

## **Attachment D – RAPPs Preprint Question 27**

### **27. Please describe the data sources and methodology used for the analysis provided in response to Question 23.**

SFY19 incurred Medicaid managed care claims for the STAR/STAR+PLUS/STAR Kids programs were pulled based on a listing of RHC NPIs. Claims were paid through July 2020. SFY19 claims were increased by 7% to account for projected MCO enrollment increases for these 3 programs from SFY19 to SFY22.

The modeling assumed all payments would be paid through Components 1 and 2 of the directed payment program. In other words, it was assumed all providers would satisfy all program requirements. The directed payments were modeled per the payment descriptions and SFY19 claims per questions 8 and 19.

Medicare T1015 and office visit encounter rates were based on freestanding RHC and rural hospital cost reports. For an RHC that did not have a corresponding rural hospital cost report, the Medicare to Medicaid encounter rate ratio from that RHC's SDA was used as a proxy. Non-T1015 Medicare rates are assumed to have the same Medicare to Medicaid payment ratios as T1015 claims.