nursing	1,735,141		145,339		10,114.7	11.94	10.06
Ambulance	932,935		84,035		5,848.3	11.10	5.41
Non-Emergency Transportation	5,356,961		224,184		15,601.9	23.90	31.07
Opioid Treatment Program	712,027		69,663		4,848.1	10.22	4.13
Federally Qualified and Rural Health Clinics	215,863		2,099		146.1	102.84	1.25
Adult Medical Day Care	301,360		13,948		970.7	21.61	1.75
Personal Care	4,841,842		895,680		62,333.9	5.41	28.08
Durable Medical Equipment	2,739,026		2,774,540		193,091.3	0.99	15.88
Applied Behavioral Analysis	53,385		3,486		242.6	15.31	0.31
Other	3,666,651		603,127		41,974.0	6.08	21.26
	\$23,903,202		4,966,929		345,668.4	\$4.81	\$138.63
Prescription Drugs							
Generic Scripts	\$158,794		49,207		3,424.5	\$3.23	\$0.92
Single-Source Brand	22,592		1,748		121.7	12.92	0.13
Multi-Source Brand	13,994		1,242		86.4	11.27	0.08
Specialty	0		0		0.0	0.00	0.00
Hepatitis C	0		0		0.0	0.00	0.00
Other	480		79		5.5	6.08	0.00
	\$195,859		52,276		3,638.1	\$3.75	\$1.14
Community Mental Health Center							
Case Management	\$90,459		247		17.2	\$366.23	\$0.52
Long Term Support Service	170,658		3,748		260.8	45.53	0.99
Partial Hospital	2,125		39		2.7	54.50	0.01
Psychotherapy	103,373		3,044		211.8	33.96	0.60
Evidence Based Practice	2,200		123		8.6	17.89	0.01
Medication Management	7,222		249		17.3	29.00	0.04
Emergency Service 24/7	376		16		1.1	23.50	0.00
AP RTP	45,167		76		5.3	594.31	0.26
Supported Employment Services	4,394		162		11.3	27.13	0.03
Other	213,304		5,552		386.4	38.42	1.24
	\$639,279		13,256		922.5	\$48.23	\$3.71
All Services	\$41,214,348	3,115	6,006,666	216.8	418,027.9	\$6.86	\$239.02

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Newborn Kick Payment

Member Months: 2,767

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$5,275,089	1,094	7,771	395.4	2,808.5	\$4,821.84	\$1,906.43
Surgical	297,741	12	225	4.3	81.3	24,811.77	107.60
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Well Newborn	991,741	1,448	3,092	523.3	1,117.5	684.90	358.42
Psychiatric	4,009	1	4	0.4	1.4	4,009.32	1.45
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$6,568,581	2,555	11,092	923.4	4,008.7	\$2,570.87	\$2,373.90
Hospital Outpatient							
Emergency Room	\$83,277		270		97.6	\$308.43	\$30.10
Surgery	2,325		11		4.0	211.35	0.84
Radiology	13,935		100		36.1	139.35	5.04
Pathology	9,631		1,278		461.9	7.54	3.48
Pharmacy	426		662		239.2	0.64	0.15
Cardiovascular	1,571		19		6.9	82.70	0.57
PT/OT/ST	1,927		29		10.5	66.44	0.70
Psychiatric	0		0		0.0	0.00	0.00
Substance Abuse	0		0		0.0	0.00	0.00
Other	108,556		1,055		381.3	102.90	39.23
	\$221,647		3,424		1,237.4	\$64.73	\$80.10
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$0		0		0.0	\$0.00	\$0.00
Office Visits	101,063		2,113		763.6	47.83	36.52
Preventive Medicine	291,984		6,346		2,293.5	46.01	105.52
Maternity	0		0		0.0	0.00	0.00
Certified Midwife	437		11		4.0	39.70	0.16
PT/OT/ST	1,005		40		14.5	25.12	0.36
Psychiatric and Substance Abuse	0		0		0.0	0.00	0.00
Radiology and Pathology	32,536		1,558		563.1	20.88	11.76
Home Health and Private Duty Nursing	67,334		834		301.4	80.74	24.33
Ambulance	62,079		2,507		906.0	24.76	22.44
Non-Emergency Transportation	2,349		124		44.8	18.94	0.85
Opioid Treatment Program	0		0		0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	239,730		1,412		510.3	169.78	86.64
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	0		0		0.0	0.00	0.00
Durable Medical Equipment	25,234		12,408		4,484.3	2.03	9.12
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	1,372,085		11,719		4,235.3	117.08	495.87
	\$2,195,835		39,072		14,120.7	\$56.20	\$793.58
Prescription Drugs							
Generic Scripts	\$5,797		547		197.7	\$10.60	\$2.10
Single-Source Brand	1,379		19		6.9	72.60	0.50
Multi-Source Brand	87		10		3.6	8.73	0.03
Specialty	12		2		0.7	5.95	0.00
Hepatitis C	0		0		0.0	0.00	0.00
Other	5		2		0.7	2.59	0.00
	\$7,281		580		209.6	\$12.55	\$2.63
Community Mental Health Center							
Case Management	\$0		0		0.0	\$0.00	\$0.00
Long Term Support Service	0		0		0.0	0.00	0.00
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	0		0		0.0	0.00	0.00
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	0		0		0.0	0.00	0.00
Emergency Service 24/7	0		0		0.0	0.00	0.00
APRTP	0		0		0.0	0.00	0.00
Supported Employment Services	0		0		0.0	0.00	0.00
Other	0		0		0.0	0.00	0.00
	\$0		0		0.0	\$0.00	\$0.00
All Services	\$8,993,345	2,555	54,168	923.4	19,576.4	\$166.03	\$3,250.21

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Neonatal Abstinence Syndrome Kick Payment

Member Months: 160

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$871,140	165	1,568	1,031.3	9,800.0	\$5,279.64	\$5,444.62
Surgical	0	0	0	0.0	0.0	0.00	0.00
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Well Newborn	15,333	2	5	12.5	31.3	7,666.44	95.83
Psychiatric	0	0	0	0.0	0.0	0.00	0.00
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$886,473	167	1,573	1,043.8	9,831.3	\$5,308.22	\$5,540.45
Hospital Outpatient							
Emergency Room	\$3,478		15		93.8	\$231.85	\$21.74
Surgery	1,441		1		6.3	1,440.61	9.00
Radiology	697		5		31.3	139.44	4.36
Pathology	799		44		275.0	18.17	5.00
Pharmacy	227		37		231.3	6.14	1.42
Cardiovascular	66		5		31.3	13.16	0.41
PT/OT/ST	223		2		12.5	111.47	1.39
Psychiatric	0		0		0.0	0.00	0.00
Substance Abuse	0		0		0.0	0.00	0.00
Other	4,804		63		393.8	76.26	30.03
	\$11,735		172		1,075.0	\$68.23	\$73.34
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$0		0		0.0	\$0.00	\$0.00
Office Visits	7,563		151		943.8	50.08	47.27
Preventive Medicine	21,823		446		2,787.5	48.93	136.40
Maternity	0		0		0.0	0.00	0.00
Certified Midwife	0		0		0.0	0.00	0.00
PT/OT/ST	350		15		93.8	23.34	2.19
Psychiatric and Substance Abuse	0		0		0.0	0.00	0.00
Radiology and Pathology	1,113		86		537.5	12.94	6.95
Home Health and Private Duty Nursing	12,665		145		906.3	87.35	79.16
Ambulance	5,016		148		925.0	33.89	31.35
Non-Emergency Transportation	335		23		143.8	14.55	2.09
Opioid Treatment Program	0		0		0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	16,773		98		612.5	171.15	104.83
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	0		0		0.0	0.00	0.00
Durable Medical Equipment	4,982		2,220		13,875.0	2.24	31.14
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	98,818		1,495		9,343.8	66.10	617.61
	\$169,438		4,827		30,168.8	\$35.10	\$1,058.99
Prescription Drugs							
Generic Scripts	\$855		64		400.0	\$13.36	\$5.34
Single-Source Brand	7		1		6.3	7.19	0.04
Multi-Source Brand	0		0		0.0	0.00	0.00
Specialty	0		0		0.0	0.00	0.00
Hepatitis C	0		0		0.0	0.00	0.00
Other	0		0		0.0	0.00	0.00
	\$862		65		406.3	\$13.26	\$5.39
Community Mental Health Center							
Case Management	\$0		0		0.0	\$0.00	\$0.00
Long Term Support Service	0		0		0.0	0.00	0.00
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	0		0		0.0	0.00	0.00
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	0		0		0.0	0.00	0.00
Emergency Service 24/7	0		0		0.0	0.00	0.00
AP RTP	0		0		0.0	0.00	0.00
Supported Employment Services	0		0		0.0	0.00	0.00
Other	0		0		0.0	0.00	0.00
	\$0		0		0.0	\$0.00	\$0.00
All Services	\$1,068,508	167	6,637	1,043.8	41,481.3	\$160.99	\$6,678.17

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Maternity Kick Payment

Member Months: 3,260

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$242,479	95	253	29.1	77.6	\$2,552.42	\$74.38
Surgical	0	0	0	0.0	0.0	0.00	0.00
Maternity Delivery	5,906,101	2,422	6,396	742.9	1,962.0	2,438.52	1,811.69
Maternity Non-Delivery	70,975	21	58	6.4	17.8	3,379.75	21.77
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	0	0	0	0.0	0.0	0.00	0.00
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$6,219,555	2,538	6,707	778.5	2,057.4	\$2,450.57	\$1,907.84
Hospital Outpatient							
Emergency Room	\$48,839		41		12.6	\$1,191.19	\$14.98
Surgery	16,043		14		4.3	1,145.92	4.92
Radiology	7,314		54		16.6	135.44	2.24
Pathology	5,902		544		166.9	10.85	1.81
Pharmacy	9,474		1,571		481.9	6.03	2.91
Cardiovascular	137		2		0.6	68.54	0.04
PT/OT/ST	538		20		6.1	26.92	0.17
Psychiatric	0		0		0.0	0.00	0.00
Substance Abuse	0		0		0.0	0.00	0.00
Other	64,567		1,246		382.2	51.82	19.81
	\$152,814		3,492		1,071.2	\$43.76	\$46.88
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$0		0		0.0	\$0.00	\$0.00
Office Visits	3,626		64		19.6	56.66	1.11
Preventive Medicine	1,645		171		52.5	9.62	0.50
Maternity	1,678,784		3,571		1,095.3	470.18	514.96
Certified Midwife	27,775		65		19.9	428.48	8.52
PT/OT/ST	22		4		1.2	5.50	0.01
Psychiatric and Substance Abuse	0		0		0.0	0.00	0.00
Radiology and Pathology	7,321		326		100.0	22.46	2.25
Home Health and Private Duty Nursing	701		10		3.1	70.10	0.22
Ambulance	9,738		1,062		325.8	9.17	2.99
Non-Emergency Transportation	0		0		0.0	0.00	0.00
Opioid Treatment Program	0		0		0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	8,427		51		15.6	165.24	2.59
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	0		0		0.0	0.00	0.00
Durable Medical Equipment	222		2		0.6	110.77	0.07
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	43,360		2,433		746.3	17.82	13.30
	\$1,781,622		7,758		2,379.9	\$229.64	\$546.51
Prescription Drugs							
Generic Scripts	\$0		0		0.0	\$0.00	\$0.00
Single-Source Brand	0		0		0.0	0.00	0.00
Multi-Source Brand	0		0		0.0	0.00	0.00
Specialty	0		0		0.0	0.00	0.00
Hepatitis C	0		0		0.0	0.00	0.00
Other	0		0		0.0	0.00	0.00
	\$0		0		0.0	\$0.00	\$0.00
Community Mental Health Center							
Case Management	\$0		0		0.0	\$0.00	\$0.00
Long Term Support Service	0		0		0.0	0.00	0.00
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	0		0		0.0	0.00	0.00
Evidence Based Practice	0		0		0.0	0.00	0.00
Medication Management	0		0		0.0	0.00	0.00
Emergency Service 24/7	0		0		0.0	0.00	0.00
APRTP	0		0		0.0	0.00	0.00
Supported Employment Services	0		0		0.0	0.00	0.00
Other	0		0		0.0	0.00	0.00
	\$0		0		0.0	\$0.00	\$0.00
All Services	\$8,153,990	2,538	17,957	778.5	5,508.4	\$454.07	\$2,501.22

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Severe/Persistent Mental Illness - Non-Dual

Member Months: 16,446

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$831,664	202	901	147.4	657.4	\$4,117.15	\$50.57
Surgical	400,660	57	343	41.6	250.3	7,029.13	24.36
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	14,423	6	19	4.4	13.9	2,403.85	0.88
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	781,999	154	1,261	112.4	920.1	5,077.91	47.55
Alcohol and Drug Abuse	31,204	11	71	8.0	51.8	2,836.72	1.90
Other	0	0	0	0.0	0.0	0.00	0.00
	\$2,059,950	430	2,595	313.8	1,893.5	\$4,790.58	\$125.26
Hospital Outpatient							
Emergency Room	\$1,400,277		2,185		1,594.4	\$640.86	\$85.15
Surgery	294,457		422		307.9	697.76	17.90
Radiology	366,206		1,611		1,175.5	227.32	22.27
Pathology	156,232		12,445		9,080.9	12.55	9.50
Pharmacy	243,001		50,310		36,710.2	4.83	14.78
Cardiovascular	42,654		198		144.5	215.43	2.59
PT/OT/ST	104,357		3,552		2,591.8	29.38	6.35
Psychiatric	30,578		210		153.2	145.61	1.86
Substance Abuse	3,911		37		27.0	105.70	0.24
Other	382,229		14,611		10,661.4	26.16	23.24
	\$3,023,902		85,581		62,446.8	\$35.33	\$183.87
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$34,505		166		121.1	\$207.86	\$2.10
Office Visits	489,430		8,927		6,513.9	54.83	29.76
Preventive Medicine	88,697		2,557		1,865.8	34.69	5.39
Maternity	20,898		112		81.9	186.24	1.27
Certified Midwife	73		3		2.2	24.21	0.00
PT/OT/ST	35,872		1,518		1,107.7	23.63	2.18
Psychiatric and Substance Abuse	360,598		4,391		3,204.0	82.12	21.93
Radiology and Pathology	251,210		10,752		7,845.5	23.36	15.28
Home Health and Private Duty Nursing	230,954		5,120		3,736.0	45.11	14.04
Ambulance	175,540		8,306		6,060.7	21.13	10.67
Non-Emergency Transportation	738,807		43,613		31,823.6	16.94	44.92
Opioid Treatment Program	160,489		15,703		11,458.2	10.22	9.76
Federally Qualified and Rural Health Clinics	329,159		2,316		1,689.9	142.12	20.02
Adult Medical Day Care	4,896		199		145.2	24.60	0.30
Personal Care	4,344		687		501.3	6.32	0.26
Durable Medical Equipment	296,293		92,972		67,839.9	3.19	18.02
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	938,058		74,202		54,143.8	12.64	57.04
	\$4,159,821		271,544		198,140.6	\$15.32	\$252.95
Prescription Drugs							
Generic Scripts	\$1,805,926		90,111		65,752.3	\$20.04	\$109.81
Single-Source Brand	3,616,361		7,479		5,457.3	483.54	219.90
Multi-Source Brand	724,812		1,795		1,309.8	403.79	44.07
Specialty	3,436,227		1,157		844.2	2,969.95	208.95
Hepatitis C	416,980		29		21.2	14,378.62	25.36
Other	104		24		17.5	4.35	0.01
	\$10,000,410		100,595		73,402.2	\$99.41	\$608.09
Community Mental Health Center							
Case Management	\$4,903,156		12,625		9,212.2	\$388.37	\$298.14
Long Term Support Service	4,551,366		162,984		118,926.3	27.93	276.75
Partial Hospital	129,288		1,232		899.0	104.94	7.86
Psychotherapy	1,128,680		20,009		14,600.2	56.41	68.63
Evidence Based Practice	114,525		6,098		4,449.6	18.78	6.96
Medication Management	67,959		2,291		1,671.7	29.66	4.13
Emergency Service 24/7	43,639		1,860		1,357.2	23.46	2.65
AP RTP	79,801		134		97.8	595.53	4.85
Supported Employment Services	420,219		14,596		10,650.4	28.79	25.55
Other	549,673		7,560		5,516.4	72.71	33.42
	\$11,988,307		229,389		167,380.8	\$52.26	\$728.97
All Services	\$31,232,391	430	689,704	313.8	503,263.9	\$45.28	\$1,899.14

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Severe/Persistent Mental Illness - Dual

Member Months: 23,082

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$475,644	292	1,708	151.8	888.0	\$1,628.92	\$20.61
Surgical	161,227	88	810	45.8	421.1	1,832.13	6.99
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	2,728	2	3	1.0	1.6	1,364.04	0.12
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	546,330	170	1,932	88.4	1,004.4	3,213.70	23.67
Alcohol and Drug Abuse	26,378	17	96	8.8	49.9	1,551.66	1.14
Other	0	0	0	0.0	0.0	0.00	0.00
	\$1,212,307	569	4,549	295.8	2,365.0	\$2,130.59	\$52.52
Hospital Outpatient							
Emergency Room	\$790,945		2,317		1,204.6	\$341.37	\$34.27
Surgery	216,058		763		396.7	283.17	9.36
Radiology	182,390		2,198		1,142.7	82.98	7.90
Pathology	32,633		6,390		3,322.1	5.11	1.41
Pharmacy	190,562		63,908		33,225.5	2.98	8.26
Cardiovascular	25,175		378		196.5	66.60	1.09
PT/OT/ST	72,124		5,918		3,076.7	12.19	3.12
Psychiatric	24,428		417		216.8	58.58	1.06
Substance Abuse	3,594		32		16.6	112.30	0.16
Other	427,806		26,714		13,888.5	16.01	18.53
	\$1,965,714		109,035		56,686.9	\$18.03	\$85.16
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$18,886		117		60.8	\$161.42	\$0.82
Office Visits	298,811		13,354		6,942.7	22.38	12.95
Preventive Medicine	21,650		1,055		548.5	20.52	0.94
Maternity	4,874		41		21.1	120.12	0.21
Certified Midwife	0		0		0.0	0.00	0.00
PT/OT/ST	14,015		2,241		1,165.1	6.25	0.61
Psychiatric and Substance Abuse	960,386		16,023		8,330.3	59.94	41.61
Radiology and Pathology	78,748		7,113		3,698.0	11.07	3.41
Home Health and Private Duty Nursing	88,288		1,689		878.1	52.27	3.83
Ambulance	138,887		10,226		5,316.5	13.58	6.02
Non-Emergency Transportation	954,959		48,741		25,340.3	19.59	41.37
Opioid Treatment Program	115,055		11,257		5,852.5	10.22	4.98
Federally Qualified and Rural Health Clinics	23,791		366		190.3	65.00	1.03
Adult Medical Day Care	17,221		1,147		596.3	15.01	0.75
Personal Care	196,705		36,440		18,945.0	5.40	8.52
Durable Medical Equipment	218,100		188,744		98,127.3	1.16	9.45
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	547,689		111,876		58,163.9	4.90	23.73
	\$3,698,065		450,430		234,176.7	\$8.21	\$160.22
Prescription Drugs							
Generic Scripts	\$28,133		7,642		3,973.0	\$3.68	\$1.22
Single-Source Brand	2,020		221		114.9	9.14	0.09
Multi-Source Brand	1,183		78		40.6	15.16	0.05
Specialty	0		0		0.0	0.00	0.00
Hepatitis C	0		0		0.0	0.00	0.00
Other	55		28		14.6	1.97	0.00
	\$31,391		7,969		4,143.1	\$3.94	\$1.36
Community Mental Health Center							
Case Management	\$7,121,612		18,344		9,537.0	\$388.23	\$308.54
Long Term Support Service	9,796,998		330,655		171,906.4	29.63	424.45
Partial Hospital	619,319		6,064		3,152.7	102.13	26.83
Psychotherapy	676,755		20,801		10,814.4	32.53	29.32
Evidence Based Practice	168,798		8,515		4,426.9	19.82	7.31
Medication Management	143,560		4,704		2,445.6	30.52	6.22
Emergency Service 24/7	66,788		2,831		1,471.8	23.59	2.89
AP RTP	172,711		290		150.8	595.56	7.48
Supported Employment Services	826,998		28,618		14,878.4	28.90	35.83
Other	313,603		10,646		5,534.8	29.46	13.59
	\$19,907,143		431,468		224,318.7	\$46.14	\$862.47
All Services	\$26,814,619	569	1,003,451	295.8	521,690.4	\$26.72	\$1,161.74

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Severe Mental Illness - Non-Dual

Member Months: 7,448

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$570,897	121	1,006	194.9	1,620.8	\$4,718.16	\$76.65
Surgical	253,436	25	448	40.3	721.8	10,137.42	34.03
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	8,988	4	19	6.4	30.6	2,246.92	1.21
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	402,004	70	523	112.8	842.6	5,742.91	53.97
Alcohol and Drug Abuse	94,463	23	172	37.1	277.1	4,107.08	12.68
Other	0	0	0	0.0	0.0	0.00	0.00
	\$1,329,787	243	2,168	391.5	3,492.8	\$5,472.37	\$178.53
Hospital Outpatient							
Emergency Room	\$777,336		1,206		1,943.0	\$644.56	\$104.36
Surgery	93,534		127		204.6	736.48	12.56
Radiology	150,532		689		1,110.0	218.48	20.21
Pathology	82,748		5,641		9,088.2	14.67	11.11
Pharmacy	37,885		13,989		22,537.5	2.71	5.09
Cardiovascular	10,107		65		104.7	155.50	1.36
PT/OT/ST	47,931		2,826		4,552.9	16.96	6.44
Psychiatric	17,025		112		180.4	152.01	2.29
Substance Abuse	2,695		24		38.7	112.29	0.36
Other	155,739		4,977		8,018.4	31.29	20.91
	\$1,375,531		29,656		47,778.5	\$46.38	\$184.68
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$16,536		62		99.9	\$266.70	\$2.22
Office Visits	232,158		4,161		6,703.7	55.79	31.17
Preventive Medicine	44,605		1,011		1,628.8	44.12	5.99
Maternity	26,542		108		173.8	246.02	3.56
Certified Midwife	47		2		3.2	23.50	0.01
PT/OT/ST	17,331		763		1,229.3	22.71	2.33
Psychiatric and Substance Abuse	525,452		4,388		7,069.5	119.75	70.55
Radiology and Pathology	175,560		6,111		9,845.4	28.73	23.57
Home Health and Private Duty Nursing	62,411		1,033		1,664.3	60.42	8.38
Ambulance	94,777		4,690		7,556.0	20.21	12.72
Non-Emergency Transportation	338,803		22,568		36,359.1	15.01	45.49
Opioid Treatment Program	136,098		13,316		21,453.3	10.22	18.27
Federally Qualified and Rural Health Clinics	193,661		1,299		2,092.8	149.09	26.00
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	39,438		7,309		11,775.5	5.40	5.29
Durable Medical Equipment	96,451		15,214		24,511.1	6.34	12.95
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	488,659		29,687		47,828.4	16.46	65.61
	\$2,488,528		111,722		179,994.1	\$22.27	\$334.10
Prescription Drugs							
Generic Scripts	\$503,323		27,485		44,280.8	\$18.31	\$67.57
Single-Source Brand	740,793		1,819		2,930.6	407.25	99.46
Multi-Source Brand	213,338		852		1,372.6	250.40	28.64
Specialty	688,035		176		283.6	3,909.29	92.37
Hepatitis C	174,034		15		24.2	11,602.27	23.37
Other	46		8		12.9	5.71	0.01
	\$2,319,569		30,355		48,904.7	\$76.41	\$311.42
Community Mental Health Center							
Case Management	\$1,469,658		3,784		6,096.4	\$388.39	\$197.31
Long Term Support Service	411,654		15,157		24,419.3	27.16	55.27
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	463,382		6,911		11,134.2	67.05	62.21
Evidence Based Practice	10,957		456		734.7	24.03	1.47
Medication Management	5,581		199		320.6	28.05	0.75
Emergency Service 24/7	5,537		236		380.2	23.46	0.74
AP RTP	58,362		98		157.9	595.53	7.84
Supported Employment Services	57,954		2,025		3,262.5	28.62	7.78
Other	208,684		2,330		3,753.8	89.56	28.02
	\$2,691,769		31,196		50,259.6	\$86.29	\$361.39
All Services	\$10,205,184	243	205,097	391.5	330,429.6	\$49.76	\$1,370.12

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Severe Mental Illness - Dual

Member Months: 3,417

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$57,165	40	171	140.5	600.6	\$1,429.13	\$16.73
Surgical	290,280	17	312	59.7	1,095.8	17,075.29	84.96
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	5,456	4	8	14.0	28.1	1,364.00	1.60
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	49,756	22	307	77.3	1,078.3	2,261.62	14.56
Alcohol and Drug Abuse	3,698	2	8	7.0	28.1	1,849.10	1.08
Other	0	0	0	0.0	0.0	0.00	0.00
	\$406,355	85	806	298.5	2,830.9	\$4,780.64	\$118.94
Hospital Outpatient							
Emergency Room	\$121,721		369		1,296.0	\$329.87	\$35.63
Surgery	24,475		126		442.5	194.25	7.16
Radiology	26,518		339		1,190.7	78.22	7.76
Pathology	7,443		1,197		4,204.2	6.22	2.18
Pharmacy	9,748		7,917		27,806.5	1.23	2.85
Cardiovascular	1,762		39		137.0	45.18	0.52
PT/OT/ST	10,505		802		2,816.8	13.10	3.07
Psychiatric	1,201		28		98.3	42.89	0.35
Substance Abuse	674		6		21.1	112.29	0.20
Other	52,401		2,717		9,542.8	19.29	15.34
	\$256,448		13,540		47,555.9	\$18.94	\$75.06
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$1,469		13		45.7	\$113.03	\$0.43
Office Visits	46,986		2,044		7,179.0	22.99	13.75
Preventive Medicine	3,651		132		463.6	27.66	1.07
Maternity	1,227		16		57.3	75.21	0.36
Certified Midwife	0		0		0.0	0.00	0.00
PT/OT/ST	2,263		208		730.5	10.88	0.66
Psychiatric and Substance Abuse	197,320		2,813		9,880.0	70.15	57.75
Radiology and Pathology	15,394		1,122		3,940.7	13.72	4.51
Home Health and Private Duty Nursing	9,533		948		3,329.6	10.06	2.79
Ambulance	20,961		1,224		4,299.0	17.13	6.14
Non-Emergency Transportation	173,744		11,802		41,451.6	14.72	50.85
Opioid Treatment Program	53,354		5,220		18,334.0	10.22	15.62
Federally Qualified and Rural Health Clinics	9,615		78		274.0	123.27	2.81
Adult Medical Day Care	3,189		225		790.3	14.17	0.93
Personal Care	15,108		2,800		9,834.3	5.40	4.42
Durable Medical Equipment	38,767		28,925		101,591.9	1.34	11.35
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	64,855		11,220		39,407.5	5.78	18.98
	\$657,437		68,790		241,608.9	\$9.56	\$192.42
Prescription Drugs							
Generic Scripts	\$2,810		684		2,402.4	\$4.11	\$0.82
Single-Source Brand	529		30		105.4	17.64	0.15
Multi-Source Brand	545		12		42.1	45.44	0.16
Specialty	0		0		0.0	0.00	0.00
Hepatitis C	0		0		0.0	0.00	0.00
Other	10		1		3.5	10.41	0.00
	\$3,895		727		2,553.4	\$5.36	\$1.14
Community Mental Health Center							
Case Management	\$671,525		1,729		6,072.7	\$388.39	\$196.55
Long Term Support Service	335,146		12,010		42,182.1	27.91	98.09
Partial Hospital	15,612		152		533.9	102.71	4.57
Psychotherapy	107,638		2,656		9,328.5	40.53	31.50
Evidence Based Practice	9,135		674		2,367.3	13.55	2.67
Medication Management	4,760		176		618.2	27.05	1.39
Emergency Service 24/7	5,553		223		783.2	24.90	1.63
APRTP	20,844		35		122.9	595.53	6.10
Supported Employment Services	79,508		2,772		9,736.0	28.68	23.27
Other	36,796		881		3,094.3	41.77	10.77
	\$1,286,515		21,308		74,839.1	\$60.38	\$376.55
All Services	\$2,610,650	85	105,171	298.5	369,388.1	\$24.82	\$764.11

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Low Utilizer - Non-Dual

Member Months: 1,412

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$22,788	7	106	59.5	900.9	\$3,255.41	\$16.14
Surgical	35,663	5	47	42.5	399.4	7,132.54	25.26
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	19,906	5	25	42.5	212.5	3,981.19	14.10
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$78,357	17	178	144.5	1,512.8	\$4,609.21	\$55.49
Hospital Outpatient							
Emergency Room	\$69,815		88		747.9	\$793.35	\$49.44
Surgery	23,886		23		195.5	1,038.52	16.92
Radiology	29,566		139		1,181.3	212.70	20.94
Pathology	12,407		931		7,912.3	13.33	8.79
Pharmacy	26,938		3,017		25,640.5	8.93	19.08
Cardiovascular	2,626		26		221.0	101.00	1.86
PT/OT/ST	6,043		274		2,328.6	22.05	4.28
Psychiatric	88		1		8.5	87.82	0.06
Substance Abuse	0		0		0.0	0.00	0.00
Other	24,169		634		5,388.2	38.12	17.12
	\$195,537		5,133		43,623.7	\$38.09	\$138.48
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$7,781		31		263.5	\$251.02	\$5.51
Office Visits	32,675		590		5,014.2	55.38	23.14
Preventive Medicine	8,201		351		2,983.0	23.36	5.81
Maternity	2,562		5		42.4	513.46	1.81
Certified Midwife	0		0		0.0	0.00	0.00
PT/OT/ST	4,483		215		1,827.2	20.85	3.17
Psychiatric and Substance Abuse	33,256		758		6,442.0	43.87	23.55
Radiology and Pathology	17,834		795		6,756.4	22.43	12.63
Home Health and Private Duty Nursing	59,035		8,449		71,805.3	6.99	41.81
Ambulance	7,497		373		3,170.0	20.10	5.31
Non-Emergency Transportation	59,956		4,874		41,422.5	12.30	42.46
Opioid Treatment Program	23,189		2,269		19,283.5	10.22	16.42
Federally Qualified and Rural Health Clinics	26,756		186		1,580.8	143.85	18.95
Adult Medical Day Care	10,728		515		4,376.8	20.83	7.60
Personal Care	15,151		2,808		23,864.3	5.40	10.73
Durable Medical Equipment	19,226		3,168		26,923.8	6.07	13.62
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	91,394		4,313		36,654.8	21.19	64.73
	\$419,725		29,700		252,410.5	\$14.13	\$297.26
Prescription Drugs							
Generic Scripts	\$143,311		7,576		64,386.0	\$18.92	\$101.50
Single-Source Brand	325,419		744		6,323.0	437.39	230.47
Multi-Source Brand	23,994		60		509.9	399.89	16.99
Specialty	195,381		81		688.4	2,412.11	138.37
Hepatitis C	20,902		2		17.0	10,450.75	14.80
Other	0		0		0.0	0.00	0.00
	\$709,006		8,463		71,924.3	\$83.78	\$502.13
Community Mental Health Center							
Case Management	\$307,296		791		6,722.5	\$388.49	\$217.63
Long Term Support Service	39,158		1,589		13,504.4	24.64	27.73
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	42,413		557		4,733.8	76.15	30.04
Evidence Based Practice	106		4		34.0	26.54	0.08
Medication Management	5,223		195		1,657.2	26.78	3.70
Emergency Service 24/7	4,551		194		1,648.7	23.46	3.22
AP RTP	5,955		10		85.0	595.53	4.22
Supported Employment Services	7,301		274		2,328.6	26.65	5.17
Other	39,732		542		4,606.3	73.31	28.14
	\$451,736		4,156		35,320.5	\$108.69	\$319.93
All Services	\$1,854,360	17	47,630	144.5	404,791.8	\$38.93	\$1,313.30

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Low Utilizer - Dual

Member Months: 2,242

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$42,820	20	237	107.0	1,268.3	\$2,140.98	\$19.10
Surgical	8,014	5	60	26.8	321.1	1,602.70	3.57
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	2,999	3	40	16.1	214.1	999.77	1.34
Alcohol and Drug Abuse	1,364	1	3	5.4	16.1	1,364.00	0.61
Other	0	0	0	0.0	0.0	0.00	0.00
	\$55,197	29	340	155.2	1,819.5	\$1,903.33	\$24.62
Hospital Outpatient							
Emergency Room	\$37,542		112		599.4	\$335.20	\$16.74
Surgery	17,371		76		406.7	228.56	7.75
Radiology	14,658		194		1,038.2	75.56	6.54
Pathology	2,869		646		3,457.1	4.44	1.28
Pharmacy	11,445		4,426		23,685.8	2.59	5.10
Cardiovascular	3,207		50		267.6	64.14	1.43
PT/OT/ST	4,592		586		3,136.0	7.84	2.05
Psychiatric	1,699		33		176.6	51.49	0.76
Substance Abuse	0		0		0.0	0.00	0.00
Other	34,757		2,292		12,265.7	15.16	15.50
	\$128,141		8,415		45,033.0	\$15.23	\$57.15
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$977		7		37.5	\$139.64	\$0.44
Office Visits	26,318		1,242		6,646.6	21.19	11.74
Preventive Medicine	3,873		374		2,001.5	10.36	1.73
Maternity	97		1		5.4	97.28	0.04
Certified Midwife	0		0		0.0	0.00	0.00
PT/OT/ST	1,844		310		1,659.0	5.95	0.82
Psychiatric and Substance Abuse	18,304		478		2,558.0	38.29	8.16
Radiology and Pathology	5,688		534		2,857.7	10.65	2.54
Home Health and Private Duty Nursing	16,450		2,628		14,063.8	6.26	7.34
Ambulance	5,570		400		2,140.6	13.92	2.48
Non-Emergency Transportation	66,059		3,293		17,622.5	20.06	29.46
Opioid Treatment Program	10,578		1,035		5,538.8	10.22	4.72
Federally Qualified and Rural Health Clinics	1,939		15		80.3	129.28	0.86
Adult Medical Day Care	1,039		95		508.4	10.94	0.46
Personal Care	3,194		592		3,168.1	5.40	1.42
Durable Medical Equipment	35,499		25,273		135,248.7	1.40	15.83
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	54,932		11,717		62,703.7	4.69	24.50
	\$252,361		47,994		256,840.4	\$5.26	\$112.54
Prescription Drugs							
Generic Scripts	\$2,498		824		4,409.6	\$3.03	\$1.11
Single-Source Brand	1,084		16		85.6	67.75	0.48
Multi-Source Brand	5		1		5.4	5.31	0.00
Specialty	0		0		0.0	0.00	0.00
Hepatitis C	0		0		0.0	0.00	0.00
Other	1		1		5.4	1.15	0.00
	\$3,589		842		4,506.0	\$4.26	\$1.60
Community Mental Health Center							
Case Management	\$420,346		1,082		5,790.3	\$388.49	\$187.46
Long Term Support Service	49,924		1,992		10,660.2	25.06	22.26
Partial Hospital	2,276		21		112.4	108.37	1.01
Psychotherapy	31,632		781		4,179.5	40.50	14.11
Evidence Based Practice	239		9		48.2	26.54	0.11
Medication Management	8,546		303		1,621.5	28.21	3.81
Emergency Service 24/7	68		9		48.2	7.50	0.03
AP RTP	6,551		11		58.9	595.53	2.92
Supported Employment Services	39,162		1,360		7,278.1	28.80	17.46
Other	25,134		805		4,308.0	31.22	11.21
	\$583,877		6,373		34,105.2	\$91.62	\$260.39
All Services	\$1,023,164	29	63,964	155.2	342,304.1	\$16.00	\$456.29

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Serious Emotionally Disturbed Child

Member Months: 75,719

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$295,638	68	289	10.8	45.8	\$4,347.62	\$3.90
Surgical	192,529	21	71	3.3	11.3	9,168.06	2.54
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	3,429	1	1	0.2	0.2	3,428.62	0.05
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	3,547,293	440	4,279	69.7	678.1	8,062.03	46.85
Alcohol and Drug Abuse	49,008	7	117	1.1	18.5	7,001.20	0.65
Other	0	0	0	0.0	0.0	0.00	0.00
	\$4,087,897	537	4,757	85.1	753.9	\$7,612.47	\$53.99
Hospital Outpatient							
Emergency Room	\$1,612,608		3,594		569.6	\$448.69	\$21.30
Surgery	294,947		289		45.8	1,020.58	3.90
Radiology	325,634		1,575		249.6	206.75	4.30
Pathology	184,520		14,401		2,282.3	12.81	2.44
Pharmacy	53,437		20,267		3,211.9	2.64	0.71
Cardiovascular	21,091		150		23.8	140.61	0.28
PT/OT/ST	177,814		5,245		831.2	33.90	2.35
Psychiatric	157,961		470		74.5	336.09	2.09
Substance Abuse	0		0		0.0	0.00	0.00
Other	551,079		16,536		2,620.6	33.33	7.28
	\$3,379,091		62,527		9,909.3	\$54.04	\$44.63
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$54,943		143		22.7	\$384.22	\$0.73
Office Visits	1,036,989		18,793		2,978.3	55.18	13.70
Preventive Medicine	324,546		11,893		1,884.8	27.29	4.29
Maternity	4,852		20		3.2	238.91	0.06
Certified Midwife	182		4		0.6	45.47	0.00
PT/OT/ST	390,022		14,376		2,278.3	27.13	5.15
Psychiatric and Substance Abuse	348,007		7,135		1,130.8	48.77	4.60
Radiology and Pathology	191,717		12,229		1,938.1	15.68	2.53
Home Health and Private Duty Nursing	234,643		31,653		5,016.4	7.41	3.10
Ambulance	181,971		14,018		2,221.6	12.98	2.40
Non-Emergency Transportation	215,301		9,564		1,515.7	22.51	2.84
Opioid Treatment Program	0		0		0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	705,568		4,605		729.8	153.22	9.32
Adult Medical Day Care	0		0		0.0	0.00	0.00
Personal Care	0		0		0.0	0.00	0.00
Durable Medical Equipment	419,646		188,943		29,943.8	2.22	5.54
Applied Behavioral Analysis	213,334		14,611		2,315.6	14.60	2.82
Other	1,258,533		80,595		12,772.8	15.62	16.62
	\$5,580,252		408,582		64,752.5	\$13.66	\$73.70
Prescription Drugs							
Generic Scripts	\$2,994,585		98,371		15,589.9	\$30.44	\$39.55
Single-Source Brand	2,077,325		6,994		1,108.4	297.02	27.43
Multi-Source Brand	185,808		827		131.1	224.68	2.45
Specialty	1,534,775		284		45.0	5,404.14	20.27
Hepatitis C	0		0		0.0	0.00	0.00
Other	734		36		5.7	20.39	0.01
	\$6,793,227		106,512		16,880.1	\$63.78	\$89.72
Community Mental Health Center							
Case Management	\$19,731,407		50,796		8,050.2	\$388.44	\$260.59
Long Term Support Service	8,373,692		337,268		53,450.5	24.83	110.59
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	9,213,704		100,389		15,909.7	91.78	121.68
Evidence Based Practice	453		21		3.3	21.58	0.01
Medication Management	9,537		358		56.7	26.64	0.13
Emergency Service 24/7	15,366		655		103.8	23.46	0.20
AP RTP	16,675		28		4.4	595.53	0.22
Supported Employment Services	8,551		297		47.1	28.79	0.11
Other	1,245,309		13,608		2,156.6	91.51	16.45
	\$38,614,694		503,420		79,782.4	\$76.70	\$509.97
All Services	\$58,455,162	537	1,085,798	85.1	172,078.2	\$53.84	\$772.00

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Granite Advantage - Medically Frail

Member Months: 84,734

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$5,025,483	1,138	6,446	161.2	912.9	\$4,416.07	\$59.31
Surgical	3,895,525	368	4,126	52.1	584.3	10,585.67	45.97
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	14,904	6	33	0.8	4.7	2,483.93	0.18
Well Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	1,054,213	216	1,547	30.6	219.1	4,880.62	12.44
Alcohol and Drug Abuse	1,567,815	402	4,632	56.9	656.0	3,900.04	18.50
Other	0	0	0	0.0	0.0	0.00	0.00
	\$11,557,940	2,130	16,784	301.6	2,376.9	\$5,426.26	\$136.40
Hospital Outpatient							
Emergency Room	\$4,992,095		7,346		1,040.3	\$679.57	\$58.91
Surgery	1,434,907		1,806		255.8	794.52	16.93
Radiology	2,201,714		7,728		1,094.4	284.90	25.98
Pathology	659,261		50,015		7,083.1	13.18	7.78
Pharmacy	4,229,112		420,622		59,568.1	10.05	49.91
Cardiovascular	258,921		1,130		160.0	229.13	3.06
PT/OT/ST	531,870		17,651		2,499.7	30.13	6.28
Psychiatric	133,057		625		88.5	212.89	1.57
Substance Abuse	86,633		781		110.6	110.93	1.02
Other	2,179,523		61,644		8,730.0	35.36	25.72
	\$16,707,093		569,348		80,630.6	\$29.34	\$197.17
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$173,111		651		92.2	\$265.92	\$2.04
Office Visits	2,424,031		40,044		5,671.0	60.53	28.61
Preventive Medicine	256,861		8,319		1,178.1	30.88	3.03
Maternity	27,370		123		17.4	222.24	0.32
Certified Midwife	413		21		3.0	19.66	0.00
PT/OT/ST	254,505		11,041		1,563.6	23.05	3.00
Psychiatric and Substance Abuse	6,019,331		50,039		7,086.5	120.29	71.04
Radiology and Pathology	2,169,100		64,921		9,194.1	33.41	25.60
Home Health and Private Duty Nursing	1,114,990		41,133		5,825.2	27.11	13.16
Ambulance	518,958		25,385		3,595.0	20.44	6.12
Non-Emergency Transportation	3,203,961		197,253		27,934.8	16.24	37.81
Opioid Treatment Program	1,832,751		179,328		25,396.3	10.22	21.63
Federally Qualified and Rural Health Clinics	1,850,785		12,137		1,718.8	152.49	21.84
Adult Medical Day Care	14,519		816		115.6	17.79	0.17
Personal Care	48,028		8,901		1,260.6	5.40	0.57
Durable Medical Equipment	1,414,337		232,642		32,946.6	6.08	16.69
Applied Behavioral Analysis	345		23		3.3	15.00	0.00
Other	4,901,197		348,027		49,287.3	14.08	57.84
	\$26,224,594		1,220,804		172,889.3	\$21.48	\$309.49
Prescription Drugs							
Generic Scripts	\$3,608,263		188,751		26,730.8	\$19.12	\$42.58
Single-Source Brand	7,335,478		18,750		2,655.4	391.23	86.57
Multi-Source Brand	2,554,617		10,717		1,517.7	238.37	30.15
Specialty	8,718,880		1,997		282.8	4,365.99	102.90
Hepatitis C	3,459,060		280		39.7	12,353.79	40.82
Other	1,511		43		6.1	35.14	0.02
	\$25,677,810		220,538		31,232.4	\$116.43	\$303.04
Community Mental Health Center							
Case Management	\$92,485		241		34.1	\$383.75	\$1.09
Long Term Support Service	155,601		2,231		316.0	69.74	1.84
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	195,115		8,730		1,236.3	22.35	2.30
Evidence Based Practice	2,270		230		32.6	9.87	0.03
Medication Management	4,162		156		22.1	26.68	0.05
Emergency Service 24/7	878		37		5.2	23.72	0.01
AP RTP	97,071		163		23.1	595.53	1.15
Supported Employment Services	1,229		83		11.8	14.81	0.01
Other	533,744		8,771		1,242.1	60.85	6.30
	\$1,082,554		20,642		2,923.3	\$52.44	\$12.78
All Services	\$81,249,990	2,130	2,048,116	301.6	290,052.5	\$39.67	\$958.88

Appendix A2
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 CY 2019 MCO Encounter Base Experience Data

Eligibility Category: Granite Advantage - Non-Medically Frail

Member Months: 383,770

Benefits	Total Paid Dollars	Total Paid Admits	Total Paid Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$7,876,994	1,732	9,536	54.2	298.2	\$4,547.92	\$20.53
Surgical	5,293,368	670	4,759	21.0	148.8	7,900.55	13.79
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	77,397	27	134	0.8	4.2	2,866.54	0.20
Well Newborn	2,200	4	7	0.1	0.2	550.01	0.01
Psychiatric	1,499,344	339	2,162	10.6	67.6	4,422.84	3.91
Alcohol and Drug Abuse	1,913,217	607	5,639	19.0	176.3	3,151.92	4.99
Other	0	0	0	0.0	0.0	0.00	0.00
	\$16,662,520	3,379	22,237	105.7	695.3	\$4,931.20	\$43.42
Hospital Outpatient							
Emergency Room	\$12,046,890		18,173		568.2	\$662.90	\$31.39
Surgery	4,052,507		4,614		144.3	878.31	10.56
Radiology	5,097,659		21,287		665.6	239.47	13.28
Pathology	1,721,447		131,530		4,112.8	13.09	4.49
Pharmacy	5,442,435		669,445		20,932.7	8.13	14.18
Cardiovascular	604,412		2,535		79.3	238.43	1.57
PT/OT/ST	1,047,768		33,861		1,058.8	30.94	2.73
Psychiatric	177,852		1,038		32.5	171.34	0.46
Substance Abuse	140,558		1,202		37.6	116.94	0.37
Other	4,736,178		176,906		5,531.6	26.77	12.34
	\$35,067,706		1,060,591		33,163.4	\$33.06	\$91.38
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$337,776		1,301		40.7	\$259.63	\$0.88
Office Visits	5,539,769		94,622		2,958.7	58.55	14.44
Preventive Medicine	1,194,959		35,844		1,120.8	33.34	3.11
Maternity	155,601		697		21.8	223.10	0.41
Certified Midwife	6,788		69		2.1	98.87	0.02
PT/OT/ST	644,057		28,245		883.2	22.80	1.68
Psychiatric and Substance Abuse	9,288,844		71,057		2,221.9	130.72	24.20
Radiology and Pathology	3,580,582		129,911		4,062.2	27.56	9.33
Home Health and Private Duty Nursing	556,076		11,055		345.7	50.30	1.45
Ambulance	839,074		43,834		1,370.6	19.14	2.19
Non-Emergency Transportation	3,675,689		232,458		7,268.7	15.81	9.58
Opioid Treatment Program	2,340,352		228,991		7,160.3	10.22	6.10
Federally Qualified and Rural Health Clinics	4,037,515		28,233		882.8	143.01	10.52
Adult Medical Day Care	12,380		526		16.4	23.54	0.03
Personal Care	0		0		0.0	0.00	0.00
Durable Medical Equipment	1,359,400		120,822		3,778.0	11.25	3.54
Applied Behavioral Analysis	0		0		0.0	0.00	0.00
Other	9,434,689		675,538		21,123.2	13.97	24.58
	\$43,003,551		1,703,203		53,257.0	\$25.25	\$112.06
Prescription Drugs							
Generic Scripts	\$7,162,579		383,547		11,993.0	\$18.67	\$18.66
Single-Source Brand	12,873,915		35,973		1,124.8	357.88	33.55
Multi-Source Brand	2,955,816		12,105		378.5	244.18	7.70
Specialty	12,418,620		2,788		87.2	4,454.31	32.36
Hepatitis C	3,300,686		270		8.4	12,224.76	8.60
Other	1,149		84		2.6	13.67	0.00
	\$38,712,765		434,767		13,594.6	\$89.04	\$100.87
Community Mental Health Center							
Case Management	\$100,435		258		8.1	\$389.28	\$0.26
Long Term Support Service	234,810		3,111		97.3	75.48	0.61
Partial Hospital	0		0		0.0	0.00	0.00
Psychotherapy	296,138		8,629		269.8	34.32	0.77
Evidence Based Practice	557		21		0.7	26.54	0.00
Medication Management	4,438		166		5.2	26.74	0.01
Emergency Service 24/7	835		35		1.1	23.86	0.00
AP RTP	103,092		174		5.4	592.48	0.27
Supported Employment Services	1,094		50		1.6	21.88	0.00
Other	500,604		6,935		216.8	72.19	1.30
	\$1,242,003		19,379		606.0	\$64.09	\$3.24
All Services	\$134,688,545	3,379	3,240,177	105.7	101,316.3	\$41.57	\$350.96

Eligibility Category: Low Income Children - Age 0-11 Months

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$18.40	1.0000	1.0874	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	\$20.12
Surgical	5.46	1.0000	1.0449	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	6.06
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Well Newborn	0.01	1.0000	1.1153	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.01
Psychiatric	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Alcohol and Drug Abuse	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
	\$23.86										\$26.20
Hospital Outpatient											
Emergency Room	\$18.05	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	\$22.39
Surgery	4.19	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	5.19
Radiology	3.76	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	4.67
Pathology	1.05	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	1.30
Pharmacy	1.36	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	1.69
Cardiovascular	0.34	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.42
PT/OT/ST	1.41	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	1.75
Psychiatric	0.00	1.0000	1.0000	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Substance Abuse	0.00	1.0000	1.0000	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	11.09	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	13.76
	\$41.25										\$51.17
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.26	1.0000	1.3531	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.36
Office Visits	17.72	1.0000	1.0601	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	18.97
Preventive Medicine	19.26	1.0000	1.0635	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	20.69
Maternity	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Certified Midwife	0.04	1.0000	1.0669	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.05
PT/OT/ST	0.51	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.55
Psychiatric and Substance Abuse	0.01	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.01
Radiology and Pathology	1.42	1.0000	1.0565	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.52
Home Health and Private Duty Nursing	5.77	1.0000	1.0629	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	6.19
Ambulance	1.78	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.81
Non-Emergency Transportation	1.56	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.68
Federally Qualified and Rural Health Clinics	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Adult Medical Day Care	18.86	1.0000	1.1683	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	22.25
Personal Care	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Durable Medical Equipment	27.81	1.0000	1.0462	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	29.38
Applied Behavioral Analysis	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	25.48	1.0000	1.0791	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	27.77
	\$120.48										\$131.52
Prescription Drugs											
Generic Scripts	\$3.36	1.0000	1.0000	1.0000	1.0064	1.0000	1.0046	1.0000	1.0000	1.0000	\$3.40
Single-Source Brand	3.31	1.0000	1.0000	1.0000	0.9747	1.0000	0.9998	1.0000	1.0000	1.0000	2.83
Multi-Source Brand	0.43	1.0000	1.0000	1.0000	0.9747	1.0000	1.2839	1.0000	1.0000	1.0000	0.53
Specialty	12.37	1.0000	1.0000	1.0000	2.3276	1.0000	0.9860	1.0000	1.0000	1.0000	28.39
Hepatitis C	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	1.0064	1.0000	0.9731	1.0000	1.0000	1.0000	0.00
	\$19.46										\$35.25
Community Mental Health Center											
Case Management	\$0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.00
Long Term Support Service	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Partial Hospital	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Evidence Based Practice	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Medication Management	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Emergency Service 24/7	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
APRTP	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Supported Employment Services	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
	\$0.00										\$0.00
All Services	\$205.06										\$243.94

Eligibility Category: Low Income Children - Age 1-18 Years

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$2.40	1.0000	1.0973	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$2.65
Surgical	1.46	1.0000	1.1011	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.61
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.04	1.0000	1.0686	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.05
Well Newborn	0.00	1.0000	1.1306	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	2.50	1.0000	1.0991	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.77
Alcohol and Drug Abuse	0.03	1.0000	1.1293	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.03
Other	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
	\$6.43										\$7.10
Hospital Outpatient											
Emergency Room	\$10.46	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	\$12.97
Surgery	3.57	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	4.42
Radiology	3.41	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	4.23
Pathology	1.25	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	1.55
Pharmacy	2.33	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	2.89
Cardiovascular	0.09	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.11
PT/OT/ST	1.18	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	1.46
Psychiatric	0.28	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.34
Substance Abuse	0.00	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	3.39	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	6.94
	\$28.15										\$34.92
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.37	1.0000	1.0307	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.38
Office Visits	9.51	1.0000	1.0606	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	10.19
Preventive Medicine	3.80	1.0000	1.0781	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.14
Maternity	0.08	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.09
Certified Midwife	0.00	1.0000	1.0629	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
PT/OT/ST	3.09	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	3.32
Psychiatric and Substance Abuse	4.91	1.0000	1.0576	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	5.24
Radiology and Pathology	1.19	1.0000	1.0565	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.27
Home Health and Private Duty Nursing	2.59	1.0000	1.0629	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.78
Ambulance	0.64	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.69
Non-Emergency Transportation	1.25	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.34
Opioid Treatment Program	0.00	1.0000	1.0636	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Federally Qualified and Rural Health Clinics	7.60	1.0000	1.1678	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	8.97
Adult Medical Day Care	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Personal Care	0.00	1.0000	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Durable Medical Equipment	4.47	1.0000	1.0403	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.70
Applied Behavioral Analysis	3.89	1.0000	1.0630	2.2738	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	9.39
Other	8.47	1.0000	1.0813	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	9.25
	\$51.87										\$61.76
Prescription Drugs											
Generic Scripts	\$9.43	1.0000	1.0000	1.0000	1.0064	1.0000	1.0046	1.0000	1.0000	1.0000	\$9.54
Single-Source Brand	8.56	1.0000	1.0000	1.0000	0.9747	1.0000	0.9098	1.0000	1.0000	1.0000	7.59
Multi-Source Brand	2.45	1.0000	1.0000	1.0000	0.9747	1.0000	1.2839	1.0000	1.0000	1.0000	3.07
Specialty	11.77	1.0000	1.0000	1.0000	2.3276	1.0000	0.9860	1.0000	1.0000	1.0000	27.01
Hepatitis C	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	1.0064	1.0000	0.9731	1.0000	1.0000	1.0000	0.00
	\$32.22										\$47.21
Community Mental Health Center											
Case Management	\$0.88	1.0500	1.1526	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$1.08
Long Term Support Service	0.45	1.0500	1.0768	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.52
Partial Hospital	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	0.34	1.0500	1.0421	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.38
Evidence Based Practice	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Medication Management	0.00	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Emergency Service 24/7	0.00	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
APRTP	0.01	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.02
Supported Employment Services	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.60	1.0500	1.0669	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.67
	\$2.29										\$2.67
All Services	\$120.96										\$153.66

Eligibility Category: Low Income Adults

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$13.44	1.0000	1.0871	1.0000	1.0080	0.9902	1.0000	1.0000	1.0000	1.0000	\$14.56
Surgical	11.12	1.0000	1.0956	1.0000	1.0080	0.9902	1.0000	1.0000	1.0000	1.0000	12.14
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0060	0.9902	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	2.29	1.0000	1.0713	1.0000	1.0060	0.9902	1.0000	1.0000	1.0000	1.0000	2.44
Well Newborn	0.16	1.0000	1.1252	1.0000	1.0060	0.9902	1.0000	1.0000	1.0000	1.0000	0.18
Psychiatric	3.19	1.0000	1.1132	1.0000	1.0060	0.9902	1.0000	1.0000	1.0000	1.0000	3.53
Alcohol and Drug Abuse	1.32	1.0000	1.1235	1.0000	1.0060	0.9902	1.0000	1.0000	1.0000	1.0000	1.47
Other	0.00	1.0000	1.0000	1.0000	1.0060	0.9902	1.0000	1.0000	1.0000	1.0000	0.00
	\$31.52										\$34.33
Hospital Outpatient											
Emergency Room	\$37.08	1.0000	1.0604	1.0200	1.1468	0.9902	1.0000	1.0000	1.0000	1.0000	\$45.54
Surgery	10.84	1.0000	1.0604	1.0200	1.1468	0.9902	1.0000	1.0000	1.0000	1.0000	13.31
Radiology	15.41	1.0000	1.0604	1.0200	1.1468	0.9902	1.0000	1.0000	1.0000	1.0000	18.93
Pathology	7.09	1.0000	1.0604	1.0200	1.1468	0.9902	1.0000	1.0000	1.0000	1.0000	8.71
Pharmacy	7.79	1.0000	1.0604	1.0200	1.1468	0.9902	1.0000	1.0000	1.0000	1.0000	9.56
Cardiovascular	1.04	1.0000	1.0604	1.0200	1.1468	0.9902	1.0000	1.0000	1.0000	1.0000	1.28
PT/OT/ST	2.72	1.0000	1.0604	1.0200	1.1468	0.9902	1.0000	1.0000	1.0000	1.0000	3.34
Psychiatric	0.32	1.0000	1.0604	1.0200	1.1468	0.9902	1.0000	1.0000	1.0000	1.0000	0.39
Substance Abuse	0.21	1.0000	1.0604	1.0200	1.1468	0.9902	1.0000	1.0000	1.0000	1.0000	0.26
Other	15.10	1.0000	1.0604	1.0200	1.1468	0.9902	1.0000	1.0000	1.0000	1.0000	18.55
	\$97.60										\$119.88
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$1.03	1.0000	1.0863	1.0100	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	\$1.12
Office Visits	19.11	1.0000	1.0634	1.0100	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	20.32
Preventive Medicine	7.56	1.0000	1.1472	1.0100	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	8.67
Maternity	10.20	1.0000	1.0630	1.0100	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	10.84
Certified Midwife	0.24	1.0000	1.0624	1.0100	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	0.25
PT/OT/ST	1.60	1.0000	1.0630	1.0100	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	1.70
Psychiatric and Substance Abuse	19.32	1.0000	1.1289	1.0100	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	21.83
Radiology and Pathology	13.40	1.0000	1.0595	1.0100	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	14.20
Home Health and Private Duty Nursing	1.23	1.0000	1.0629	1.0100	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	1.31
Ambulance	2.25	1.0000	1.0630	1.0100	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	2.39
Non-Emergency Transportation	18.26	1.0000	1.0636	1.0100	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	19.41
Opioid Treatment Program	12.42	1.0000	1.0636	1.0100	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	13.21
Federally Qualified and Rural Health Clinics	19.54	1.0000	1.1635	1.0100	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	22.74
Adult Medical Day Care	0.11	1.0000	1.0624	1.0100	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	0.12
Personal Care	0.01	1.0000	1.0624	1.0100	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	0.01
Durable Medical Equipment	4.87	1.0000	0.9827	1.0100	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	4.78
Applied Behavioral Analysis	0.00	1.0000	1.0000	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	0.00
Other	22.89	1.0000	1.0351	1.0100	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	23.70
	\$154.03										\$166.61
Prescription Drugs											
Generic Scripts	\$19.95	1.0000	1.0000	1.0000	1.3069	0.9902	1.3702	1.0000	1.0000	1.0000	\$35.38
Single-Source Brand	28.53	1.0000	1.0000	1.0000	0.8891	0.9902	0.3118	1.0000	1.0000	1.0000	23.06
Multi-Source Brand	21.10	1.0000	1.0000	1.0000	1.8419	0.9902	0.9775	1.0000	1.0000	1.0000	3.79
Specialty	26.62	1.0000	1.0000	1.0000	1.0000	0.9902	0.9531	1.0000	1.0000	1.0000	47.46
Hepatitis C	17.54	1.0000	1.0000	1.0000	1.3069	0.9902	0.9213	1.0000	1.0000	1.0000	6.03
Other	0.00	1.0000	1.0000	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	0.00
	\$114.73										\$117.74
Community Mental Health Center											
Case Management	\$0.37	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.46
Long Term Support Service	0.77	1.0500	1.0690	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.87
Partial Hospital	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	1.31	1.0500	1.0582	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.47
Evidence Based Practice	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Medication Management	0.01	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.01
Emergency Service 24/7	0.00	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
APRTP	0.25	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.30
Supported Employment Services	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	1.53	1.0500	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.73
	\$4.25										\$4.84
All Services	\$402.12										\$443.40

Eligibility Category: CHIP

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$0.90	1.0000	1.0786	1.0000	1.0080	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.98
Surgical	0.57	1.0000	1.0809	1.0000	1.0080	1.0000	1.0000	1.0000	1.0000	1.0000	0.62
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0080	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.02	1.0000	1.0460	1.0000	1.0080	1.0000	1.0000	1.0000	1.0000	1.0000	0.02
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0080	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	2.38	1.0000	1.1191	1.0000	1.0080	1.0000	1.0000	1.0000	1.0000	1.0000	2.68
Alcohol and Drug Abuse	0.08	1.0000	1.0000	1.0000	1.0080	1.0000	1.0000	1.0000	1.0000	1.0000	0.08
Other	0.00	1.0000	1.0000	1.0000	1.0080	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
	\$3.95										\$4.38
Hospital Outpatient											
Emergency Room	\$8.23	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	\$10.21
Surgery	3.09	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	3.83
Radiology	3.28	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	4.07
Pathology	1.16	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	1.44
Pharmacy	0.94	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	1.16
Cardiovascular	0.15	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.18
PT/OT/ST	1.41	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	1.75
Psychiatric	0.25	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.31
Substance Abuse	0.00	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	5.13	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	6.36
	\$23.63										\$29.31
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.37	1.0000	1.0633	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.40
Office Visits	10.39	1.0000	1.0697	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	11.13
Preventive Medicine	4.40	1.0000	1.0752	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.78
Maternity	0.02	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.03
Certified Midwife	0.00	1.0000	1.0629	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
PT/OT/ST	4.41	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.73
Psychiatric and Substance Abuse	4.15	1.0000	1.0633	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.45
Radiology and Pathology	1.24	1.0000	1.0554	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.32
Home Health and Private Duty Nursing	1.72	1.0000	1.0628	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.84
Ambulance	0.42	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.45
Non-Emergency Transportation	0.92	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.98
Opioid Treatment Program	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Federally Qualified and Rural Health Clinics	4.77	1.0000	1.1635	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	5.60
Adult Medical Day Care	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Personal Care	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Durable Medical Equipment	4.18	1.0000	1.0091	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.26
Applied Behavioral Analysis	3.96	1.0000	1.0630	2.7316	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	11.50
Other	8.20	1.0000	1.1011	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	9.12
	\$49.14										\$50.60
Prescription Drugs											
Generic Scripts	\$8.90	1.0000	1.0000	1.0000	1.0064	1.0000	1.0046	1.0000	1.0000	1.0000	\$9.00
Single-Source Brand	9.62	1.0000	1.0000	1.0000	0.8747	1.0000	0.8988	1.0000	1.0000	1.0000	8.53
Multi-Source Brand	1.79	1.0000	1.0000	1.0000	0.8747	1.0000	1.2839	1.0000	1.0000	1.0000	2.23
Specialty	15.09	1.0000	1.0000	1.0000	2.3276	1.0000	0.9859	1.0000	1.0000	1.0000	34.63
Hepatitis C	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9884	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	1.0064	1.0000	0.9731	1.0000	1.0000	1.0000	0.00
	\$35.40										\$54.40
Community Mental Health Center											
Case Management	\$0.52	1.0500	1.1525	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.63
Long Term Support Service	0.33	1.0500	1.0660	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.38
Partial Hospital	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	0.24	1.0500	1.0616	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.27
Evidence Based Practice	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Medication Management	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Emergency Service 24/7	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
APRTP	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Supported Employment Services	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.47	1.0500	1.0582	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.53
	\$1.57										\$1.81
All Services	\$113.68										\$150.50

Eligibility Category: Foster Care / Adoption

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$3.63	1.0000	1.1060	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	\$4.02
Surgical	0.74	1.0000	1.0809	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.80
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	14.60	1.0000	1.0900	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	15.91
Alcohol and Drug Abuse	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
	\$18.97										\$20.72
Hospital Outpatient											
Emergency Room	\$12.58	1.0000	1.0604	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	\$15.51
Surgery	4.69	1.0000	1.0604	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	5.78
Radiology	4.15	1.0000	1.0604	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	5.12
Pharmacy	1.99	1.0000	1.0604	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	2.45
Cardiovascular	0.92	1.0000	1.0604	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	1.13
PT/OT/ST	0.25	1.0000	1.0604	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	0.30
Psychiatric	3.45	1.0000	1.0604	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	4.25
Substance Abuse	0.05	1.0000	1.0604	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	0.05
Other	0.00	1.0000	1.0000	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
	\$7.53										\$11.75
	\$37.58										\$46.32
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.42	1.0000	1.2084	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	\$0.50
Office Visits	12.46	1.0000	1.0598	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	13.26
Preventive Medicine	4.14	1.0000	1.0793	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	4.49
Maternity	0.12	1.0000	1.0630	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.13
Certified Midwife	0.00	1.0000	1.0000	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
PT/OT/ST	5.32	1.0000	1.0631	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	5.68
Psychiatric and Substance Abuse	13.71	1.0000	1.0630	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	14.62
Radiology and Pathology	2.37	1.0000	1.0586	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	2.52
Home Health and Private Duty Nursing	36.29	1.0000	1.0629	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	38.71
Ambulance	1.54	1.0000	1.0630	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	1.64
Non-Emergency Transportation	2.20	1.0000	1.0630	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	2.35
Opioid Treatment Program	0.00	1.0000	1.0000	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Federally Qualified and Rural Health Clinics	7.91	1.0000	1.1581	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	9.19
Adult Medical Day Care	0.00	1.0000	1.0000	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Personal Care	0.00	1.0000	1.0000	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Durable Medical Equipment	18.34	1.0000	0.8702	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	17.86
Applied Behavioral Analysis	6.14	1.0000	1.0630	1.8927	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	12.27
Other	12.40	1.0000	1.0470	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	13.03
	\$123.37										\$136.27
Prescription Drugs											
Generic Scripts	\$32.74	1.0000	1.0000	1.0000	0.7899	0.9938	0.9939	1.0000	1.0000	1.0000	\$25.55
Single-Source Brand	16.35	1.0000	1.0000	1.0000	1.2382	0.9938	0.9591	1.0000	1.0000	1.0000	21.67
Multi-Source Brand	7.15	1.0000	1.0000	1.0000	1.2382	0.9938	0.8545	1.0000	1.0000	1.0000	8.40
Specialty	19.99	1.0000	1.0000	1.0000	1.3796	0.9938	0.8943	1.0000	1.0000	1.0000	38.71
Hepatitis C	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	0.9894	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	0.7899	0.9938	0.9784	1.0000	1.0000	1.0000	0.00
	\$78.23										\$94.32
Community Mental Health Center											
Case Management	\$2.42	1.0500	1.1513	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$2.96
Long Term Support Service	0.97	1.0500	1.0691	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.10
Partial Hospital	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	1.02	1.0500	1.0586	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.14
Evidence Based Practice	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Medication Management	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Emergency Service 24/7	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
APRTP	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Supported Employment Services	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	2.30	1.0500	1.0610	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.59
	\$6.71										\$7.79
All Services	\$264.86										\$305.43

Eligibility Category: Severely Disabled Children

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$29.82	1.0000	1.0943	1.0000	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	\$32.49
Surgical	13.54	1.0000	1.1079	1.0000	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	14.83
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.00	1.0000	1.0000	1.0000	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	0.00
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	1.18	1.0000	1.1351	1.0000	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	1.34
Alcohol and Drug Abuse	0.00	1.0000	1.0000	1.0000	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	0.00
	\$44.54										\$48.77
Hospital Outpatient											
Emergency Room	\$7.70	1.0000	1.0604	1.0200	1.1468	0.9899	1.0000	1.0000	1.0000	1.0000	\$9.46
Surgery	7.74	1.0000	1.0604	1.0200	1.1468	0.9899	1.0000	1.0000	1.0000	1.0000	9.50
Radiology	11.60	1.0000	1.0604	1.0200	1.1468	0.9899	1.0000	1.0000	1.0000	1.0000	14.24
Pathology	2.65	1.0000	1.0604	1.0200	1.1468	0.9899	1.0000	1.0000	1.0000	1.0000	3.25
Pharmacy	2.38	1.0000	1.0604	1.0200	1.1468	0.9899	1.0000	1.0000	1.0000	1.0000	2.93
Cardiovascular	0.39	1.0000	1.0604	1.0200	1.1468	0.9899	1.0000	1.0000	1.0000	1.0000	0.48
PT/OT/ST	11.19	1.0000	1.0604	1.0200	1.1468	0.9899	1.0000	1.0000	1.0000	1.0000	13.74
Psychiatric	0.02	1.0000	1.0604	1.0200	1.1468	0.9899	1.0000	1.0000	1.0000	1.0000	0.03
Substance Abuse	0.00	1.0000	1.0000	1.0200	1.1468	0.9899	1.0000	1.0000	1.0000	1.0000	0.00
Other	10.08	1.0000	1.0604	1.0200	1.1468	0.9899	1.0000	1.0000	1.0000	1.0000	12.36
	\$53.75										\$66.00
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.45	1.0000	0.8035	1.0100	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	\$0.36
Office Visits	16.51	1.0000	1.0603	1.0100	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	17.50
Preventive Medicine	1.78	1.0000	1.0678	1.0100	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	1.90
Maternity	0.00	1.0000	1.0000	1.0100	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	0.00
Certified Midwife	0.00	1.0000	1.0000	1.0100	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	0.00
PT/OT/ST	28.21	1.0000	1.0630	1.0100	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	29.99
Psychiatric and Substance Abuse	8.79	1.0000	1.0431	1.0100	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	9.17
Radiology and Pathology	3.06	1.0000	1.0574	1.0100	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	3.24
Home Health and Private Duty Nursing	355.40	1.0000	1.0628	1.0100	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	377.67
Ambulance	2.39	1.0000	1.0630	1.0100	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	2.54
Non-Emergency Transportation	7.10	1.0000	1.0630	1.0100	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	7.54
Opioid Treatment Program	0.00	1.0000	1.0000	1.0100	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	0.00
Federally Qualified and Rural Health Clinics	1.30	1.0000	1.1574	1.0100	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	1.50
Adult Medical Day Care	0.00	1.0000	1.0000	1.0100	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	0.00
Personal Care	0.01	1.0000	1.0000	1.0100	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	0.01
Durable Medical Equipment	140.67	1.0000	1.3874	1.0100	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	195.13
Applied Behavioral Analysis	56.55	1.0000	1.0630	2.3448	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	139.52
Other	59.95	1.0000	1.1023	1.0100	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	66.07
	\$682.14										\$852.12
Prescription Drugs											
Generic Scripts	\$47.69	1.0000	1.0000	1.0000	1.5799	0.9899	1.0195	1.0000	1.0000	1.0000	\$76.04
Single-Source Brand	35.53	1.0000	1.0000	1.0000	1.7965	0.9899	0.8282	1.0000	1.0000	1.0000	56.71
Multi-Source Brand	66.68	1.0000	1.0000	1.0000	1.7965	0.9899	0.8284	1.0000	1.0000	1.0000	109.86
Specialty	108.01	1.0000	1.0000	1.0000	1.7020	0.9899	0.9959	1.0000	1.0000	1.0000	181.23
Hepatitis C	0.00	1.0000	1.0000	1.0000	1.0000	0.9899	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.02	1.0000	1.0000	1.0000	1.5799	0.9899	0.9659	1.0000	1.0000	1.0000	0.04
	\$257.94										\$425.88
Community Mental Health Center											
Case Management	\$1.15	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$1.41
Long Term Support Service	2.01	1.0500	1.1276	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.40
Partial Hospital	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	0.20	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.24
Evidence Based Practice	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Medication Management	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Emergency Service 24/7	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
APRTP	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Supported Employment Services	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.58	1.0500	1.0603	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.66
	\$3.95										\$4.71
All Services	\$1,042.32										\$1,397.47

Eligibility Category: Elderly and Disabled Adults – Age 19-64

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$66.13	1.0000	1.0849	1.0000	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	\$70.99
Surgical	39.68	1.0000	1.0963	1.0000	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	43.04
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	0.00
Maternity Non-Delivery	0.15	1.0000	1.1035	1.0000	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	0.17
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	0.00
Psychiatric	5.99	1.0000	1.1847	1.0000	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	7.02
Alcohol and Drug Abuse	2.31	1.0000	1.1382	1.0000	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	2.60
Other	0.00	1.0000	1.0000	1.0000	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	0.00
	\$114.25										\$123.92
Hospital Outpatient											
Emergency Room	\$52.35	1.0000	1.0604	1.0200	1.1468	0.9891	1.0000	1.0000	0.9946	1.0000	\$63.88
Surgery	19.77	1.0000	1.0604	1.0200	1.1468	0.9891	1.0000	1.0000	0.9946	1.0000	24.12
Radiology	27.23	1.0000	1.0604	1.0200	1.1468	0.9891	1.0000	1.0000	0.9946	1.0000	33.23
Pathology	7.89	1.0000	1.0604	1.0200	1.1468	0.9891	1.0000	1.0000	0.9946	1.0000	9.63
Pharmacy	40.81	1.0000	1.0604	1.0200	1.1468	0.9891	1.0000	1.0000	0.9946	1.0000	49.79
Cardiovascular	1.95	1.0000	1.0604	1.0200	1.1468	0.9891	1.0000	1.0000	0.9946	1.0000	2.38
PT/OT/ST	6.94	1.0000	1.0604	1.0200	1.1468	0.9891	1.0000	1.0000	0.9946	1.0000	8.10
Psychiatric	0.12	1.0000	1.0604	1.0200	1.1468	0.9891	1.0000	1.0000	0.9946	1.0000	0.15
Substance Abuse	0.10	1.0000	1.0604	1.0200	1.1468	0.9891	1.0000	1.0000	0.9946	1.0000	0.12
Other	31.37	1.0000	1.0604	1.0200	1.1468	0.9891	1.0000	1.0000	0.9946	1.0000	38.28
	\$188.23										\$229.67
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$2.40	1.0000	1.1518	1.0100	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	\$2.75
Office Visits	28.24	1.0000	1.0632	1.0100	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	29.83
Preventive Medicine	2.76	1.0000	1.1314	1.0100	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	3.10
Maternity	0.33	1.0000	1.0630	1.0100	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	0.35
Certified Midwife	0.00	1.0000	1.0629	1.0100	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	0.00
PT/OT/ST	3.93	1.0000	1.0630	1.0100	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	4.15
Psychiatric and Substance Abuse	14.64	1.0000	1.1716	1.0100	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	17.04
Radiology and Pathology	12.63	1.0000	1.0587	1.0100	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	13.26
Home Health and Private Duty Nursing	65.95	1.0000	1.0629	1.0100	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	69.65
Ambulance	7.22	1.0000	1.0630	1.0100	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	7.62
Non-Emergency Transportation	28.20	1.0000	1.0636	1.0100	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	29.79
Opioid Treatment Program	9.56	1.0000	1.0636	1.0100	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	10.10
Federally Qualified and Rural Health Clinics	17.79	1.0000	1.1587	1.0100	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	20.48
Adult Medical Day Care	2.76	1.0000	1.0624	1.0100	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	2.91
Personal Care	17.36	1.0000	1.0624	1.0100	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	18.32
Durable Medical Equipment	37.29	1.0000	0.8353	1.0100	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	34.66
Applied Behavioral Analysis	0.72	1.0000	1.0630	1.0000	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	0.75
Other	61.12	1.0000	1.1011	1.0100	1.0000	0.9891	1.0000	1.0000	0.9946	1.0000	66.87
	\$312.92										\$331.64
Prescription Drugs											
Generic Scripts	\$57.56	1.0000	1.0000	1.0000	1.1471	0.9891	1.0929	1.0000	0.9946	1.0000	\$70.98
Single-Source Brand	145.56	1.0000	1.0000	1.0000	1.1280	0.9891	0.9069	1.0000	0.9946	1.0000	146.23
Multi-Source Brand	64.86	1.0000	1.0000	1.0000	1.1260	0.9891	0.6328	1.0000	0.9946	1.0000	45.47
Specialty	148.98	1.0000	1.0000	1.0000	1.4004	0.9891	0.9894	1.0000	0.9946	1.0000	202.96
Hepatitis C	18.50	1.0000	1.0000	1.0000	0.4252	0.9891	0.9575	1.0000	0.9946	1.0000	7.41
Other	0.01	1.0000	1.0000	1.0000	1.1471	0.9891	0.9458	1.0000	0.9946	1.0000	0.01
	\$435.52										\$472.97
Community Mental Health Center											
Case Management	\$0.74	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	0.9946	1.0000	\$0.90
Long Term Support Service	1.33	1.0500	1.0827	1.0100	1.0000	1.0000	1.0000	1.0000	0.9946	1.0000	1.52
Partial Hospital	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	0.9946	1.0000	0.00
Psychotherapy	1.76	1.0500	1.0636	1.0100	1.0000	1.0000	1.0000	1.0000	0.9946	1.0000	1.88
Evidence Based Practice	0.01	1.0500	1.0629	1.0100	1.0000	1.0000	1.0000	1.0000	0.9946	1.0000	0.01
Medication Management	0.08	1.0500	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	0.9946	1.0000	0.09
Emergency Service 24/7	0.01	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	0.9946	1.0000	0.01
APRTP	0.28	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	0.9946	1.0000	0.34
Supported Employment Services	0.04	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	0.9946	1.0000	0.04
Other	2.49	1.0500	1.0629	1.0100	1.0000	1.0000	1.0000	1.0000	0.9946	1.0000	2.79
	\$6.73										\$7.67
All Services	\$1,057.65										\$1,165.78

Eligibility Category: Elderly and Disabled Adults – Age 65+

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$89.19	1.0000	1.0712	1.0000	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	\$95.31
Surgical	39.23	1.0000	1.0708	1.0000	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	41.92
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.00	1.0000	1.0000	1.0000	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	0.00
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	3.68	1.0000	1.0145	1.0000	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	3.72
Alcohol and Drug Abuse	0.00	1.0000	1.0000	1.0000	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	0.00
	\$132.10										\$140.95
Hospital Outpatient											
Emergency Room	\$42.95	1.0000	1.0604	1.0200	1.1468	0.9917	1.0000	1.0000	1.0000	1.0000	\$52.83
Surgery	13.34	1.0000	1.0604	1.0200	1.1468	0.9917	1.0000	1.0000	1.0000	1.0000	16.41
Radiology	32.34	1.0000	1.0604	1.0200	1.1468	0.9917	1.0000	1.0000	1.0000	1.0000	39.78
Pathology	8.24	1.0000	1.0604	1.0200	1.1468	0.9917	1.0000	1.0000	1.0000	1.0000	10.13
Pharmacy	23.83	1.0000	1.0604	1.0200	1.1468	0.9917	1.0000	1.0000	1.0000	1.0000	29.31
Cardiovascular	1.99	1.0000	1.0604	1.0200	1.1468	0.9917	1.0000	1.0000	1.0000	1.0000	2.44
PT/OT/ST	5.27	1.0000	1.0604	1.0200	1.1468	0.9917	1.0000	1.0000	1.0000	1.0000	6.48
Psychiatric	0.00	1.0000	1.0000	1.0200	1.1468	0.9917	1.0000	1.0000	1.0000	1.0000	0.00
Substance Abuse	0.00	1.0000	1.0000	1.0200	1.1468	0.9917	1.0000	1.0000	1.0000	1.0000	0.00
Other	40.21	1.0000	1.0604	1.0200	1.1468	0.9917	1.0000	1.0000	1.0000	1.0000	49.46
	\$168.17										\$206.97
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$4.99	1.0000	1.1088	1.0100	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	\$5.54
Office Visits	26.71	1.0000	1.0610	1.0100	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	28.38
Preventive Medicine	2.62	1.0000	1.3366	1.0100	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	3.51
Maternity	0.00	1.0000	1.0000	1.0100	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	0.00
Certified Midwife	0.00	1.0000	1.0000	1.0100	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	0.00
PT/OT/ST	1.98	1.0000	1.0631	1.0100	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	2.11
Psychiatric and Substance Abuse	1.12	1.0000	1.0630	1.0100	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	1.19
Radiology and Pathology	12.27	1.0000	1.0587	1.0100	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	12.98
Home Health and Private Duty Nursing	59.36	1.0000	1.0629	1.0100	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	63.20
Ambulance	7.70	1.0000	1.0630	1.0100	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	8.20
Non-Emergency Transportation	13.85	1.0000	1.0636	1.0100	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	14.74
Opioid Treatment Program	1.03	1.0000	1.0636	1.0100	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	1.10
Federally Qualified and Rural Health Clinics	22.09	1.0000	1.0630	1.0100	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	25.89
Adult Medical Day Care	31.42	1.0000	1.0630	1.0100	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	33.45
Personal Care	0.00	1.0000	1.0000	1.0100	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	0.00
Durable Medical Equipment	21.25	1.0000	0.9110	1.0100	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	19.40
Applied Behavioral Analysis	0.00	1.0000	1.0000	1.0000	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	0.00
Other	65.45	1.0000	1.0595	1.0100	1.0000	0.9917	1.0000	1.0000	1.0000	1.0000	69.46
	\$271.95										\$293.15
Prescription Drugs											
Generic Scripts	\$45.10	1.0000	1.0000	1.0000	1.1471	0.9917	1.0929	1.0000	1.0000	1.0000	\$56.07
Single-Source Brand	132.46	1.0000	1.0000	1.0000	1.1260	0.9917	0.9069	1.0000	1.0000	1.0000	134.15
Multi-Source Brand	32.18	1.0000	1.0000	1.0000	1.1260	0.9917	0.6328	1.0000	1.0000	1.0000	22.74
Specialty	47.09	1.0000	1.0000	1.0000	1.4004	0.9917	0.9894	1.0000	1.0000	1.0000	64.64
Hepatitis C	4.95	1.0000	1.0000	1.0000	0.4252	0.9917	0.9575	1.0000	1.0000	1.0000	2.00
Other	0.01	1.0000	1.0000	1.0000	1.1471	0.9917	0.9458	1.0000	1.0000	1.0000	0.01
	\$261.80										\$279.61
Community Mental Health Center											
Case Management	\$0.03	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.04
Long Term Support Service	0.24	1.0500	1.0629	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.27
Partial Hospital	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	0.17	1.0500	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.19
Evidence Based Practice	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Medication Management	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Emergency Service 24/7	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
APRTP	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Supported Employment Services	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.86	1.0500	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.97
	\$1.30										\$1.47
All Services	\$635.22										\$918.05

Eligibility Category: Dual Eligibles

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$20.31	1.0000	1.0712	1.0000	1.0080	1.0000	1.0000	1.0000	1.0000	1.0000	\$21.89
Surgical	5.99	1.0000	1.0708	1.0000	1.0080	1.0000	1.0000	1.0000	1.0000	1.0000	6.46
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0080	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.07	1.0000	1.0000	1.0000	1.0080	1.0000	1.0000	1.0000	1.0000	1.0000	0.07
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0080	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	3.00	1.0000	1.0145	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	3.06
Alcohol and Drug Abuse	0.58	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.59
Other	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
	\$29.96										\$32.06
Hospital Outpatient											
Emergency Room	\$19.02	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	\$23.59
Surgery	7.52	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	9.33
Radiology	6.25	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	7.75
Pathology	1.14	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	1.41
Pharmacy	13.34	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	16.55
Cardiovascular	0.96	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	1.19
PT/OT/ST	2.26	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	2.80
Psychiatric	0.34	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.42
Substance Abuse	0.03	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.04
Other	16.68	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	20.69
	\$67.53										\$83.76
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.63	1.0000	1.1088	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.71
Office Visits	9.74	1.0000	1.0610	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	10.43
Preventive Medicine	0.79	1.0000	1.3366	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.06
Maternity	0.15	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.15
Certified Midwife	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
PT/OT/ST	0.64	1.0000	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.69
Psychiatric and Substance Abuse	5.72	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	6.14
Radiology and Pathology	3.08	1.0000	1.0567	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	3.29
Home Health and Private Duty Nursing	12.79	1.0000	1.0629	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	13.73
Ambulance	7.68	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	8.24
Non-Emergency Transportation	26.00	1.0000	1.0636	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	27.91
Opioid Treatment Program	3.61	1.0000	1.0636	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.91
Federally Qualified and Rural Health Clinics	1.50	1.0000	1.1576	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.76
Adult Medical Day Care	1.48	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.59
Personal Care	30.13	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	30.43
Durable Medical Equipment	16.01	1.0000	2.0254	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	32.76
Applied Behavioral Analysis	0.01	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.01
Other	24.08	1.0000	1.0595	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	25.76
	\$144.04										\$165.59
Prescription Drugs											
Generic Scripts	\$0.99	1.0000	1.0000	1.0000	0.9902	1.0000	0.9894	1.0000	1.0000	1.0000	\$0.97
Single-Source Brand	0.06	1.0000	1.0000	1.0000	1.1838	1.0000	0.9894	1.0000	1.0000	1.0000	0.09
Multi-Source Brand	0.04	1.0000	1.0000	1.0000	1.1838	1.0000	0.9894	1.0000	1.0000	1.0000	0.05
Specialty	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
Hepatitis C	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	0.9902	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
	\$1.11										\$1.11
Community Mental Health Center											
Case Management	\$0.35	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.43
Long Term Support Service	0.81	1.0500	1.0629	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.91
Partial Hospital	0.01	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.01
Psychotherapy	0.57	1.0500	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.65
Evidence Based Practice	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Medication Management	0.05	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.05
Emergency Service 24/7	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
APRTP	0.14	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.15
Supported Employment Services	0.03	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.03
Other	1.31	1.0500	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.47
	\$3.27										\$3.71
All Services	\$245.90										\$286.22

Eligibility Category: Newborn Kick Payment

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$2,056.22	1.0000	1.0768	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	\$2,227.45
Surgical	21.59	1.0000	1.0944	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	23.77
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Well Newborn	350.08	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	396.90
Psychiatric	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Alcohol and Drug Abuse	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
	\$2,427.90										\$2,648.12
Hospital Outpatient											
Emergency Room	\$37.07	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	\$45.98
Surgery	2.64	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	3.28
Radiology	6.40	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	7.94
Pathology	3.49	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	4.33
Pharmacy	0.44	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.55
Cardiovascular	1.46	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	1.82
PT/OT/ST	0.61	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.75
Psychiatric	0.00	1.0000	1.0000	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Substance Abuse	0.00	1.0000	1.0000	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	47.72	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	59.20
	\$99.84										\$123.84
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.00
Office Visits	40.41	1.0000	1.0592	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	43.23
Preventive Medicine	108.46	1.0000	1.0628	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	116.42
Maternity	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Certified Midwife	0.24	1.0000	1.0629	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.26
PT/OT/ST	0.15	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.16
Psychiatric and Substance Abuse	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Radiology and Pathology	8.30	1.0000	1.0557	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	8.85
Home Health and Private Duty Nursing	27.66	1.0000	1.0629	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	29.69
Ambulance	20.84	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	22.37
Non-Emergency Transportation	1.93	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.07
Opioid Treatment Program	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Federally Qualified and Rural Health Clinics	74.90	1.0000	1.1682	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	88.37
Adult Medical Day Care	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Personal Care	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Durable Medical Equipment	9.14	1.0000	0.8756	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	9.04
Applied Behavioral Analysis	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	354.14	1.0000	1.0625	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	380.03
	\$646.17										\$700.50
Prescription Drugs											
Generic Scripts	\$1.81	1.0000	1.0000	1.0000	1.0064	1.0000	0.9894	1.0000	1.0000	1.0000	\$1.80
Single-Source Brand	0.87	1.0000	1.0000	1.0000	0.8747	1.0000	0.9894	1.0000	1.0000	1.0000	0.84
Multi-Source Brand	0.07	1.0000	1.0000	1.0000	0.8747	1.0000	0.9894	1.0000	1.0000	1.0000	0.06
Specialty	0.04	1.0000	1.0000	1.0000	2.3276	1.0000	0.9894	1.0000	1.0000	1.0000	0.10
Hepatitis C	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	1.0064	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
	\$2.80										\$2.81
Community Mental Health Center											
Case Management	\$0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.00
Long Term Support Service	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Partial Hospital	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Evidence Based Practice	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Medication Management	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Emergency Service 24/7	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
APRTP	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Supported Employment Services	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
	\$0.00										\$0.00
All Services	\$3,176.71										\$3,475.28

Eligibility Category: Neonatal Abstinence Syndrome Kick Payment

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$5,895.30	1,0000	1,0760	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	\$6,381.07
Surgical	106.91	1,0000	1,1323	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	121.77
Maternity Delivery	0.00	1,0000	1,0000	1,0000	1,0060	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Maternity Non-Delivery	0.00	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Well Newborn	0.00	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Psychiatric	0.00	1,0000	1,0000	1,0000	1,0060	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Alcohol and Drug Abuse	0.00	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Other	0.00	1,0000	1,0000	1,0000	1,0060	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
	\$6,002.21										\$6,502.85
Hospital Outpatient											
Emergency Room	\$25.87	1,0000	1,0604	1,0200	1,1468	1,0000	1,0000	1,0000	1,0000	1,0000	\$32.09
Surgery	2.76	1,0000	1,0604	1,0200	1,1468	1,0000	1,0000	1,0000	1,0000	1,0000	3.42
Radiology	7.33	1,0000	1,0604	1,0200	1,1468	1,0000	1,0000	1,0000	1,0000	1,0000	9.10
Pathology	3.80	1,0000	1,0604	1,0200	1,1468	1,0000	1,0000	1,0000	1,0000	1,0000	4.72
Pharmacy	0.06	1,0000	1,0604	1,0200	1,1468	1,0000	1,0000	1,0000	1,0000	1,0000	0.07
Cardiovascular	2.27	1,0000	1,0604	1,0200	1,1468	1,0000	1,0000	1,0000	1,0000	1,0000	2.81
PT/OT/ST	0.00	1,0000	1,0000	1,0200	1,1468	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Psychiatric	0.00	1,0000	1,0000	1,0200	1,1468	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Substance Abuse	0.00	1,0000	1,0000	1,0200	1,1468	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Other	26.90	1,0000	1,0604	1,0200	1,1468	1,0000	1,0000	1,0000	1,0000	1,0000	33.37
	\$99.00										\$85.95
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.00	1,0000	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	\$0.00
Office Visits	46.35	1,0000	1,0607	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	49.66
Preventive Medicine	148.21	1,0000	1,0628	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	159.10
Maternity	0.00	1,0000	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Certified Midwife	0.00	1,0000	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
PT/OT/ST	2.26	1,0000	1,0629	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	2.42
Psychiatric and Substance Abuse	0.00	1,0000	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Radiology and Pathology	12.60	1,0000	1,0551	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	13.43
Home Health and Private Duty Nursing	84.45	1,0000	1,0629	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	90.66
Ambulance	40.60	1,0000	1,0630	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	43.59
Non-Emergency Transportation	8.32	1,0000	1,0630	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	8.93
Opoid Treatment Program	0.00	1,0000	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Federally Qualified and Rural Health Clinics	90.06	1,0000	1,1670	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	106.15
Adult Medical Day Care	0.00	1,0000	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Personal Care	0.00	1,0000	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Durable Medical Equipment	54.30	1,0000	0.9844	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	53.98
Personal Care	0.00	1,0000	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Applied Behavioral Analysis	0.00	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Other	720.21	1,0000	1,0624	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	772.79
	\$1,207.36										\$1,300.71
Prescription Drugs											
Generic Scripts	\$3.66	1,0000	1,0000	1,0000	1,0064	1,0000	0.9894	1,0000	1,0000	1,0000	\$3.65
Single-Source Brand	1.44	1,0000	1,0000	1,0000	0.8747	1,0000	0.9894	1,0000	1,0000	1,0000	1.39
Multi-Source Brand	0.12	1,0000	1,0000	1,0000	0.8747	1,0000	0.9894	1,0000	1,0000	1,0000	0.12
Specialty	0.00	1,0000	1,0000	1,0000	2.3276	1,0000	0.9894	1,0000	1,0000	1,0000	0.00
Hepatitis C	0.00	1,0000	1,0000	1,0000	1,0000	1,0000	0.9894	1,0000	1,0000	1,0000	0.00
Other	0.00	1,0000	1,0000	1,0000	1,0064	1,0000	0.9894	1,0000	1,0000	1,0000	0.00
	\$5.22										\$5.15
Community Mental Health Center											
Case Management	\$0.00	1,0500	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	\$0.00
Long Term Support Service	0.00	1,0500	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Partial Hospital	0.00	1,0500	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Psychotherapy	0.00	1,0500	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Evidence Based Practice	0.00	1,0500	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Medication Management	0.00	1,0500	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Emergency Service 24/7	0.00	1,0500	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
APRTP	0.00	1,0500	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Supported Employment Services	0.00	1,0500	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Other	0.00	1,0500	1,0000	1,0100	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
	\$0.00										\$0.00
All Services	\$7,283.78										\$7,894.29

Eligibility Category: Maternity Kick Payment

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$23.64	1,000.00	1,0898	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	\$25.92
Surgical	1.72	1,000.00	1,0759	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1.86
Maternity Delivery	1,931.33	1,000.00	1,0578	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	2,055.23
Maternity Non-Delivery	19.74	1,000.00	1,0611	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	21.08
Well Newborn	0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Psychiatric	0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Alcohol and Drug Abuse	0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Other	0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
	\$1,976.43										\$2,104.08
Hospital Outpatient											
Emergency Room	\$12.67	1,000.00	1,0604	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	\$15.72
Surgery	0.80	1,000.00	1,0604	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.99
Radiology	2.27	1,000.00	1,0604	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	2.82
Pathology	1.69	1,000.00	1,0604	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	2.09
Pharmacy	2.04	1,000.00	1,0604	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	2.53
Cardiovascular	0.00	1,000.00	1,000.00	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
PT/OT/ST	0.00	1,000.00	1,000.00	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Psychiatric	0.00	1,000.00	1,000.00	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Substance Abuse	0.00	1,000.00	1,000.00	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Other	13.52	1,000.00	1,0604	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	16.76
	\$32.99										\$40.92
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.00	1,000.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	\$0.00
Office Visits	1.47	1,000.00	1,0622	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1.58
Preventive Medicine	1.08	1,000.00	1,0606	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1.16
Maternity	518.97	1,000.00	1,0629	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	557.14
Certified Midwife	6.01	1,000.00	1,0615	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	6.44
PT/OT/ST	0.00	1,000.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Psychiatric and Substance Abuse	0.00	1,000.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Radiology and Pathology	2.41	1,000.00	1,0621	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	2.58
Home Health and Private Duty Nursing	0.44	1,000.00	1,0629	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.47
Ambulance	3.95	1,000.00	1,0630	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	4.24
Non-Emergency Transportation	0.00	1,000.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Opioid Treatment Program	0.00	1,000.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Federally Qualified and Rural Health Clinics	3.19	1,000.00	1,1666	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	3.76
Adult Medical Day Care	0.00	1,000.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Personal Care	0.00	1,000.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Durable Medical Equipment	0.00	1,000.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Applied Behavioral Analysis	0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Other	43.33	1,000.00	1,0617	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	14.30
	\$550.35										\$591.67
Prescription Drugs											
Generic Scripts	\$0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	\$0.00
Single-Source Brand	0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Multi-Source Brand	0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Specialty	0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Hepatitis C	0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Other	0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
	\$0.00										\$0.00
Community Mental Health Center											
Case Management	\$0.00	1,050.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	\$0.00
Long Term Support Service	0.00	1,050.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Partial Hospital	0.00	1,050.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Psychotherapy	0.00	1,050.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Evidence Based Practice	0.00	1,050.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Medication Management	0.00	1,050.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Emergency Service 24/7	0.00	1,050.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
APRTP	0.00	1,050.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Supported Employment Services	0.00	1,050.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Other	0.00	1,050.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
	\$0.00										\$0.00
All Services											
	\$2,560.27										\$2,736.67

Eligibility Category: Severe/Persistent Mental Illness - Non-Dual

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$44.50	1.0000	1.0852	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	\$47.97
Surgical	39.85	1.0000	1.0961	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	43.40
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.44	1.0000	1.1072	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.48
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	52.54	1.0000	1.1984	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	62.45
Alcohol and Drug Abuse	1.92	1.0000	1.1164	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	2.13
Other	0.00	1.0000	1.0000	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
	\$139.25										\$156.43
Hospital Outpatient											
Emergency Room	\$83.55	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	\$102.34
Surgery	18.21	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	22.31
Radiology	22.46	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	27.51
Pathology	8.59	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	10.52
Pharmacy	11.50	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	14.09
Cardiovascular	2.28	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	2.79
PT/OT/ST	5.53	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	6.78
Psychiatric	1.16	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	1.42
Substance Abuse	0.36	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	0.46
Other	19.18	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	23.50
	\$172.82										\$211.69
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$2.26	1.0000	1.1204	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	\$2.53
Office Visits	32.10	1.0000	1.0641	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	34.07
Preventive Medicine	3.32	1.0000	1.1389	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	3.77
Maternity	1.05	1.0000	1.0630	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	1.12
Certified Midwife	0.01	1.0000	1.0629	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.01
PT/OT/ST	3.19	1.0000	1.0630	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	3.38
Psychiatric and Substance Abuse	24.15	1.0000	1.3294	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	32.02
Radiology and Pathology	14.19	1.0000	1.0574	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	14.96
Home Health and Private Duty Nursing	12.20	1.0000	1.0629	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	12.93
Ambulance	10.41	1.0000	1.0630	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	11.04
Non-Emergency Transportation	40.23	1.0000	1.0636	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	42.65
Opioid Treatment Program	8.73	1.0000	1.1572	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	9.26
Federally Qualified and Rural Health Clinics	21.10	1.0000	1.0000	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	24.36
Adult Medical Day Care	0.00	1.0000	1.0000	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Personal Care	2.52	1.0000	1.0624	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	2.87
Durable Medical Equipment	18.96	1.0000	0.9265	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	17.52
Applied Behavioral Analysis	0.00	1.0000	1.0000	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Other	51.80	1.0000	1.0387	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	53.66
	\$246.24										\$265.97
Prescription Drugs											
Generic Scripts	\$101.23	1.0000	1.0000	1.0000	0.8964	0.9875	1.1429	1.0000	1.0000	1.0000	\$102.41
Single-Source Brand	211.97	1.0000	1.0000	1.0000	1.0065	0.9875	0.9177	1.0000	1.0000	1.0000	193.34
Multi-Source Brand	60.15	1.0000	1.0000	1.0000	1.0000	0.9875	0.9942	1.0000	1.0000	1.0000	23.57
Specialty	172.84	1.0000	1.0000	1.0000	1.4015	0.9875	0.9873	1.0000	1.0000	1.0000	236.18
Hepatitis C	30.14	1.0000	1.0000	1.0000	0.2293	0.9875	0.9443	1.0000	1.0000	1.0000	6.44
Other	0.07	1.0000	1.0000	1.0000	0.8964	0.9875	0.9441	1.0000	1.0000	1.0000	0.06
	\$576.41										\$592.00
Community Mental Health Center											
Case Management	\$278.54	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$340.60
Long Term Support Service	288.21	1.0500	1.2672	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	360.44
Partial Hospital	12.36	1.0500	1.1459	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	15.01
Psychotherapy	64.47	1.0500	1.0676	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	73.00
Evidence Based Practice	3.36	1.0500	1.0626	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	3.79
Medication Management	4.11	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.64
Emergency Service 24/7	4.11	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.63
APRTP	4.94	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	6.04
Supported Employment Services	20.31	1.0500	1.1529	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	24.83
Other	31.56	1.0500	1.0628	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	35.57
	\$691.98										\$868.56
All Services	\$1,826.71										\$2,064.64

Eligibility Category: Severe/Persistent Mental Illness - Dual

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$20.54	1,000.00	1,0852	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	\$22.43
Surgical	4.07	1,000.00	1,0961	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	4.48
Maternity Delivery	0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Maternity Non-Delivery	0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Well Newborn	0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Psychiatric	18.25	1,000.00	1,1984	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	21.96
Alcohol and Drug Abuse	1.25	1,000.00	1,1164	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1.41
Other	0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
	\$44.11										\$50.28
Hospital Outpatient											
Emergency Room	\$30.74	1,000.00	1,0604	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	\$38.13
Surgery	9.63	1,000.00	1,0604	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	11.95
Radiology	6.71	1,000.00	1,0604	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	8.32
Pathology	1.63	1,000.00	1,0604	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	2.03
Pharmacy	7.60	1,000.00	1,0604	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	9.43
Cardiovascular	0.83	1,000.00	1,0604	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1.03
PT/OT/ST	2.71	1,000.00	1,0604	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	3.37
Psychiatric	1.02	1,000.00	1,0604	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1.26
Substance Abuse	0.15	1,000.00	1,0604	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.16
Other	17.79	1,000.00	1,0604	1,020.00	1,1468	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	22.07
	\$78.83										\$97.77
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$1.19	1,000.00	1,1204	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	\$1.34
Office Visits	14.69	1,000.00	1,0641	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	15.79
Preventive Medicine	0.97	1,000.00	1,1389	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1.12
Maternity	0.13	1,000.00	1,0630	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.14
Certified Midwife	0.00	1,000.00	1,000.00	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
PT/OT/ST	0.96	1,000.00	1,0630	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1.03
Psychiatric and Substance Abuse	34.92	1,000.00	1,3294	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	46.88
Radiology and Pathology	3.88	1,000.00	1,0574	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	4.14
Home Health and Private Duty Nursing	2.38	1,000.00	1,0629	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	2.56
Ambulance	7.35	1,000.00	1,0630	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	7.89
Non-Emergency Transportation	43.39	1,000.00	1,0636	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	46.58
Opioid Treatment Program	5.96	1,000.00	1,1572	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	6.48
Federally Qualified and Rural Health Clinics	1.10	1,000.00	1,0630	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1.29
Adult Medical Day Care	9.14	1,000.00	1,0624	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	9.81
Personal Care	8.82	1,000.00	2,3497	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	20.92
Durable Medical Equipment	0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.00
Applied Behavioral Analysis	27.70	1,000.00	1,0387	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	29.06
Other	\$164.49	1,000.00	1,0387	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	\$192.09
Prescription Drugs											
Generic Scripts	\$1.15	1,000.00	1,000.00	1,000.00	0.9902	1,000.00	0.9894	1,000.00	1,000.00	1,000.00	\$1.13
Single-Source Brand	0.02	1,000.00	1,000.00	1,000.00	1,1838	1,000.00	0.9894	1,000.00	1,000.00	1,000.00	0.03
Multi-Source Brand	0.02	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.9894	1,000.00	1,000.00	1,000.00	0.02
Specialty	0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.9894	1,000.00	1,000.00	1,000.00	0.00
Hepatitis C	0.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	0.9894	1,000.00	1,000.00	1,000.00	0.00
Other	0.00	1,000.00	1,000.00	1,000.00	0.9902	1,000.00	0.9894	1,000.00	1,000.00	1,000.00	0.00
	\$1.20										\$1.18
Community Mental Health Center											
Case Management	\$299.88	1,050.00	1,1530	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	\$366.69
Long Term Support Service	418.41	1,050.00	1,2672	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	562.28
Partial Hospital	24.37	1,050.00	1,1459	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	29.61
Psychotherapy	34.23	1,050.00	1,0676	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	38.75
Evidence Based Practice	5.59	1,050.00	1,0626	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	6.30
Medication Management	6.35	1,050.00	1,0631	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	7.16
Emergency Service 24/7	4.36	1,050.00	1,0631	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	4.91
APRTP	8.23	1,050.00	1,1530	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	10.07
Supported Employment Services	37.78	1,050.00	1,1529	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	46.20
Other	16.28	1,050.00	1,0628	1,010.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	18.35
	\$655.48										\$1,090.33
All Services	\$1,144.11										\$1,431.66

Eligibility Category: Severe Mental Illness - Non-Dual

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$53.52	1.0000	1.0856	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	\$57.71
Surgical	25.88	1.0000	1.0895	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	28.00
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	1.84	1.0000	1.0475	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	1.92
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	32.81	1.0000	1.2020	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	39.17
Alcohol and Drug Abuse	5.71	1.0000	1.1223	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	6.37
Other	0.00	1.0000	1.0000	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
	\$119.75										\$133.18
Hospital Outpatient											
Emergency Room	\$92.26	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	\$113.01
Surgery	18.86	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	23.11
Radiology	21.07	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	25.80
Pathology	10.14	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	12.42
Pharmacy	12.05	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	14.76
Cardiovascular	3.35	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	4.10
PT/OT/ST	6.86	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	8.42
Psychiatric	1.77	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	2.16
Substance Abuse	0.93	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	1.14
Other	23.38	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	28.64
	\$190.69										\$233.57
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$1.31	1.0000	1.2011	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	\$1.56
Office Visits	32.65	1.0000	1.0705	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	34.86
Preventive Medicine	4.56	1.0000	1.1408	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	5.19
Maternity	3.59	1.0000	1.0630	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	3.80
Certified Midwife	0.01	1.0000	1.0629	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.01
PT/OT/ST	1.66	1.0000	1.0630	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	1.76
Psychiatric and Substance Abuse	44.71	1.0000	1.2214	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	54.47
Radiology and Pathology	19.79	1.0000	1.0584	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	20.90
Home Health and Private Duty Nursing	12.58	1.0000	1.0628	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	13.33
Ambulance	11.32	1.0000	1.0630	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	12.00
Non-Emergency Transportation	62.02	1.0000	1.0630	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	65.75
Opoid Treatment Program	16.15	1.0000	1.0636	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	17.13
Federally Qualified and Rural Health Clinics	23.78	1.0000	1.1602	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	27.52
Adult Medical Day Care	1.50	1.0000	1.0624	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	1.59
Personal Care	0.11	1.0000	1.0624	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.12
Durable Medical Equipment	12.85	1.0000	1.1852	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	15.19
Applied Behavioral Analysis	0.00	1.0000	1.0000	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Other	59.34	1.0000	1.0536	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	62.36
	\$307.93										\$327.54
Prescription Drugs											
Generic Scripts	\$61.05	1.0000	1.0000	1.0000	0.8964	0.9875	1.1429	1.0000	1.0000	1.0000	\$61.76
Single-Source Brand	110.51	1.0000	1.0000	1.0000	1.0065	0.9875	0.9177	1.0000	1.0000	1.0000	100.60
Multi-Source Brand	36.68	1.0000	1.0000	1.0000	1.0065	0.9875	0.9342	1.0000	1.0000	1.0000	37.37
Specialty	96.40	1.0000	1.0000	1.0000	1.4015	0.9875	0.9873	1.0000	1.0000	1.0000	134.46
Hepatitis C	73.87	1.0000	1.0000	1.0000	0.2293	0.9875	0.9443	1.0000	1.0000	1.0000	15.79
Other	0.00	1.0000	1.0000	1.0000	0.8964	0.9875	0.9441	1.0000	1.0000	1.0000	0.00
	\$380.51										\$327.18
Community Mental Health Center											
Case Management	\$191.95	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$234.72
Long Term Support Service	62.95	1.0500	1.1592	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	77.39
Partial Hospital	0.14	1.0500	1.1512	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.17
Psychotherapy	69.78	1.0500	1.0681	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	79.04
Evidence Based Practice	3.08	1.0500	1.0627	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	3.47
Medication Management	1.73	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.95
Emergency Service 24/7	0.69	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.78
APRTP	9.91	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	12.12
Supported Employment Services	12.16	1.0500	1.1526	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	14.86
Other	27.48	1.0500	1.0629	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	30.98
	\$379.87										\$455.47
All Services	\$1,376.76										\$1,486.94

Eligibility Category: Severe Mental Illness - Dual

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$17.25	1.0000	1.0856	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$18.84
Surgical	7.39	1.0000	1.0895	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	8.10
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.36	1.0000	1.0475	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.37
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	6.15	1.0000	1.2020	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	7.43
Alcohol and Drug Abuse	6.05	1.0000	1.1223	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	6.83
Other	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
	\$37.20										\$41.58
Hospital Outpatient											
Emergency Room	\$33.30	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	\$41.31
Surgery	9.83	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	12.19
Radiology	9.68	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	12.01
Pathology	2.60	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	3.22
Pharmacy	9.17	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	11.37
Cardiovascular	0.75	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.83
PT/OT/ST	2.74	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	3.40
Psychiatric	3.43	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	4.26
Substance Abuse	0.00	1.0000	1.0000	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	16.01	1.0000	1.0604	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	19.86
	\$87.51										\$108.55
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$1.17	1.0000	1.2011	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$1.42
Office Visits	16.82	1.0000	1.0705	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	18.19
Preventive Medicine	3.67	1.0000	1.1408	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.23
Maternity	0.93	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.00
Certified Midwife	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
PT/OT/ST	1.00	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.07
Psychiatric and Substance Abuse	21.45	1.0000	1.2214	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	26.46
Radiology and Pathology	6.48	1.0000	1.0584	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	6.92
Home Health and Private Duty Nursing	1.86	1.0000	1.0628	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.99
Ambulance	8.12	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	8.72
Non-Emergency Transportation	62.79	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	67.41
Opoid Treatment Program	16.19	1.0000	1.0636	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	17.26
Federally Qualified and Rural Health Clinics	2.65	1.0000	1.1602	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	3.11
Adult Medical Day Care	0.52	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.56
Personal Care	28.13	1.0000	1.0624	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	30.19
Durable Medical Equipment	9.69	1.0000	2.4706	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	24.19
Applied Behavioral Analysis	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	28.34	1.0000	1.0536	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	30.15
	\$209.81										\$239.72
Prescription Drugs											
Generic Scripts	\$0.90	1.0000	1.0000	1.0000	0.9902	1.0000	0.9894	1.0000	1.0000	1.0000	\$0.89
Single-Source Brand	0.28	1.0000	1.0000	1.0000	1.1838	1.0000	0.9894	1.0000	1.0000	1.0000	0.32
Multi-Source Brand	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
Specialty	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
Hepatitis C	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
Other	0.01	1.0000	1.0000	1.0000	0.9902	1.0000	0.9894	1.0000	1.0000	1.0000	0.01
	\$1.19										\$1.22
Community Mental Health Center											
Case Management	\$206.46	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$252.46
Long Term Support Service	84.06	1.0500	1.1592	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	103.33
Partial Hospital	0.62	1.0500	1.1512	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.76
Psychotherapy	43.55	1.0500	1.0681	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	49.33
Evidence Based Practice	5.48	1.0500	1.0627	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	6.18
Medication Management	1.17	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.32
Emergency Service 24/7	0.65	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.74
APRTP	10.88	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	13.31
Supported Employment Services	20.25	1.0500	1.1526	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	24.75
Other	16.15	1.0500	1.0629	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	18.20
	\$389.26										\$470.36
All Services	\$724.97										\$865.43

Eligibility Category: Low Utilizer - Non-Dual

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$18.53	1.0000	1.0692	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	\$19.69
Surgical	9.70	1.0000	1.0837	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	10.44
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.00	1.0000	1.0000	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	6.02	1.0000	1.5299	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	9.15
Alcohol and Drug Abuse	0.00	1.0000	1.0000	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
	\$34.25										\$39.27
Hospital Outpatient											
Emergency Room	\$54.59	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	\$66.86
Surgery	22.25	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	27.25
Radiology	25.11	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	30.76
Pathology	8.88	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	10.87
Pharmacy	11.04	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	13.63
Cardiovascular	2.12	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	2.60
PT/OT/ST	6.93	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	8.49
Psychiatric	2.15	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	2.63
Substance Abuse	1.26	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	1.57
Other	18.13	1.0000	1.0604	1.0200	1.1468	0.9875	1.0000	1.0000	1.0000	1.0000	22.20
	\$152.48										\$186.77
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$4.66	1.0000	1.2932	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	\$6.01
Office Visits	28.18	1.0000	1.0729	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	30.15
Preventive Medicine	3.70	1.0000	1.0716	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	3.95
Maternity	0.10	1.0000	1.0632	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.10
Certified Midwife	0.00	1.0000	1.0000	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
PT/OT/ST	2.04	1.0000	1.0630	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	2.17
Psychiatric and Substance Abuse	40.99	1.0000	1.3782	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	56.35
Radiology and Pathology	8.50	1.0000	1.0573	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	12.89
Home Health and Private Duty Nursing	5.47	1.0000	1.0628	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	9.01
Ambulance	30.23	1.0000	1.0630	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	32.05
Non-Emergency Transportation	11.40	1.0000	1.0636	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	12.09
Opioid Treatment Program	20.01	1.0000	1.1617	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	23.19
Federally Qualified and Rural Health Clinics	0.00	1.0000	1.0000	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Adult Medical Day Care	6.26	1.0000	1.0624	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	6.63
Personal Care	9.40	1.0000	0.9517	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	8.92
Durable Medical Equipment	0.00	1.0000	1.0000	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Applied Behavioral Analysis	43.88	1.0000	1.0700	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	46.83
Other		1.0000	1.0700	1.0100	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	
	\$227.03										\$256.14
Prescription Drugs											
Generic Scripts	\$111.53	1.0000	1.0000	1.0000	0.8964	0.9875	1.1429	1.0000	1.0000	1.0000	\$112.83
Single-Source Brand	200.20	1.0000	1.0000	1.0000	1.0065	0.9875	0.9177	1.0000	1.0000	1.0000	162.60
Multi-Source Brand	20.63	1.0000	1.0000	1.0000	1.0065	0.9875	0.9342	1.0000	1.0000	1.0000	8.08
Specialty	114.88	1.0000	1.0000	1.0000	1.4015	0.9875	0.9873	1.0000	1.0000	1.0000	156.98
Hepatitis C	0.00	1.0000	1.0000	1.0000	0.2293	0.9875	0.9443	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	0.8964	0.9875	0.9441	1.0000	1.0000	1.0000	0.00
	\$447.23										\$460.49
Community Mental Health Center											
Case Management	\$208.43	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$254.87
Long Term Support Service	22.79	1.0500	1.1423	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	27.60
Partial Hospital	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	31.21	1.0500	1.0753	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	35.59
Evidence Based Practice	0.28	1.0500	1.0629	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.32
Medication Management	6.02	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	6.79
Emergency Service 24/7	0.11	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.13
APRTP	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Supported Employment Services	5.41	1.0500	1.1262	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	6.46
Other	23.33	1.0500	1.0621	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	26.28
	\$297.58										\$358.04
All Services	\$1,158.57										\$1,300.70

Eligibility Category: Low Utilizer - Dual

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$15.25	1.0000	1.0692	1.0000	1.0080	1.0000	1.0000	1.0000	1.0000	1.0000	\$16.40
Surgical	11.92	1.0000	1.0837	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	12.99
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	1.93	1.0000	1.5299	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	2.97
Alcohol and Drug Abuse	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
	\$29.10										\$32.37
Hospital Outpatient											
Emergency Room	\$20.08	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	\$24.91
Surgery	11.15	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	13.83
Radiology	7.89	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	9.79
Pathology	1.61	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	2.00
Pharmacy	5.23	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	6.49
Cardiovascular	0.84	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	1.04
PT/OT/ST	2.09	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	2.59
Psychiatric	0.08	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.10
Substance Abuse	0.00	1.0000	1.0000	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	14.32	1.0000	1.0694	1.0200	1.1468	1.0000	1.0000	1.0000	1.0000	1.0000	17.76
	\$63.30										\$78.51
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$2.31	1.0000	1.2932	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$3.01
Office Visits	15.01	1.0000	1.0729	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	16.27
Preventive Medicine	1.77	1.0000	1.0716	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.91
Maternity	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Certified Midwife	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
PT/OT/ST	1.53	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.85
Psychiatric and Substance Abuse	11.00	1.0000	1.3782	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	15.31
Radiology and Pathology	4.28	1.0000	1.0573	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.57
Home Health and Private Duty Nursing	0.04	1.0000	1.0628	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.04
Ambulance	6.14	1.0000	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	6.59
Non-Emergency Transportation	26.17	1.0000	1.0636	1.0100	1.0000	1.0000	1.0000	0.2461	1.0000	1.0000	28.10
Opioid Treatment Program	2.64	1.0000	1.0636	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.70
Federally Qualified and Rural Health Clinics	1.12	1.0000	1.1617	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.32
Adult Medical Day Care	2.88	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.91
Personal Care	0.00	1.0000	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Durable Medical Equipment	10.07	1.0000	1.8197	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	19.53
Applied Behavioral Analysis	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	32.43	1.0000	1.0700	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	35.04
	\$117.40										\$136.96
Prescription Drugs											
Generic Scripts	\$0.76	1.0000	1.0000	1.0000	0.9902	1.0000	0.9894	1.0000	1.0000	1.0000	\$0.75
Single-Source Brand	0.23	1.0000	1.0000	1.0000	1.1838	1.0000	0.9894	1.0000	1.0000	1.0000	0.27
Multi-Source Brand	0.02	1.0000	1.0000	1.0000	1.0000	1.0000	0.9894	1.0000	1.0000	1.0000	0.02
Specialty	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
Hepatitis C	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
Other	\$1.01	1.0000	1.0000	1.0000	0.9902	1.0000	0.9894	1.0000	1.0000	1.0000	\$1.04
Community Mental Health Center											
Case Management	\$190.04	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$232.38
Long Term Support Service	37.94	1.0500	1.1423	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	45.87
Partial Hospital	2.56	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.71
Psychotherapy	16.07	1.0500	1.0753	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	18.33
Evidence Based Practice	0.55	1.0500	1.0629	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.62
Medication Management	4.78	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	5.39
Emergency Service 24/7	0.20	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.23
APRTP	2.51	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.66
Supported Employment Services	23.94	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	28.60
Other	12.87	1.0500	1.0621	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	14.50
	\$291.47										\$351.38
All Services	\$502.28										\$600.26

Eligibility Category: Serious Emotionally Disturbed Child

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$2.62	1.0000	1.0842	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	\$2.84
Surgical	2.21	1.0000	1.0878	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	2.40
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.06	1.0000	1.0972	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.07
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	48.25	1.0000	1.0972	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	\$2.92
Alcohol and Drug Abuse	0.24	1.0000	1.1410	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.28
Other	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
	\$53.37										\$58.50
Hospital Outpatient											
Emergency Room	\$20.34	1.0000	1.0604	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	\$25.07
Surgery	4.24	1.0000	1.0604	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	5.23
Radiology	4.04	1.0000	1.0604	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	4.98
Pathology	2.21	1.0000	1.0604	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	2.72
Pharmacy	0.87	1.0000	1.0604	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	1.07
Cardiovascular	0.13	1.0000	1.0604	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	0.16
PT/OT/ST	2.03	1.0000	1.0604	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	2.51
Psychiatric	1.89	1.0000	1.0604	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	2.08
Substance Abuse	0.00	1.0000	1.0000	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Other	7.39	1.0000	1.0604	1.0200	1.1468	0.9938	1.0000	1.0000	1.0000	1.0000	9.11
	\$42.93										\$52.92
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.47	1.0000	0.9118	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	\$0.43
Office Visits	14.42	1.0000	1.0605	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	15.35
Preventive Medicine	4.38	1.0000	1.0972	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	4.83
Maternity	0.06	1.0000	1.0630	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.06
Certified Midwife	0.00	1.0000	1.0629	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
PT/OT/ST	4.75	1.0000	1.0631	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	5.06
Psychiatric and Substance Abuse	3.31	1.0000	1.0716	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	3.56
Radiology and Pathology	2.24	1.0000	1.0562	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	2.38
Home Health and Private Duty Nursing	2.12	1.0000	1.0627	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	2.26
Ambulance	2.58	1.0000	1.0630	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	2.75
Non-Emergency Transportation	3.24	1.0000	1.0630	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	3.46
Opioid Treatment Program	0.00	1.0000	1.0000	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Federally Qualified and Rural Health Clinics	10.06	1.0000	1.1725	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	11.84
Adult Medical Day Care	0.00	1.0000	1.0000	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Personal Care	0.00	1.0000	1.0000	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Durable Medical Equipment	4.47	1.0000	1.0758	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	4.82
Applied Behavioral Analysis	2.00	1.0000	1.0630	4.8722	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	9.88
Other	45.20	1.0000	1.0742	1.0100	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	16.39
	\$69.31										\$83.08
Prescription Drugs											
Generic Scripts	\$41.10	1.0000	1.0000	1.0000	0.7379	0.9938	0.9937	1.0000	1.0000	1.0000	\$29.85
Single-Source Brand	26.05	1.0000	1.0000	1.0000	0.9352	0.9938	0.9514	1.0000	1.0000	1.0000	24.61
Multi-Source Brand	4.51	1.0000	1.0000	1.0000	1.8255	0.9938	0.9970	1.0000	1.0000	1.0000	4.16
Specialty	22.08	1.0000	1.0000	1.0000	1.9255	0.9938	0.9903	1.0000	1.0000	1.0000	41.84
Hepatitis C	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	0.9894	1.0000	1.0000	1.0000	0.00
Other	0.01	1.0000	1.0000	1.0000	0.7379	0.9938	0.9785	1.0000	1.0000	1.0000	0.00
	\$95.76										\$100.78
Community Mental Health Center											
Case Management	\$237.03	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$289.84
Long Term Support Service	110.80	1.0500	1.1471	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	134.79
Partial Hospital	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	115.25	1.0500	1.0586	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	129.14
Evidence Based Practice	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Medication Management	0.10	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.11
Emergency Service 24/7	0.25	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.29
APRTP	0.13	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.16
Supported Employment Services	0.03	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.03
Other	16.35	1.0500	1.0621	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	18.42
	\$478.94										\$572.78
All Services	\$741.30										\$868.06

Eligibility Category: Granite Advantage - Medically Frail

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$45.53	1.0000	1.0872	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	\$49.10
Surgical	38.16	1.0000	1.0962	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	41.49
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.08	1.0000	1.1257	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	0.09
Well Newborn	0.01	1.0000	1.1306	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	0.01
Psychiatric	13.09	1.0000	1.0681	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	13.84
Alcohol and Drug Abuse	12.30	1.0000	1.1292	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	13.78
Other	0.00	1.0000	1.0000	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	0.00
	\$109.17										\$118.32
Hospital Outpatient											
Emergency Room	\$49.53	1.0000	1.0604	1.0200	1.1468	0.9860	1.0000	1.0000	1.0000	1.0000	\$60.58
Surgery	14.76	1.0000	1.0604	1.0200	1.1468	0.9860	1.0000	1.0000	1.0000	1.0000	18.05
Radiology	23.92	1.0000	1.0604	1.0200	1.1468	0.9860	1.0000	1.0000	1.0000	1.0000	29.25
Pathology	7.36	1.0000	1.0604	1.0200	1.1468	0.9860	1.0000	1.0000	1.0000	1.0000	9.00
Pharmacy	28.80	1.0000	1.0604	1.0200	1.1468	0.9860	1.0000	1.0000	1.0000	1.0000	35.22
Cardiovascular	2.05	1.0000	1.0604	1.0200	1.1468	0.9860	1.0000	1.0000	1.0000	1.0000	2.51
PT/OT/ST	5.15	1.0000	1.0604	1.0200	1.1468	0.9860	1.0000	1.0000	1.0000	1.0000	6.30
Psychiatric	1.58	1.0000	1.0604	1.0200	1.1468	0.9860	1.0000	1.0000	1.0000	1.0000	1.53
Substance Abuse	1.05	1.0000	1.0604	1.0200	1.1468	0.9860	1.0000	1.0000	1.0000	1.0000	1.28
Other	21.71	1.0000	1.0604	1.0200	1.1468	0.9860	1.0000	1.0000	1.0000	1.0000	26.55
	\$155.91										\$190.68
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$1.80	1.0000	1.1005	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	\$1.97
Office Visits	26.04	1.0000	1.0696	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	27.74
Preventive Medicine	2.60	1.0000	1.1326	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	2.83
Maternity	0.47	1.0000	1.0629	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	0.50
Certified Midwife	0.01	1.0000	1.0629	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	0.01
PT/OT/ST	2.98	1.0000	1.0641	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	3.15
Psychiatric and Substance Abuse	60.57	1.0000	1.2287	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	73.99
Radiology and Pathology	19.85	1.0000	1.0636	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	21.02
Home Health and Private Duty Nursing	11.36	1.0000	1.0629	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	12.02
Ambulance	5.91	1.0000	1.0630	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	6.26
Non-Emergency Transportation	42.40	1.0000	1.0636	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	44.89
Opoid Treatment Program	22.82	1.0000	1.0636	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	24.17
Federally Qualified and Rural Health Clinics	20.33	1.0000	1.1601	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	23.48
Adult Medical Day Care	0.34	1.0000	1.0624	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	0.36
Personal Care	0.44	1.0000	1.0624	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	0.47
Durable Medical Equipment	16.76	1.0000	0.8316	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	15.55
Personal Care	0.00	1.0000	1.0000	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	0.00
Applied Behavioral Analysis	45.97	1.0000	1.0635	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	48.68
Other		1.0000	1.0635	1.0100	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	
	\$260.63										\$307.19
Prescription Drugs											
Generic Scripts	\$31.19	1.0000	1.0000	1.0000	1.5041	0.9860	1.5128	1.0000	1.0000	1.0000	\$69.97
Single-Source Brand	66.32	1.0000	1.0000	1.0000	1.0663	0.9860	0.9002	1.0000	1.0000	1.0000	64.76
Multi-Source Brand	40.90	1.0000	1.0000	1.0000	1.0663	0.9860	0.3165	1.0000	1.0000	1.0000	13.64
Specialty	78.05	1.0000	1.0000	1.0000	2.1342	0.9860	0.9865	1.0000	1.0000	1.0000	162.03
Hepatitis C	50.83	1.0000	1.0000	1.0000	1.0000	0.9860	0.9564	1.0000	1.0000	1.0000	14.14
Other	0.01	1.0000	1.0000	1.0000	1.5041	0.9860	0.9295	1.0000	1.0000	1.0000	0.01
	\$269.30										\$324.57
Community Mental Health Center											
Case Management	\$1.47	1.0500	1.1530	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$1.80
Long Term Support Service	2.25	1.0500	1.0919	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.60
Partial Hospital	0.00	1.0500	1.0000	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	2.37	1.0500	1.0636	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.67
Evidence Based Practice	0.01	1.0500	1.0627	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.01
Medication Management	0.07	1.0500	1.0630	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.08
Emergency Service 24/7	0.01	1.0500	1.0631	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.01
APRTP	0.86	1.0500	1.1527	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.05
Supported Employment Services	0.04	1.0500	1.1509	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.05
Other	4.25	1.0500	1.0629	1.0100	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.79
	\$11.32										\$13.06
All Services	\$626.34										\$953.81

Eligibility Category: Low Income Children - Age 0-11 Months

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$18.07	1.0000	1.0603	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	\$19.27
Surgical	4.43	1.0000	1.1028	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	4.92
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Well Newborn	0.01	1.0000	1.0879	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.01
Psychiatric	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Alcohol and Drug Abuse	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
	\$22.51										\$24.20
Hospital Outpatient											
Emergency Room	\$17.75	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	\$20.85
Surgery	2.87	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	3.38
Radiology	3.83	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	4.50
Pathology	1.17	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	1.37
Pharmacy	1.34	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	1.58
Cardiovascular	0.30	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	0.35
PT/OT/ST	1.14	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	1.33
Psychiatric	0.00	1.0000	1.0000	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Substance Abuse	0.00	1.0000	1.0000	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	11.50	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	13.51
	\$39.90										\$46.87
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.20	1.0000	1.3523	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.27
Office Visits	18.88	1.0000	1.0600	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	17.89
Preventive Medicine	19.86	1.0000	1.0631	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	21.11
Maternity	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Certified Midwife	0.06	1.0000	1.0677	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.07
PT/OT/ST	0.49	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.52
Psychiatric and Substance Abuse	0.01	1.0000	1.0628	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.01
Radiology and Pathology	2.11	1.0000	1.0584	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.23
Home Health and Private Duty Nursing	4.88	1.0000	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	5.19
Ambulance	2.00	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.12
Non-Emergency Transportation	1.42	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.51
Opioid Treatment Program	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Federally Qualified and Rural Health Clinics	20.52	1.0000	1.1362	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	23.32
Adult Medical Day Care	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Personal Care	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Durable Medical Equipment	30.80	1.0000	1.0383	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	31.98
Applied Behavioral Analysis	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	33.60	1.0000	1.0641	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	35.75
	\$132.83										\$141.98
Prescription Drugs											
Generic Scripts	\$3.09	1.0000	1.0000	1.0000	1.0420	1.0000	0.9927	1.0000	1.0000	1.0000	\$3.20
Single-Source Brand	1.99	1.0000	1.0000	1.0000	1.0503	1.0000	0.9688	1.0000	1.0000	1.0000	2.02
Multi-Source Brand	0.46	1.0000	1.0000	1.0000	1.0503	1.0000	0.9834	1.0000	1.0000	1.0000	0.48
Specialty	6.59	1.0000	1.0000	1.0000	1.6705	1.0000	0.9882	1.0000	1.0000	1.0000	10.88
Hepatitis C	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9366	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	1.0420	1.0000	0.9844	1.0000	1.0000	1.0000	0.00
	\$12.13										\$16.58
Community Mental Health Center											
Case Management	\$0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.00
Long Term Support Service	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Partial Hospital	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Evidence Based Practice	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Medication Management	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Emergency Service 24/7	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
APRTP	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Supported Employment Services	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
	\$0.00										\$0.00
All Services	\$207.38										\$229.63

Eligibility Category: Low Income Children - Age 1-18 Years

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$1.90	1.0000	1.0599	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	\$2.03
Surgical	1.50	1.0000	1.0756	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	1.62
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.02	1.0000	0.9474	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.02
Well Newborn	0.00	1.0000	1.0879	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	2.33	1.0000	1.0636	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	2.50
Alcohol and Drug Abuse	0.08	1.0000	1.1132	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.09
Other	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
	\$5.84										\$6.26
Hospital Outpatient											
Emergency Room	\$11.10	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	\$13.04
Surgery	3.07	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	3.61
Radiology	3.30	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	3.88
Pathology	1.34	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	1.57
Pharmacy	1.93	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	2.27
Cardiovascular	0.12	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	0.14
PT/OT/ST	1.23	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	1.45
Psychiatric	0.15	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	0.18
Substance Abuse	0.00	1.0000	1.0000	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	5.73	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	6.73
	\$27.98										\$32.87
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.64	1.0000	0.8077	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.52
Office Visits	9.06	1.0000	1.0606	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	9.61
Preventive Medicine	3.95	1.0000	1.0789	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.26
Maternity	0.06	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.07
Certified Midwife	0.00	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
PT/OT/ST	3.42	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	3.64
Psychiatric and Substance Abuse	5.33	1.0000	1.0548	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	5.62
Radiology and Pathology	1.32	1.0000	1.0573	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.40
Home Health and Private Duty Nursing	3.23	1.0000	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	3.43
Ambulance	0.67	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.71
Non-Emergency Transportation	1.28	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.36
Opioid Treatment Program	0.00	1.0000	1.0636	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Federally Qualified and Rural Health Clinics	8.44	1.0000	1.1348	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	9.58
Adult Medical Day Care	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Personal Care	0.00	1.0000	0.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Durable Medical Equipment	5.04	1.0000	0.9881	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.98
Applied Behavioral Analysis	5.88	1.0000	1.0630	1.8943	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	11.83
Other	8.85	1.0000	1.0662	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	9.43
	\$57.17										\$66.44
Prescription Drugs											
Generic Scripts	\$9.72	1.0000	1.0000	1.0000	1.0420	1.0000	0.9927	1.0000	1.0000	1.0000	\$10.06
Single-Source Brand	8.38	1.0000	1.0000	1.0000	1.0503	1.0000	0.9688	1.0000	1.0000	1.0000	8.52
Multi-Source Brand	1.32	1.0000	1.0000	1.0000	1.0503	1.0000	0.9634	1.0000	1.0000	1.0000	1.37
Specialty	16.55	1.0000	1.0000	1.0000	1.6705	1.0000	0.9882	1.0000	1.0000	1.0000	27.33
Hepatitis C	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9366	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	1.0420	1.0000	0.9844	1.0000	1.0000	1.0000	0.00
	\$35.97										\$47.28
Community Mental Health Center											
Case Management	\$0.96	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$1.07
Long Term Support Service	0.50	1.0500	1.0627	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.56
Partial Hospital	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	0.35	1.0500	1.0242	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.37
Evidence Based Practice	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Medication Management	0.00	1.0500	1.0468	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Emergency Service 24/7	0.00	1.0500	1.0436	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
APRTP	0.01	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.01
Supported Employment Services	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.84	1.0500	1.0625	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.71
	\$2.46										\$2.73
All Services	\$129.42										\$155.58

Eligibility Category: Low Income Adults

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$17.95	1.0000	1.0573	1.0000	1.0060	0.9902	1.0000	1.0000	1.0000	1.0000	\$18.90
Surgical	11.90	1.0000	1.0603	1.0000	1.0060	0.9902	1.0000	1.0000	1.0000	1.0000	12.57
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0060	0.9902	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	2.22	1.0000	1.1462	1.0000	1.0060	0.9902	1.0000	1.0000	1.0000	1.0000	2.54
Well Newborn	0.22	1.0000	1.0684	1.0000	1.0060	0.9902	1.0000	1.0000	1.0000	1.0000	0.24
Psychiatric	2.89	1.0000	1.2127	1.0000	1.0060	0.9902	1.0000	1.0000	1.0000	1.0000	3.49
Alcohol and Drug Abuse	2.00	1.0000	1.0634	1.0000	1.0060	0.9902	1.0000	1.0000	1.0000	1.0000	2.12
Other	0.00	1.0000	1.0000	1.0000	1.0060	0.9902	1.0000	1.0000	1.0000	1.0000	0.00
	\$37.19										\$39.87
Hospital Outpatient											
Emergency Room	\$40.49	1.0000	1.0558	1.0000	1.1124	0.9902	1.0000	1.0000	1.0000	1.0000	\$47.10
Surgery	11.27	1.0000	1.0558	1.0000	1.1124	0.9902	1.0000	1.0000	1.0000	1.0000	13.11
Radiology	15.56	1.0000	1.0558	1.0000	1.1124	0.9902	1.0000	1.0000	1.0000	1.0000	18.10
Pathology	7.88	1.0000	1.0558	1.0000	1.1124	0.9902	1.0000	1.0000	1.0000	1.0000	9.17
Pharmacy	8.67	1.0000	1.0558	1.0000	1.1124	0.9902	1.0000	1.0000	1.0000	1.0000	10.08
Cardiovascular	1.01	1.0000	1.0558	1.0000	1.1124	0.9902	1.0000	1.0000	1.0000	1.0000	1.17
PT/OT/ST	2.74	1.0000	1.0558	1.0000	1.1124	0.9902	1.0000	1.0000	1.0000	1.0000	3.18
Psychiatric	0.14	1.0000	1.0558	1.0000	1.1124	0.9902	1.0000	1.0000	1.0000	1.0000	0.16
Substance Abuse	0.14	1.0000	1.0558	1.0000	1.1124	0.9902	1.0000	1.0000	1.0000	1.0000	0.17
Other	17.20	1.0000	1.0558	1.0000	1.1124	0.9902	1.0000	1.0000	1.0000	1.0000	20.01
	\$105.10										\$122.24
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.90	1.0000	1.0973	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	\$0.98
Office Visits	17.96	1.0000	1.0608	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	18.87
Preventive Medicine	7.79	1.0000	1.1534	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	8.90
Maternity	10.28	1.0000	1.0630	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	10.82
Certified Midwife	0.35	1.0000	1.0628	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	0.37
PT/OT/ST	1.51	1.0000	1.0630	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	1.59
Psychiatric and Substance Abuse	23.94	1.0000	1.0730	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	25.44
Radiology and Pathology	14.40	1.0000	1.0596	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	15.11
Home Health and Private Duty Nursing	1.02	1.0000	1.0629	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	1.08
Ambulance	2.01	1.0000	1.0630	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	2.12
Non-Emergency Transportation	17.25	1.0000	1.0630	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	18.16
Opioid Treatment Program	11.88	1.0000	1.0636	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	12.51
Federally Qualified and Rural Health Clinics	20.50	1.0000	1.1368	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	23.08
Adult Medical Day Care	0.01	1.0000	1.0630	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	0.01
Personal Care	0.00	1.0000	1.0000	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	0.00
Durable Medical Equipment	6.65	1.0000	1.0174	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	6.70
Applied Behavioral Analysis	0.00	1.0000	1.0000	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	0.00
Other	26.12	1.0000	1.0702	1.0000	1.0000	0.9902	1.0000	1.0000	1.0000	1.0000	27.68
	\$162.58										\$173.41
Prescription Drugs											
Generic Scripts	\$23.55	1.0000	1.0000	1.0000	1.1417	0.9902	1.1071	1.0000	1.0000	1.0000	\$29.47
Single-Source Brand	31.51	1.0000	1.0000	1.0000	0.9525	0.9902	0.9337	1.0000	1.0000	1.0000	27.75
Multi-Source Brand	13.55	1.0000	1.0000	1.0000	0.9525	0.9902	0.3733	1.0000	1.0000	1.0000	4.77
Specialty	32.31	1.0000	1.0000	1.0000	1.4872	0.9902	0.9791	1.0000	1.0000	1.0000	46.99
Hepatitis C	9.01	1.0000	1.0000	1.0000	0.6932	0.9902	0.9718	1.0000	1.0000	1.0000	6.01
Other	0.01	1.0000	1.0000	1.0000	1.1417	0.9902	0.9275	1.0000	1.0000	1.0000	0.01
	\$109.93										\$114.50
Community Mental Health Center											
Case Management	\$0.58	1.0500	1.0616	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.65
Long Term Support Service	0.77	1.0500	1.0598	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.85
Partial Hospital	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	1.25	1.0500	1.0571	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.39
Evidence Based Practices	0.00	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Medication Management	0.02	1.0500	1.0602	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.02
Emergency Service 24/7	0.00	1.0500	1.0514	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
APRTP	0.30	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.33
Supported Employment Services	0.00	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	1.75	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.95
	\$4.67										\$5.20
All Services	\$419.48										\$455.33

Eligibility Category: CHIP

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$2.11	1.0000	1.0646	1.0000	1.0060	1.0000	1.0000	1.0000	0.9909	1.0000	\$2.24
Surgical	1.92	1.0000	1.0526	1.0000	1.0060	1.0000	1.0000	1.0000	0.9909	1.0000	2.01
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	0.00
Maternity Non-Delivery	0.02	1.0000	1.1479	1.0000	1.0060	1.0000	1.0000	1.0000	0.9909	1.0000	0.02
Well Newborn	0.00	1.0000	1.0879	1.0000	1.0060	1.0000	1.0000	1.0000	0.9909	1.0000	0.00
Psychiatric	1.97	1.0000	1.0386	1.0000	1.0060	1.0000	1.0000	1.0000	0.9909	1.0000	2.04
Alcohol and Drug Abuse	0.19	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	0.9909	1.0000	0.19
Other	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	0.9909	1.0000	0.00
	\$6.20										\$6.50
Hospital Outpatient											
Emergency Room	\$9.02	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	0.9909	1.0000	\$10.49
Surgery	3.22	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	0.9909	1.0000	3.74
Radiology	3.29	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	0.9909	1.0000	3.83
Pathology	1.24	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	0.9909	1.0000	1.44
Pharmacy	1.28	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	0.9909	1.0000	1.49
Cardiovascular	0.10	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	0.9909	1.0000	0.12
PT/OT/ST	1.36	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	0.9909	1.0000	1.58
Psychiatric	0.19	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	0.9909	1.0000	0.23
Substance Abuse	0.00	1.0000	1.0000	1.0000	1.1124	1.0000	1.0000	1.0000	0.9909	1.0000	0.00
Other	5.52	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	0.9909	1.0000	6.42
	\$25.21										\$29.34
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.58	1.0000	0.8585	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	\$0.49
Office Visits	9.50	1.0000	1.0607	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	9.99
Preventive Medicine	4.55	1.0000	1.0758	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	4.85
Maternity	0.02	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	0.02
Certified Midwife	0.00	1.0000	1.0689	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	0.00
PT/OT/ST	4.54	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	4.79
Psychiatric and Substance Abuse	4.97	1.0000	1.0553	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	5.20
Radiology and Pathology	1.41	1.0000	1.0579	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	1.48
Home Health and Private Duty Nursing	1.53	1.0000	1.0628	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	1.61
Ambulance	0.50	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	0.53
Non-Emergency Transportation	0.99	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	1.04
Opioid Treatment Program	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	0.00
Federally Qualified and Rural Health Clinics	5.83	1.0000	1.1355	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	6.56
Adult Medical Day Care	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	0.00
Personal Care	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	0.00
Durable Medical Equipment	5.21	1.0000	0.8685	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	5.11
Applied Behavioral Analysis	5.85	1.0000	1.0630	2.1849	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	13.47
Other	9.15	1.0000	1.1335	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	10.28
	\$54.64										\$65.41
Prescription Drugs											
Generic Scripts	\$8.88	1.0000	1.0000	1.0000	1.0420	1.0000	0.9927	1.0000	0.9909	1.0000	\$9.10
Single-Source Brand	8.70	1.0000	1.0000	1.0000	1.0503	1.0000	0.9688	1.0000	0.9909	1.0000	8.77
Multi-Source Brand	0.94	1.0000	1.0000	1.0000	1.0503	1.0000	0.9634	1.0000	0.9909	1.0000	0.97
Specialty	22.80	1.0000	1.0000	1.0000	1.6705	1.0000	0.9882	1.0000	0.9909	1.0000	37.30
Hepatitis C	0.19	1.0000	1.0000	1.0000	1.0000	1.0000	0.9366	1.0000	0.9909	1.0000	0.17
Other	0.00	1.0000	1.0000	1.0000	1.0420	1.0000	0.9844	1.0000	0.9909	1.0000	0.00
	\$41.50										\$56.31
Community Mental Health Center											
Case Management	\$0.51	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	\$0.56
Long Term Support Service	0.34	1.0500	1.0626	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	0.38
Partial Hospital	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	0.00
Psychotherapy	0.29	1.0500	1.0408	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	0.31
Evidence Based Practices	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	0.00
Medication Management	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	0.00
Emergency Service 24/7	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	0.00
APRTP	0.04	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	0.04
Supported Employment Services	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	0.00
Other	0.36	1.0500	1.0623	1.0000	1.0000	1.0000	1.0000	1.0000	0.9909	1.0000	0.40
	\$1.54										\$1.69
All Services	\$129.10										\$155.25

Eligibility Category: Foster Care / Adoption

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$4.08	1.0000	1.0642	1.0000	1.0060	0.9938	1.0000	1.0000	1.0000	1.0000	\$4.34
Surgical	2.39	1.0000	1.0786	1.0000	1.0060	0.9938	1.0000	1.0000	1.0000	1.0000	2.58
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0060	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.00	1.0000	1.0000	1.0000	1.0060	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0060	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	20.23	1.0000	1.0548	1.0000	1.0060	0.9938	1.0000	1.0000	1.0000	1.0000	21.33
Alcohol and Drug Abuse	0.11	1.0000	1.0599	1.0000	1.0060	0.9938	1.0000	1.0000	1.0000	1.0000	0.11
Other	0.00	1.0000	1.0000	1.0000	1.0060	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
	\$26.81										\$28.37
Hospital Outpatient											
Emergency Room	\$11.98	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	\$13.99
Surgery	4.79	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	5.59
Radiology	5.86	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	6.84
Pathology	1.95	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	2.28
Pharmacy	0.94	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	1.10
Cardiovascular	0.22	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	0.26
PT/OT/ST	3.44	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	4.02
Psychiatric	0.97	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	1.13
Substance Abuse	0.00	1.0000	1.0000	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Other	9.20	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	10.73
	\$39.35										\$45.93
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.83	1.0000	0.9921	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	\$0.82
Office Visits	11.40	1.0000	1.0598	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	12.01
Preventive Medicine	4.30	1.0000	1.0745	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	4.99
Maternity	0.00	1.0000	1.0628	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Certified Midwife	0.00	1.0000	1.0630	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
PT/OT/ST	5.58	1.0000	1.0583	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	5.90
Psychiatric and Substance Abuse	16.69	1.0000	1.0590	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	17.56
Radiology and Pathology	2.50	1.0000	1.0629	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	2.63
Home Health and Private Duty Nursing	28.59	1.0000	1.0630	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	30.20
Ambulance	1.40	1.0000	1.0630	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	1.48
Non-Emergency Transportation	1.28	1.0000	1.0630	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	1.35
Opioid Treatment Program	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Federally Qualified and Rural Health Clinics	9.12	1.0000	1.1329	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	10.27
Adult Medical Day Care	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Personal Care	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Durable Medical Equipment	19.93	1.0000	0.8612	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	17.06
Applied Behavioral Analysis	6.27	1.0000	1.0630	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	10.88
Other	17.76	1.0000	1.0445	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	18.43
	\$125.67										\$133.18
Prescription Drugs											
Generic Scripts	\$29.65	1.0000	1.0000	1.0000	0.8925	0.9938	0.9916	1.0000	1.0000	1.0000	\$26.07
Single-Source Brand	21.72	1.0000	1.0000	1.0000	1.1872	0.9938	0.9744	1.0000	1.0000	1.0000	24.97
Multi-Source Brand	3.97	1.0000	1.0000	1.0000	1.1872	0.9938	0.9297	1.0000	1.0000	1.0000	4.35
Specialty	23.53	1.0000	1.0000	1.0000	1.7134	0.9938	0.9406	1.0000	1.0000	1.0000	37.69
Hepatitis C	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	0.9894	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	0.8925	0.9938	0.9660	1.0000	1.0000	1.0000	0.00
	\$78.87										\$93.08
Community Mental Health Center											
Case Management	\$2.63	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$2.94
Long Term Support Service	1.58	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.77
Partial Hospital	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	0.86	1.0500	1.0309	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.93
Evidence Based Practices	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Medication Management	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Emergency Service 24/7	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
APRTP	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Supported Employment Services	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	1.62	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.61
	\$6.70										\$7.45
All Services	\$277.40										\$308.01

Eligibility Category: Severely Disabled Children

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$14.96	1,000	1,0595	1,000	1,0060	0.9899	1,000	1,000	1,000	1,000	\$15.79
Surgical	4.88	1,000	1,0768	1,000	1,0060	0.9899	1,000	1,000	1,000	1,000	5.23
Maternity Delivery	0.00	1,000	1,0000	1,000	1,0060	0.9899	1,000	1,000	1,000	1,000	0.00
Maternity Non-Delivery	0.00	1,000	1,0000	1,000	1,0060	0.9899	1,000	1,000	1,000	1,000	0.00
Well Newborn	0.00	1,000	1,0000	1,000	1,0060	0.9899	1,000	1,000	1,000	1,000	0.00
Psychiatric	3.90	1,000	1,2493	1,000	1,0060	0.9899	1,000	1,000	1,000	1,000	4.85
Alcohol and Drug Abuse	0.00	1,000	1,0000	1,000	1,0060	0.9899	1,000	1,000	1,000	1,000	0.00
Other	0.00	1,000	1,0000	1,000	1,0060	0.9899	1,000	1,000	1,000	1,000	0.00
	\$23.74										\$25.86
Hospital Outpatient											
Emergency Room	\$8.47	1,000	1,0558	1,000	1,1124	0.9899	1,000	1,000	1,000	1,000	\$9.85
Surgery	3.88	1,000	1,0558	1,000	1,1124	0.9899	1,000	1,000	1,000	1,000	4.51
Radiology	11.08	1,000	1,0558	1,000	1,1124	0.9899	1,000	1,000	1,000	1,000	12.88
Pathology	2.81	1,000	1,0558	1,000	1,1124	0.9899	1,000	1,000	1,000	1,000	3.27
Pharmacy	4.25	1,000	1,0558	1,000	1,1124	0.9899	1,000	1,000	1,000	1,000	4.95
Cardiovascular	0.38	1,000	1,0558	1,000	1,1124	0.9899	1,000	1,000	1,000	1,000	0.44
PT/OT/ST	10.98	1,000	1,0558	1,000	1,1124	0.9899	1,000	1,000	1,000	1,000	12.77
Psychiatric	0.80	1,000	1,0558	1,000	1,1124	0.9899	1,000	1,000	1,000	1,000	0.93
Substance Abuse	0.00	1,000	1,0000	1,000	1,1124	0.9899	1,000	1,000	1,000	1,000	0.00
Other	8.33	1,000	1,0558	1,000	1,1124	0.9899	1,000	1,000	1,000	1,000	9.69
	\$50.99										\$59.29
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.68	1,000	0.7512	1,000	1,0000	0.9899	1,000	1,000	1,000	1,000	\$0.51
Office Visits	15.73	1,000	1,0605	1,000	1,0000	0.9899	1,000	1,000	1,000	1,000	16.51
Preventive Medicine	1.90	1,000	1,0706	1,000	1,0000	0.9899	1,000	1,000	1,000	1,000	2.01
Maternity	0.00	1,000	1,0000	1,000	1,0000	0.9899	1,000	1,000	1,000	1,000	0.00
Certified Midwife	0.00	1,000	1,0000	1,000	1,0000	0.9899	1,000	1,000	1,000	1,000	0.00
PT/OT/ST	25.92	1,000	1,0630	1,000	1,0000	0.9899	1,000	1,000	1,000	1,000	27.27
Psychiatric and Substance Abuse	6.78	1,000	1,0478	1,000	1,0000	0.9899	1,000	1,000	1,000	1,000	7.03
Radiology and Pathology	2.54	1,000	1,0538	1,000	1,0000	0.9899	1,000	1,000	1,000	1,000	2.65
Home Health and Private Duty Nursing	364.24	1,000	1,0629	1,000	1,0000	0.9899	1,000	1,000	1,000	1,000	363.23
Ambulance	6.60	1,000	1,0630	1,000	1,0000	0.9899	1,000	1,000	1,000	1,000	6.95
Non-Emergency Transportation	16.06	1,000	1,0630	1,000	1,0000	0.9899	1,000	1,000	1,000	1,000	16.90
Opioid Treatment Program	0.00	1,000	1,0000	1,000	1,0000	0.9899	1,000	1,000	1,000	1,000	0.00
Federally Qualified and Rural Health Clinics	1.75	1,000	1,1324	1,000	1,0000	0.9899	1,000	1,000	1,000	1,000	1.96
Adult Medical Day Care	0.00	1,000	1,0000	1,000	1,0000	0.9899	1,000	1,000	1,000	1,000	0.00
Personal Care	0.60	1,000	1,0624	1,000	1,0000	0.9899	1,000	1,000	1,000	1,000	0.63
Durable Medical Equipment	136.48	1,000	1,4876	1,000	1,0000	0.9899	1,000	1,000	1,000	1,000	200.99
Applied Behavioral Analysis	40.92	1,000	1,0630	1,9403	1,0000	0.9899	1,000	1,000	1,000	1,000	63.54
Other	43.86	1,000	0.7963	1,000	1,0000	0.9899	1,000	1,000	1,000	1,000	34.57
	\$664.05										\$784.75
Prescription Drugs											
Generic Scripts	\$49.64	1,000	1,0000	1,000	1,5793	0.9899	0.9905	1,000	1,000	1,000	\$76.87
Single-Source Brand	69.53	1,000	1,0000	1,000	1,3674	0.9899	0.9544	1,000	1,000	1,000	91.14
Multi-Source Brand	55.57	1,000	1,0000	1,000	1,3674	0.9899	0.8910	1,000	1,000	1,000	68.00
Specialty	163.76	1,000	1,0000	1,000	1,1729	0.9899	0.9931	1,000	1,000	1,000	188.83
Hepatitis C	0.00	1,000	1,0000	1,000	1,0000	0.9899	0.9894	1,000	1,000	1,000	0.00
Other	0.00	1,000	1,0000	1,000	1,5793	0.9899	0.9751	1,000	1,000	1,000	0.00
	\$338.50										\$424.54
Community Mental Health Center											
Case Management	\$2.31	1,0500	1,0630	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	\$2.57
Long Term Support Service	2.72	1,0500	1,0629	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	3.03
Partial Hospital	0.00	1,0500	1,0000	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Psychotherapy	0.37	1,0500	1,0629	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.42
Evidence Based Practices	0.00	1,0500	1,0000	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Medication Management	0.00	1,0500	1,0000	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Emergency Service 24/7	0.01	1,0500	1,0631	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.01
APRTP	0.00	1,0500	1,0000	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Supported Employment Services	0.00	1,0500	1,0000	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.00
Other	0.62	1,0500	1,0630	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	0.69
	\$6.02										\$6.72
All Services	\$1,083.30										\$1,301.46

Eligibility Category: Elderly and Disabled Adults - Age 19-64

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$57.69	1.0000	1.0547	1.0000	1.0060	0.9891	1.0000	1.0000	0.9971	1.0000	\$60.36
Surgical	37.89	1.0000	1.0619	1.0000	1.0060	0.9891	1.0000	1.0000	0.9971	1.0000	39.92
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0060	0.9891	1.0000	1.0000	0.9971	1.0000	0.00
Maternity Non-Delivery	0.09	1.0000	1.1511	1.0000	1.0060	0.9891	1.0000	1.0000	0.9971	1.0000	0.10
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0060	0.9891	1.0000	1.0000	0.9971	1.0000	0.00
Psychiatric	7.35	1.0000	1.1145	1.0000	1.0060	0.9891	1.0000	1.0000	0.9971	1.0000	8.12
Alcohol and Drug Abuse	2.55	1.0000	1.0631	1.0000	1.0060	0.9891	1.0000	1.0000	0.9971	1.0000	2.69
Other	0.00	1.0000	1.0000	1.0000	1.0060	0.9891	1.0000	1.0000	0.9971	1.0000	0.00
	\$105.56										\$111.19
Hospital Outpatient											
Emergency Room	\$56.61	1.0000	1.0558	1.0000	1.1124	0.9891	1.0000	1.0000	0.9971	1.0000	\$65.58
Surgery	23.47	1.0000	1.0558	1.0000	1.1124	0.9891	1.0000	1.0000	0.9971	1.0000	27.19
Radiology	32.48	1.0000	1.0558	1.0000	1.1124	0.9891	1.0000	1.0000	0.9971	1.0000	37.62
Pathology	8.28	1.0000	1.0558	1.0000	1.1124	0.9891	1.0000	1.0000	0.9971	1.0000	9.59
Pharmacy	40.80	1.0000	1.0558	1.0000	1.1124	0.9891	1.0000	1.0000	0.9971	1.0000	47.26
Cardiovascular	2.36	1.0000	1.0558	1.0000	1.1124	0.9891	1.0000	1.0000	0.9971	1.0000	2.73
PT/OT/ST	6.03	1.0000	1.0558	1.0000	1.1124	0.9891	1.0000	1.0000	0.9971	1.0000	6.98
Psychiatric	0.47	1.0000	1.0558	1.0000	1.1124	0.9891	1.0000	1.0000	0.9971	1.0000	0.95
Substance Abuse	0.14	1.0000	1.0558	1.0000	1.1124	0.9891	1.0000	1.0000	0.9971	1.0000	0.16
Other	32.15	1.0000	1.0558	1.0000	1.1124	0.9891	1.0000	1.0000	0.9971	1.0000	37.24
	\$202.78										\$234.90
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$2.28	1.0000	1.1878	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	\$2.67
Office Visits	26.43	1.0000	1.0610	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	27.65
Preventive Medicine	3.44	1.0000	1.1330	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	3.85
Maternity	0.23	1.0000	1.0630	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	0.25
Certified Midwife	0.00	1.0000	1.0000	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	0.00
PT/OT/ST	3.75	1.0000	1.0630	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	3.93
Psychiatric and Substance Abuse	16.62	1.0000	1.0723	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	17.58
Radiology and Pathology	14.64	1.0000	1.0579	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	15.28
Home Health and Private Duty Nursing	56.64	1.0000	1.0629	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	59.37
Ambulance	6.66	1.0000	1.0630	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	6.98
Non-Emergency Transportation	27.58	1.0000	1.0630	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	28.91
Opioid Treatment Program	9.63	1.0000	1.0636	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	10.10
Federally Qualified and Rural Health Clinics	17.60	1.0000	1.1345	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	19.70
Adult Medical Day Care	2.16	1.0000	1.0630	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	2.26
Personal Care	15.82	1.0000	1.0624	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	16.58
Durable Medical Equipment	40.91	1.0000	0.9416	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	37.99
Applied Behavioral Analysis	0.09	1.0000	1.0630	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	0.10
Other	65.37	1.0000	1.0913	1.0000	1.0000	0.9891	1.0000	1.0000	0.9971	1.0000	70.35
	\$309.85										\$323.53
Prescription Drugs											
Generic Scripts	\$68.70	1.0000	1.0000	1.0000	1.0340	0.9891	1.0248	1.0000	0.9971	1.0000	\$71.79
Single-Source Brand	160.24	1.0000	1.0000	1.0000	1.1153	0.9891	0.9380	1.0000	0.9971	1.0000	165.33
Multi-Source Brand	47.63	1.0000	1.0000	1.0000	1.1153	0.9891	0.6783	1.0000	0.9971	1.0000	38.68
Specialty	154.18	1.0000	1.0000	1.0000	1.3640	0.9891	0.9884	1.0000	0.9971	1.0000	205.00
Hepatitis C	16.96	1.0000	1.0000	1.0000	0.4873	0.9891	0.9666	1.0000	0.9971	1.0000	7.88
Other	0.00	1.0000	1.0000	1.0000	1.0340	0.9891	0.9544	1.0000	0.9971	1.0000	0.00
	\$447.92										\$485.69
Community Mental Health Center											
Case Management	\$0.85	1.0500	1.0611	1.0000	1.0000	1.0000	1.0000	1.0000	0.9971	1.0000	\$0.95
Long Term Support Service	1.34	1.0500	1.0681	1.0000	1.0000	1.0000	1.0000	1.0000	0.9971	1.0000	1.50
Partial Hospital	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.9971	1.0000	0.00
Psychotherapy	2.02	1.0500	1.0628	1.0000	1.0000	1.0000	1.0000	1.0000	0.9971	1.0000	2.25
Evidence Based Practices	0.01	1.0500	1.0624	1.0000	1.0000	1.0000	1.0000	1.0000	0.9971	1.0000	0.01
Medication Management	0.08	1.0500	1.0620	1.0000	1.0000	1.0000	1.0000	1.0000	0.9971	1.0000	0.09
Emergency Service 24/7	0.00	1.0500	1.0560	1.0000	1.0000	1.0000	1.0000	1.0000	0.9971	1.0000	0.00
APRTP	0.72	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	0.9971	1.0000	0.80
Supported Employment Services	0.02	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	0.9971	1.0000	0.02
Other	2.52	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	0.9971	1.0000	3.25
	\$7.97										\$8.88
All Services	\$1,074.09										\$1,164.18

Eligibility Category: Elderly and Disabled Adults - Age 65+

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$93.82	1,000	1,0418	1,000	1,0060	0.9917	1,000	1,000	1,000	1,000	\$97.51
Surgical	68.77	1,000	1,0439	1,000	1,0060	0.9917	1,000	1,000	1,000	1,000	71.62
Maternity Delivery	0.00	1,000	1,000	1,000	1,0060	0.9917	1,000	1,000	1,000	1,000	0.00
Maternity Non-Delivery	0.00	1,000	1,000	1,000	1,0060	0.9917	1,000	1,000	1,000	1,000	0.00
Well Newborn	0.00	1,000	1,000	1,000	1,0060	0.9917	1,000	1,000	1,000	1,000	0.00
Psychiatric	4.31	1,000	1,1078	1,000	1,0060	0.9917	1,000	1,000	1,000	1,000	4.76
Alcohol and Drug Abuse	0.00	1,000	1,000	1,000	1,0060	0.9917	1,000	1,000	1,000	1,000	0.00
Other	0.00	1,000	1,000	1,000	1,0060	0.9917	1,000	1,000	1,000	1,000	0.00
	\$166.89										\$173.89
Hospital Outpatient											
Emergency Room	\$48.87	1,000	1,0558	1,000	1,1124	0.9917	1,000	1,000	1,000	1,000	\$56.93
Surgery	17.25	1,000	1,0558	1,000	1,1124	0.9917	1,000	1,000	1,000	1,000	20.09
Radiology	30.23	1,000	1,0558	1,000	1,1124	0.9917	1,000	1,000	1,000	1,000	35.21
Pathology	9.11	1,000	1,0558	1,000	1,1124	0.9917	1,000	1,000	1,000	1,000	10.61
Pharmacy	23.33	1,000	1,0558	1,000	1,1124	0.9917	1,000	1,000	1,000	1,000	27.17
Cardiovascular	2.69	1,000	1,0558	1,000	1,1124	0.9917	1,000	1,000	1,000	1,000	3.14
PT/OT/ST	5.60	1,000	1,0558	1,000	1,1124	0.9917	1,000	1,000	1,000	1,000	6.52
Psychiatric	0.00	1,000	1,000	1,000	1,1124	0.9917	1,000	1,000	1,000	1,000	0.00
Substance Abuse	0.00	1,000	1,000	1,000	1,1124	0.9917	1,000	1,000	1,000	1,000	0.00
Other	38.58	1,000	1,0558	1,000	1,1124	0.9917	1,000	1,000	1,000	1,000	44.94
	\$175.66										\$204.62
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$5.01	1,000	1,0882	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	\$5.40
Office Visits	24.83	1,000	1,0609	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	26.12
Preventive Medicine	2.71	1,000	1,3063	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	3.51
Maternity	0.00	1,000	1,000	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	0.00
Certified Midwife	0.00	1,000	1,000	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	0.00
PT/OT/ST	2.73	1,000	1,0630	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	2.88
Psychiatric and Substance Abuse	0.99	1,000	1,0630	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	1.05
Radiology and Pathology	11.52	1,000	1,0549	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	12.05
Home Health and Private Duty Nursing	51.04	1,000	1,0629	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	53.80
Ambulance	8.73	1,000	1,0630	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	9.20
Non-Emergency Transportation	12.54	1,000	1,0630	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	13.22
Opioid Treatment Program	0.89	1,000	1,0636	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	0.94
Federally Qualified and Rural Health Clinics	22.85	1,000	1,1369	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	25.77
Adult Medical Day Care	30.56	1,000	1,0630	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	32.21
Personal Care	0.17	1,000	1,0630	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	0.18
Durable Medical Equipment	23.13	1,000	0.9848	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	22.59
Applied Behavioral Analysis	74.02	1,000	1,000	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	0.00
Other	0.00	1,000	1,0508	1,000	1,000	0.9917	1,000	1,000	1,000	1,000	77.13
	\$271.71										\$286.05
Prescription Drugs											
Generic Scripts	\$56.07	1,000	1,000	1,000	1,0340	0.9917	1,0248	1,000	1,000	1,000	\$58.92
Single-Source Brand	135.98	1,000	1,000	1,000	1,1153	0.9917	0.9380	1,000	1,000	1,000	141.08
Multi-Source Brand	19.86	1,000	1,000	1,000	1,1153	0.9917	0.6783	1,000	1,000	1,000	14.90
Specialty	51.50	1,000	1,000	1,000	1,3640	0.9917	0.9884	1,000	1,000	1,000	68.85
Hepatitis C	0.00	1,000	1,000	1,000	0.4873	0.9917	0.9666	1,000	1,000	1,000	0.00
Other	0.00	1,000	1,000	1,000	1,0340	0.9917	0.9544	1,000	1,000	1,000	0.00
	\$263.41										\$283.76
Community Mental Health Center											
Case Management	\$0.15	1,0500	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	\$0.17
Long Term Support Service	0.03	1,0500	1,0629	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.04
Partial Hospital	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Psychotherapy	0.23	1,0500	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.26
Evidence Based Practices	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Medication Management	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Emergency Service 24/7	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
APRTP	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Supported Employment Services	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Other	0.40	1,0500	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.44
	\$0.81										\$0.91
All Services	\$878.48										\$946.22

Eligibility Category: Dual Eligibles

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$19.16	1.0000	1.0418	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	\$20.08
Surgical	6.40	1.0000	1.0439	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	6.72
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.08	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.06
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	1.63	1.0000	1.1078	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	1.82
Alcohol and Drug Abuse	0.41	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.42
Other	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
	\$27.87										\$28.10
Hospital Outpatient											
Emergency Room	\$20.97	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	\$24.84
Surgery	6.83	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	8.02
Radiology	6.59	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	7.74
Pathology	1.10	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	1.29
Pharmacy	11.66	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	13.70
Cardiovascular	0.96	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	1.13
PT/OT/ST	2.48	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	2.92
Psychiatric	0.43	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	0.51
Substance Abuse	0.02	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	0.03
Other	16.84	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	19.78
	\$67.89										\$79.74
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.56	1.0000	1.0882	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.61
Office Visits	7.83	1.0000	1.0609	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	8.31
Preventive Medicine	0.75	1.0000	1.3083	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.98
Maternity	0.14	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.14
Certified Midwife	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
PT/OT/ST	0.63	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.67
Psychiatric and Substance Abuse	6.76	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	7.19
Radiology and Pathology	2.74	1.0000	1.0549	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.90
Home Health and Private Duty Nursing	10.06	1.0000	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	10.70
Ambulance	5.41	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	5.75
Non-Emergency Transportation	31.07	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	33.02
Opioid Treatment Program	4.13	1.0000	1.0636	1.0000	1.0000	1.0000	1.0000	0.2354	1.0000	1.0000	1.03
Federally Qualified and Rural Health Clinics	1.25	1.0000	1.1340	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.42
Adult Medical Day Care	1.75	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.86
Personal Care	28.08	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	29.85
Durable Medical Equipment	15.88	1.0000	1.9022	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	30.22
Applied Behavioral Analysis	0.31	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.31
Other	21.26	1.0000	1.0508	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	22.34
	\$138.63										\$157.29
Prescription Drugs											
Generic Scripts	\$0.92	1.0000	1.0000	1.0000	0.9885	1.0000	0.9884	1.0000	1.0000	1.0000	\$0.90
Single-Source Brand	0.13	1.0000	1.0000	1.0000	1.0498	1.0000	0.9894	1.0000	1.0000	1.0000	0.14
Multi-Source Brand	0.08	1.0000	1.0000	1.0000	1.0498	1.0000	0.9894	1.0000	1.0000	1.0000	0.08
Specialty	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
Hepatitis C	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	0.9885	1.0000	0.9884	1.0000	1.0000	1.0000	0.00
	\$1.14										\$1.12
Community Mental Health Center											
Case Management	\$0.52	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.59
Long Term Support Service	0.99	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.10
Partial Hospital	0.01	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.01
Psychotherapy	0.60	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.67
Evidence Based Practices	0.04	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.01
Medication Management	0.01	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.04
Emergency Service 24/7	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
APRTP	0.26	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.28
Supported Employment Services	0.03	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.03
Other	1.24	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.38
	\$3.71										\$4.11
All Services	\$239.02										\$271.36

Eligibility Category: Newborn Kick Payment

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$1,906.43	1,000	1,0509	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	\$2,015.42
Surgical	107.60	1,000	1,0862	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	117.48
Maternity Delivery	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Maternity Non-Delivery	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Well Newborn	358.42	1,000	1,0635	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	390.68
Psychiatric	1.45	1,000	1,1296	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	1.85
Alcohol and Drug Abuse	0.00	1,000	1,000	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	0.00
Other	0.00	1,000	1,000	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	0.00
	\$2,373.90										\$2,525.23
Hospital Outpatient											
Emergency Room	\$30.10	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	\$35.35
Surgery	0.84	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	0.99
Radiology	5.04	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	5.92
Pathology	3.48	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	4.09
Pharmacy	0.15	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	0.18
Cardiovascular	0.57	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	0.67
PT/OT/ST	0.70	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	0.82
Psychiatric	0.00	1,000	1,000	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	0.00
Substance Abuse	0.00	1,000	1,000	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	0.00
Other	39.23	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	46.08
	\$80.10										\$94.09
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	\$0.00
Office Visits	36.52	1,000	1,0592	1,000	1,000	1,000	1,000	1,000	1,000	1,000	38.69
Preventive Medicine	105.52	1,000	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	112.17
Maternity	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Certified Midwife	0.16	1,000	1,0629	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.17
PT/OT/ST	0.36	1,000	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.39
Psychiatric and Substance Abuse	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Radiology and Pathology	11.76	1,000	1,0588	1,000	1,000	1,000	1,000	1,000	1,000	1,000	12.45
Home Health and Private Duty Nursing	24.33	1,000	1,0629	1,000	1,000	1,000	1,000	1,000	1,000	1,000	25.87
Ambulance	22.44	1,000	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	23.85
Non-Emergency Transportation	0.85	1,000	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.90
Opioid Treatment Program	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Federally Qualified and Rural Health Clinics	86.64	1,000	1,1355	1,000	1,000	1,000	1,000	1,000	1,000	1,000	98.38
Adult Medical Day Care	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Personal Care	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Durable Medical Equipment	9.12	1,000	0,8863	1,000	1,000	1,000	1,000	1,000	1,000	1,000	8.19
Applied Behavioral Analysis	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Other	495.87	1,000	1,0625	1,000	1,000	1,000	1,000	1,000	1,000	1,000	526.87
	\$793.58										\$847.92
Prescription Drugs											
Generic Scripts	\$2.10	1,000	1,000	1,000	1,0420	1,000	0,9894	1,000	1,000	1,000	\$2.16
Single-Source Brand	0.50	1,000	1,000	1,000	1,0503	1,000	0,9894	1,000	1,000	1,000	0.52
Multi-Source Brand	0.03	1,000	1,000	1,000	1,0503	1,000	0,9894	1,000	1,000	1,000	0.03
Specialty	0.00	1,000	1,000	1,000	1,6705	1,000	0,9894	1,000	1,000	1,000	0.01
Hepatitis C	0.00	1,000	1,000	1,000	1,000	1,000	0,9894	1,000	1,000	1,000	0.00
Other	0.00	1,000	1,000	1,000	1,0420	1,000	0,9894	1,000	1,000	1,000	0.00
	\$2.63										\$2.72
Community Mental Health Center											
Case Management	\$0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	\$0.00
Long Term Support Service	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Partial Hospital	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Psychotherapy	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Evidence Based Practices	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Medication Management	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Emergency Service 24/7	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
APRTP	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Supported Employment Services	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Other	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
	\$0.00										\$0.00
All Services	\$3,250.21										\$3,465.95

Eligibility Category: Neonatal Abstinence Syndrome Kick Payment

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$5,444.62	1,000	1,0501	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	\$5,751.75
Surgical	0.00	1,000	1,000	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	0.00
Maternity Delivery	0.00	1,000	1,000	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	0.00
Maternity Non-Delivery	0.00	1,000	1,000	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	0.00
Well Newborn	95.83	1,000	1,0879	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	104.88
Psychiatric	0.00	1,000	1,000	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	0.00
Alcohol and Drug Abuse	0.00	1,000	1,000	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	0.00
Other	0.00	1,000	1,000	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	0.00
	\$5,540.45										\$5,856.63
Hospital Outpatient											
Emergency Room	\$21.74	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	\$25.53
Surgery	9.00	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	10.58
Radiology	4.36	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	5.12
Pathology	5.00	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	5.87
Pharmacy	1.42	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	1.67
Cardiovascular	0.41	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	0.48
PT/OT/ST	1.39	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	1.64
Psychiatric	0.00	1,000	1,000	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	0.00
Substance Abuse	0.00	1,000	1,000	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	0.00
Other	30.03	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	35.27
	\$73.34										\$86.15
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	\$0.00
Office Visits	47.27	1,000	1,0582	1,000	1,000	1,000	1,000	1,000	1,000	1,000	50.06
Preventive Medicine	136.40	1,000	1,0629	1,000	1,000	1,000	1,000	1,000	1,000	1,000	144.97
Maternity	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Certified Midwife	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
PT/OT/ST	2.19	1,000	1,0629	1,000	1,000	1,000	1,000	1,000	1,000	1,000	2.33
Psychiatric and Substance Abuse	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Radiology and Pathology	6.95	1,000	1,0558	1,000	1,000	1,000	1,000	1,000	1,000	1,000	7.34
Home Health and Private Duty Nursing	79.16	1,000	1,0629	1,000	1,000	1,000	1,000	1,000	1,000	1,000	84.14
Ambulance	31.35	1,000	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	33.33
Non-Emergency Transportation	2.09	1,000	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	2.22
Opioid Treatment Program	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Federally Qualified and Rural Health Clinics	104.83	1,000	1,1404	1,000	1,000	1,000	1,000	1,000	1,000	1,000	119.55
Adult Medical Day Care	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Personal Care	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Durable Medical Equipment	31.14	1,000	0,8629	1,000	1,000	1,000	1,000	1,000	1,000	1,000	28.87
Applied Behavioral Analysis	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Other	617.61	1,000	1,0627	1,000	1,000	1,000	1,000	1,000	1,000	1,000	656.32
	\$1,058.99										\$1,127.13
Prescription Drugs											
Generic Scripts	\$5.34	1,000	1,000	1,000	1,0420	1,000	0,9884	1,000	1,000	1,000	\$6.51
Single-Source Brand	0.04	1,000	1,000	1,000	1,0503	1,000	0,9884	1,000	1,000	1,000	0.05
Multi-Source Brand	0.00	1,000	1,000	1,000	1,0503	1,000	0,9884	1,000	1,000	1,000	0.00
Specialty	0.00	1,000	1,000	1,000	1,6705	1,000	0,9884	1,000	1,000	1,000	0.00
Hepatitis C	0.00	1,000	1,000	1,000	1,000	1,000	0,9884	1,000	1,000	1,000	0.00
Other	0.00	1,000	1,000	1,000	1,0420	1,000	0,9884	1,000	1,000	1,000	0.00
	\$5.39										\$6.56
Community Mental Health Center											
Case Management	\$0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	\$0.00
Long Term Support Service	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Partial Hospital	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Psychotherapy	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Evidence Based Practices	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Medication Management	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Emergency Service 24/7	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
APRTP	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Supported Employment Services	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Other	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
	\$0.00										\$0.00
All Services	\$6,678.17										\$7,075.46

Eligibility Category: Maternity Kick Payment

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$74.38	1,000	1,1079	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	\$82.90
Surgical	0.00	1,000	1,000	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	0.00
Maternity Delivery	1,811.69	1,000	1,0675	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	1,946.55
Maternity Non-Delivery	21.77	1,000	1,1540	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	25.28
Well Newborn	0.00	1,000	1,000	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	0.00
Psychiatric	0.00	1,000	1,000	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	0.00
Alcohol and Drug Abuse	0.00	1,000	1,000	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	0.00
Other	0.00	1,000	1,000	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	0.00
	\$1,907.84										\$2,053.72
Hospital Outpatient											
Emergency Room	\$14.98	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	\$17.60
Surgery	4.92	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	5.78
Radiology	2.24	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	2.64
Pathology	1.81	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	2.13
Pharmacy	2.91	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	3.41
Cardiovascular	0.04	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	0.05
PT/OT/ST	0.17	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	0.19
Psychiatric	0.00	1,000	1,000	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	0.00
Substance Abuse	0.00	1,000	1,000	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	0.00
Other	19.81	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	23.26
	\$46.88										\$55.06
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	\$0.00
Office Visits	1.11	1,000	1,0560	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1.18
Preventive Medicine	0.50	1,000	1,0629	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.54
Maternity	514.96	1,000	1,0629	1,000	1,000	1,000	1,000	1,000	1,000	1,000	547.31
Certified Midwife	8.52	1,000	1,0620	1,000	1,000	1,000	1,000	1,000	1,000	1,000	9.05
PT/OT/ST	0.01	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.01
Psychiatric and Substance Abuse	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Radiology and Pathology	2.25	1,000	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	2.39
Home Health and Private Duty Nursing	0.22	1,000	1,0629	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.23
Ambulance	2.99	1,000	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	3.18
Non-Emergency Transportation	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Opioid Treatment Program	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Federally Qualified and Rural Health Clinics	2.59	1,000	1,1361	1,000	1,000	1,000	1,000	1,000	1,000	1,000	2.94
Adult Medical Day Care	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Personal Care	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Durable Medical Equipment	0.07	1,000	1,0651	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.07
Applied Behavioral Analysis	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Other	13.30	1,000	1,0614	1,000	1,000	1,000	1,000	1,000	1,000	1,000	14.12
	\$546.51										\$581.00
Prescription Drugs											
Generic Scripts	\$0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	\$0.00
Single-Source Brand	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Multi-Source Brand	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Specialty	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Hepatitis C	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Other	0.00	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
	\$0.00										\$0.00
Community Mental Health Center											
Case Management	\$0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	\$0.00
Long Term Support Service	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Partial Hospital	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Psychotherapy	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Evidence Based Practices	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Medication Management	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Emergency Service 24/7	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
APRTP	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Supported Employment Services	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Other	0.00	1,0500	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
	\$0.00										\$0.00
All Services	\$2,501.22										\$2,689.78

Eligibility Category: Severe/Persistent Mental Illness - Non-Dual

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$50.57	1,000	1,0563	1,000	1,0060	0.9875	1,000	1,000	1,000	1,000	\$53.06
Surgical	24.36	1,000	1,0566	1,000	1,0060	0.9875	1,000	1,000	1,000	1,000	25.64
Maternity Delivery	0.00	1,000	1,0000	1,000	1,0060	0.9875	1,000	1,000	1,000	1,000	0.00
Maternity Non-Delivery	0.88	1,000	1,1482	1,000	1,0060	0.9875	1,000	1,000	1,000	1,000	1.00
Well Newborn	0.00	1,000	1,0000	1,000	1,0060	0.9875	1,000	1,000	1,000	1,000	0.00
Psychiatric	47.55	1,000	1,1720	1,000	1,0060	0.9875	1,000	1,000	1,000	1,000	55.36
Alcohol and Drug Abuse	1.90	1,000	1,0618	1,000	1,0060	0.9875	1,000	1,000	1,000	1,000	2.00
Other	0.00	1,000	1,0000	1,000	1,0060	0.9875	1,000	1,000	1,000	1,000	0.00
	\$125.26										\$137.07
Hospital Outpatient											
Emergency Room	\$85.15	1,000	1,0558	1,000	1,1124	0.9875	1,000	1,000	1,000	1,000	\$98.76
Surgery	17.90	1,000	1,0558	1,000	1,1124	0.9875	1,000	1,000	1,000	1,000	20.77
Radiology	22.27	1,000	1,0558	1,000	1,1124	0.9875	1,000	1,000	1,000	1,000	25.83
Pathology	9.50	1,000	1,0558	1,000	1,1124	0.9875	1,000	1,000	1,000	1,000	11.02
Pharmacy	14.78	1,000	1,0558	1,000	1,1124	0.9875	1,000	1,000	1,000	1,000	17.14
Cardiovascular	2.59	1,000	1,0558	1,000	1,1124	0.9875	1,000	1,000	1,000	1,000	3.01
PT/OT/ST	6.35	1,000	1,0558	1,000	1,1124	0.9875	1,000	1,000	1,000	1,000	7.36
Psychiatric	1.86	1,000	1,0558	1,000	1,1124	0.9875	1,000	1,000	1,000	1,000	2.16
Substance Abuse	0.24	1,000	1,0558	1,000	1,1124	0.9875	1,000	1,000	1,000	1,000	0.28
Other	23.24	1,000	1,0558	1,000	1,1124	0.9875	1,000	1,000	1,000	1,000	26.96
	\$183.87										\$213.27
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$2.10	1,000	1,1268	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	\$2.33
Office Visits	29.76	1,000	1,0611	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	31.18
Preventive Medicine	5.39	1,000	1,1476	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	6.11
Maternity	1.27	1,000	1,0630	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	1.33
Certified Midwife	0.00	1,000	1,0629	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	0.00
PT/OT/ST	2.18	1,000	1,0630	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	2.29
Psychiatric and Substance Abuse	21.93	1,000	1,1020	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	23.86
Radiology and Pathology	15.28	1,000	1,0581	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	15.96
Home Health and Private Duty Nursing	14.04	1,000	1,0629	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	14.74
Ambulance	10.67	1,000	1,0630	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	11.20
Non-Emergency Transportation	44.92	1,000	1,0630	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	47.16
Opioid Treatment Program	9.76	1,000	1,0636	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	10.25
Federally Qualified and Rural Health Clinics	20.02	1,000	1,1344	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	22.42
Adult Medical Day Care	0.30	1,000	1,0630	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	0.31
Personal Care	0.26	1,000	1,0624	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	0.28
Durable Medical Equipment	18.02	1,000	0.9068	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	16.03
Applied Behavioral Analysis	0.00	1,000	1,0000	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	0.00
Other	57.04	1,000	1,0296	1,000	1,0000	0.9875	1,000	1,000	1,000	1,000	58.00
	\$252.95										\$263.47
Prescription Drugs											
Generic Scripts	\$109.81	1,000	1,0000	1,000	0.9397	0.9875	1,0527	1,000	1,000	1,000	\$107.28
Single-Source Brand	219.90	1,000	1,0000	1,000	1,1463	0.9875	0.9329	1,000	1,000	1,000	232.23
Multi-Source Brand	44.07	1,000	1,0000	1,000	1,1463	0.9875	0.4284	1,000	1,000	1,000	21.37
Specialty	208.95	1,000	1,0000	1,000	1,3906	0.9875	0.9785	1,000	1,000	1,000	282.78
Hepatitis C	25.36	1,000	1,0000	1,000	0.5020	0.9875	0.9788	1,000	1,000	1,000	12.30
Other	0.01	1,000	1,0000	1,000	0.9397	0.9875	0.9489	1,000	1,000	1,000	0.01
	\$608.09										\$655.97
Community Mental Health Center											
Case Management	\$298.14	1,0500	1,0629	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	\$332.76
Long Term Support Service	276.75	1,0500	1,1448	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	332.66
Partial Hospital	7.86	1,0500	1,0629	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	8.77
Psychotherapy	68.63	1,0500	1,0624	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	76.56
Evidence Based Practices	6.96	1,0500	1,0626	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	7.77
Medication Management	4.13	1,0500	1,0630	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	4.61
Emergency Service 24/7	2.65	1,0500	1,0623	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	2.96
APRTP	4.85	1,0500	1,0630	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	5.42
Supported Employment Services	25.55	1,0500	1,0629	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	28.52
Other	33.42	1,0500	1,0629	1,000	1,0000	1,0000	1,0000	1,0000	1,0000	1,0000	37.30
	\$728.97										\$837.33
All Services	\$1,899.14										\$2,107.12

Eligibility Category: Severe/Persistent Mental Illness - Dual

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$20.61	1,000	1,0563	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	\$21.90
Surgical	6.99	1,000	1,0566	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	7.45
Maternity Delivery	0.00	1,000	1,0000	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	0.00
Maternity Non-Delivery	0.12	1,000	1,1482	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	0.14
Well Newborn	0.00	1,000	1,0000	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	0.00
Psychiatric	23.67	1,000	1,1720	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	27.91
Alcohol and Drug Abuse	1.14	1,000	1,0618	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	1.22
Other	0.00	1,000	1,0000	1,000	1,0060	1,000	1,000	1,000	1,000	1,000	0.00
	\$52.52										\$58.61
Hospital Outpatient											
Emergency Room	\$34.27	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	\$40.25
Surgery	9.36	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	10.99
Radiology	7.90	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	9.28
Pathology	1.41	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	1.66
Pharmacy	8.26	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	9.70
Cardiovascular	1.09	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	1.28
PT/OT/ST	3.12	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	3.67
Psychiatric	1.06	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	1.24
Substance Abuse	0.16	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	0.18
Other	18.53	1,000	1,0558	1,000	1,1124	1,000	1,000	1,000	1,000	1,000	21.77
	\$85.16										\$100.03
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.82	1,000	1,1268	1,000	1,000	1,000	1,000	1,000	1,000	1,000	\$0.92
Office Visits	12.95	1,000	1,0611	1,000	1,000	1,000	1,000	1,000	1,000	1,000	13.74
Preventive Medicine	0.94	1,000	1,1476	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1.08
Maternity	0.21	1,000	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.22
Certified Midwife	0.00	1,000	1,0000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
PT/OT/ST	0.61	1,000	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.65
Psychiatric and Substance Abuse	41.61	1,000	1,1020	1,000	1,000	1,000	1,000	1,000	1,000	1,000	45.85
Radiology and Pathology	3.41	1,000	1,0581	1,000	1,000	1,000	1,000	1,000	1,000	1,000	3.61
Home Health and Private Duty Nursing	3.83	1,000	1,0629	1,000	1,000	1,000	1,000	1,000	1,000	1,000	4.07
Ambulance	6.02	1,000	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	6.40
Non-Emergency Transportation	41.37	1,000	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	43.98
Opioid Treatment Program	4.98	1,000	1,0636	1,000	1,000	1,000	1,000	1,000	1,000	1,000	5.22
Federally Qualified and Rural Health Clinics	1.03	1,000	1,1344	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1.17
Adult Medical Day Care	0.75	1,000	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.79
Personal Care	8.52	1,000	1,0624	1,000	1,000	1,000	1,000	1,000	1,000	1,000	9.05
Durable Medical Equipment	9.45	1,000	2,1746	1,000	1,000	1,000	1,000	1,000	1,000	1,000	20.55
Applied Behavioral Analysis	0.00	1,000	1,0000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.00
Other	23.73	1,000	1,0296	1,000	1,000	1,000	1,000	1,000	1,000	1,000	24.43
	\$160.22										\$177.73
Prescription Drugs											
Generic Scripts	\$1.22	1,000	1,000	1,000	0.9885	1,000	0.9884	1,000	1,000	1,000	\$1.19
Single-Source Brand	0.09	1,000	1,000	1,000	1,0498	1,000	0.9894	1,000	1,000	1,000	0.09
Multi-Source Brand	0.05	1,000	1,000	1,000	1,0498	1,000	0.9894	1,000	1,000	1,000	0.05
Specialty	0.00	1,000	1,000	1,000	1,000	1,000	0.9894	1,000	1,000	1,000	0.00
Hepatitis C	0.00	1,000	1,000	1,000	1,000	1,000	0.9894	1,000	1,000	1,000	0.00
Other	0.00	1,000	1,000	1,000	0.9885	1,000	0.9894	1,000	1,000	1,000	0.00
	\$1.35										\$1.34
Community Mental Health Center											
Case Management	\$308.54	1,0500	1,0629	1,000	1,000	1,000	1,000	1,000	1,000	1,000	\$344.36
Long Term Support Service	424.45	1,0500	1,1448	1,000	1,000	1,000	1,000	1,000	1,000	1,000	510.20
Partial Hospital	26.83	1,0500	1,0629	1,000	1,000	1,000	1,000	1,000	1,000	1,000	29.95
Psychotherapy	29.32	1,0500	1,0624	1,000	1,000	1,000	1,000	1,000	1,000	1,000	32.71
Evidence Based Practices	7.31	1,0500	1,0626	1,000	1,000	1,000	1,000	1,000	1,000	1,000	8.16
Medication Management	6.22	1,0500	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	6.94
Emergency Service 24/7	2.89	1,0500	1,0623	1,000	1,000	1,000	1,000	1,000	1,000	1,000	3.23
APRTP	7.48	1,0500	1,0630	1,000	1,000	1,000	1,000	1,000	1,000	1,000	8.35
Supported Employment Services	35.83	1,0500	1,0629	1,000	1,000	1,000	1,000	1,000	1,000	1,000	39.99
Other	13.59	1,0500	1,0629	1,000	1,000	1,000	1,000	1,000	1,000	1,000	15.16
	\$862.47										\$999.04
All Services	\$1,161.74										\$1,336.75

Eligibility Category: Severe Mental Illness - Non-Dual

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$76.65	1.0000	1.0555	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	\$80.37
Surgical	34.03	1.0000	1.0687	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	36.12
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	1.21	1.0000	1.1108	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	1.33
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	53.97	1.0000	1.1620	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	62.30
Alcohol and Drug Abuse	12.68	1.0000	1.0696	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	13.48
Other	0.00	1.0000	1.0000	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
	\$178.53										\$193.61
Hospital Outpatient											
Emergency Room	\$104.36	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	\$121.05
Surgery	12.56	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	14.57
Radiology	20.21	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	23.44
Pathology	11.11	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	12.89
Pharmacy	5.09	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	5.90
Cardiovascular	1.36	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	1.57
PT/OT/ST	6.44	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	7.46
Psychiatric	2.29	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	2.65
Substance Abuse	0.36	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	0.42
Other	20.91	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	24.25
	\$184.68										\$214.20
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$2.22	1.0000	1.2081	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	\$2.65
Office Visits	31.17	1.0000	1.0609	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	32.65
Preventive Medicine	5.99	1.0000	1.1606	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	6.86
Maternity	3.56	1.0000	1.0630	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	3.74
Certified Midwife	0.01	1.0000	1.0629	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.01
PT/OT/ST	2.33	1.0000	1.0630	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	2.44
Psychiatric and Substance Abuse	70.55	1.0000	1.0788	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	75.16
Radiology and Pathology	23.57	1.0000	1.0597	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	24.66
Home Health and Private Duty Nursing	8.38	1.0000	1.0629	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	8.80
Ambulance	12.72	1.0000	1.0630	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	13.36
Non-Emergency Transportation	45.49	1.0000	1.0630	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	47.75
Opioid Treatment Program	18.27	1.0000	1.0630	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	19.19
Federally Qualified and Rural Health Clinics	26.00	1.0000	1.1339	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	29.11
Adult Medical Day Care	0.00	1.0000	1.0624	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Personal Care	5.29	1.0000	1.0624	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	5.55
Durable Medical Equipment	12.85	1.0000	1.0616	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	12.17
Applied Behavioral Analysis	0.00	1.0000	1.0000	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Other	65.61	1.0000	1.0306	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	66.77
	\$334.10										\$350.67
Prescription Drugs											
Generic Scripts	\$67.57	1.0000	1.0000	1.0000	0.9397	0.9875	1.0527	1.0000	1.0000	1.0000	\$66.02
Single-Source Brand	99.46	1.0000	1.0000	1.0000	1.1463	0.9875	0.9329	1.0000	1.0000	1.0000	105.03
Multi-Source Brand	28.64	1.0000	1.0000	1.0000	1.1463	0.9875	0.4284	1.0000	1.0000	1.0000	13.89
Specialty	92.37	1.0000	1.0000	1.0000	1.3906	0.9875	0.9786	1.0000	1.0000	1.0000	125.02
Hepatitis C	23.37	1.0000	1.0000	1.0000	0.5020	0.9875	0.9788	1.0000	1.0000	1.0000	11.34
Other	0.01	1.0000	1.0000	1.0000	0.9397	0.9875	0.9489	1.0000	1.0000	1.0000	0.01
	\$311.42										\$321.30
Community Mental Health Center											
Case Management	\$197.31	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$220.22
Long Term Support Service	55.27	1.0500	1.0653	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	61.82
Partial Hospital	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	62.21	1.0500	1.0624	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	69.40
Evidence Based Practices	1.47	1.0500	1.0624	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.64
Medication Management	0.75	1.0500	1.0628	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.84
Emergency Service 24/7	0.74	1.0500	1.0613	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.83
APRTP	7.84	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	8.75
Supported Employment Services	7.78	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	8.68
Other	28.02	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	31.27
	\$361.39										\$403.44
All Services	\$1,370.12										\$1,483.41

Eligibility Category: Severe Mental Illness - Dual

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$16.73	1.0000	1.0558	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	\$17.77
Surgical	84.96	1.0000	1.0687	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	91.34
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	1.60	1.0000	1.1108	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	1.78
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	14.56	1.0000	1.1620	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	17.02
Alcohol and Drug Abuse	1.08	1.0000	1.0696	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	1.16
Other	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
	\$118.94										\$129.08
Hospital Outpatient											
Emergency Room	\$35.63	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	\$41.85
Surgery	7.16	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	8.41
Radiology	7.76	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	9.12
Pathology	2.18	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	2.56
Pharmacy	2.85	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	3.35
Cardiovascular	0.52	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	0.61
PT/OT/ST	3.07	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	3.61
Psychiatric	0.35	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	0.41
Substance Abuse	0.20	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	0.23
Other	15.34	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	18.01
	\$75.06										\$88.16
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.43	1.0000	1.2081	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.52
Office Visits	13.75	1.0000	1.0609	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	14.59
Preventive Medicine	1.07	1.0000	1.1606	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.24
Maternity	0.36	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.38
Certified Midwife	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
PT/OT/ST	0.66	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.70
Psychiatric and Substance Abuse	57.75	1.0000	1.0788	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	62.31
Radiology and Pathology	4.51	1.0000	1.0597	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.77
Home Health and Private Duty Nursing	2.79	1.0000	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.97
Ambulance	6.14	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	6.52
Non-Emergency Transportation	50.85	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	54.05
Opioid Treatment Program	15.62	1.0000	1.0636	1.0000	1.0000	1.0000	1.0000	0.2369	1.0000	1.0000	3.94
Federally Qualified and Rural Health Clinics	2.81	1.0000	1.1339	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	3.19
Adult Medical Day Care	0.93	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.93
Personal Care	4.42	1.0000	1.0624	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.70
Durable Medical Equipment	11.35	1.0000	1.8865	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	21.44
Applied Behavioral Analysis	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	18.98	1.0000	1.0306	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	19.56
	\$192.42										\$201.82
Prescription Drugs											
Generic Scripts	\$0.82	1.0000	1.0000	1.0000	0.9885	1.0000	0.9884	1.0000	1.0000	1.0000	\$0.80
Single-Source Brand	0.15	1.0000	1.0000	1.0000	1.0498	1.0000	0.9894	1.0000	1.0000	1.0000	0.16
Multi-Source Brand	0.16	1.0000	1.0000	1.0000	1.0498	1.0000	0.9894	1.0000	1.0000	1.0000	0.17
Specialty	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
Hepatitis C	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	0.9885	1.0000	0.9884	1.0000	1.0000	1.0000	0.00
	\$1.14										\$1.13
Community Mental Health Center											
Case Management	\$196.55	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$219.36
Long Term Support Service	98.09	1.0500	1.0653	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	108.72
Partial Hospital	4.57	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	5.10
Psychotherapy	31.50	1.0500	1.0624	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	35.14
Evidence Based Practices	2.67	1.0500	1.0624	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.98
Medication Management	1.39	1.0500	1.0628	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.55
Emergency Service 24/7	1.63	1.0500	1.0613	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.81
APRTP	6.10	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	6.81
Supported Employment Services	23.27	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	25.97
Other	10.77	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	12.02
	\$376.55										\$420.48
All Services	\$764.11										\$840.67

Eligibility Category: Low Utilizer - Non-Dual

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$16.14	1.0000	1.0475	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	\$16.79
Surgical	25.26	1.0000	1.0426	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	26.16
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.00	1.0000	1.0000	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	14.10	1.0000	1.3767	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	19.28
Alcohol and Drug Abuse	0.00	1.0000	1.0000	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	1.0060	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
	\$55.49										\$62.24
Hospital Outpatient											
Emergency Room	\$49.44	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	\$57.35
Surgery	16.92	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	19.62
Radiology	20.94	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	24.29
Pathology	8.79	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	10.19
Pharmacy	19.08	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	22.13
Cardiovascular	1.86	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	2.16
PT/OT/ST	4.28	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	4.96
Psychiatric	0.06	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	0.07
Substance Abuse	0.00	1.0000	1.0000	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Other	17.12	1.0000	1.0558	1.0000	1.1124	0.9875	1.0000	1.0000	1.0000	1.0000	19.85
	\$138.48										\$160.62
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$5.51	1.0000	1.1160	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	\$6.07
Office Visits	23.14	1.0000	1.0609	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	24.24
Preventive Medicine	5.81	1.0000	1.1242	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	6.45
Maternity	1.81	1.0000	1.0630	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	1.90
Certified Midwife	0.00	1.0000	1.0000	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
PT/OT/ST	3.17	1.0000	1.0630	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	3.33
Psychiatric and Substance Abuse	23.55	1.0000	1.0911	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	25.38
Radiology and Pathology	12.63	1.0000	1.0565	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	13.16
Home Health and Private Duty Nursing	41.81	1.0000	1.0628	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	43.88
Ambulance	5.31	1.0000	1.0630	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	5.57
Non-Emergency Transportation	42.46	1.0000	1.0630	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	44.57
Opioid Treatment Program	16.42	1.0000	1.0636	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	17.25
Federally Qualified and Rural Health Clinics	18.95	1.0000	1.1354	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	21.25
Adult Medical Day Care	7.60	1.0000	1.0630	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	7.98
Personal Care	10.73	1.0000	1.0624	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	11.26
Durable Medical Equipment	13.62	1.0000	0.9725	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	13.08
Applied Behavioral Analysis	0.00	1.0000	1.0000	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	0.00
Other	64.73	1.0000	1.1149	1.0000	1.0000	0.9875	1.0000	1.0000	1.0000	1.0000	71.26
	\$297.26										\$316.64
Prescription Drugs											
Generic Scripts	\$101.50	1.0000	1.0000	1.0000	0.9397	0.9875	1.0527	1.0000	1.0000	1.0000	\$99.16
Single-Source Brand	230.47	1.0000	1.0000	1.0000	1.1463	0.9875	0.9329	1.0000	1.0000	1.0000	243.39
Multi-Source Brand	16.99	1.0000	1.0000	1.0000	1.1463	0.9875	0.4284	1.0000	1.0000	1.0000	8.24
Specialty	138.37	1.0000	1.0000	1.0000	1.3906	0.9875	0.9656	1.0000	1.0000	1.0000	187.27
Hepatitis C	14.80	1.0000	1.0000	1.0000	0.5020	0.9875	0.9788	1.0000	1.0000	1.0000	7.18
Other	0.00	1.0000	1.0000	1.0000	0.9397	0.9875	0.9489	1.0000	1.0000	1.0000	0.00
	\$502.13										\$545.24
Community Mental Health Center											
Case Management	\$217.63	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$242.90
Long Term Support Service	27.73	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	30.95
Partial Hospital	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	30.04	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	33.52
Evidence Based Practices	0.08	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.08
Medication Management	3.70	1.0500	1.0631	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.13
Emergency Service 24/7	3.22	1.0500	1.0631	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	3.60
APRTP	4.22	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.71
Supported Employment Services	5.17	1.0500	1.1081	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	6.02
Other	28.14	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	31.41
	\$319.93										\$357.32
All Services	\$1,313.30										\$1,442.06

Eligibility Category: Low Utilizer - Dual

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$19.10	1.0000	1.0475	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	\$20.12
Surgical	3.57	1.0000	1.0426	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	3.75
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	1.34	1.0000	1.3767	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	1.85
Alcohol and Drug Abuse	0.61	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.61
Other	0.00	1.0000	1.0000	1.0000	1.0060	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
	\$24.62										\$26.34
Hospital Outpatient											
Emergency Room	\$16.74	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	\$19.66
Surgery	7.75	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	9.10
Radiology	6.54	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	7.68
Pathology	1.28	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	1.50
Pharmacy	5.10	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	5.99
Cardiovascular	1.43	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	1.68
PT/OT/ST	2.05	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	2.41
Psychiatric	0.76	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	0.89
Substance Abuse	0.00	1.0000	1.0000	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	15.50	1.0000	1.0558	1.0000	1.1124	1.0000	1.0000	1.0000	1.0000	1.0000	18.21
	\$57.15										\$67.12
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.44	1.0000	1.1160	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.49
Office Visits	11.74	1.0000	1.0609	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	12.45
Preventive Medicine	1.73	1.0000	1.1242	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.94
Maternity	0.04	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.05
Certified Midwife	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
PT/OT/ST	0.82	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.87
Psychiatric and Substance Abuse	8.16	1.0000	1.0911	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	8.91
Radiology and Pathology	2.54	1.0000	1.0565	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.68
Home Health and Private Duty Nursing	7.34	1.0000	1.0628	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	7.80
Ambulance	2.48	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.64
Non-Emergency Transportation	29.46	1.0000	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	31.31
Opioid Treatment Program	4.72	1.0000	1.0636	1.0000	1.0000	1.0000	1.0000	0.2461	1.0000	1.0000	1.23
Federally Qualified and Rural Health Clinics	0.86	1.0000	1.1354	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.98
Adult Medical Day Care	0.46	1.0000	1.0624	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.49
Personal Care	1.42	1.0000	1.0624	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.51
Durable Medical Equipment	15.83	1.0000	1.7968	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	28.49
Applied Behavioral Analysis	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	24.50	1.0000	1.1149	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	27.31
	\$112.54										\$129.16
Prescription Drugs											
Generic Scripts	\$1.11	1.0000	1.0000	1.0000	0.9885	1.0000	0.9884	1.0000	1.0000	1.0000	\$1.09
Single-Source Brand	0.48	1.0000	1.0000	1.0000	1.0498	1.0000	0.9894	1.0000	1.0000	1.0000	0.50
Multi-Source Brand	0.00	1.0000	1.0000	1.0000	1.0498	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
Specialty	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
Hepatitis C	0.00	1.0000	1.0000	1.0000	1.0000	1.0000	0.9894	1.0000	1.0000	1.0000	0.00
Other	0.00	1.0000	1.0000	1.0000	0.9885	1.0000	0.9884	1.0000	1.0000	1.0000	0.00
	\$1.60										\$1.59
Community Mental Health Center											
Case Management	\$187.46	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$209.22
Long Term Support Service	22.26	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	24.85
Partial Hospital	1.01	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.07
Psychotherapy	14.11	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	15.74
Evidence Based Practices	0.11	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.12
Medication Management	3.81	1.0500	1.0631	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	4.25
Emergency Service 24/7	0.03	1.0500	1.0631	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.03
APRTP	2.92	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	3.26
Supported Employment Services	17.46	1.0500	1.1081	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	20.34
Other	11.21	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	12.51
	\$260.39										\$291.39
All Services	\$456.29										\$515.61

Eligibility Category: Serious Emotionally Disturbed Child

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$3.90	1.0000	1.0624	1.0000	1.0060	0.9938	1.0000	1.0000	1.0000	1.0000	\$4.15
Surgical	2.54	1.0000	1.0664	1.0000	1.0060	0.9938	1.0000	1.0000	1.0000	1.0000	2.71
Maternity Delivery	0.05	1.0000	0.9757	1.0000	1.0060	0.9938	1.0000	1.0000	1.0000	1.0000	0.04
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0060	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	46.85	1.0000	1.0452	1.0000	1.0060	0.9938	1.0000	1.0000	1.0000	1.0000	48.95
Alcohol and Drug Abuse	0.65	1.0000	1.1073	1.0000	1.0060	0.9938	1.0000	1.0000	1.0000	1.0000	0.72
Other	0.00	1.0000	1.0000	1.0000	1.0060	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
	\$53.99										\$56.57
Hospital Outpatient											
Emergency Room	\$21.30	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	\$24.86
Surgery	3.90	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	4.55
Radiology	4.30	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	5.02
Pathology	2.44	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	2.84
Pharmacy	0.71	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	0.82
Cardiovascular	0.28	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	0.33
PT/OT/ST	2.35	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	2.74
Psychiatric	2.09	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	2.43
Substance Abuse	0.00	1.0000	1.0000	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Other	7.28	1.0000	1.0558	1.0000	1.1124	0.9938	1.0000	1.0000	1.0000	1.0000	8.49
	\$44.63										\$52.09
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.73	1.0000	0.7671	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	\$0.55
Office Visits	13.70	1.0000	1.0605	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	14.43
Preventive Medicine	4.29	1.0000	1.0934	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	4.86
Maternity	0.06	1.0000	1.0630	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.07
Certified Midwife	0.00	1.0000	1.0629	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
PT/OT/ST	5.15	1.0000	1.0630	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	5.44
Psychiatric and Substance Abuse	4.60	1.0000	1.0566	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	4.83
Radiology and Pathology	2.53	1.0000	1.0577	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	2.66
Home Health and Private Duty Nursing	3.10	1.0000	1.0627	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	3.27
Ambulance	2.40	1.0000	1.0630	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	2.54
Non-Emergency Transportation	2.84	1.0000	1.0630	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	3.00
Opioid Treatment Program	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Federally Qualified and Rural Health Clinics	9.32	1.0000	1.1341	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	10.50
Adult Medical Day Care	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Personal Care	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	0.00
Durable Medical Equipment	5.54	1.0000	1.0117	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	5.57
Applied Behavioral Analysis	2.82	1.0000	1.0630	3.3169	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	9.87
Other	16.62	1.0000	1.0624	1.0000	1.0000	0.9938	1.0000	1.0000	1.0000	1.0000	17.55
	\$73.70										\$84.95
Prescription Drugs											
Generic Scripts	\$39.55	1.0000	1.0000	1.0000	0.7915	0.9938	0.9907	1.0000	1.0000	1.0000	\$30.82
Single-Source Brand	27.43	1.0000	1.0000	1.0000	0.9666	0.9938	0.9729	1.0000	1.0000	1.0000	26.43
Multi-Source Brand	2.45	1.0000	1.0000	1.0000	0.9966	0.9938	0.9367	1.0000	1.0000	1.0000	2.28
Specialty	20.27	1.0000	1.0000	1.0000	2.0057	0.9938	0.9886	1.0000	1.0000	1.0000	39.94
Hepatitis C	0.00	1.0000	1.0000	1.0000	1.0000	0.9938	0.9894	1.0000	1.0000	1.0000	0.00
Other	0.01	1.0000	1.0000	1.0000	0.7915	0.9938	0.9829	1.0000	1.0000	1.0000	0.01
	\$89.72										\$99.48
Community Mental Health Center											
Case Management	\$260.59	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$290.84
Long Term Support Service	110.59	1.0500	1.0628	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	123.42
Partial Hospital	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	121.68	1.0500	1.0158	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	129.79
Evidence Based Practices	0.01	1.0500	1.0627	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.01
Medication Management	0.13	1.0500	1.0631	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.14
Emergency Service 24/7	0.20	1.0500	1.0631	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.23
APRTP	0.22	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.25
Supported Employment Services	0.11	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.13
Other	16.45	1.0500	1.0628	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	16.35
	\$509.97										\$563.15
All Services	\$772.00										\$856.24

Eligibility Category: Granite Advantage - Medically Frail

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$59.31	1.0000	1.0551	1.0000	1.0060	0.9860	1.0000	1.0000	1.0000	1.0000	\$62.07
Surgical	45.97	1.0000	1.0639	1.0000	1.0060	0.9860	1.0000	1.0000	1.0000	1.0000	48.52
Maternity Delivery	0.00	1.0000	1.0611	1.0000	1.0060	0.9860	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.18	1.0000	1.0611	1.0000	1.0060	0.9860	1.0000	1.0000	1.0000	1.0000	0.19
Well Newborn	0.00	1.0000	1.0000	1.0000	1.0060	0.9860	1.0000	1.0000	1.0000	1.0000	0.00
Psychiatric	12.44	1.0000	1.1161	1.0000	1.0060	0.9860	1.0000	1.0000	1.0000	1.0000	13.77
Alcohol and Drug Abuse	18.50	1.0000	1.0720	1.0000	1.0060	0.9860	1.0000	1.0000	1.0000	1.0000	19.68
Other	0.00	1.0000	1.0000	1.0000	1.0060	0.9860	1.0000	1.0000	1.0000	1.0000	0.00
	\$136.40										\$144.22
Hospital Outpatient											
Emergency Room	\$58.91	1.0000	1.0558	1.0000	1.1124	0.9860	1.0000	1.0000	1.0000	1.0000	\$66.23
Surgery	16.93	1.0000	1.0558	1.0000	1.1124	0.9860	1.0000	1.0000	1.0000	1.0000	19.61
Radiology	25.98	1.0000	1.0558	1.0000	1.1124	0.9860	1.0000	1.0000	1.0000	1.0000	30.09
Pathology	7.78	1.0000	1.0558	1.0000	1.1124	0.9860	1.0000	1.0000	1.0000	1.0000	9.01
Pharmacy	49.91	1.0000	1.0558	1.0000	1.1124	0.9860	1.0000	1.0000	1.0000	1.0000	57.80
Cardiovascular	3.06	1.0000	1.0558	1.0000	1.1124	0.9860	1.0000	1.0000	1.0000	1.0000	3.54
PT/OT/ST	6.28	1.0000	1.0558	1.0000	1.1124	0.9860	1.0000	1.0000	1.0000	1.0000	7.27
Psychiatric	1.57	1.0000	1.0558	1.0000	1.1124	0.9860	1.0000	1.0000	1.0000	1.0000	1.82
Substance Abuse	1.02	1.0000	1.0558	1.0000	1.1124	0.9860	1.0000	1.0000	1.0000	1.0000	1.18
Other	25.72	1.0000	1.0558	1.0000	1.1124	0.9860	1.0000	1.0000	1.0000	1.0000	29.79
	\$197.17										\$228.35
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$2.04	1.0000	1.0519	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	\$2.12
Office Visits	28.61	1.0000	1.0612	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	29.93
Preventive Medicine	3.03	1.0000	1.1436	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	3.42
Maternity	0.32	1.0000	1.0627	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	0.34
Certified Midwife	0.00	1.0000	1.0630	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	0.01
PT/OT/ST	3.00	1.0000	1.0645	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	3.15
Psychiatric and Substance Abuse	71.04	1.0000	1.0720	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	75.09
Radiology and Pathology	25.60	1.0000	1.0683	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	26.97
Home Health and Private Duty Nursing	13.16	1.0000	1.0629	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	13.79
Ambulance	6.12	1.0000	1.0630	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	6.42
Non-Emergency Transportation	37.81	1.0000	1.0630	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	39.63
Opioid Treatment Program	21.63	1.0000	1.0636	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	22.68
Federally Qualified and Rural Health Clinics	21.84	1.0000	1.1348	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	24.44
Adult Medical Day Care	0.17	1.0000	1.0630	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	0.18
Personal Care	0.57	1.0000	1.0624	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	0.59
Durable Medical Equipment	16.89	1.0000	1.2965	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	21.34
Applied Behavioral Analysis	0.00	1.0000	1.0630	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	0.00
Other	57.84	1.0000	1.0375	1.0000	1.0000	0.9860	1.0000	1.0000	1.0000	1.0000	59.17
	\$309.49										\$329.27
Prescription Drugs											
Generic Scripts	\$42.58	1.0000	1.0000	1.0000	1.1607	0.9860	1.1553	1.0000	1.0000	1.0000	\$56.30
Single-Source Brand	86.57	1.0000	1.0000	1.0000	1.0008	0.9860	0.9434	1.0000	1.0000	1.0000	80.59
Multi-Source Brand	30.15	1.0000	1.0000	1.0000	1.0008	0.9860	0.3503	1.0000	1.0000	1.0000	10.42
Specialty	102.90	1.0000	1.0000	1.0000	1.4800	0.9860	0.9860	1.0000	1.0000	1.0000	147.29
Hepatitis C	40.82	1.0000	1.0000	1.0000	0.3632	0.9860	0.9760	1.0000	1.0000	1.0000	14.27
Other	0.02	1.0000	1.0000	1.0000	1.1607	0.9860	0.9332	1.0000	1.0000	1.0000	0.02
	\$303.04										\$308.30
Community Mental Health Center											
Case Management	\$1.09	1.0500	1.0625	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$1.22
Long Term Support Service	1.84	1.0500	1.0627	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.05
Partial Hospital	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	2.30	1.0500	1.0628	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	2.57
Evidence Based Practice	0.03	1.0500	1.0621	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.03
Medication Management	0.05	1.0500	1.0614	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.05
Emergency Service 24/7	0.01	1.0500	1.0516	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.01
APRTP	1.15	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.28
Supported Employment Services	0.01	1.0500	1.0677	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.02
Other	6.30	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	7.03
	\$12.78										\$14.26
All Services	\$958.88										\$1,024.99

Eligibility Category: Granite Advantage - Non-Medically Frail

Benefits	Per Capita Monthly Paid Cost	IBNR Adjustment	Reimbursement Adjustment	Utilization Trend Factors	Unit Cost Trend Factors	Managed Care Savings Adjustment	PDL Adjustment	Medicare OUD Adjustment	Stop Loss Adjustment	NEMT Adjustment	Projected Per Capita Monthly Paid Cost
Hospital Inpatient											
Medical	\$20.53	1.0000	1.0561	1.0000	1.0060	0.9923	1.0000	1.0000	1.0000	1.0000	\$21.64
Surgical	13.79	1.0000	1.0592	1.0000	1.0060	0.9923	1.0000	1.0000	1.0000	1.0000	14.58
Maternity Delivery	0.00	1.0000	1.0000	1.0000	1.0060	0.9923	1.0000	1.0000	1.0000	1.0000	0.00
Maternity Non-Delivery	0.20	1.0000	1.0458	1.0000	1.0060	0.9923	1.0000	1.0000	1.0000	1.0000	0.21
Well Newborn	0.01	1.0000	1.0633	1.0000	1.0060	0.9923	1.0000	1.0000	1.0000	1.0000	0.01
Psychiatric	3.91	1.0000	1.1524	1.0000	1.0060	0.9923	1.0000	1.0000	1.0000	1.0000	4.49
Alcohol and Drug Abuse	4.99	1.0000	1.0673	1.0000	1.0060	0.9923	1.0000	1.0000	1.0000	1.0000	5.31
Other	0.00	1.0000	1.0000	1.0000	1.0060	0.9923	1.0000	1.0000	1.0000	1.0000	0.00
	\$43.42										\$46.25
Hospital Outpatient											
Emergency Room	\$31.39	1.0000	1.0558	1.0000	1.1096	0.9923	1.0000	1.0000	1.0000	1.0000	\$36.50
Surgery	10.56	1.0000	1.0558	1.0000	1.1096	0.9923	1.0000	1.0000	1.0000	1.0000	12.28
Radiology	13.28	1.0000	1.0558	1.0000	1.1096	0.9923	1.0000	1.0000	1.0000	1.0000	15.44
Pathology	4.49	1.0000	1.0558	1.0000	1.1096	0.9923	1.0000	1.0000	1.0000	1.0000	5.22
Pharmacy	14.18	1.0000	1.0558	1.0000	1.1096	0.9923	1.0000	1.0000	1.0000	1.0000	16.49
Cardiovascular	1.57	1.0000	1.0558	1.0000	1.1096	0.9923	1.0000	1.0000	1.0000	1.0000	1.83
PT/OT/ST	2.73	1.0000	1.0558	1.0000	1.1096	0.9923	1.0000	1.0000	1.0000	1.0000	3.17
Psychiatric	0.46	1.0000	1.0558	1.0000	1.1096	0.9923	1.0000	1.0000	1.0000	1.0000	0.54
Substance Abuse	0.37	1.0000	1.0558	1.0000	1.1096	0.9923	1.0000	1.0000	1.0000	1.0000	0.43
Other	12.34	1.0000	1.0558	1.0000	1.1096	0.9923	1.0000	1.0000	1.0000	1.0000	14.35
	\$91.38										\$106.24
Professional and Other State Plan Services											
Ambulatory Surgery Center	\$0.88	1.0000	1.0465	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	\$0.92
Office Visits	14.44	1.0000	1.0608	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	15.20
Preventive Medicine	3.11	1.0000	1.1406	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	3.52
Maternity	0.41	1.0000	1.0626	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	0.43
Certified Midwife	0.02	1.0000	1.0606	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	0.02
PT/OT/ST	1.68	1.0000	1.0633	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	1.77
Psychiatric and Substance Abuse	24.20	1.0000	1.0741	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	25.60
Radiology and Pathology	9.33	1.0000	1.0866	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	10.06
Home Health and Private Duty Nursing	1.45	1.0000	1.0629	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	1.53
Ambulance	2.19	1.0000	1.0630	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	2.31
Non-Emergency Transportation	9.58	1.0000	1.0630	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	10.10
Opioid Treatment Program	6.10	1.0000	1.0636	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	6.44
Federally Qualified and Rural Health Clinics	10.52	1.0000	1.1335	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	11.83
Adult Medical Day Care	0.03	1.0000	1.0630	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	0.03
Personal Care	0.00	1.0000	1.0000	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	0.00
Durable Medical Equipment	3.54	1.0000	1.0663	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	3.54
Applied Behavioral Analysis	0.00	1.0000	1.0000	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	0.00
Other	24.58	1.0000	1.0595	1.0000	1.0000	0.9923	1.0000	1.0000	1.0000	1.0000	25.95
	\$112.06										\$119.34
Prescription Drugs											
Generic Scripts	\$18.66	1.0000	1.0000	1.0000	1.1971	0.9923	1.0611	1.0000	1.0000	1.0000	\$23.52
Single-Source Brand	33.55	1.0000	1.0000	1.0000	1.1593	0.9923	0.9469	1.0000	1.0000	1.0000	36.54
Multi-Source Brand	7.70	1.0000	1.0000	1.0000	1.1593	0.9923	0.4400	1.0000	1.0000	1.0000	3.90
Specialty	32.36	1.0000	1.0000	1.0000	1.3776	0.9923	0.9801	1.0000	1.0000	1.0000	43.36
Hepatitis C	8.60	1.0000	1.0000	1.0000	0.7009	0.9923	0.9753	1.0000	1.0000	1.0000	5.83
Other	0.00	1.0000	1.0000	1.0000	1.1971	0.9923	0.9492	1.0000	1.0000	1.0000	0.00
	\$100.87										\$113.16
Community Mental Health Center											
Case Management	\$0.26	1.0500	1.0608	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	\$0.29
Long Term Support Service	0.61	1.0500	1.0633	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.68
Partial Hospital	0.00	1.0500	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Psychotherapy	0.77	1.0500	1.0625	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.86
Evidence Based Practices	0.00	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Medication Management	0.01	1.0500	1.0593	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.01
Emergency Service 24/7	0.00	1.0500	1.0454	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
APRTP	0.27	1.0500	1.0630	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.30
Supported Employment Services	0.00	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	0.00
Other	1.30	1.0500	1.0629	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.46
	\$3.24										\$3.61
All Services	\$350.96										\$386.59

Appendix C
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 Blended Projected Medical Cost Based on CY 2018 and CY 2019 Experience

Eligibility Category	CY 2018 Encounter Member Months	CY 2018 Encounter Projected Per Capita Monthly Paid Cost	CY 2019 Encounter Member Months	CY 2019 Encounter Projected Per Capita Monthly Paid Cost	Blended Projected Per Capita Monthly Paid Cost	Opioid Adjustment	FFS Data Adjustment	Acuity Adjustment	Final Blended Projected Per Capita Monthly Paid Cost
Low Income Children - Age 0-11 Months	47,865	\$243.94	47,995	\$229.63	\$236.78	0.9765	0.9921	1.0000	\$229.38
Low Income Children - Age 1-18 Years	729,792	153.66	727,538	155.58	154.62	0.9990	0.9973	0.9959	153.41
Low Income Adults	124,392	443.40	133,084	455.33	449.56	0.9626	0.9949	0.9663	416.00
CHIP	154,555	150.50	165,409	159.25	155.02	1.0028	0.9985	0.9959	154.59
Foster Care / Adoption	20,976	305.43	23,159	308.01	306.78	0.9994	0.9980	0.9959	304.73
Severely Disabled Children	11,180	1,397.47	10,785	1,301.46	1,350.33	0.9999	0.9981	1.0000	1,347.59
Elderly and Disabled Adults - Age 19-64	76,828	1,165.78	73,573	1,164.18	1,165.00	1.0002	1.0000	0.9573	1,115.40
Elderly and Disabled Adults - Age 65+	12,505	918.05	12,753	949.22	933.79	0.9990	0.9971	0.9573	890.38
Dual Eligibles	166,049	286.22	172,429	271.36	278.65	0.9910	0.9947	1.0000	274.66
Newborn Kick Payment	2,296	3,475.28	2,767	3,469.95	3,472.37	1.0000	1.0101	1.0000	3,507.45
Neonatal Abstinence Syndrome Kick Payment	144	7,894.29	160	7,075.46	7,463.33	1.0000	1.0015	1.0000	7,474.75
Maternity Kick Payment	2,897	2,736.67	3,260	2,689.78	2,711.85	1.0000	0.9961	1.0000	2,701.32
Severe/Persistent Mental Illness - Non-Dual	23,493	\$2,064.64	28,956	\$2,107.12	\$2,088.09	1.0069	1.0000	1.0000	\$2,102.37
Severe/Persistent Mental Illness - Dual	22,217	1,431.66	23,082	1,336.75	1,383.30	0.9985	0.9998	1.0000	1,380.99
Severe Mental Illness - Non-Dual	17,089	1,486.94	29,203	1,483.41	1,484.72	0.9937	0.9994	1.0000	1,474.48
Severe Mental Illness - Dual	3,766	851.43	3,417	840.67	846.31	0.9984	1.0014	1.0000	846.14
Low Utilizer - Non-Dual	1,796	1,300.70	2,553	1,442.06	1,383.68	0.9966	1.0000	1.0000	1,378.94
Low Utilizer - Dual	2,080	600.26	2,242	515.61	556.34	0.9975	1.0000	1.0000	554.96
Serious Emotionally Disturbed Child	73,352	868.06	76,603	856.24	862.02	0.9999	0.9999	1.0000	861.79
Standard Subtotal1	1,487,934	\$380.44	1,532,782	\$394.62	\$387.63	0.9952	0.9982	0.9885	\$380.65
Granite Advantage - Medically Frail	71,345	\$953.81	84,734	\$1,024.99	\$992.45	0.9926	0.9982	0.9947	\$978.08
Granite Advantage - Non-Medically Frail	0	0.00	383,770	388.59	\$388.59	0.9795	1.0000	0.9663	367.79
GAHCP Subtotal2	71,345	\$953.81	468,504	\$503.69	\$563.18	0.9862	0.9991	0.9808	\$544.24
Total1	1,559,279	\$406.67	2,001,286	\$420.15	\$414.25	0.9933	0.9984	0.9869	\$405.45

¹ Member Months totals exclude kick payments.

² GAHCP Subtotal excludes behavioral health rate cells.

Eligibility Category	Projected Per Capita Cost	PHIP Add-On for Health Services	Waze Mountain Health Services Adjustment	Behavioral Health Center (BHC) Adjustment	AT/ESH Adjustment	Primary Care Remuneration Payment	New Patients for Age 2 to 64	Non-Resident	Homebased	State Owned Hospital Capacity	State Owned Hospital Services	Transition of Care/ Home Based	Bones Chiropractic Hospital	Community Health Services	Home Visiting	Geriatric Training	MCR/ES Services On-Call	Additional Pricing Changes	Birthrate Changes	Health Changes	Remote Patient Monitoring	RIS Residual Code 0010	Primary Savings	Final Projected Benefit Cost
Low-Income Children - Age 0-11 Months	\$276.38	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$14.56	\$0.00	\$56.60	\$0.00	\$0.00	\$0.00	\$0.00	\$0.02	\$0.51	\$0.76	\$0.01	\$0.00	(\$1.00)	\$300.20
Low-Income Children - Age 1-18 Years	415.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	415.00
CHIP - Age 0-18 Months	154.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	154.59
CHIP - Age 1-18 Years	1,367.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,367.69
Severely Disabled Children	1,116.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,116.40
Elderly and Disabled Adults - Age 18-64	279.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	279.66
Medicaid Eligible - Age 65+	2,474.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,474.76
Medicaid Advantage - Medicare Kick Payment	2,701.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,701.32
Medicaid Advantage - Medicare Kick Payment	2,701.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,701.32
Severe/Persistent Mental Illness - Non-Dual	\$2,102.37	\$66.38	\$0.00	\$0.00	\$0.00	\$4,617.00	\$93.22	\$0.59	\$1.77	\$24.56	\$6.66	\$0.15	\$0.15	\$6.66	\$0.00	\$0.00	\$15.14	\$0.94	\$3.38	\$0.02	\$0.02	\$0.00	\$0.00	\$2,168.45
Severe/Persistent Mental Illness - Dual	1,820.66	160.79	0.07	0.00	0.00	0.00	14.26	1.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,981.45
Severe Mental Illness - Dual	846.14	64.51	0.08	0.00	0.00	0.00	87.66	0.41	0.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	910.75
Severe Mental Illness - Dual	1,558.85	33.72	0.00	0.00	0.00	0.00	18.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,592.57
Low Utilizer - Dual	558.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	558.85
Severe Emotional/Disrupted Child	897.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	897.79
Grants Advantage - Medically Fragile	897.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	897.08
Grants Advantage - Non-Medically Fragile	367.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	367.79

Appendix E
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 Final Capitation Rate Development

Eligibility Category	Projected Per Capita Monthly Paid Cost	TPL Adjustment	Adjusted Per Capita Monthly Paid Cost	Administrative Cost Load	Administrative Expense Allowance	Risk/Profit Margin	Risk/Profit Margin Allowance	CMHC Directed Payment	Hospital Directed Payment	Premium Tax Load	Premium Tax Allowance	Final Capitation Rate	Withhold Adjustment	Final Capitation Rate Less Withhold
Low Income Children - Age 0-11 Months	\$300.20	0.9925	\$297.95	9.1%	\$30.27	1.5%	\$5.00	\$0.00	\$11.82	2.0%	\$7.04	\$352.08	100%	\$352.08
Low Income Children - Age 1-18 Years	163.55	0.9925	162.32	9.1%	16.49	1.5%	2.72	0.00	5.14	2.0%	3.81	190.48	100%	190.48
Low Income Adults	416.35	0.9925	413.22	9.1%	41.98	1.5%	6.93	0.00	14.43	2.0%	9.73	486.29	100%	486.29
CHIP	162.31	0.9925	161.09	9.1%	16.36	1.5%	2.70	0.00	3.30	2.0%	3.74	187.20	100%	187.20
Foster Care / Adoption	320.18	0.9925	317.78	9.1%	32.28	1.5%	5.33	0.00	7.70	2.0%	7.41	370.51	100%	370.51
Severely Disabled Children	1,596.66	0.9925	1,584.68	7.0%	120.99	1.5%	25.97	0.00	13.28	2.0%	35.61	1,780.54	100%	1,780.54
Elderly and Disabled Adults - Age 19-64	1,118.47	0.9925	1,110.08	7.0%	84.76	1.5%	18.20	0.00	52.72	2.0%	25.83	1,291.59	100%	1,291.59
Elderly and Disabled Adults - Age 65+	891.07	0.9925	884.39	7.0%	67.53	1.5%	14.50	0.00	43.37	2.0%	20.61	1,030.39	100%	1,030.39
Dual Eligibles	281.81	0.9925	279.69	5.6%	16.83	1.5%	4.52	0.00	14.44	2.0%	6.44	321.91	100%	321.91
Newborn Kick Payment	4,991.02	0.9925	4,953.59	3.5%	182.16	1.5%	78.21	0.00	0.00	2.0%	106.41	5,320.36	100%	5,320.36
Neonatal Abstinence Syndrome Kick Payment	10,468.87	0.9925	10,390.36	3.5%	382.08	1.5%	164.05	0.00	0.00	2.0%	223.19	11,159.68	100%	11,159.68
Maternity Kick Payment	3,187.30	0.9925	3,143.94	3.5%	115.60	1.5%	49.63	0.00	0.00	2.0%	67.53	3,376.29	100%	3,376.29
Severe/Persistent Mental Illness - Non-Dual	\$2,194.15	0.9925	\$2,177.70	7.0%	\$166.27	1.5%	\$35.89	\$22.97	\$24.63	2.0%	\$49.54	\$2,476.79	100%	\$2,476.79
Severe/Persistent Mental Illness - Dual	1,653.75	0.9925	1,641.35	5.6%	98.75	1.5%	26.50	53.23	21.49	2.0%	37.58	1,878.89	100%	1,878.89
Severe Mental Illness - Non-Dual	1,492.00	0.9925	1,480.81	7.0%	113.06	1.5%	24.27	6.57	16.70	2.0%	33.50	1,674.92	100%	1,674.92
Severe Mental Illness - Dual	988.08	0.9925	980.82	5.6%	57.81	1.5%	15.51	21.36	27.82	2.0%	22.11	1,105.42	100%	1,105.42
Low Utilizer - Non-Dual	1,386.99	0.9925	1,376.59	7.0%	105.11	1.5%	22.56	5.76	8.84	2.0%	31.00	1,549.86	100%	1,549.86
Low Utilizer - Dual	599.45	0.9925	594.95	5.6%	35.79	1.5%	9.61	11.16	8.86	2.0%	13.48	673.86	100%	673.86
Serious Emotionally Disturbed Child	987.53	0.9925	980.13	7.0%	74.84	1.5%	16.07	32.34	15.81	2.0%	22.84	1,142.02	100%	1,142.02
Granite Advantage - Medically Frail	\$971.33	0.9925	\$964.04	7.0%	\$73.61	1.5%	\$15.80	\$0.00	\$37.78	2.0%	\$22.27	\$1,113.50	100%	\$1,113.50
Granite Advantage - Non-Medically Frail	365.62	0.9925	363.08	9.1%	36.68	1.5%	6.09	0.00	9.12	2.0%	8.47	423.65	100%	423.65

Exhibit A1

New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development
 Comparison of Composite Rates with PHE Ending April 2023 to Amendment #8 SFY 2023 Capitation Rates
 Excluding Directed Payments

Eligibility Category	SFY 2023 Projected Member Months	Amendment #8 - SFY 2023 Rates	Amendment #9 - SFY 2023 Rates	Proposed Rate Change
Low Income Children - Age 0-11 Months	42,402	\$338.99	\$340.01	0.3%
Low Income Children - Age 1-18 Years	801,829	183.65	185.24	0.9%
Low Income Adults	219,693	477.91	471.57	-1.3%
CHIP	263,326	181.09	183.83	1.5%
Foster Care / Adoption	33,296	364.50	362.65	-0.5%
Severely Disabled Children	10,161	1,794.09	1,766.99	-1.5%
Elderly and Disabled Adults - Age 19-64	72,021	1,267.91	1,237.79	-2.4%
Elderly and Disabled Adults - Age 65+	16,861	1,009.28	986.14	-2.3%
Dual Eligibles	191,012	306.95	307.18	0.1%
Newborn Kick Payment	2,736	4,721.98	5,320.36	12.7%
Neonatal Abstinence Syndrome Kick Payment	21	9,707.32	11,159.68	15.0%
Maternity Kick Payment	2,423	2,875.73	3,376.29	17.4%
Severe/Persistent Mental Illness - Non-Dual	34,556	\$2,493.51	\$2,428.23	-2.6%
Severe/Persistent Mental Illness - Dual	24,758	1,858.45	1,802.65	-3.0%
Severe Mental Illness - Non-Dual	27,115	1,670.86	1,651.17	-1.2%
Severe Mental Illness - Dual	3,988	1,100.97	1,055.24	-4.2%
Low Utilizer - Non-Dual	5,188	1,547.51	1,534.96	-0.8%
Low Utilizer - Dual	3,463	663.34	653.43	-1.5%
Serious Emotionally Disturbed Child	79,044	1,102.75	1,092.88	-0.9%
Granite Advantage - Medically Frail	125,223	\$1,097.65	\$1,074.95	-2.1%
Granite Advantage - Non-Medically Frail	949,176	419.51	414.34	-1.2%
Kick Payment				
PG 01 & 07		\$3,681.70	\$3,681.70	0.0%
PG 02		2,836.28	2,836.28	0.0%
PG 09		8,000.60	8,000.60	0.0%
PG 06		17,606.39	17,606.39	0.0%
Base Population Rate Cells	1,387,276	\$349.04	\$348.81	-0.1%
CHIP Population Rate Cell ¹	271,945	211.15	213.50	1.1%
Standard Behavioral Health Population Rate Cells ²	126,434	1,459.07	1,431.84	-1.9%
GAHCP Rate Cells	1,074,399	505.08	498.04	-1.4%
GAHCP Behavioral Health Population Rate Cells	43,059	2,054.51	2,015.13	-1.9%
Total³	2,903,112	\$467.51	\$463.25	-0.9%

¹ CHIP population rate cell composite includes the CHIP and SED rate cells.

² Standard Behavioral Health Population Rate Cells composite excludes CHIP.

³ Member Months totals exclude kicks.

Exhibit A2

New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development
 Comparison of Composite Rates with PHE Ending April 2023 to Amendment #8 SFY 2023 Capitation Rates
 Including Directed Payments

Eligibility Category	SFY 2023 Projected Member Months	Amendment #8 - SFY 2023 Rates	Amendment #9 - SFY 2023 Rates	Proposed Rate Change
Low Income Children - Age 0-11 Months	42,402	\$350.35	\$352.08	0.5%
Low Income Children - Age 1-18 Years	801,829	189.00	190.48	0.8%
Low Income Adults	219,693	494.04	486.29	-1.6%
CHIP	263,326	185.02	187.20	1.2%
Foster Care / Adoption	33,296	374.07	370.51	-1.0%
Severely Disabled Children	10,161	1,808.17	1,780.54	-1.5%
Elderly and Disabled Adults - Age 19-64	72,021	1,324.83	1,291.59	-2.5%
Elderly and Disabled Adults - Age 65+	16,861	1,059.06	1,030.39	-2.7%
Dual Eligibles	191,012	322.91	321.91	-0.3%
Newborn Kick Payment	2,736	4,721.98	5,320.36	12.7%
Neonatal Abstinence Syndrome Kick Payment	21	9,707.32	11,159.68	15.0%
Maternity Kick Payment	2,423	2,875.73	3,376.29	17.4%
Severe/Persistent Mental Illness - Non-Dual	34,556	\$2,553.10	\$2,476.79	-3.0%
Severe/Persistent Mental Illness - Dual	24,758	1,939.34	1,878.89	-3.1%
Severe Mental Illness - Non-Dual	27,115	1,698.74	1,674.92	-1.4%
Severe Mental Illness - Dual	3,988	1,158.41	1,105.42	-4.6%
Low Utilizer - Non-Dual	5,188	1,567.60	1,549.86	-1.1%
Low Utilizer - Dual	3,463	686.42	673.86	-1.8%
Serious Emotionally Disturbed Child	79,044	1,154.84	1,142.02	-1.1%
Granite Advantage - Medically Frail	125,223	\$1,150.99	\$1,113.50	-3.3%
Granite Advantage - Non-Medically Frail	949,176	432.57	423.65	-2.1%
Kick Payment				
PG 01 & 07		\$3,681.70	\$3,681.70	0.0%
PG 02		2,836.28	2,836.28	0.0%
PG 09		8,000.60	8,000.60	0.0%
PG 06		17,606.39	17,606.39	0.0%
Base Population Rate Cells	1,387,276	\$361.13	\$360.19	-0.3%
CHIP Population Rate Cell ¹	271,945	216.61	218.32	0.8%
Standard Behavioral Health Population Rate Cells ²	126,434	1,514.99	1,483.27	-2.1%
GAHCP Rate Cells	1,074,399	522.83	510.76	-2.3%
GAHCP Behavioral Health Population Rate Cells	43,059	2,097.00	2,050.34	-2.2%
Total³	2,903,112	\$483.43	\$476.60	-1.4%

¹ CHIP population rate cell composite includes the CHIP and SED rate cells.

² Standard Behavioral Health Population Rate Cells composite excludes CHIP.

³ Member Months totals exclude kicks.

Exhibit B

New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development - PHE Ending April 2023
 Estimated Fiscal Impact - Assuming 50% FMAP for Standard, 65% FMAP for CHIP, and 90% FMAP for GAHCP

Eligibility Category	Estimated Member Months	Average Total Capitation Rate	Federal Capitation Rate Liability	Federal Capitation Total Cost Liability	State Capitation Rate Liability	State Capitation Total Cost Liability
Low Income Children - Age 0-11 Months	42,402	\$352.08	\$176.04	\$7,464,474	\$176.04	\$7,464,474
Low Income Children - Age 1-18 Years	801,829	190.48	95.24	76,366,226	95.24	76,366,226
Low Income Adults	219,693	486.29	243.15	53,417,366	243.15	53,417,366
CHIP	263,326	187.20	121.68	32,041,518	65.52	17,253,125
Foster Care / Adoption	33,296	370.51	185.26	6,168,271	185.26	6,168,271
Severely Disabled Children	10,161	1,780.54	890.27	9,046,324	890.27	9,046,324
Elderly and Disabled Adults - Age 19-64	72,021	1,291.59	645.80	46,510,800	645.80	46,510,800
Elderly and Disabled Adults - Age 65+	16,861	1,030.39	515.20	8,686,831	515.20	8,686,831
Dual Eligibles	191,012	321.91	160.96	30,744,283	160.96	30,744,283
Newborn Kick Payment	2,736	5,320.36	2,660.18	7,278,252	2,660.18	7,278,252
Neonatal Abstinence Syndrome Kick Payment	21	11,159.68	5,579.84	117,177	5,579.84	117,177
Maternity Kick Payment	2,423	3,376.29	1,981.77	4,801,338	1,394.52	3,378,569
Severe/Persistent Mental Illness - Non-Dual	34,556	\$2,476.79	\$1,796.50	\$62,079,030	\$680.29	\$23,507,741
Severe/Persistent Mental Illness - Dual	24,758	1,878.89	939.45	23,258,704	939.45	23,258,704
Severe Mental Illness - Non-Dual	27,115	1,674.92	1,312.04	35,576,007	362.88	9,839,356
Severe Mental Illness - Dual	3,988	1,105.42	552.71	2,204,172	552.71	2,204,172
Low Utilizer - Non-Dual	5,188	1,549.86	1,127.36	5,848,859	422.50	2,191,974
Low Utilizer - Dual	3,463	673.86	336.93	1,166,647	336.93	1,166,647
Serious Emotionally Disturbed Child	79,044	1,142.02	579.31	45,790,993	562.71	44,479,156
Granite Advantage - Medically Frail	125,223	\$1,113.50	\$1,002.15	\$125,491,885	\$111.35	\$13,943,543
Granite Advantage - Non-Medically Frail	949,176	423.65	381.29	361,906,516	42.37	40,211,835
Base Population Rate Cells	1,387,276	\$360.19	\$180.09	\$249,839,526	\$180.09	\$249,839,526
CHIP Population Rate Cells	271,945	218.32	141.91	38,590,921	76.41	20,779,727
Behavioral Health Population Rate Cells	126,434	1,483.27	741.64	93,767,853	741.64	93,767,853
GAHCP Rate Cells	1,074,399	510.76	459.68	493,882,010	51.08	54,875,779
GAHCP Behavioral Health Rate Cells	43,059	2,050.34	1,845.30	79,456,859	205.03	8,828,540
Total	2,903,112	\$476.60	\$329.14	\$955,537,170	\$147.46	\$428,091,425

*CHIP population rate cell composite includes the CHIP and SED rate cells.

**Standard Behavioral Health Population Rate Cells composite excludes CHIP.

***Member Months totals exclude kicks.

Exhibit C1
 New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development
 Blended Projected BCH Medical Cost Based on Combined CY 2018 and CY 2019 Experience - PHE Ending April 2023

Eligibility Category	CY 2018 Encounter Member Months	CY 2018 Encounter Projected Per Capita Monthly Paid Cost	CY 2019 Encounter Member Months	CY 2019 Encounter Projected Per Capita Monthly Paid Cost	Acuity Adjustment	Blended Projected Per Capita Monthly Paid Cost	Additional PMPM	Final Blended Projected Per Capita Monthly Paid Cost
Low Income Children - Age 0-11 Months	47,865	\$28.33	47,995	\$48.78	1.0000	\$38.57	\$18.34	\$56.90
Low Income Children - Age 1-18 Years	729,792	5.36	727,538	8.04	0.9959	6.67	3.17	9.84
Low Income Adults	124,392	0.08	133,084	0.58	0.9663	0.33	0.15	0.48
CHIP	154,555	4.71	165,409	5.93	0.9959	5.32	2.53	7.85
Foster Care / Adoption	20,976	5.39	23,159	21.53	0.9959	13.80	6.56	20.37
Severely Disabled Children	11,180	198.88	10,785	153.88	1.0000	176.79	84.05	260.83
Elderly and Disabled Adults - Age 19-64	76,828	2.58	73,573	3.57	0.9573	2.93	1.39	4.33
Elderly and Disabled Adults - Age 65+	12,505	0.00	12,753	0.00	0.9573	0.00	0.00	0.00
Dual Eligibles	166,049	0.07	172,429	0.20	1.0000	0.14	0.07	0.20
Newborn Kick Payment	2,296	623.40	2,767	561.89	1.0000	589.78	280.39	870.17
Neonatal Abstinence Syndrome Kick Payment	144	2,165.64	160	111.72	1.0000	1,084.63	515.65	1,600.28
Maternity Kick Payment	2,897	0.00	3,260	0.00	1.0000	0.00	0.00	0.00
Severe/Persistent Mental Illness - Non-Dual	23,493	\$0.06	28,956	\$0.13	1.0000	\$0.10	\$0.05	\$0.15
Severe/Persistent Mental Illness - Dual	22,217	0.00	23,082	0.59	1.0000	0.30	0.14	0.44
Severe Mental Illness - Non-Dual	17,089	0.20	29,203	0.33	1.0000	0.28	0.13	0.41
Severe Mental Illness - Dual	3,766	0.00	3,417	0.00	1.0000	0.00	0.00	0.00
Low Utilizer - Non-Dual	1,796	0.00	2,553	0.00	1.0000	0.00	0.00	0.00
Low Utilizer - Dual	2,080	0.00	2,242	0.00	1.0000	0.00	0.00	0.00
Serious Emotionally Disturbed Child	73,352	9.51	76,603	22.41	1.0000	16.10	7.65	23.75
Standard Subtotal¹	1,487,934	\$7.39	1,532,782	\$9.80	0.9885	\$8.59	\$4.08	\$12.67
Granite Advantage - Medically Frail	71,345	0.38	84,734	0.12	0.9947	0.24	\$0.11	0.36
Granite Advantage - Non-Medically Frail	0	0.00	383,770	0.19	0.9663	0.19	0.09	0.27
GAHCP Subtotal²	71,345	\$0.38	468,504	\$0.18	0.9808	\$0.20	\$0.10	\$0.30
Total¹	1,559,279	\$7.07	2,001,286	\$7.55	0.9869	\$7.32	\$3.48	\$10.79

¹ Member Months totals exclude kicks.

² GAHCP Subtotal excludes behavioral health rate cells.

Exhibit C2

**New Hampshire Department of Health and Human Services
SFY 2023 Medicaid Care Management Capitation Rate Development
Total Projected BCH Funding - PHE Ending April 2023**

Eligibility Category	Projected BCH Funding Using Base Data	Total Additional BCH Funding	Total BCH Funding
Low Income Children - Age 0-11 Months	\$1,635,350	\$777,472	\$2,412,822
Low Income Children - Age 1-18 Years	5,345,215	2,541,203	7,886,417
Low Income Adults	71,507	33,996	105,502
CHIP	1,401,154	666,131	2,067,285
Foster Care / Adoption	459,610	218,506	678,116
Severely Disabled Children	1,796,382	854,030	2,650,412
Elderly and Disabled Adults - Age 19-64	211,297	100,454	311,751
Elderly and Disabled Adults - Age 65+	0	0	0
Dual Eligibles	26,437	12,569	39,006
Newborn Kick Payment	1,613,644	767,153	2,380,797
Neonatal Abstinence Syndrome Kick Payment	22,777	10,829	33,606
Maternity Kick Payment	0	0	0
Severe/Persistent Mental Illness - Non-Dual	3,430	1,631	5,061
Severe/Persistent Mental Illness - Dual	7,425	3,530	10,955
Severe Mental Illness - Non-Dual	7,586	3,607	11,193
Severe Mental Illness - Dual	0	0	0
Low Utilizer - Non-Dual	0	0	0
Low Utilizer - Dual	0	0	0
Serious Emotionally Disturbed Child	1,272,283	604,864	1,877,147
Standard Subtotal¹	\$13,874,097	\$6,595,973	\$20,470,070
Granite Advantage - Medically Frail	30,237	14,375	44,613
Granite Advantage - Non-Medically Frail	175,759	83,559	259,317
GAHCP Subtotal²	\$205,996	\$97,934	\$303,930
Total¹	\$14,080,093	\$6,693,907	\$20,774,000

¹ Member Months totals exclude kicks.

² GAHCP Subtotal excludes behavioral health rate cells.

Exhibit D
New Hampshire Department of Health and Human Services
SFY 2023 Medicaid Care Management Capitation Rates
Acuity Adjustment Factors

Eligibility Group	January 2021 to June 2021 Actual To Expected Acuity		
	Included Acuity Adjustment	Actual to Expected	Adjustment with Full Difference
Children	-4.4%	1.5%	-2.8%
Adults	-1.1%	-7.2%	-8.2%
Disabled Adults	0.5%	-13.0%	-12.4%
BBH Adults	-1.7%	-4.9%	-6.5%
Disabled Children	-3.6%	12.4%	8.8%

Eligibility Group	SFY 2022 Actual To Expected Acuity		
	Included Acuity Adjustment	Actual to Expected	Adjustment with Full Difference
Children	-2.1%	3.3%	1.2%
Adults	-3.3%	-2.0%	-5.3%
Disabled Adults	-1.8%	-2.9%	-4.6%
BBH Adults	-2.1%	9.6%	7.5%
Disabled Children	-0.9%	-7.7%	-8.6%

Eligibility Group	Acuity Adjustment		Average Acuity Adjustment Dampened by 50%
	January 2021 to June 2021	SFY 2022	
Children	-2.8%	1.2%	-0.4%
Adults	-8.2%	-5.3%	-3.4%
Disabled Adults	-12.4%	-4.6%	-4.3%
BBH Adults	-6.5%	7.5%	0.0%
Disabled Children	8.8%	-8.6%	0.0%

Exhibit E
New Hampshire Department of Health and Human Services
Medicaid Care Management Program - PHE Ending in April 2023
CMHC Funding

Rate Cell	SFY 2023 Projected Member Months	CMHC Service Costs					Behavioral Health Crisis Treatment Center (BHCTC)					Total	
		CY 2018	CY 2019	Blended	Expanded Mental Health Services	MCRT / ES Services Carve Out	CMHC Directed Payment	Community Residential Services					
Low Income Children - Age 0-11 Months	42,402	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Low Income Children - Age 1-18 Years	801,829	2.67	2.73	2.70	0.00	0.00	0.00	0.00	-0.58	0.00	0.00	0.00	2.12
Low Income Adults	219,693	4.84	5.20	5.03	0.00	-0.03	0.00	0.00	-1.02	0.00	0.00	0.01	3.98
CHP	263,326	1.81	1.69	1.75	0.00	0.00	0.00	0.00	-0.45	0.00	0.00	0.00	1.30
Foster Care / Adoption	33,296	7.79	7.45	7.61	0.00	0.00	0.00	0.00	-1.55	0.00	0.00	0.00	6.06
Severely Disabled Children	10,161	4.71	6.72	5.70	0.00	0.00	0.00	0.00	-0.59	0.00	0.00	0.00	5.10
Elderly and Disabled Adults - Age 19-64	72,021	7.67	8.88	8.26	0.00	-0.06	0.00	0.00	-1.61	0.00	0.20	0.00	6.80
Elderly and Disabled Adults - Age 65+	16,861	1.47	0.91	1.18	0.00	0.00	0.00	0.00	-0.15	0.00	0.00	0.00	1.03
Dual Eligibles	191,012	3.71	4.11	3.91	0.00	-0.01	0.00	0.00	-0.82	0.00	0.04	0.00	3.12
Newborn Kick Payment	2,736	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Neonatal Abstinence Syndrome Kick Payment	21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Maternity Kick Payment	2,423	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Severe/Persistent Mental Illness - Non-Dual	15,089	\$868.56	\$837.33	\$852.56	\$69.38	-\$0.06	\$69.38	\$69.38	-\$10.14	\$22.97	\$6.66	\$6.66	\$941.37
Severe/Persistent Mental Illness - Dual	24,758	1,090.33	999.04	1,043.81	160.79	-0.04	160.79	160.79	-13.95	53.23	27.43	27.43	1,271.29
Severe Mental Illness - Non-Dual	7,908	455.47	403.44	429.70	19.85	0.00	19.85	19.85	-4.33	6.57	0.13	0.13	451.93
Severe Mental Illness - Dual	3,988	470.36	420.48	446.63	64.51	0.00	64.51	64.51	-13.88	21.36	1.32	1.32	519.94
Low Utilizer - Non-Dual	2,239	358.04	357.32	357.65	17.41	0.00	17.41	17.41	-2.56	5.76	0.70	0.70	378.97
Low Utilizer - Dual	3,463	351.38	291.39	320.26	33.72	0.00	33.72	33.72	-3.37	11.16	0.01	0.01	361.79
Serious Emotionally Disturbed Child	77,608	572.78	563.15	567.87	97.69	0.00	97.69	97.69	-6.90	32.34	0.01	0.01	691.02
Standard Subtotal	1,785,655	\$54.50	\$52.24	\$53.35	\$7.38	-\$0.01	\$7.38	\$7.38	-\$1.28	\$2.44	\$0.45	\$0.45	\$62.35
Granite Advantage - Severe/Persistent Mental Illness	19,466	\$868.56	\$837.33	\$852.56	\$69.38	-\$0.06	\$69.38	\$69.38	-\$10.14	\$22.97	\$6.66	\$6.66	\$941.37
Granite Advantage - Severe Mental Illness	19,207	455.47	403.44	429.70	19.85	0.00	19.85	19.85	-4.33	6.57	0.13	0.13	451.93
Granite Advantage - Low Utilizer	2,949	358.04	357.32	357.65	17.41	0.00	17.41	17.41	-2.56	5.76	0.70	0.70	378.97
Granite Advantage - Serious Emotionally Disturbed Child	1,436	572.78	563.15	567.87	97.69	0.00	97.69	97.69	-6.90	32.34	0.01	0.01	691.02
Granite Advantage - Medically Frail	125,223	13.06	14.26	13.71	0.00	-0.04	0.00	0.00	-2.97	0.00	0.06	0.06	10.76
Granite Advantage - Non-Medically Frail ¹	949,176	0.00	3.61	3.61	0.00	-0.07	0.00	0.00	-1.01	0.00	0.01	0.01	2.53
GAHCP Subtotal	1,117,457	\$26.10	\$27.85	\$28.51	\$1.72	-\$0.07	\$1.72	\$1.72	-\$1.46	\$0.57	\$0.13	\$0.13	\$29.41
Total	2,903,112	\$43.57	\$42.85	\$43.79	\$5.20	-\$0.03	\$5.20	\$5.20	-\$1.35	\$1.72	\$0.33	\$0.33	\$49.67

¹ CY 2018 CMHC Service Costs for the Granite Advantage - Non-Medically Frail population is set equal to CY 2019 as CY 2018 data was not available.

Exhibit F
 New Hampshire Department of Health and Human Services
 Medicaid Care Management Program
 SFY 2023 Enrollment Projections - PHE Ending April 2023

Eligibility Category	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Total
Low Income Children - Age 0-11 Months	3,768	3,711	3,657	3,599	3,578	3,539	3,501	3,462	3,425	3,387	3,387	3,387	42,402
Low Income Children - Age 1-18 Years	67,706	67,691	67,572	67,145	67,137	66,921	66,705	66,490	66,276	66,062	66,062	66,062	801,829
Low Income Adults	17,996	18,030	18,186	18,484	18,260	18,298	18,335	18,372	18,410	18,448	18,448	18,448	219,693
CHIP	20,922	21,164	21,656	21,783	21,876	21,987	22,098	22,210	22,323	22,436	22,436	22,436	263,326
Foster Care / Adoption	2,584	2,643	2,683	2,694	2,742	2,771	2,802	2,832	2,863	2,894	2,894	2,894	33,296
Severely Disabled Children	842	860	849	838	848	848	847	847	846	846	846	846	10,161
Elderly and Disabled Adults - Age 19-64	5,910	5,995	6,038	5,918	6,031	6,027	6,024	6,020	6,017	6,013	6,013	6,013	72,021
Elderly and Disabled Adults - Age 65+	1,336	1,340	1,393	1,343	1,408	1,415	1,423	1,430	1,438	1,445	1,445	1,445	16,861
Dual Eligibles	15,500	15,694	15,996	15,611	16,008	16,014	16,020	16,026	16,032	16,038	16,038	16,038	191,012
Newborn Kick Payment	237	198	260	217	228	228	228	228	228	228	228	228	2,736
Neonatal Abstinence Syndrome Kick Payment	-	-	7	-	2	2	2	2	2	2	2	2	21
Maternity Kick Payment	212	193	231	171	202	202	202	202	202	202	202	202	2,423
Severe/Persistent Mental Illness - Non-Dual	2,722	2,899	2,910	3,047	2,894	2,894	2,894	2,894	2,894	2,894	2,894	2,717	34,556
Severe/Persistent Mental Illness - Dual	2,050	1,930	2,215	2,058	2,063	2,063	2,063	2,063	2,063	2,063	2,063	2,063	24,758
Severe Mental Illness - Non-Dual	2,073	2,384	2,218	2,445	2,280	2,280	2,280	2,280	2,280	2,280	2,280	2,035	27,115
Severe Mental Illness - Dual	315	311	378	325	332	332	332	332	332	332	332	332	3,988
Low Utilizer - Non-Dual	399	430	435	467	433	433	433	433	433	433	433	429	5,188
Low Utilizer - Dual	278	274	316	286	289	289	289	289	289	289	289	289	3,463
Serious Emotionally Disturbed Child	6,385	6,241	7,171	6,544	6,585	6,585	6,585	6,585	6,585	6,585	6,585	6,605	79,044
Standard Subtotal	150,786	151,596	153,673	152,566	152,764	152,696	152,630	152,567	152,505	152,446	152,446	152,039	1,828,714
Granite Advantage - Medically Frail	10,011	10,106	9,970	10,246	10,379	10,515	10,652	10,791	10,932	10,932	10,932	9,756	125,223
Granite Advantage - Non-Medically Frail	75,918	76,809	76,862	78,153	78,895	79,644	80,401	81,165	81,935	81,935	81,935	75,523	949,176
GAHCP Subtotal	85,928	86,915	86,832	88,399	89,275	90,159	91,053	91,956	92,867	92,867	92,867	85,279	1,074,399
Total	236,714	238,511	240,505	240,964	242,038	242,855	243,683	244,522	245,373	245,314	245,314	237,319	2,903,112

Eligibility Category	Age Limit	Quantity Limit	Medication Possession Ratio	Therapeutic Duplication						Opioid				Adjusted Total	PMPM
				Asthma / COPD		Long-Acting Muscarinic Antagonists		Autoimmune	HIV	Concurrent Utilization	Opioid Use Disorder	Agonists			
				Corticosteroids	Long-Acting Beta Agonists	Long-Acting Muscarinic Antagonists									
Low Income Children - Age 0-11 Months	-	51,658	11	-	-	-	-	-	-	-	-	-	-	8	0.00
Low Income Children - Age 1-18 Years	50,209	62,219	5,501	5,679	-	330	-	-	-	-	-	-	-	90,702	0.12
Low Income Adults	5,773	9,152	9,152	3,935	49	-	-	-	-	-	-	-	-	76,971	0.58
CHIP	4,689	12,562	161	1,937	-	-	-	-	-	-	-	-	-	15,685	0.09
Foster Care / Adoption	2,217	13,385	143	-	-	-	-	-	-	-	-	-	-	12,586	0.54
Severely Disabled Children	2,729	25,173	799	488	-	-	-	-	-	-	-	-	-	23,351	2.17
Elderly and Disabled Adults - Age 19-64	11,298	127,214	13,814	15,427	1,807	1,842	-	-	-	-	-	-	-	257,578	3.50
Elderly and Disabled Adults - Age 65+	-	3,622	2,677	2,742	97	499	-	135,595	-	-	-	-	-	11,552	0.91
Dual Eligibles	-	2,151	15	-	-	-	-	-	-	-	-	-	-	1,733	0.01
Newborn Kick Payment	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Neonatal Abstinence Syndrome Kick Payment	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Maternity Kick Payment	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Severe/Persistent Mental Illness - Non-Dual	4,366	72,021	5,231	932	103	506	-	-	-	-	-	-	-	96,379	3.33
Severe/Persistent Mental Illness - Dual	-	3,798	2	-	-	-	-	-	212	-	-	-	-	3,040	0.13
Severe Mental Illness - Non-Dual	2,279	31,227	1,021	3,356	-	-	8,871	-	-	-	-	-	-	48,275	1.65
Severe Mental Illness - Dual	-	37	1	-	-	-	-	-	-	-	-	-	-	30	0.01
Low Utilizer - Non-Dual	-	14,794	63	-	-	-	-	-	-	-	-	-	-	11,934	4.67
Low Utilizer - Dual	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Serious Emotionally Disturbed Child	7,596	50,639	1,045	365	-	-	-	-	-	-	-	-	-	47,716	0.62
Standard Subtotal	91,356	470,520	39,635	34,859	2,056	3,178	13,168	135,807	39,718	29,131	3,434	697,519	907,740	0.46	
Granite Advantage - Medically Frail	1,615	60,337	4,275	9,277	975	-	-	14,571	1,889	3,257	564	77,978	77,978	0.92	
Granite Advantage - Non-Medically Frail	12,951	84,518	2,890	14,524	1,461	3,161	-	39,676	2,927	2,057	814	132,244	132,244	0.34	
GAHCP Subtotal	14,166	144,855	7,165	23,801	2,436	3,161	-	54,247	4,815	5,314	1,378	210,221	210,221	0.45	
Total	105,521	615,376	46,800	58,660	4,492	6,339	13,168	190,054	44,533	34,445	4,812	907,740	907,740	0.45	

Exhibit H

New Hampshire Department of Health and Human Services
 SFY 2023 Medicaid Care Management Capitation Rate Development
 National Drug Codes for Carved-Out Prescription Drugs

Zolgensma	Hemophilia	Hyperammonemia (Carbaglu & Ravicti)	Zynteglo and Skysona
71894012002	00026037220	52276031205	735543111XX
71894012103	00026037230	52276031260	735542111XX
71894012203	00026037250	75987005006	
71894012303	00026037920	76325010004	
71894012404	00026037930	76325010025	
71894012504	00026037950	71863011460	
71894012604	00026378220		
71894012705	00026378225		
71894012805	00026378330		
71894012905	00026378335		
71894013006	00026378550		
71894013106	00026378555		
71894013206	00026378660		
71894013307	00026378665		
71894013407	00026378770		
71894013507	00026378775		
71894013608	00026379220		
71894013708	00026379330		
71894013808	00026379550		
71894013909	00026379660		
71894014009	00026379770		
71894014109	00026382125		
	00026382225		
	00026382425		
	00026382650		
	00026382850		
	00026394225		
	00026394425		
	00026394625		
	00026394825		
	00026482101		
	00026482201		
	00026482401		
	00026482601		
	00026482801		
	00053623302		
	00053761505		
	00053761510		
	00053761520		
	00053762005		
	00053762010		
	00053762020		
	00053763302		
	00053763402		
	00053765601		
	00053765602		
	00053765604		
	00053765605		
	00053766801		
	00053766802		
	00053766804		
	00053813001		
	00053813002		
	00053813004		
	00053813005		
	00053813102		
	00053813202		
	00053813302		
	00053813402		
	00053813502		
	00169701001		
	00169701301		
	00169702001		

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New Hampshire Department of Health and Human Services
SFY 2023 Medicaid Care Management Capitation Rate Development
National Drug Codes for Carved-Out Prescription Drugs

Zolgensma	Hemophilia	Hyperammonemia (Carbaglu & Ravicti)	Zynteglo and Skysona
	00169704001		
	00169705001		
	00169706001		
	00169706101		
	00169706201		
	00169720101		
	00169720201		
	00169720501		
	00169720801		
	00169781001		
	00169781501		
	00169782001		
	00169782501		
	00169783001		
	00169785001		
	00169790101		
	00169790201		
	00169790501		
	00169810001		
	00169815001		
	00169820001		
	00169830001		
	00169850001		
	00944058101		
	00944130110		
	00944130210		
	00944130310		
	00944130410		
	00944283110		
	00944283210		
	00944283310		
	00944283401		
	00944283410		
	00944283501		
	00944283510		
	00944284110		
	00944284210		
	00944284310		
	00944284410		
	00944284510		
	00944292102		
	00944292202		
	00944292302		
	00944292402		
	00944293001		
	00944293101		
	00944293201		
	00944293301		
	00944293501		
	00944293502		
	00944293503		
	00944293504		
	00944293801		
	00944293802		
	00944293803		
	00944294001		
	00944294002		
	00944294003		
	00944294004		
	00944294010		
	00944294110		
	00944294210		
	00944294310		

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New Hampshire Department of Health and Human Services
SFY 2023 Medicaid Care Management Capitation Rate Development
National Drug Codes for Carved-Out Prescription Drugs

Zolgensma	Hemophilia	Hyperammonemia (Carbaglu & Ravicti)	Zynteglo and Skysona
	00944294410		
	00944294510		
	00944294610		
	00944294810		
	00944296010		
	00944296110		
	00944296210		
	00944296310		
	00944296410		
	00944296510		
	00944302602		
	00944302802		
	00944303002		
	00944303202		
	00944303402		
	00944304510		
	00944304610		
	00944304710		
	00944305102		
	00944305202		
	00944305302		
	00944305402		
	00944394002		
	00944394202		
	00944394402		
	00944394602		
	00944425202		
	00944425402		
	00944425602		
	00944425802		
	00944462201		
	00944462301		
	00944462401		
	00944462501		
	00944462601		
	00944462602		
	00944462701		
	00944462702		
	00944462801		
	00944462802		
	00944500101		
	00944500105		
	00944500110		
	00944755102		
	00944755302		
	13533066520		
	13533066530		
	13533066550		
	50242092001		
	50242092101		
	50242092201		
	50242092301		
	52769046001		
	53270027005		
	53270027105		
	53270027106		
	53270027205		
	53270027206		
	58394000101		
	58394000105		
	58394000106		
	58394000201		
	58394000205		

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New Hampshire Department of Health and Human Services
SFY 2023 Medicaid Care Management Capitation Rate Development
National Drug Codes for Carved-Out Prescription Drugs

Zolgensma	Hemophilia	Hyperammonemia (Carbaglu & Ravicti)	Zynteglo and Skysona
	58394000206		
	58394000301		
	58394000305		
	58394000306		
	58394000502		
	58394000504		
	58394000602		
	58394000604		
	58394000702		
	58394000704		
	58394000802		
	58394000803		
	58394001102		
	58394001104		
	58394001201		
	58394001202		
	58394001301		
	58394001302		
	58394001401		
	58394001402		
	58394001501		
	58394001502		
	58394001603		
	58394002203		
	58394002303		
	58394002403		
	58394002503		
	58394063303		
	58394063403		
	58394063503		
	58394063603		
	58394063703		
	63833038602		
	63833038702		
	63833051802		
	63833061502		
	63833061602		
	63833061702		
	63833089151		
	63833089190		
	63833891501		
	64193022203		
	64193022204		
	64193022205		
	64193022302		
	64193022402		
	64193022502		
	64193024402		
	64193042302		
	64193042402		
	64193042502		
	64193042602		
	64193044502		
	64208775201		
	64208775301		
	64406048308		
	64406048408		
	64406048508		
	64406048608		
	64406048708		
	64406048808		

Exhibit H

New Hampshire Department of Health and Human Services
SFY 2023 Medicaid Care Management Capitation Rate Development
National Drug Codes for Carved-Out Prescription Drugs

Zolgensma	Hemophilia	Hyperammonemia (Carbaglu & Ravicti)	Zynteglo and Skysona
	64406048908		
	64406080101		
	64406080201		
	64406080301		
	64406080401		
	64406080501		
	64406080601		
	64406080701		
	64406080801		
	64406080901		
	64406081001		
	64406091101		
	64406092201		
	64406093301		
	64406094401		
	64406096601		
	64406097701		
	67467018101		
	67467018102		
	67467018201		
	67467018202		
	68516320002		
	68516320003		
	68516320004		
	68516320005		
	68516320101		
	68516320202		
	68516320302		
	68516320401		
	68516320502		
	68516320602		
	68516320701		
	68516320802		
	68516320902		
	68516360002		
	68516360004		
	68516360005		
	68516360006		
	68516360102		
	68516360202		
	68516360302		
	68516360402		
	68516360502		
	68516360602		
	68516360702		
	68516360802		
	68516360902		
	68516460001		
	68516460002		
	68516460101		
	68516460201		
	68516460302		
	68516460402		
	68516460501		
	68516460601		
	68516460702		
	68516460802		
	68516460902		
	68516461002		
	68516461101		
	68516461201		
	68516461302		
	68516461402		

Exhibit H

New Hampshire Department of Health and Human Services
SFY 2023 Medicaid Care Management Capitation Rate Development
National Drug Codes for Carved-Out Prescription Drugs

Zolgensma	Hemophilia	Hyperammonemia (Carbaglu & Ravicti)	Zynteglo and Skysona
	68516461502		
	68982013901		
	68982014001		
	68982014101		
	68982014201		
	68982014301		
	68982014401		
	68982014501		
	68982014601		
	68982014701		
	68982014801		
	68982014901		
	68982015001		
	68982015101		
	68982015201		
	68982018201		
	68982018202		
	68982034701		
	68982034801		
	69911047402		
	69911047502		
	69911047602		
	69911047702		
	69911047802		
	69911048002		
	69911048102		
	69911086402		
	69911086502		
	69911086602		
	69911086702		
	69911086902		
	70504028205		
	70504028305		
	70504028405		
	70504028506		
	70504028606		
	70504028705		
	70504028805		
	70504028905		
	71104048308		
	71104048408		
	71104048508		
	71104048608		
	71104048708		
	71104048808		
	71104048908		
	71104049008		
	71104049108		
	71104049208		
	71104080101		
	71104080201		
	71104080301		
	71104080401		
	71104080501		
	71104080601		
	71104080701		
	71104080801		
	71104080901		
	71104081001		
	71104091101		
	71104092201		
	71104093301		
	71104094401		

Exhibit H
New Hampshire Department of Health and Human Services
SFY 2023 Medicaid Care Management Capitation Rate Development
National Drug Codes for Carved-Out Prescription Drugs

Zolgensma	Hemophilia	Hyperammonemia (Carbaglu & Ravicti)	Zynteglo and Skysona
	71104096601		
	71104097701		
	76125025020		
	76125025620		
	76125050030		
	76125066730		
	76125066750		
	76125066830		
	76125067250		
	76125067351		
	76125067650		

Exhibit J1a
New Hampshire Department of Health and Human Services
Medicaid Care Management Program
Impact of PDL Change - Top 25 Classes - C Y 2018

Top 25 Classes	Percentage of		Total Projected		Total Projected		Impact of PDL Change
	Pharmacy Expenditure in Base Period		Expenditure Before PDL		Expenditure After PDL		
Autoimmune Agents	8.50%		\$13,623,234		\$13,586,841		-0.27%
Hepatitis C Agents - Treatments	5.99%		\$9,602,412		\$9,248,310		-3.69%
Opioid Partial Agonists - buprenorphine/naloxone film	4.22%		\$6,762,446		\$4,665,448		-31.01%
Amphetamine Stimulants	4.13%		\$6,623,697		\$6,620,700		-0.05%
Atypical Antipsychotics	3.61%		\$5,785,418		\$5,639,217		-2.53%
Methylphenidate Stimulants	3.42%		\$5,474,070		\$5,458,374		-0.29%
Growth Hormones	2.90%		\$4,653,422		\$4,686,584		0.71%
Long Acting Beta Agonist and Corticosteroid Combinations	2.89%		\$4,625,611		\$4,627,518		0.04%
Long Acting Injectable Antipsychotics	2.68%		\$4,286,837		\$4,286,837		0.00%
Cystic Fibrosis Agents - CFTR Modulator	2.63%		\$4,218,635		\$4,218,635		0.00%
Steroid Inhalants	2.26%		\$3,615,941		\$3,630,901		0.41%
Insulin - Rapid Acting	2.06%		\$3,303,971		\$3,304,565		0.02%
Antiretrovirals - HIV Combinations	1.85%		\$2,972,536		\$2,972,536		0.00%
Insulin - Long Acting - insulin glargine	1.51%		\$2,417,385		\$2,661,071		10.08%
Multiple Sclerosis Agents	1.43%		\$2,296,185		\$2,277,213		-0.83%
Opioid Antagonists - Naltrexone	1.43%		\$2,291,643		\$2,291,643		0.00%
Anticonvulsants - Misc.	1.33%		\$2,131,621		\$2,029,342		-4.80%
Fibromyalgia Agents - Lyrica	1.27%		\$2,031,878		\$496,535		-75.56%
Cystic Fibrosis Agents - Mucolytic Agents	1.23%		\$1,966,533		\$1,966,533		0.00%
GABA Modulators	1.12%		\$1,800,047		\$1,800,047		0.00%
Diagnostic Tests	1.10%		\$1,760,954		\$1,760,954		0.00%
Anticonvulsants - Misc. - Banzel/Vimpat	1.06%		\$1,700,929		\$1,700,929		0.00%
Anticonvulsants - Benzodiazepines - Onfi	1.06%		\$1,700,336		\$1,595,958		-6.14%
Pancreatic Enzymes	1.01%		\$1,624,186		\$1,614,366		-0.60%
Antineoplastic Enzyme Inhibitor - Breast/Ovarian	1.01%		\$1,623,954		\$1,623,954		0.00%
Total	61.71%		\$98,893,879		\$94,765,008		-4.18%

Exhibit J1b
New Hampshire Department of Health and Human Services
Medicaid Care Management Program
Impact of PDL Change - Top 25 Classes - C Y 2019

Top 25 Classes	Percentage of Pharmacy Expenditure in Base Period		Total Projected Expenditure		Total Projected Expenditure After PDL		Impact of PDL Change
			Before PDL		PDL		
Autoimmune Agents	11.97%		\$26,081,966		\$25,931,741		-0.58%
Hepatitis C Agents - Treatments	4.93%		\$10,738,709		\$10,576,736		-1.51%
Opioid Partial Agonists - buprenorphine/naloxone film	4.19%		\$9,127,238		\$5,195,807		-43.07%
Cystic Fibrosis Agents - CFTR Modulator	3.71%		\$8,085,963		\$8,085,963		0.00%
Amphetamine Stimulants	3.49%		\$7,614,536		\$7,591,075		-0.31%
Atypical Antipsychotics	3.23%		\$7,049,628		\$6,848,086		-2.86%
Antiretrovirals - HIV Combinations	2.72%		\$5,923,259		\$5,923,259		0.00%
Long Acting Beta Agonist and Corticosteroid Combinations	2.50%		\$5,441,239		\$5,436,281		-0.09%
Methylphenidate Stimulants	2.44%		\$5,310,032		\$5,290,537		-0.37%
Long Acting Injectable Antipsychotics	2.38%		\$5,177,804		\$5,177,804		0.00%
Growth Hormones	2.09%		\$4,556,444		\$4,573,697		0.38%
Insulin - Rapid Acting	1.83%		\$3,993,866		\$3,991,509		-0.06%
Steroid Inhalants	1.79%		\$3,898,631		\$3,923,173		0.63%
Multiple Sclerosis Agents	1.75%		\$3,823,366		\$3,685,112		-3.62%
Opioid Antagonists - Naltrexone	1.72%		\$3,740,126		\$3,740,126		0.00%
Anticonvulsants - Misc.	1.56%		\$3,398,571		\$3,285,143		-3.34%
Incretin Mimetic Agents (GLP-1 Receptor Agonists)	1.53%		\$3,339,911		\$3,822,778		14.46%
Insulin - Long Acting - insulin glargine	1.52%		\$3,308,725		\$3,342,366		1.02%
Anticoagulants	1.21%		\$2,632,904		\$2,632,957		0.00%
Opioid Partial Agonists	1.06%		\$2,309,943		\$2,050,784		-11.22%
Cystic Fibrosis Agents - Mucolytic Agents	1.02%		\$2,218,462		\$2,218,462		0.00%
Antineoplastic Enzyme Inhibitor - Breast/Ovarian	0.97%		\$2,107,980		\$2,107,980		0.00%
Pancreatic Enzymes	0.95%		\$2,077,907		\$2,059,888		-0.87%
Anticonvulsants - Misc. - Banzel/Vimpat	0.93%		\$2,021,030		\$2,021,030		0.00%
Diagnostic Tests	0.92%		\$2,000,833		\$2,000,833		0.00%
Total	62.39%		\$135,979,073		\$131,513,131		-3.28%

Exhibit J2a

New Hampshire Department of Health and Human Services
Medicaid Care Management Program

Impact of PDL Change - Drug Classes with Largest Impact - CY 2018

Drug Classes with Largest Impact	Percentage of Pharmacy Expenditure in Base Period		Total Projected Expenditure Before PDL	Total Projected Expenditure After PDL	Impact of PDL Change
Fibromyalgia Agents - Lyrica	1.27%	\$2,031,878	\$496,535	-75.56%	
Antianginal Agents	0.02%	\$31,598	\$8,157	-74.19%	
Antifungals - Nail Topicals	0.00%	\$982	\$303	-69.13%	
Ophthalmics - Carbonic Anhydrase Inhibitors	0.01%	\$20,636	\$6,973	-66.21%	
Intestinal Cholesterol Absorption Inhibitors	0.01%	\$17,392	\$9,906	-43.05%	
ACE Inhibitors	0.06%	\$93,371	\$53,716	-42.47%	
Irritable Bowel Syndrome (IBS) Agents - Diarrhea	0.03%	\$55,293	\$77,980	41.03%	
Beta Blockers Non-Selective	0.14%	\$228,652	\$135,759	-40.63%	
Extended Release Opioid Agonists	0.60%	\$959,787	\$570,147	-40.60%	
Ophthalmics - Misc.	0.01%	\$10,556	\$6,297	-40.35%	
Benzodiazepines	0.09%	\$150,369	\$96,408	-35.89%	
Androgens	0.12%	\$188,036	\$124,556	-33.76%	
Antiparkinson Agents	0.04%	\$60,805	\$40,466	-33.45%	
Potassium Removing Resins	0.01%	\$15,472	\$10,390	-32.85%	
Opioid Partial Agonists - buprenorphine/naloxone film	4.22%	\$6,762,446	\$4,665,448	-31.01%	
Proton Pump Inhibitors	0.43%	\$681,554	\$481,849	-29.30%	
Prostaglandins - Ophthalmic	0.03%	\$54,835	\$39,071	-28.75%	
Angiotensin II Receptor Antagonists	0.03%	\$41,669	\$29,903	-28.24%	
Short Acting Beta Agonists - Ventolin	0.96%	\$1,541,699	\$1,125,288	-27.01%	
Multiple Sclerosis Agents - dimethyl fumarate	0.52%	\$832,910	\$613,050	-26.40%	
Glucocorticosteroids - Uceris	0.03%	\$45,388	\$33,621	-25.93%	
Scabicides & Pediculicides	0.22%	\$347,626	\$265,391	-23.66%	
Granulocyte Colony-Stimulating Factors	0.26%	\$418,906	\$324,307	-22.58%	
Peripheral Opioid Receptor Antagonists	0.07%	\$120,105	\$95,840	-20.20%	
Anthyperlipidemics - Misc.	0.01%	\$14,310	\$11,615	-18.83%	
Total	9.19%	\$14,726,275	\$9,322,976	-36.69%	

Exhibit J2b
New Hampshire Department of Health and Human Services
Medicaid Care Management Program
Impact of PDL Change - Drug Classes with Largest Impact - CY 2019

Drug Classes with Largest Impact	Percentage of Pharmacy Expenditure in		Total Projected Expenditure		Total Projected Expenditure After PDL	Impact of PDL Change
	Base Period	Before PDL	Before PDL	PDL		
Antifungals - Nail Topicals	0.00%	\$6,912	\$1,799	-73.97%		
Potassium Removing Resins	0.01%	\$16,304	\$5,956	-63.47%		
Extended Release Opioid Agonists	0.52%	\$1,141,553	\$421,029	-63.12%		
Ophthalmics - Carbonic Anhydrase Inhibitors	0.01%	\$19,661	\$7,338	-62.68%		
Fibromyalgia Agents - Lyrica	0.82%	\$1,792,824	\$777,448	-56.64%		
Antihyperlipidemics - Misc.	0.02%	\$37,639	\$21,208	-43.66%		
Opioid Partial Agonists - buprenorphine/naloxone film	4.19%	\$9,127,238	\$5,195,807	-43.07%		
Ophthalmics - Misc.	0.01%	\$15,490	\$8,955	-42.19%		
Multiple Sclerosis Agents - dimethyl fumarate	0.61%	\$1,325,154	\$851,056	-35.78%		
Prostaglandins - Ophthalmic	0.04%	\$87,420	\$58,000	-33.65%		
Proton Pump Inhibitors	0.46%	\$1,000,062	\$740,557	-25.95%		
Beta Blockers Non-Selective	0.12%	\$256,764	\$192,206	-25.14%		
Peripheral Opioid Receptor Antagonists	0.05%	\$116,861	\$92,283	-21.03%		
Benzodiazepines	0.09%	\$205,076	\$163,977	-20.04%		
Intestinal Cholesterol Absorption Inhibitors	0.01%	\$21,117	\$17,247	-18.33%		
ACE Inhibitors	0.09%	\$197,461	\$162,625	-17.64%		
Androgens	0.09%	\$204,144	\$169,494	-16.97%		
Antiparkinson Agents	0.03%	\$75,614	\$63,515	-16.00%		
Antianginal Agents	0.01%	\$18,438	\$15,494	-15.96%		
Insulin - Regular/NPH	1.53%	\$3,339,911	\$3,822,778	14.46%		
Irritable Bowel Syndrome (IBS) Agents - Diarrhea	0.77%	\$1,669,735	\$1,911,092	14.45%		
Insulin - Long Acting - insulin glargine	0.02%	\$40,275	\$45,927	14.03%		
Alpha-Beta Blockers / Beta Blockers Cardio-Selective	0.14%	\$297,604	\$263,669	-11.40%		
Migraine Serotonin Agonists	0.12%	\$270,957	\$240,324	-11.31%		
Opioid Partial Agonists	1.06%	\$2,309,943	\$2,050,784	-11.22%		
Total	10.83%	\$23,594,156	\$17,300,567	-26.67%		