

**STATE OF TEXAS
CHILDREN'S HEALTH INSURANCE
PROGRAM
CHIP RATE SETTING
STATE FISCAL YEAR 2023**

Prepared for:

Texas Health and Human Services Commission

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I. Introduction

Rudd and Wisdom, Inc. has been retained by the Texas Health and Human Services Commission (HHSC) to develop the state fiscal year 2023 (FY2023, September 1, 2022 through August 31, 2023) premium rates for health plans participating in the Texas Children's Health Insurance Program (CHIP). This report presents the rating methodology and assumptions used in developing the premium rates.

CHIP is a managed care program that provides primary and preventive health care to low-income, uninsured children through age 18 with household incomes up to 201 percent of the federal poverty level (FPL) who do not qualify for Medicaid. The CHIP program expanded to provide benefits for unborn children of pregnant women on January 1, 2007 under the program name CHIP Perinate. CHIP Perinate services include prenatal visits, prescription prenatal vitamins, labor and delivery and postpartum care. CHIP Perinate members are exempt from the 90-day waiting period and all cost-sharing for the duration of their coverage period.

There are ten CHIP service delivery areas (SDAs). CHIP members can select from at least two managed care plans (MCOs) in each SDA. There are 15 MCOs serving numerous SDAs throughout the state.

Rudd and Wisdom has provided actuarial services to the Texas Medicaid program for over 35 years. We have participated in the state's Medicaid managed care rating process since its inception in 1993 and in developing premium rates for CHIP plans since that program's inception in 2000. This year, as in previous years, we have worked closely with HHSC in developing the FY2023 CHIP premium rates.

Rudd and Wisdom has relied on the following data sources as provided by HHSC, the participating health plans and the agency's External Quality Review Organization (EQRO):

- Monthly enrollment by age group for each health plan. This includes historical enrollment since September 2018 and a projection of future enrollment through August 2023. These projections were prepared by HHS Forecasting staff.
- Detailed MCO encounter data for FY2019, FY2020 and FY2021. The encounter data is a dataset that includes detail claim information for every claim incurred during FY2019 and paid through November 30, 2019, incurred during FY2020 and paid through November 30, 2020 and incurred during FY2021 and paid through November 30, 2021. The dataset includes but is not limited to (1) individual member information – date of birth, risk group, health plan; (2) provider information – type of provider, NPI, bill type, taxonomy code; (3) procedure information – diagnosis, procedure code, claim modifier; and (4) payment information – paid amount, billed amount. This information is used to identify the providers and services which will receive or have received reimbursement changes in order to determine the cost impact of such changes.
- Claim lag reports by age group for each health plan for the period September 2018 through February 2022. These reports were provided by the health plans and include monthly paid claims by month of service.

- Financial Statistical Reports (FSR) for each MCO participating in the CHIP program for FY2018, FY2019, FY2020, FY2021 and the first six months of FY2022. The FSR contains detailed information regarding monthly enrollment, revenue, incurred claims and administrative expenses as reported by the health plan. These reports are prepared by the health plans and are audited by an external audit organization. A health plan that participates in multiple programs and/or service areas submits a separate FSR for each individual service area and program combination.
- Reports from the EQRO summarizing their analysis of the health plan's encounter claims data.
- Reports from the health plans providing information on high volume claimants during the experience period.
- Current (FY2022) premium rates for each health plan.
- The number of maternity deliveries by health plan and risk group for the period September 2018 through February 2022.
- Information from both HHSC and the health plans regarding recent changes in covered services and provider reimbursement under the State Medicaid and CHIP programs.
- Information from the health plans regarding current and projected payment rates for certain capitated services, such as mental health and vision.
- March 2019 through February 2020 acuity risk adjustment analysis provided by the EQRO for each participating health plan.
- Information from the health plans regarding current and projected reinsurance premium rates.
- Information provided by HHSC regarding FY2019 and FY2020 CHIP health plan claims cost by type of service for certain services. This information was obtained from the encounter database.
- Information provided by HHSC regarding the expected impact of FY2020, FY2021, FY2022 and FY2023 Medicaid provider reimbursement rate changes.

After accumulating all of the information to be used in the rate setting process, a comparison of the various sources of claims data was performed to check for consistency. We compared (i) the claim lag reports provided by the MCOs, (ii) the claim amounts reported in the FSRs and (iii) the claim amounts in the encounter data files. The three data sources are compared to ensure consistent results such that the three are considered interchangeable in aggregate. Although interchangeable in total, each data source has a unique role in the analysis. FSR data provides high level summary information of claims data, subcapitated expenses, reinsurance expenses and administrative costs. In some cases, this information is available at the risk group level while for others it is only provided at an aggregated level. MCO summary reports provide HHSC-specified data points at a more granular level such as subcapitated expenses by service, claim lag data by service, other medical expenses and large claimant information. The detail encounter data provides claim data at the most granular level including information for individual claims such as provider, procedure code, diagnostic information, etc. The use of these multiple data sources allows for a dynamic, flexible rating model that is not constrained to the data limitation of a single source.

All data requested by the actuary was provided by HHSC and the participating MCOs. Although the above data was reviewed for reasonableness, Rudd and Wisdom did not audit the data.

In addition to the review for reasonableness performed by Rudd and Wisdom, HHSC employs the Institute for Child Health Policy (ICHP) as an External Quality Review Organization (EQRO). ICHP reviews the detail encounter data and provides certification of the data quality. Below is an excerpt from their data certification report:

The EQRO considers the required data elements for all MCO-SA combinations in all programs to be accurate and complete, meeting the following components of Texas Government Code § 533.0131 for data certification purposes:

- 1. The encounter data for the most recent measurement year are complete, accurate, and reliable.*
- 2. No statistically significant variability in the encounter data is attributable to incompleteness, inaccuracy, or other deficiency as compared to equivalent data for similar populations and when evaluated against professionally accepted standards.*

Based on the review of the data by the EQRO, HHSC and Rudd and Wisdom, we have concluded that all data sources are consistent, complete and accurate. It is our opinion that the data collected for the rate development is high quality and we have no concerns over the availability or applicability to the FY2023 rate development. The accumulation of data sources noted above have been assigned full credibility.

Given the history of managed care data available for the CHIP program, the rate development is based exclusively on managed care data.

II. Overview of the Rate Setting Methodology

This report details the development of the medical and prescription drug components of the CHIP premium rate. The two components are developed separately but follow similar methodologies in their calculations. Information regarding the CHIP Dental program can be found in the report titled “State of Texas Medicaid and CHIP Managed Care Dental Rate Setting FY2023”.

The actuarial model used to derive the FY2023 CHIP premium rates relies primarily on historical health plan experience. The historical claims experience for the program was analyzed and estimates for the base period were developed. Due to the significant impact of COVID-19 and the public health emergency (PHE) we have made adjustments to the standard base periods used in prior rate setting. Beginning March 2020, all programs experienced significant declines in the average cost due to large scale shutdowns and deferral of services. As a result, we have determined that experience after February 2020 is not indicative of future cost patterns. The base period for all rating components was defined as March 2019 through February 2020, which is the most recent twelve-month period which includes claims not impacted by COVID-19 and the subsequent PHE. Estimates of the base period included an evaluation of incurred but unpaid claims (IBNR). Given the extensive runout beyond the base period, the IBNR estimates are immaterial. The IBNR estimate is based on claims paid through February 2022 and represents the following percentage of claims by type of service:

- Medical – 0.0%
- Prescription Drug – 0.0%

These estimates were then projected forward to FY2023 using assumed trend rates. Other plan expenditures such as capitated amounts, reinsurance costs and administrative expenses were added to the claims component in order to project the total FY2023 cost under the health plan. These projected total cost rates were determined separately for each risk group for each health plan in each service area. The results of this analysis were then combined for all health plans in a service area in order to develop a set of community rates for each service area.

The health plans under review are located in the following service areas:

- Bexar County Service Area (San Antonio)
- Dallas County Service Area (Dallas)
- El Paso County Service Area (El Paso)
- Harris County Service Area (Houston)
- Jefferson County Service Area (Jefferson)
- Lubbock County Service Area (Lubbock)
- Nueces County Service Area (Corpus Christi)
- Tarrant County Service Area (Fort Worth)
- Travis County Service Area (Austin)
- Rural County Service Area (All other Texas regions)

Premium rates were determined for the following age groups:

- Children Under Age One Year
- Children Ages 1 to 5 Years
- Children Ages 6 to 14 Years
- Children Ages 15 to 18 Years
- Perinate Newborn 198%-202%
- Perinate Mother <198%
- Perinate Mother 198%-202%

The services used in the analysis include the following:

- Inpatient Hospital
- Outpatient Hospital
- Physician Services
- Other Professional Services
- Lab, X-ray and Radiology Services
- Medical Supplies
- Behavioral Health Services
- EPSDT Medical Services
- Family Planning and Genetics Services
- Hearing Services
- Home Health Services
- Emergency Room Services
- Ambulance Services
- Vision Services
- Prescription Drugs

Services specifically excluded from the analysis include:

- Dental and Orthodontia Services
- Certain High Cost Carve-out Drugs

We projected the FY2023 cost for each individual health plan by estimating their base period average claims cost and then applying trend and other adjustment factors. (These adjustment factors are described in more detail in Section III.) We added capitation expenses for services capitated by the health plan (such as vision and behavioral health), a net cost of reinsurance, a reasonable provision for administrative expenses and a risk margin. Attachment 2 presents a description and an example of the experience analysis for a sample health plan. This type of analysis was conducted on the experience of each participating CHIP health plan.

The analysis of base period claims experience for each health plan attempted to identify and adjust for any distortions in the data. Significant variations in experience, including the impact from unusually large individual claims, were investigated and it was determined that no such adjustments were necessary.

HHSC utilized the combination of two rating methodologies in setting the FY2023 CHIP premium rates – individual plan experience rating and community rating. The individual plan experience rating method is described above and documented in Attachment 2. The community rates are developed by a weighted average of the projected FY2023 cost for each

health plan in the service area (from the individual plan experience rating method). The weights used in this formula are the projected FY2023 number of members enrolled in each health plan by age group. Attachment 3 presents the summary community rating exhibit for each service area along with a description of the analysis.

The projected FY2023 average total per-capita cost in a service area is called the unadjusted premium rate. This rate includes provision for all health care and administrative services to be provided by the health plan. This rate is then separated into two components – (i) non-maternity related expenses and (ii) maternity expenses. The premium rate for non-maternity expenses is called the adjusted premium rate. These are the monthly rates paid to the health plan. The amount paid for maternity expenses is called the Delivery Supplemental Payment (DSP). Additional information regarding DSP is included in Attachment 8.

The base community rate in each service area was adjusted to reflect the health status, or acuity, of the population enrolled in each health plan. The purpose of acuity risk adjustment is to recognize the anticipated cost differential between multiple health plans in a service area by analyzing the health status of their respective memberships. Additional information regarding risk adjustment is included in Section III below under Risk Adjustment and in Attachment 7.

The FY2023 CHIP health plan premium rates were then defined as the following: the minimum of (a) 108% of the rate developed using the individual experience of the plan and (b) community rate with risk adjustment. The enrollment for children under age one, Perinate Newborn 198%-202% and Perinate Mother 198%-202% risk groups was so small that credible rates could not be set by area. As a result, the rates for these risk groups were calculated on a statewide basis. By limiting the final premium rates to no greater than 108% of the rate developed using the individual experience of the plan, the CHIP rates continue to incentivize the efficient provision of services while preventing a relatively low-cost plan from benefiting excessively from the higher community average premium rates. The 108% minimum impacts twelve of the thirty-two health plan/SDA options in the CHIP program. This methodology prevents a lower cost health plan from being excessively profitable as a result of a significantly different cost structure in comparison to their competition.

III. Adjustment Factors

This section contains a description of the adjustment factors used in the FY2023 CHIP rate setting process.

Trend Factors - Medical

The rating methodology uses assumed trend factors to adjust the base period claims cost to the projection period. The cost trend factors used in this analysis are a combination of utilization and inflation components. The projected trend rate assumptions were developed by the actuary based on an analysis of recent experience under the CHIP program. A single trend assumption applies to all service areas but varies by CHIP Perinate versus CHIP non-Perinate programs.

The historical claims cost and trend experience was reviewed separately by service area and risk group. The service area trends were then combined into a statewide average using a weighted average formula with estimated incurred claims as the weights. The experience trends for all time periods were adjusted to remove the impact of provider reimbursement changes and other changes that have impacted the cost of the program. CHIP experience after February 2020 has been excluded from the trend analysis due to the significant reduction in cost caused by the COVID-19 pandemic and the corresponding PHE declaration. These patterns are not expected to continue into the future and therefore the trends for this time period are not assigned any credibility.

The trend assumptions were then developed from an average of the FY2017, FY2018, FY2019 and September 2019 through February 2020 trends. The weighting of each time period was based on the number of months within each time period.

Attachment 4 – Exhibit A presents the derivation of the medical trend assumption. The trend analysis resulted in an annual trend assumption of 5.3% for CHIP non-Perinate program and 3.5% for CHIP Perinate program.

Trend Factors - Pharmacy

The rating methodology uses assumed pharmacy trend factors to adjust the base period claims cost to the rating period (FY2023). The trend rate assumptions were developed by the actuary based on an analysis of recent pharmacy claims experience under the CHIP program and the actuary's professional judgment regarding anticipated future cost changes. The trend rate assumption is the same for all CHIP risk groups and service areas.

Attachment 4 – Exhibit B presents the derivation of the pharmacy trend assumption. The trend analysis resulted in an annual trend assumption of 6.7%.

Provider Reimbursement Adjustments

Medicaid provider reimbursement changes were recognized for the following: inpatient hospital, potentially preventable readmissions (PPR), potentially preventable complications (PPC), therapy services, rural hospital outpatient, private duty nursing, ambulatory surgical

center, non-rural clinical lab, outpatient behavioral health, evaluation and management services, vaccine administration and radiology.

The rating adjustments for these provider reimbursement changes were calculated by applying actual health plan encounter data to the old and new reimbursement basis and the resulting impact determined. Attachment 5 presents a summary of the derivation of these adjustment factors.

DRG Grouper Revision

Retroactive to October 1, 2019 the DRG Grouper used to reimburse inpatient claims was revised from Version 37 to Version 36. A portion of the base period, October 2019 through February 2020 was reimbursed under Version 37 and must be adjusted. Exhibit E of Attachment 5 presents a summary of the derivation of these adjustment factors.

Related Party Adjustments

HHSC excludes from the base period claims experience any amounts paid by a health plan to a related party in excess of 100% of Medicaid. HHSC discussed with the health plans individually to determine (i) which providers had an owner-relationship to the health plan and (ii) the basis on which the health plan reimbursed the provider. All health plans in the affected service areas are impacted because the related party adjustment lowers the community rate applicable to all of the plans in that area. The rating methodology excludes from the claims experience base any amounts paid by a health plan to a related party in excess of 100% of Medicaid. Exhibit F of Attachment 5 presents a summary of the derivation of the rating adjustment factors.

Potentially Preventable Readmission Quality Improvement

Effective September 1, 2019 HHSC began utilizing an adjustment to the base period data that analyzes inefficiencies and potentially preventable expenses that unnecessarily increase managed care costs. This analysis was performed using the 3M™ PPR methodology which is a computerized algorithm to identify readmissions with a plausible clinical relationship to the care rendered during or immediately following a hospital admission. An expected reduction of PPR events of 10% has been applied for FY2023. Exhibit D of Attachment 5 presents a summary of the derivation of these adjustment factors.

Readmissions are an indicator of quality of care because they may reflect poor clinical care and poor coordination of services either during hospitalization or in the immediate post discharge period. A potentially preventable readmission is a readmission (return hospitalization within the specified readmission time interval) that is clinically related to the initial hospital admission. HHSC expects the MCOs to provide their members with timely access to appropriate care at the proper level by coordinating care across the entire continuum of the health care spectrum. Preventable readmissions should be avoided through high-quality outpatient care thus improving efficiency of the managed care programs.

Federally Qualified Health Center (FQHC) Wrap Payment Removal

Effective March 1, 2018, MCOs were no longer required to reimburse FQHCs the full

encounter rate. The MCOs are expected to reimburse FQHCs at a rate that is comparable to the reimbursement of all other non-FQHC providers providing similar services. Subsequently, the FQHC will be reimbursed up to their full encounter rate outside of the capitation rate. The base period data includes the full reimbursement rate paid to the FQHCs. As a result, this adjustment is necessary to remove the FQHC wrap payment portion from the base period data. The rating adjustment was calculated by collecting the FQHC wrap payments paid by the MCOs during the base period. Exhibit R of Attachment 5 presents a summary of the derivation of these adjustment factors.

Removal of Invalid Clinician Administered Drugs (CADs)

By HHSC rule, all outpatient medical claims for clinician-administered drugs must contain a Healthcare Common Procedure Coding System (HCPCS) code, an NDC number, the NDC unit of measure, and the NDC quantity. The MCO must edit claims using the Texas HHSC NDC to HCPCS Crosswalk file. If such a claim is missing the NDC information, or the NDC is not valid for the corresponding HCPCS code, then the drug is not considered a covered Medicaid benefit and the MCO must deny or reject the entire claim or claim line item. As a result, the base period data was reviewed and clinician administered drugs which were submitted under an invalid NDC were excluded from the rating analysis. Exhibit P of Attachment 5 presents a summary of the derivation of this adjustment factor.

Hemostatic Drug Carve-Out

Effective September 1, 2020, HHSC carved out all hemostatic drugs from the managed care capitated arrangement. These drugs continue to be covered services under the program but are funded through a non-risk arrangement. Hemostatic drugs are rare and extremely high cost. In one example, the cost of a single hemophilia drug for a single plan participant is over \$10 million per year. The purpose of this carveout is to improve the balance of risk between various MCOs. The hemostatic carve out adjustment factors are based on actual experience of the program and is determined by comparing the hemostatic drug experience to the base period claims cost by service area and risk group. Exhibit S.1 and S.2 of Attachment 5 presents the calculation of the hemostatic carve-out adjustment factors applicable to the medical and pharmacy rate development, respectively.

Public Health Emergency (PHE) Related Cost Adjustment

Beginning in March 2020 and continuing into 2022, the PHE has had a significant impact on average CHIP expenditures. CHIP enrollment has dropped significantly as members transition to Medicaid and average cost for all services has decreased from the pre-pandemic historical norms. While a return to pre-pandemic levels is expected, we believe the return will be gradual and won't occur until the termination of the PHE. A rating adjustment was calculated in order to estimate the continued impact of the PHE on average program cost in FY2023. Attachment 6 presents a summary of the derivation of this adjustment factor.

Risk Adjustment

Several risk adjustment techniques are employed in the rate setting methodology. Premium rates are established separately by area and age group in order to recognize the inherent geographical and demographical variation in the cost of delivering care. In an attempt to

treat the health plans more equitably regarding maternity expenses, the methodology includes a separate payment for maternity services. The rating methodology also includes a health status adjustment.

The base community rate in each service area was adjusted to reflect the health status, or acuity, of the population enrolled in each health plan. The purpose of acuity risk adjustment is to recognize the anticipated cost differential between multiple health plans in a service area by analyzing the health status of their respective members. The risk analysis was performed by the University of Florida's Institute for Child Health Policy (ICHP). The methodology used to incorporate the acuity risk adjustment is the Chronic Illness and Disability Payment System (CDPS). Additional information regarding risk adjustment is included in Attachment 7.

Although the results of the risk adjustment analysis were reviewed for reasonableness, Rudd and Wisdom did not audit the risk adjustment data or the results of ICHP's analysis.

COVID-19

In addition to the PHE-related cost adjustment discussed above, the most significant impact that COVID-19 and the resulting PHE had on the FY2023 rate development was the significant reduction in claims during FY2020 and FY2021. As a result, the base period was altered such that all data beyond February 2020 was deemed to have no credibility and was excluded from the base period and all trend and adjustment factor calculations. The impact of the cost reduction and expectations for FY2023 vary significantly by program. For the CHIP population, the reduced enrollment and reductions in average cost experienced during the period March 2020 through August 2020 have continued into FY2021 and FY2022 and are expected to continue until the termination of the PHE. During the last half of FY2021 and the first quarter of FY2022 the average cost per member per month and average trends by quarter continue to be lower than the historical levels and it is expected that the impact of the pandemic and the PHE on the CHIP program will continue into FY2023.

In addition to adjusting the base period used in the FY2023 rate development, we have also applied a PHE-related cost adjustment as discussed in Attachment 6. As implemented in FY2021 and FY2022, to mitigate the risk to both HHSC and the MCOs resulting from COVID-19, the following actions will be continued for FY2023:

- COVID-19 related expenditures such as testing and treatment will be excluded from the capitation rates and paid via non-risk arrangements.
- HHSC is continuing the revisions to the experience rebate tiers made for FY2022 for one additional year for FY2023. The revised structure will limit the opportunity for excessive profitability should the reduction in cost associated with the PHE extend longer than anticipated. The table below presents the revised experience rebate tiers resulting in max profit of 4.6% for each health plan.

Pre-tax Income as a % of Revenues	MCO Share	HHSC Share
≤ 3%	100%	0%
> 3% and ≤ 5%	80%	20%
> 5% and ≤ 7%	0%	100%
> 7% and ≤ 9%	0%	100%
> 9% and ≤ 12%	0%	100%
> 12%	0%	100%

IV. Administrative Fees, Taxes and Risk Margin

The rating methodology includes an explicit provision for administrative services. The amount allocated for administrative expenses is \$9.00 pmpm for CHIP non-Perinate and \$13.50 pmpm for CHIP Perinate plus 5.25% of gross premium for medical services and \$1.60 pmpm for pharmacy services. This amount is intended to provide for all administrative-related services performed by the MCO. The administrative allowance is split between a fixed and variable component in order to allocate a larger percentage of the administrative dollars to the higher cost risk groups.

The data used in developing the administrative expense assumption are the detailed administrative costs reported by the health plans in their audited financial statistical reports (FSRs) for the past four fiscal years. These reports provide a detailed breakdown of monthly administrative expenses by category including salaries, technology, equipment, marketing, legal, PBM and other expenses. These reports are provided quarterly and audited annually by an external auditor.

The table below summarizes the reported per capita administrative expenses for the past four fiscal years for the CHIP program.

	Average
FY2019	\$17.78
FY2020	17.24
FY2021	17.26
FY2022 (thru Feb 22)	23.54
Average	18.95

Based on the administrative formula included in the rate development the average administrative expense included in the capitation rates is approximately \$19.48 which is in line with the historical averages. The FY2022 average administrative cost appears to be an outlier and is attributable to the significant enrollment reduction in the CHIP program. As the PHE ends, and enrollment increases to pre-PHE levels, it is expected that average administrative cost will decrease from the FY2022 amount.

The fixed and variable components of the administrative cost assumption are not intended to account for different administrative cost categories. The combined administrative assumption is intended to be a reasonable amount to cover all administrative costs. This formula is reviewed annually to ensure consistency with the reported administrative costs. For informational purposes the fixed component of the medical administrative expense formula breaks down into two categories:

- Quality Improvement - \$3.00
- General Administration - \$6.00 for CHIP non-Perinate and \$10.50 for CHIP Perinate.

The quality improvement amount includes services such as disease management, health information technology and wellness service among other items.

The premium rates also include an amount for premium tax (1.75% of premium), maintenance tax (\$0.0725 pmpm) and a risk margin (1.50% of premium). The premium tax and maintenance tax are based on Texas Department of Insurance requirements.

V. CHIP Dental

This report details the development of the medical and prescription drug component of the premium. Information regarding the CHIP Dental program can be found in the report titled “State of Texas Medicaid and CHIP Managed Care Dental Rate Setting FY2023”.

VI. Summary

The chart below presents the results of the FY2023 CHIP rating analysis and includes all components of the premium – medical and prescription drug.

Health Plan	CHIP - Medical & Prescription Drug Rates				
	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	DSP
FY2023 CHIP Premium Rates pmpm					
Aetna - Bexar	606.17	137.53	103.86	133.65	3,100.00
Amerigroup - Bexar	606.17	136.62	146.32	109.72	3,100.00
CFHP - Bexar	606.17	157.79	139.35	144.80	3,100.00
Superior - Bexar	606.17	201.25	135.74	133.44	3,100.00
Amerigroup - Dallas	606.17	190.51	148.21	171.78	3,100.00
Molina - Dallas	606.17	177.33	129.68	149.23	3,100.00
Parkland - Dallas	606.17	205.77	152.20	165.69	3,100.00
El Paso Health - El Paso	606.17	138.97	126.79	140.98	3,100.00
Superior - El Paso	606.17	139.42	117.88	131.90	3,100.00
Amerigroup - Harris	606.17	157.56	139.24	175.12	3,100.00
CHC - Harris	606.17	206.19	147.10	199.57	3,100.00
Molina - Harris	606.17	150.11	101.89	127.78	3,100.00
TCHP - Harris	606.17	208.28	166.69	237.92	3,100.00
United - Harris	606.17	237.07	147.65	210.04	3,100.00
Amerigroup - Jefferson	606.17	118.96	169.58	602.26	3,100.00
CHC - Jefferson	606.17	173.77	177.24	427.32	3,100.00
Molina - Jefferson	606.17	74.28	93.49	167.24	3,100.00
TCHP - Jefferson	606.17	170.63	168.39	702.45	3,100.00
United - Jefferson	606.17	174.23	163.36	372.86	3,100.00
Firstcare - Lubbock	606.17	142.66	124.64	137.71	3,100.00
Superior - Lubbock	606.17	149.07	124.18	141.31	3,100.00
Driscoll - Nueces	606.17	198.26	218.77	239.28	3,100.00
Superior - Nueces	606.17	217.49	173.79	421.13	3,100.00
United - Nueces	606.17	74.07	76.25	147.78	3,100.00
Aetna - Tarrant	606.17	192.96	116.61	131.69	3,100.00
Amerigroup - Tarrant	606.17	184.85	116.18	206.87	3,100.00
Cook - Tarrant	606.17	177.01	147.44	201.65	3,100.00
BCBS - Travis	606.17	208.15	120.64	149.76	3,100.00
DCHP - Travis	606.17	160.42	124.18	151.34	3,100.00
Superior - Travis	606.17	139.95	122.30	162.46	3,100.00
Molina - RSA	606.17	139.05	120.52	144.86	3,100.00
Superior - RSA	606.17	147.49	112.58	138.91	3,100.00

CHIP Perinate - Medical & Prescription Drug Rates

<u>Health Plan</u>	<u>Newborns 198%-202%</u>	<u>Perinate <198%</u>	<u>Perinate 198%-202%</u>	<u>DSP</u>
FY2023 CHIP Perinate Premium Rates pmpm				
Aetna - Bexar	350.82	452.84	341.10	3,100.00
Amerigroup - Bexar	350.82	394.06	341.10	3,100.00
CFHP - Bexar	350.82	516.09	341.10	3,100.00
Superior - Bexar	350.82	485.57	341.10	3,100.00
Amerigroup - Dallas	350.82	417.51	341.10	3,100.00
Molina - Dallas	350.82	394.57	341.10	3,100.00
Parkland - Dallas	350.82	416.25	341.10	3,100.00
El Paso Health - El Paso	350.82	464.31	341.10	3,100.00
Superior - El Paso	350.82	450.57	341.10	3,100.00
Amerigroup - Harris	350.82	500.45	341.10	3,100.00
CHC - Harris	350.82	589.32	341.10	3,100.00
Molina - Harris	350.82	542.86	341.10	3,100.00
TCHP - Harris	350.82	608.61	341.10	3,100.00
United - Harris	350.82	553.83	341.10	3,100.00
Amerigroup - Jefferson	350.82	578.39	341.10	3,100.00
CHC - Jefferson	350.82	632.34	341.10	3,100.00
Molina - Jefferson	350.82	608.71	341.10	3,100.00
TCHP - Jefferson	350.82	592.25	341.10	3,100.00
United - Jefferson	350.82	683.48	341.10	3,100.00
Firstcare - Lubbock	350.82	435.75	341.10	3,100.00
Superior - Lubbock	350.82	433.34	341.10	3,100.00
Driscoll - Nueces	350.82	574.09	341.10	3,100.00
Superior - Nueces	350.82	435.37	341.10	3,100.00
United - Nueces	350.82	402.24	341.10	3,100.00
Aetna - Tarrant	350.82	395.85	341.10	3,100.00
Amerigroup - Tarrant	350.82	455.43	341.10	3,100.00
Cook - Tarrant	350.82	453.48	341.10	3,100.00
BCBS - Travis	350.82	437.83	341.10	3,100.00
DCHP - Travis	350.82	431.13	341.10	3,100.00
Superior - Travis	350.82	440.14	341.10	3,100.00
Molina - RSA	350.82	461.39	341.10	3,100.00
Superior - RSA	350.82	475.75	341.10	3,100.00

The chart below presents the results of the FY2023 CHIP Dental rating analysis.

<u>Health Plan</u>	<u>CHIP Dental Rates</u>			
	<u>Under Age 1</u>	<u>Ages 1-5</u>	<u>Ages 6-14</u>	<u>Ages 15-18</u>
FY2023 Premium Rates pmpm				
Dentaquest	3.37	18.07	24.69	23.65
MCNA	3.37	18.07	24.69	23.65
United	5.43	16.1	23.77	22.82

Attachment 1 presents additional information regarding the FY2023 CHIP medical and pharmacy rates including a comparison to current (FY2022) rates. This report details the development of the medical and prescription drug component of the premium. Information regarding the CHIP Dental program can be found in the report titled “State of Texas Medicaid and CHIP Managed Care Dental Rate Setting FY2023”.

Attachment 10 presents the required rating index summarizing the applicable sections from the 2022-2023 Medicaid Managed Care Rate Development Guide.

VII. Actuarial Certification of FY2023 CHIP HMO Premium Rates

We, Evan L. Dial, Khiem D. Ngo, David G. Wilkes and Dustin J. Kim are with the firm of Rudd and Wisdom, Inc., Consulting Actuaries (Rudd and Wisdom). All are Fellows of the Society of Actuaries (FSAs), members of the American Academy of Actuaries and meet the Academy's qualification standards for rendering this opinion.

Rudd and Wisdom has been retained by the Texas Health and Human Services Commission (HHSC) to assist in the development of the CHIP premium rate for the period September 1, 2022 through August 31, 2023 and to provide the actuarial certification required under Centers for Medicare and Medicaid Services (CMS) requirements 42 CFR 438.4.

We certify that the CHIP premium rate developed by HHSC and Rudd and Wisdom satisfies the following:

- (a) The premium rate has been developed in accordance with generally accepted actuarial principles and practices;
- (b) The premium rate is appropriate for the populations and services covered under the managed care contract; and
- (c) The premium rate is actuarially sound as defined in the regulations.

We have relied on historical experience data and program information provided to us by HHSC. We have reviewed the data for reasonableness but have not audited the data.

The assumptions, methodologies and factors used in developing the certified capitation rates are based on valid rate development standards and represent actual cost differences in providing covered services to the covered populations, and these differences do not vary with the rate of FFP associated with the covered populations. All rates have been developed based on the actual managed care experience of the covered populations. Any services subject to varying FFP have been separately identified and documented throughout this report.

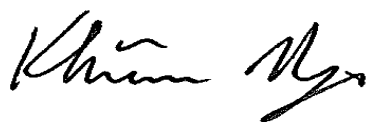
Please note that actual health plan contractor experience will differ from these projections. Rudd and Wisdom has developed these rates on behalf of the State to demonstrate compliance with the CMS requirements under 42 CFR 438.3(c), 438.3(e), 438.4, 438.5, 438.6 and 438.7. Any health plan contracting with the State should analyze its own projected premium needs before deciding whether to contract with the State.



Evan L. Dial, F.S.A., M.A.A.A.



David G. Wilkes, F.S.A., M.A.A.A.



Khiem D. Ngo, F.S.A., M.A.A.A.



Dustin J. Kim, F.S.A., M.A.A.A.

VIII. Attachments

Attachment 1 – Summary of FY2023 CHIP Medical and Pharmacy Rating Analysis

Attachment 2 – Individual Health Plan Experience Analysis

Attachment 3 – Community Experience Analysis

Attachment 4 – Trend Analysis

Attachment 5 – Provider Reimbursement and Benefit Adjustment Factors

Attachment 6 – PHE Related Cost Adjustment

Attachment 7 – Acuity Risk Adjustment

Attachment 8 – Delivery Supplemental Payment

Attachment 9 – Pay-for-Quality (P4Q) Program

Attachment 10 – Index for 2022-2023 Medicaid Managed Care Rate Development Guide

Attachment 1

Summary of FY2023 CHIP Medical and Pharmacy Rating Analysis

Exhibit A presents summary information regarding the FY2023 CHIP health plan rates. Included on the exhibit are current (FY2022) premium rates, split between medical, prescription drug, and delivery supplemental payment (DSP) components; FY2023 premium rates, split between medical, prescription drug and DSP components; and a comparison of FY2022 and FY2023 premium rates.

Exhibit B presents a comparison of the projected expenditures under the current (FY2022) premium rates and the FY2023 premium rates. The projection is split by medical (includes DSP), pharmacy and dental.

The reasons for the rate changes shown in Exhibit A are numerous and vary from SDA to SDA and risk group to risk group. The overall medical and pharmacy premium rates increased by an average of 3.1% which is slightly lower than the annual trend.

FY2023 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
Current (9/1/21-8/31/22) Medical Premium Rates pmpm								
Aetna - Bexar	282.42	106.47	78.04	100.07	511.53	368.94	299.69	3,100.00
Amerigroup - Bexar	282.42	107.79	80.49	59.54	511.53	299.82	299.69	3,100.00
CFHP - Bexar	282.42	126.83	104.38	107.03	511.53	418.40	299.69	3,100.00
Superior - Bexar	282.42	162.63	97.69	100.74	511.53	392.43	299.69	3,100.00
Amerigroup - Dallas	282.42	169.32	117.81	124.49	511.53	397.17	299.69	3,100.00
Molina - Dallas	282.42	120.09	72.96	116.46	511.53	399.29	299.69	3,100.00
Parkland - Dallas	282.42	179.67	120.39	122.55	511.53	395.65	299.69	3,100.00
El Paso Health - El Paso	282.42	124.07	92.43	100.92	511.53	388.00	299.69	3,100.00
Superior - El Paso	282.42	115.26	78.32	103.24	511.53	387.28	299.69	3,100.00
Amerigroup - Harris	282.42	144.89	96.63	125.55	511.53	406.08	299.69	3,100.00
CHC - Harris	282.42	191.38	112.91	162.10	511.53	489.35	299.69	3,100.00
Molina - Harris	282.42	131.69	78.50	108.49	511.53	452.03	299.69	3,100.00
TCHP - Harris	282.42	195.53	129.31	189.30	511.53	503.00	299.69	3,100.00
United - Harris	282.42	189.64	114.73	137.63	511.53	489.52	299.69	3,100.00
Amerigroup - Jefferson	282.42	107.98	117.28	217.40	511.53	494.84	299.69	3,100.00
CHC - Jefferson	282.42	162.47	101.51	161.91	511.53	530.84	299.69	3,100.00
Molina - Jefferson	282.42	62.84	59.53	70.26	511.53	530.71	299.69	3,100.00
TCHP - Jefferson	282.42	158.64	120.76	276.48	511.53	496.87	299.69	3,100.00
United - Jefferson	282.42	147.23	105.66	139.87	511.53	570.50	299.69	3,100.00
Firstcare - Lubbock	282.42	125.44	85.13	88.50	511.53	352.71	299.69	3,100.00
Superior - Lubbock	282.42	128.03	86.40	91.74	511.53	362.05	299.69	3,100.00
Driscoll - Nueces	282.42	177.65	158.04	192.53	511.53	469.51	299.69	3,100.00
Superior - Nueces	282.42	181.63	117.12	358.01	511.53	352.25	299.69	3,100.00
United - Nueces	282.42	59.50	54.83	97.66	511.53	320.21	299.69	3,100.00
Aetna - Tarrant	282.42	156.15	78.52	102.14	511.53	330.61	299.69	3,100.00
Amerigroup - Tarrant	282.42	164.99	85.29	142.96	511.53	344.60	299.69	3,100.00
Cook - Tarrant	282.42	158.48	106.92	143.57	511.53	343.63	299.69	3,100.00
BCBS - Travis	282.42	194.89	79.07	106.18	511.53	388.71	299.69	3,100.00
DCHP - Travis	282.42	151.04	81.37	98.10	511.53	387.44	299.69	3,100.00
Superior - Travis	282.42	133.80	80.10	113.23	511.53	387.08	299.69	3,100.00
Molina - RSA	282.42	115.30	82.44	108.35	511.53	369.39	299.69	3,100.00
Superior - RSA	282.42	120.81	78.66	101.66	511.53	386.50	299.69	3,100.00

FY2023 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
Current (9/1/21-8/31/22) Prescription Drug Premium Rates pmpm								
Aetna - Bexar	8.84	15.35	25.03	34.69	8.50	60.61	69.80	
Amerigroup - Bexar	8.84	19.68	58.83	49.41	8.50	66.32	69.80	
CFHP - Bexar	8.84	18.29	33.47	37.10	8.50	68.73	69.80	
Superior - Bexar	8.84	23.45	31.33	34.92	8.50	64.46	69.80	
Amerigroup - Dallas	8.84	14.31	29.48	38.09	8.50	31.70	69.80	
Molina - Dallas	8.84	32.03	24.58	29.28	8.50	26.29	69.80	
Parkland - Dallas	8.84	15.19	30.13	37.49	8.50	31.58	69.80	
El Paso Health - El Paso	8.84	12.56	35.00	35.45	8.50	77.08	69.80	
Superior - El Paso	8.84	11.67	29.66	36.27	8.50	76.94	69.80	
Amerigroup - Harris	8.84	11.50	34.19	35.14	8.50	75.37	69.80	
CHC - Harris	8.84	17.06	28.91	31.07	8.50	81.05	69.80	
Molina - Harris	8.84	11.74	20.10	20.79	8.50	74.87	69.80	
TCHP - Harris	8.84	17.44	33.11	36.28	8.50	83.31	69.80	
United - Harris	8.84	16.91	29.38	26.38	8.50	81.08	69.80	
Amerigroup - Jefferson	8.84	9.22	34.55	25.69	8.50	72.64	69.80	
CHC - Jefferson	8.84	12.72	59.17	38.65	8.50	83.24	69.80	
Molina - Jefferson	8.84	12.04	25.28	8.69	8.50	54.99	69.80	
TCHP - Jefferson	8.84	13.54	35.58	32.67	8.50	72.94	69.80	
United - Jefferson	8.84	16.86	40.80	35.77	8.50	89.90	69.80	
Firstcare - Lubbock	8.84	12.54	37.01	39.69	8.50	50.43	69.80	
Superior - Lubbock	8.84	9.22	34.31	39.03	8.50	48.20	69.80	
Driscoll - Nueces	8.84	16.21	57.09	46.47	8.50	78.12	69.80	
Superior - Nueces	8.84	14.69	53.79	76.22	8.50	56.99	69.80	
United - Nueces	8.84	11.97	17.65	50.84	8.50	56.78	69.80	
Aetna - Tarrant	8.84	13.64	26.20	32.71	8.50	101.88	69.80	
Amerigroup - Tarrant	8.84	14.41	28.46	45.78	8.50	106.19	69.80	
Cook - Tarrant	8.84	13.84	35.68	45.98	8.50	105.89	69.80	
BCBS - Travis	8.84	15.42	37.65	34.66	8.50	32.56	69.80	
DCHP - Travis	8.84	13.10	37.19	46.83	8.50	25.31	69.80	
Superior - Travis	8.84	10.59	38.14	36.96	8.50	32.43	69.80	
Molina - RSA	8.84	17.99	33.82	31.78	8.50	75.97	69.80	
Superior - RSA	8.84	18.85	32.27	29.81	8.50	79.49	69.80	

FY2023 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
Current Total Premium Rates pmpm								
Aetna - Bexar	291.26	121.82	103.07	134.76	520.03	429.55	369.49	3,100.00
Amerigroup - Bexar	291.26	127.47	139.32	108.95	520.03	366.14	369.49	3,100.00
CFHP - Bexar	291.26	145.12	137.85	144.13	520.03	487.13	369.49	3,100.00
Superior - Bexar	291.26	186.08	129.02	135.66	520.03	456.89	369.49	3,100.00
Amerigroup - Dallas	291.26	183.63	147.29	162.58	520.03	428.87	369.49	3,100.00
Molina - Dallas	291.26	152.12	97.54	145.74	520.03	425.58	369.49	3,100.00
Parkland - Dallas	291.26	194.86	150.52	160.04	520.03	427.23	369.49	3,100.00
El Paso Health - El Paso	291.26	136.63	127.43	136.37	520.03	465.08	369.49	3,100.00
Superior - El Paso	291.26	126.93	107.98	139.51	520.03	464.22	369.49	3,100.00
Amerigroup - Harris	291.26	156.39	130.82	160.69	520.03	481.45	369.49	3,100.00
CHC - Harris	291.26	208.44	141.82	193.17	520.03	570.40	369.49	3,100.00
Molina - Harris	291.26	143.43	98.60	129.28	520.03	526.90	369.49	3,100.00
TCHP - Harris	291.26	212.97	162.42	225.58	520.03	586.31	369.49	3,100.00
United - Harris	291.26	206.55	144.11	164.01	520.03	570.60	369.49	3,100.00
Amerigroup - Jefferson	291.26	117.20	151.83	243.09	520.03	567.48	369.49	3,100.00
CHC - Jefferson	291.26	175.19	160.68	200.56	520.03	614.08	369.49	3,100.00
Molina - Jefferson	291.26	74.88	84.81	78.95	520.03	585.70	369.49	3,100.00
TCHP - Jefferson	291.26	172.18	156.34	309.15	520.03	569.81	369.49	3,100.00
United - Jefferson	291.26	164.09	146.46	175.64	520.03	660.40	369.49	3,100.00
Firstcare - Lubbock	291.26	137.98	122.14	128.19	520.03	403.14	369.49	3,100.00
Superior - Lubbock	291.26	137.25	120.71	130.77	520.03	410.25	369.49	3,100.00
Driscoll - Nueces	291.26	193.86	215.13	239.00	520.03	547.63	369.49	3,100.00
Superior - Nueces	291.26	196.32	170.91	434.23	520.03	409.24	369.49	3,100.00
United - Nueces	291.26	71.47	72.48	148.50	520.03	376.99	369.49	3,100.00
Aetna - Tarrant	291.26	169.79	104.72	134.85	520.03	432.49	369.49	3,100.00
Amerigroup - Tarrant	291.26	179.40	113.75	188.74	520.03	450.79	369.49	3,100.00
Cook - Tarrant	291.26	172.32	142.60	189.55	520.03	449.52	369.49	3,100.00
BCBS - Travis	291.26	210.31	116.72	140.84	520.03	421.27	369.49	3,100.00
DCHP - Travis	291.26	164.14	118.56	144.93	520.03	412.75	369.49	3,100.00
Superior - Travis	291.26	144.39	118.24	150.19	520.03	419.51	369.49	3,100.00
Molina - RSA	291.26	133.29	116.26	140.13	520.03	445.36	369.49	3,100.00
Superior - RSA	291.26	139.66	110.93	131.47	520.03	465.99	369.49	3,100.00

FY2023 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2023 Medical Premium Rates pmpm								
Aetna - Bexar	597.31	123.20	77.73	98.93	345.28	389.56	277.42	3,100.00
Amerigroup - Bexar	597.31	117.85	83.41	59.79	345.28	323.45	277.42	3,100.00
CFHP - Bexar	597.31	141.35	104.29	107.18	345.28	443.98	277.42	3,100.00
Superior - Bexar	597.31	180.28	101.59	98.77	345.28	417.72	277.42	3,100.00
Amerigroup - Dallas	597.31	175.17	117.27	130.87	345.28	383.72	277.42	3,100.00
Molina - Dallas	597.31	163.05	102.61	113.69	345.28	362.63	277.42	3,100.00
Parkland - Dallas	597.31	189.20	120.43	126.23	345.28	382.56	277.42	3,100.00
El Paso Health - El Paso	597.31	127.34	92.73	105.58	345.28	387.21	277.42	3,100.00
Superior - El Paso	597.31	128.33	89.19	103.24	345.28	367.72	277.42	3,100.00
Amerigroup - Harris	597.31	144.79	103.36	134.82	345.28	421.87	277.42	3,100.00
CHC - Harris	597.31	188.06	117.10	165.26	345.28	506.00	277.42	3,100.00
Molina - Harris	597.31	136.91	81.11	105.81	345.28	466.11	277.42	3,100.00
TCHP - Harris	597.31	189.97	132.70	197.02	345.28	522.56	277.42	3,100.00
United - Harris	597.31	221.38	117.65	161.24	345.28	486.11	277.42	3,100.00
Amerigroup - Jefferson	597.31	109.85	133.02	573.11	345.28	504.41	277.42	3,100.00
CHC - Jefferson	597.31	161.23	116.14	385.34	345.28	546.70	277.42	3,100.00
Molina - Jefferson	597.31	62.42	67.44	157.94	345.28	551.67	277.42	3,100.00
TCHP - Jefferson	597.31	157.56	132.09	668.45	345.28	516.50	277.42	3,100.00
United - Jefferson	597.31	157.62	121.24	334.01	345.28	590.98	277.42	3,100.00
Firstcare - Lubbock	597.31	130.76	86.56	92.13	345.28	386.71	277.42	3,100.00
Superior - Lubbock	597.31	140.28	88.23	96.22	345.28	386.77	277.42	3,100.00
Driscoll - Nueces	597.31	183.41	163.52	187.83	345.28	483.70	277.42	3,100.00
Superior - Nueces	597.31	203.81	121.26	338.62	345.28	368.93	277.42	3,100.00
United - Nueces	597.31	62.89	58.99	92.82	345.28	336.03	277.42	3,100.00
Aetna - Tarrant	597.31	175.85	93.49	106.40	345.28	290.22	277.42	3,100.00
Amerigroup - Tarrant	597.31	168.72	88.38	155.37	345.28	349.76	277.42	3,100.00
Cook - Tarrant	597.31	161.57	112.16	151.45	345.28	348.26	277.42	3,100.00
BCBS - Travis	597.31	193.69	83.34	112.81	345.28	406.32	277.42	3,100.00
DCHP - Travis	597.31	148.24	86.69	101.22	345.28	406.62	277.42	3,100.00
Superior - Travis	597.31	130.23	84.49	122.38	345.28	408.47	277.42	3,100.00
Molina - RSA	597.31	120.10	84.72	109.97	345.28	382.90	277.42	3,100.00
Superior - RSA	597.31	127.39	79.14	105.45	345.28	394.82	277.42	3,100.00

FY2023 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2023 Prescription Drug Premium Rates pmpm								
Aetna - Bexar	8.86	14.33	26.13	34.72	5.54	63.28	63.68	
Amerigroup - Bexar	8.86	18.77	62.91	49.93	5.54	70.61	63.68	
CFHP - Bexar	8.86	16.44	35.06	37.62	5.54	72.11	63.68	
Superior - Bexar	8.86	20.97	34.15	34.67	5.54	67.85	63.68	
Amerigroup - Dallas	8.86	15.34	30.94	40.91	5.54	33.79	63.68	
Molina - Dallas	8.86	14.28	27.07	35.54	5.54	31.94	63.68	
Parkland - Dallas	8.86	16.57	31.77	39.46	5.54	33.69	63.68	
El Paso Health - El Paso	8.86	11.63	34.06	35.40	5.54	77.10	63.68	
Superior - El Paso	8.86	11.09	28.69	28.66	5.54	82.85	63.68	
Amerigroup - Harris	8.86	12.77	35.88	40.30	5.54	78.58	63.68	
CHC - Harris	8.86	18.13	30.00	34.31	5.54	83.32	63.68	
Molina - Harris	8.86	13.20	20.78	21.97	5.54	76.75	63.68	
TCHP - Harris	8.86	18.31	33.99	40.90	5.54	86.05	63.68	
United - Harris	8.86	15.69	30.00	48.80	5.54	67.72	63.68	
Amerigroup - Jefferson	8.86	9.11	36.56	29.15	5.54	73.98	63.68	
CHC - Jefferson	8.86	12.54	61.10	41.98	5.54	85.64	63.68	
Molina - Jefferson	8.86	11.86	26.05	9.30	5.54	57.04	63.68	
TCHP - Jefferson	8.86	13.07	36.30	34.00	5.54	75.75	63.68	
United - Jefferson	8.86	16.61	42.12	38.85	5.54	92.50	63.68	
Firstcare - Lubbock	8.86	11.90	38.08	45.58	5.54	49.04	63.68	
Superior - Lubbock	8.86	8.79	35.95	45.09	5.54	46.57	63.68	
Driscoll - Nueces	8.86	14.85	55.25	51.45	5.54	90.39	63.68	
Superior - Nueces	8.86	13.68	52.53	82.51	5.54	66.44	63.68	
United - Nueces	8.86	11.18	17.26	54.96	5.54	66.21	63.68	
Aetna - Tarrant	8.86	17.11	23.12	25.29	5.54	105.63	63.68	
Amerigroup - Tarrant	8.86	16.13	27.80	51.50	5.54	105.67	63.68	
Cook - Tarrant	8.86	15.44	35.28	50.20	5.54	105.22	63.68	
BCBS - Travis	8.86	14.46	37.30	36.95	5.54	31.51	63.68	
DCHP - Travis	8.86	12.18	37.49	50.12	5.54	24.51	63.68	
Superior - Travis	8.86	9.72	37.81	40.08	5.54	31.67	63.68	
Molina - RSA	8.86	18.95	35.80	34.89	5.54	78.49	63.68	
Superior - RSA	8.86	20.10	33.44	33.46	5.54	80.93	63.68	

FY2023 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2023 Total Premium Rates pmpm								
Aetna - Bexar	606.17	137.53	103.86	133.65	350.82	452.84	341.10	3,100.00
Amerigroup - Bexar	606.17	136.62	146.32	109.72	350.82	394.06	341.10	3,100.00
CFHP - Bexar	606.17	157.79	139.35	144.80	350.82	516.09	341.10	3,100.00
Superior - Bexar	606.17	201.25	135.74	133.44	350.82	485.57	341.10	3,100.00
Amerigroup - Dallas	606.17	190.51	148.21	171.78	350.82	417.51	341.10	3,100.00
Molina - Dallas	606.17	177.33	129.68	149.23	350.82	394.57	341.10	3,100.00
Parkland - Dallas	606.17	205.77	152.20	165.69	350.82	416.25	341.10	3,100.00
El Paso Health - El Paso	606.17	138.97	126.79	140.98	350.82	464.31	341.10	3,100.00
Superior - El Paso	606.17	139.42	117.88	131.90	350.82	450.57	341.10	3,100.00
Amerigroup - Harris	606.17	157.56	139.24	175.12	350.82	500.45	341.10	3,100.00
CHC - Harris	606.17	206.19	147.10	199.57	350.82	589.32	341.10	3,100.00
Molina - Harris	606.17	150.11	101.89	127.78	350.82	542.86	341.10	3,100.00
TCHP - Harris	606.17	208.28	166.69	237.92	350.82	608.61	341.10	3,100.00
United - Harris	606.17	237.07	147.65	210.04	350.82	553.83	341.10	3,100.00
Amerigroup - Jefferson	606.17	118.96	169.58	602.26	350.82	578.39	341.10	3,100.00
CHC - Jefferson	606.17	173.77	177.24	427.32	350.82	632.34	341.10	3,100.00
Molina - Jefferson	606.17	74.28	93.49	167.24	350.82	608.71	341.10	3,100.00
TCHP - Jefferson	606.17	170.63	168.39	702.45	350.82	592.25	341.10	3,100.00
United - Jefferson	606.17	174.23	163.36	372.86	350.82	683.48	341.10	3,100.00
Firstcare - Lubbock	606.17	142.66	124.64	137.71	350.82	435.75	341.10	3,100.00
Superior - Lubbock	606.17	149.07	124.18	141.31	350.82	433.34	341.10	3,100.00
Driscoll - Nueces	606.17	198.26	218.77	239.28	350.82	574.09	341.10	3,100.00
Superior - Nueces	606.17	217.49	173.79	421.13	350.82	435.37	341.10	3,100.00
United - Nueces	606.17	74.07	76.25	147.78	350.82	402.24	341.10	3,100.00
Aetna - Tarrant	606.17	192.96	116.61	131.69	350.82	395.85	341.10	3,100.00
Amerigroup - Tarrant	606.17	184.85	116.18	206.87	350.82	455.43	341.10	3,100.00
Cook - Tarrant	606.17	177.01	147.44	201.65	350.82	453.48	341.10	3,100.00
BCBS - Travis	606.17	208.15	120.64	149.76	350.82	437.83	341.10	3,100.00
DCHP - Travis	606.17	160.42	124.18	151.34	350.82	431.13	341.10	3,100.00
Superior - Travis	606.17	139.95	122.30	162.46	350.82	440.14	341.10	3,100.00
Molina - RSA	606.17	139.05	120.52	144.86	350.82	461.39	341.10	3,100.00
Superior - RSA	606.17	147.49	112.58	138.91	350.82	475.75	341.10	3,100.00

FY2023 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2023 Medical Premium Rate Change								
Aetna - Bexar	111.5%	15.7%	-0.4%	-1.1%	-32.5%	5.6%	-7.4%	0.0%
Amerigroup - Bexar	111.5%	9.3%	3.6%	0.4%	-32.5%	7.9%	-7.4%	0.0%
CFHP - Bexar	111.5%	11.4%	-0.1%	0.1%	-32.5%	6.1%	-7.4%	0.0%
Superior - Bexar	111.5%	10.9%	4.0%	-2.0%	-32.5%	6.4%	-7.4%	0.0%
Amerigroup - Dallas	111.5%	3.5%	-0.5%	5.1%	-32.5%	-3.4%	-7.4%	0.0%
Molina - Dallas	111.5%	35.8%	40.6%	-2.4%	-32.5%	-9.2%	-7.4%	0.0%
Parkland - Dallas	111.5%	5.3%	0.0%	3.0%	-32.5%	-3.3%	-7.4%	0.0%
El Paso Health - El Paso	111.5%	2.6%	0.3%	4.6%	-32.5%	-0.2%	-7.4%	0.0%
Superior - El Paso	111.5%	11.3%	13.9%	0.0%	-32.5%	-5.1%	-7.4%	0.0%
Amerigroup - Harris	111.5%	-0.1%	7.0%	7.4%	-32.5%	3.9%	-7.4%	0.0%
CHC - Harris	111.5%	-1.7%	3.7%	1.9%	-32.5%	3.4%	-7.4%	0.0%
Molina - Harris	111.5%	4.0%	3.3%	-2.5%	-32.5%	3.1%	-7.4%	0.0%
TCHP - Harris	111.5%	-2.8%	2.6%	4.1%	-32.5%	3.9%	-7.4%	0.0%
United - Harris	111.5%	16.7%	2.5%	17.2%	-32.5%	-0.7%	-7.4%	0.0%
Amerigroup - Jefferson	111.5%	1.7%	13.4%	163.6%	-32.5%	1.9%	-7.4%	0.0%
CHC - Jefferson	111.5%	-0.8%	14.4%	138.0%	-32.5%	3.0%	-7.4%	0.0%
Molina - Jefferson	111.5%	-0.7%	13.3%	124.8%	-32.5%	3.9%	-7.4%	0.0%
TCHP - Jefferson	111.5%	-0.7%	9.4%	141.8%	-32.5%	4.0%	-7.4%	0.0%
United - Jefferson	111.5%	7.1%	14.7%	138.8%	-32.5%	3.6%	-7.4%	0.0%
Firstcare - Lubbock	111.5%	4.2%	1.7%	4.1%	-32.5%	9.6%	-7.4%	0.0%
Superior - Lubbock	111.5%	9.6%	2.1%	4.9%	-32.5%	6.8%	-7.4%	0.0%
Driscoll - Nueces	111.5%	3.2%	3.5%	-2.4%	-32.5%	3.0%	-7.4%	0.0%
Superior - Nueces	111.5%	12.2%	3.5%	-5.4%	-32.5%	4.7%	-7.4%	0.0%
United - Nueces	111.5%	5.7%	7.6%	-5.0%	-32.5%	4.9%	-7.4%	0.0%
Aetna - Tarrant	111.5%	12.6%	19.1%	4.2%	-32.5%	-12.2%	-7.4%	0.0%
Amerigroup - Tarrant	111.5%	2.3%	3.6%	8.7%	-32.5%	1.5%	-7.4%	0.0%
Cook - Tarrant	111.5%	1.9%	4.9%	5.5%	-32.5%	1.3%	-7.4%	0.0%
BCBS - Travis	111.5%	-0.6%	5.4%	6.2%	-32.5%	4.5%	-7.4%	0.0%
DCHP - Travis	111.5%	-1.9%	6.5%	3.2%	-32.5%	5.0%	-7.4%	0.0%
Superior - Travis	111.5%	-2.7%	5.5%	8.1%	-32.5%	5.5%	-7.4%	0.0%
Molina - RSA	111.5%	4.2%	2.8%	1.5%	-32.5%	3.7%	-7.4%	0.0%
Superior - RSA	111.5%	5.4%	0.6%	3.7%	-32.5%	2.2%	-7.4%	0.0%

FY2023 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2023 Prescription Drug Premium Rate Change								
Aetna - Bexar	0.2%	-6.6%	4.4%	0.1%	-34.8%	4.4%	-8.8%	
Amerigroup - Bexar	0.2%	-4.6%	6.9%	1.1%	-34.8%	6.5%	-8.8%	
CFHP - Bexar	0.2%	-10.1%	4.8%	1.4%	-34.8%	4.9%	-8.8%	
Superior - Bexar	0.2%	-10.6%	9.0%	-0.7%	-34.8%	5.3%	-8.8%	
Amerigroup - Dallas	0.2%	7.2%	5.0%	7.4%	-34.8%	6.6%	-8.8%	
Molina - Dallas	0.2%	-55.4%	10.1%	21.4%	-34.8%	21.5%	-8.8%	
Parkland - Dallas	0.2%	9.1%	5.4%	5.3%	-34.8%	6.7%	-8.8%	
El Paso Health - El Paso	0.2%	-7.4%	-2.7%	-0.1%	-34.8%	0.0%	-8.8%	
Superior - El Paso	0.2%	-5.0%	-3.3%	-21.0%	-34.8%	7.7%	-8.8%	
Amerigroup - Harris	0.2%	11.0%	4.9%	14.7%	-34.8%	4.3%	-8.8%	
CHC - Harris	0.2%	6.3%	3.8%	10.4%	-34.8%	2.8%	-8.8%	
Molina - Harris	0.2%	12.4%	3.4%	5.7%	-34.8%	2.5%	-8.8%	
TCHP - Harris	0.2%	5.0%	2.7%	12.7%	-34.8%	3.3%	-8.8%	
United - Harris	0.2%	-7.2%	2.1%	85.0%	-34.8%	-16.5%	-8.8%	
Amerigroup - Jefferson	0.2%	-1.2%	5.8%	13.5%	-34.8%	1.8%	-8.8%	
CHC - Jefferson	0.2%	-1.4%	3.3%	8.6%	-34.8%	2.9%	-8.8%	
Molina - Jefferson	0.2%	-1.5%	3.0%	7.0%	-34.8%	3.7%	-8.8%	
TCHP - Jefferson	0.2%	-3.5%	2.0%	4.1%	-34.8%	3.9%	-8.8%	
United - Jefferson	0.2%	-1.5%	3.2%	8.6%	-34.8%	2.9%	-8.8%	
Firstcare - Lubbock	0.2%	-5.1%	2.9%	14.8%	-34.8%	-2.8%	-8.8%	
Superior - Lubbock	0.2%	-4.7%	4.8%	15.5%	-34.8%	-3.4%	-8.8%	
Driscoll - Nueces	0.2%	-8.4%	-3.2%	10.7%	-34.8%	15.7%	-8.8%	
Superior - Nueces	0.2%	-6.9%	-2.3%	8.3%	-34.8%	16.6%	-8.8%	
United - Nueces	0.2%	-6.6%	-2.2%	8.1%	-34.8%	16.6%	-8.8%	
Aetna - Tarrant	0.2%	25.4%	-11.8%	-22.7%	-34.8%	3.7%	-8.8%	
Amerigroup - Tarrant	0.2%	11.9%	-2.3%	12.5%	-34.8%	-0.5%	-8.8%	
Cook - Tarrant	0.2%	11.6%	-1.1%	9.2%	-34.8%	-0.6%	-8.8%	
BCBS - Travis	0.2%	-6.2%	-0.9%	6.6%	-34.8%	-3.2%	-8.8%	
DCHP - Travis	0.2%	-7.0%	0.8%	7.0%	-34.8%	-3.2%	-8.8%	
Superior - Travis	0.2%	-8.2%	-0.9%	8.4%	-34.8%	-2.3%	-8.8%	
Molina - RSA	0.2%	5.3%	5.9%	9.8%	-34.8%	3.3%	-8.8%	
Superior - RSA	0.2%	6.6%	3.6%	12.2%	-34.8%	1.8%	-8.8%	

FY2023 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2023 Total Premium Rate Change								
Aetna - Bexar	108.1%	12.9%	0.8%	-0.8%	-32.5%	5.4%	-7.7%	0.0%
Amerigroup - Bexar	108.1%	7.2%	5.0%	0.7%	-32.5%	7.6%	-7.7%	0.0%
CFHP - Bexar	108.1%	8.7%	1.1%	0.5%	-32.5%	5.9%	-7.7%	0.0%
Superior - Bexar	108.1%	8.2%	5.2%	-1.6%	-32.5%	6.3%	-7.7%	0.0%
Amerigroup - Dallas	108.1%	3.7%	0.6%	5.7%	-32.5%	-2.6%	-7.7%	0.0%
Molina - Dallas	108.1%	16.6%	33.0%	2.4%	-32.5%	-7.3%	-7.7%	0.0%
Parkland - Dallas	108.1%	5.6%	1.1%	3.5%	-32.5%	-2.6%	-7.7%	0.0%
El Paso Health - El Paso	108.1%	1.7%	-0.5%	3.4%	-32.5%	-0.2%	-7.7%	0.0%
Superior - El Paso	108.1%	9.8%	9.2%	-5.5%	-32.5%	-2.9%	-7.7%	0.0%
Amerigroup - Harris	108.1%	0.7%	6.4%	9.0%	-32.5%	3.9%	-7.7%	0.0%
CHC - Harris	108.1%	-1.1%	3.7%	3.3%	-32.5%	3.3%	-7.7%	0.0%
Molina - Harris	108.1%	4.7%	3.3%	-1.2%	-32.5%	3.0%	-7.7%	0.0%
TCHP - Harris	108.1%	-2.2%	2.6%	5.5%	-32.5%	3.8%	-7.7%	0.0%
United - Harris	108.1%	14.8%	2.5%	28.1%	-32.5%	-2.9%	-7.7%	0.0%
Amerigroup - Jefferson	108.1%	1.5%	11.7%	147.8%	-32.5%	1.9%	-7.7%	0.0%
CHC - Jefferson	108.1%	-0.8%	10.3%	113.1%	-32.5%	3.0%	-7.7%	0.0%
Molina - Jefferson	108.1%	-0.8%	10.2%	111.8%	-32.5%	3.9%	-7.7%	0.0%
TCHP - Jefferson	108.1%	-0.9%	7.7%	127.2%	-32.5%	3.9%	-7.7%	0.0%
United - Jefferson	108.1%	6.2%	11.5%	112.3%	-32.5%	3.5%	-7.7%	0.0%
Firstcare - Lubbock	108.1%	3.4%	2.0%	7.4%	-32.5%	8.1%	-7.7%	0.0%
Superior - Lubbock	108.1%	8.6%	2.9%	8.1%	-32.5%	5.6%	-7.7%	0.0%
Driscoll - Nueces	108.1%	2.3%	1.7%	0.1%	-32.5%	4.8%	-7.7%	0.0%
Superior - Nueces	108.1%	10.8%	1.7%	-3.0%	-32.5%	6.4%	-7.7%	0.0%
United - Nueces	108.1%	3.6%	5.2%	-0.5%	-32.5%	6.7%	-7.7%	0.0%
Aetna - Tarrant	108.1%	13.6%	11.4%	-2.3%	-32.5%	-8.5%	-7.7%	0.0%
Amerigroup - Tarrant	108.1%	3.0%	2.1%	9.6%	-32.5%	1.0%	-7.7%	0.0%
Cook - Tarrant	108.1%	2.7%	3.4%	6.4%	-32.5%	0.9%	-7.7%	0.0%
BCBS - Travis	108.1%	-1.0%	3.4%	6.3%	-32.5%	3.9%	-7.7%	0.0%
DCHP - Travis	108.1%	-2.3%	4.7%	4.4%	-32.5%	4.5%	-7.7%	0.0%
Superior - Travis	108.1%	-3.1%	3.4%	8.2%	-32.5%	4.9%	-7.7%	0.0%
Molina - RSA	108.1%	4.3%	3.7%	3.4%	-32.5%	3.6%	-7.7%	0.0%
Superior - RSA	108.1%	5.6%	1.5%	5.7%	-32.5%	2.1%	-7.7%	0.0%

FY2023 CHIP Rating Summary
Projected Expenditures

	Projected PMPM		Projected FY2023 Premium		% Rate Change
	<u>FY2022 Rates</u>	<u>FY2023 Rates</u>	<u>FY2022 Rates</u>	<u>FY2023 Rates</u>	
Medical (1)	154.33	159.30	446,774,093	461,154,996	3.2%
Pharmacy	33.99	35.22	98,390,989	101,966,399	3.6%
Dental	22.64	22.93	58,065,162	58,829,259	1.3%
Total			603,230,244	621,950,654	3.1%

Notes:
(1) Includes Delivery Supplemental Payments.

Attachment 2

Individual Health Plan Experience Analysis

The following exhibits present a summary of the experience analysis performed for each participating health plan for medical services. These exhibits use hypothetical experience data from a sample health plan. The actual analysis is based on experience data provided by each plan. This data was checked for reasonableness by comparing to other data sources provided by HHSC, the EQRO and the health plan. Below is a brief description of each of the exhibits contained in this attachment.

Exhibit A. This exhibit shows monthly enrollment and earned premium by age group for the period September 2018 through February 2022. This information was provided by HHSC.

Exhibit B. This exhibit shows a sample of a claim lag report. This report includes claim amounts by payment month and month of service. We analyzed claims experience for each plan by age group for the period September 2018 through February 2022.

Exhibit C. This exhibit shows the calculation of estimated monthly incurred claims. The exhibit includes the following information: (i) monthly enrollment, (ii) claim amounts incurred in that month and paid through February 28, 2022, (iii) estimated proportion of that month's incurred claims paid through February 28, 2022 (completion factor), (iv) estimated incurred claims, (v) estimated incurred claims pmpm and (vi) the ratio of this month's incurred claims pmpm to the same statistic from one year ago (trend factor). The assumed completion factors and estimated incurred claims were derived based on the actual historical claims payment pattern of the health plan.

Exhibit D. This exhibit is a summary of the sample health plan's projected FY2023 cost based on the plan's actual experience. The top of the exhibit shows summary base period enrollment, premium and claims experience. Trend assumptions for FY2022 and FY2023 are used to project the average base period claims cost to FY2023. Following that are several adjustments for benefit and provider reimbursement changes.

In addition to incurred claims, provision is also made for services that are capitated by the health plan, such as vision and behavioral health services. The cost of reinsurance is also considered. In developing the cost of reinsurance, an assumption is made regarding how much the plan is expected to receive in reinsurance recoveries (reimbursements from the reinsurance company for large claims). We have assumed that the net cost of reinsurance (reinsurance premium less reinsurance recoveries) is the minimum of (a) the actual reinsurance premium rate and (b) \$0.50 pmpm.

The rating methodology includes an explicit provision for administrative expenses. The amount allocated for administrative expenses is \$9.00 per member per month (pmpm) for the CHIP non-Perinate program and \$13.50 pmpm for the CHIP Perinate program plus 5.25% of gross premium. Provisions are also included for risk margin (1.50% of gross premium), premium tax (1.75%) and maintenance tax (\$.0725 pmpm).

At the bottom of Exhibit D is a summary of the projected FY2023 cost based on the above assumptions. A similar analysis was performed for prescription drug services.

Sample Health Plan
Enrollment and Premium Experience

Month	Number of Members				Total Members	Premium	Premium pmpm
	<1	1-5	6-14	15-18			
Sep-18	124	5,188	15,901	5,132	26,345	1,912,339	72.59
Oct-18	114	4,896	15,278	4,918	25,206	1,827,852	72.52
Nov-18	104	4,410	14,441	4,721	23,676	1,719,029	72.61
Dec-18	98	4,151	13,842	4,541	22,632	1,643,508	72.62
Jan-19	84	3,945	13,248	4,363	21,640	1,569,212	72.51
Feb-19	80	3,778	12,940	4,286	21,084	1,529,380	72.54
Mar-19	85	3,602	12,610	4,236	20,533	1,493,965	72.76
Apr-19	72	3,458	12,326	4,107	19,963	1,448,064	72.54
May-19	68	3,360	12,063	4,013	19,504	1,413,847	72.49
Jun-19	57	3,315	11,940	3,987	19,299	1,396,455	72.36
Jul-19	54	3,298	11,968	4,010	19,330	1,398,322	72.34
Aug-19	48	3,276	11,957	4,033	19,314	1,396,413	72.30
Sep-19	52	3,228	11,979	4,045	19,304	1,497,835	77.59
Oct-19	44	3,134	11,888	3,989	19,055	1,473,875	77.35
Nov-19	45	3,062	11,636	3,994	18,737	1,453,300	77.56
Dec-19	46	3,004	11,658	3,966	18,674	1,446,630	77.47
Jan-20	43	2,927	11,618	3,986	18,574	1,438,250	77.43
Feb-20	42	2,904	11,562	3,948	18,456	1,428,000	77.37
Mar-20	45	2,878	11,497	3,941	18,361	1,422,305	77.46
Apr-20	45	2,910	11,557	3,950	18,463	1,430,030	77.46
May-20	45	2,927	11,645	3,985	18,603	1,440,864	77.45
Jun-20	46	2,950	11,747	4,021	18,764	1,453,372	77.46
Jul-20	46	2,982	11,862	4,058	18,949	1,467,683	77.45
Aug-20	47	3,013	11,992	4,103	19,155	1,483,648	77.45
Sep-20	46	3,002	11,971	4,090	19,109	1,449,030	75.83
Oct-20	45	2,991	11,950	4,077	19,063	1,444,963	75.80
Nov-20	44	2,980	11,929	4,064	19,017	1,440,896	75.77
Dec-20	43	2,969	11,908	4,051	18,971	1,436,829	75.74
Jan-21	42	2,958	11,887	4,038	18,925	1,432,762	75.71
Feb-21	41	2,947	11,866	4,025	18,879	1,428,695	75.67
Mar-21	40	2,936	11,845	4,012	18,833	1,424,628	75.64
Apr-21	44	2,964	11,847	4,040	18,895	1,431,973	75.79
May-21	44	2,994	11,965	4,080	19,083	1,446,064	75.78
Jun-21	43	3,024	12,085	4,121	19,273	1,459,960	75.75
Jul-21	43	3,039	12,145	4,142	19,369	1,467,176	75.75
Aug-21	47	3,059	12,226	4,170	19,502	1,478,560	75.82
Sep-21	47	3,065	12,252	4,179	19,543	1,561,595	79.91
Oct-21	47	3,068	12,264	4,183	19,562	1,563,110	79.91
Nov-21	47	3,075	12,292	4,193	19,607	1,566,706	79.91
Dec-21	45	3,078	12,304	4,197	19,624	1,567,980	79.90
Jan-22	48	3,081	12,316	4,201	19,646	1,569,858	79.91
Feb-22	46	3,084	12,328	4,205	19,663	1,571,132	79.90
FY2019	988	46,677	158,514	52,347	258,526	18,748,386	72.52
FY2020	547	35,920	140,641	47,987	225,095	17,435,792	77.46
FY2021	520	35,865	143,623	48,913	228,922	17,341,535	75.75
3/19-2/20	656	38,568	143,205	48,314	230,743	17,284,956	74.91

Sample Health Plan
 CHIP Incurred Claims Summary Lag Report

Month Incurred	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19
Ages 6-14															
Sep-18	98,844	301,670	120,017	19,287	3,265	6,474	1,850	2,341	1,704	316	1,347	807	306	0	160
Oct-18		86,099	328,120	197,976	18,651	12,689	-1,201	-254	838	990	146	7,384	0	0	1,735
Nov-18			17,351	367,907	68,405	39,292	5,651	3,370	7,579	1,947	657	-57	0	-43	32
Dec-18				79,890	251,389	123,262	19,456	6,304	2,806	2,392	107	-157	-1,160	66	-30
Jan-19					17,198	383,437	95,120	15,460	4,917	5,241	94	3	849	301	371
Feb-19						58,788	330,673	63,094	25,904	8,509	2,334	-1,095	466	0	0
Mar-19							37,050	375,045	87,951	25,614	3,633	1,463	902	-2,288	956
Apr-19								49,356	358,033	79,963	16,664	7,310	348	3,833	720
May-19									50,126	340,480	109,840	31,914	7,497	6,509	1,813
Jun-19										43,481	290,289	255,510	13,292	7,486	1,683
Jul-19											20,983	305,586	130,515	70,186	4,511
Aug-19												32,812	371,147	109,441	16,108
Sep-19													50,488	529,966	240,552
Oct-19														6,091	398,876
Nov-19															14,019

Sample Health Plan
 Estimated Claims Experience

Month	Ages 6-14						Ages 15-18					
	Members	Inc & Pd Claims	Compl Factor	Est. Inc. Claims	Est. Inc. pmpm	Trend Factor	Members	Inc & Pd Claims	Compl Factor	Est. Inc. Claims	Est. Inc. pmpm	Trend Factor
Sep-18	15,901	558,351	1.000	558,351	35.11		5,132	197,614	1.000	197,614	38.51	
Oct-18	15,278	654,945	1.000	654,945	42.87		4,918	219,280	1.000	219,280	44.59	
Nov-18	14,441	512,126	1.000	512,126	35.46		4,721	145,363	1.000	145,363	30.79	
Dec-18	13,842	481,758	1.000	481,758	34.80		4,541	173,388	1.000	173,388	38.18	
Jan-19	13,248	524,336	1.000	524,336	39.58		4,363	152,657	1.000	152,657	34.99	
Feb-19	12,940	488,266	1.000	488,266	37.73		4,286	162,354	1.000	162,354	37.88	
Mar-19	12,610	530,040	1.000	530,040	42.03		4,236	194,139	1.000	194,139	45.83	
Apr-19	12,326	517,116	1.000	517,116	41.95		4,107	157,314	1.000	157,314	38.30	
May-19	12,063	546,601	1.000	546,601	45.31		4,013	124,140	1.000	124,140	30.93	
Jun-19	11,940	626,076	1.000	626,076	52.44		3,987	109,522	1.000	109,522	27.47	
Jul-19	11,968	543,697	1.000	543,697	45.43		4,010	164,529	1.000	164,529	41.03	
Aug-19	11,957	545,204	1.000	545,204	45.60		4,033	148,171	1.000	148,171	36.74	
Sep-19	11,979	883,569	1.000	883,569	73.76	2.101	4,045	121,542	1.000	121,542	30.05	0.780
Oct-19	11,888	726,038	1.000	726,038	61.07	1.425	3,989	136,479	1.000	136,479	34.21	0.767
Nov-19	11,636	689,010	1.000	689,010	59.21	1.670	3,994	131,288	1.000	131,288	32.87	1.068
Dec-19	11,658	631,106	1.000	631,106	54.14	1.555	3,966	112,702	1.000	112,702	28.42	0.744
Jan-20	11,618	673,253	1.000	673,253	57.95	1.464	3,986	156,610	1.000	156,610	39.29	1.123
Feb-20	11,562	920,872	1.000	920,872	79.65	2.111	3,948	174,974	1.000	174,974	44.32	1.170
Mar-20	11,497	905,576	1.000	905,576	78.77	1.874	3,941	123,638	1.000	123,638	31.37	0.685
Apr-20	11,557	721,089	1.000	721,089	62.40	1.487	3,950	133,668	1.000	133,668	33.84	0.883
May-20	11,645	807,072	1.000	807,072	69.30	1.529	3,985	107,791	1.000	107,791	27.05	0.874
Jun-20	11,747	688,476	1.000	688,476	58.61	1.118	4,021	157,910	1.000	157,910	39.27	1.430
Jul-20	11,862	608,947	1.000	608,947	51.33	1.130	4,058	160,277	1.000	160,277	39.50	0.963
Aug-20	11,992	569,289	1.000	569,289	47.47	1.041	4,103	172,673	1.000	172,673	42.08	1.145
Sep-20	11,971	663,520	1.000	663,520	55.43	0.751	4,090	138,374	1.000	138,374	33.83	1.126
Oct-20	11,950	598,716	1.000	598,716	50.10	0.820	4,077	150,967	1.000	150,967	37.02	1.082
Nov-20	11,929	660,770	1.000	660,770	55.39	0.935	4,064	149,593	1.000	149,593	36.81	1.120
Dec-20	11,908	573,589	1.000	573,589	48.17	0.890	4,051	143,090	1.000	143,090	35.32	1.243
Jan-21	11,887	635,506	1.000	635,506	53.46	0.923	4,038	184,225	1.000	184,225	45.62	1.161
Feb-21	11,866	521,422	1.000	521,422	43.94	0.552	4,025	166,286	1.000	166,286	41.31	0.932
Mar-21	11,845	753,968	1.000	753,968	63.65	0.808	4,012	168,218	1.000	168,218	41.92	1.336
Apr-21	11,847	789,166	1.000	789,166	66.61	1.068	4,040	181,051	1.000	181,051	44.81	1.324
May-21	11,965	530,716	1.000	530,716	44.36	0.640	4,080	182,148	1.000	182,148	44.64	1.651
Jun-21	12,085	493,401	1.000	493,401	40.83	0.697	4,121	227,718	1.000	227,718	55.26	1.407
Jul-21	12,145	603,945	1.000	603,945	49.73	0.969	4,142	154,049	1.000	154,049	37.19	0.942
Aug-21	12,226	734,285	1.000	734,285	60.06	1.265	4,170	282,268	0.998	282,833	67.83	1.612
Sep-21	12,252	601,308	1.000	601,308	49.08	0.885	4,179	186,424	0.996	187,173	44.79	1.324
Oct-21	12,264	574,896	0.999	575,471	46.92	0.937	4,183	167,963	0.992	169,318	40.48	1.093

Sample Health Plan
 Estimated Claims Experience

Month	Ages 6-14						Ages 15-18					
	Members	Inc & Pd Claims	Compl Factor	Est. Inc. Claims	Est. Inc. pmpm	Trend Factor	Members	Inc & Pd Claims	Compl Factor	Est. Inc. Claims	Est. Inc. pmpm	Trend Factor
Nov-21	12,292	568,615	0.998	569,754	46.35	0.837	4,193	160,190	0.988	162,135	38.67	1.051
Dec-21	12,304	527,662	0.992	531,917	43.23	0.897	4,197	140,761	0.980	143,634	34.22	0.969
Jan-22	12,316	480,186	0.956	502,287	40.78	0.763	4,201	120,835	0.930	129,930	30.93	0.678
Feb-22	12,328	37,308	0.758	49,220	3.99	0.091	4,205	117,532	0.650	180,819	43.00	1.041
FY2019	158,514			6,528,516	41.19		52,347			1,948,470	37.22	
FY2020	140,641			8,824,296	62.74	1.523	47,987			1,689,551	35.21	0.946
FY2021	143,623			7,559,003	52.63	0.839	48,913			2,128,554	43.52	1.236
3/19-2/20	143,205			7,832,581	54.69		48,314			1,731,409	35.84	

Sample Health Plan
 Experienced Based Renewal Rating
 Projection Period: FY2023 (9/1/2022 - 8/31/2023)

	<1		1-5		6-14		15-18		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience 3/1/2019 - 2/28/2020										
Member Months	656		38,568		143,205		48,314		230,743	
Premium Revenue	279,226	425.65	3,306,820	85.74	8,628,101	60.25	5,325,652	110.23	17,539,800	76.01
Adjusted Premium (Current Rates)	79,212	120.75	3,288,308	85.26	10,737,511	74.98	4,346,327	89.96	18,451,358	79.96
Estimated Incurred Claims	48,251	73.55	2,254,965	58.47	7,832,581	54.69	1,731,409	35.84	11,867,206	51.43
Projected FY2023 Member Months	335		27,561		119,625		44,598		192,119	
Projected FY2023 Premium Current Rates	40,451	120.75	2,349,851	85.26	8,969,483	74.98	4,012,036	89.96	15,371,821	80.01
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %			
Provider Reimbursement Adjustment	1.0257		1.0169		1.0134		1.0124			
Other Reimbursement Changes	1.0000		1.0006		1.0043		1.0045			
Inpatient Reimbursement Changes	0.9893		0.9862		0.9881		0.9828			
FQHC & Other Adjustments	0.9754		0.9704		0.9645		0.9731			
PHE Related Adjustment	1.0000		0.9573		0.9708		1.0429			
Projected Incurred Claims	29,218	87.22	1,799,914	65.31	7,380,532	61.70	1,942,196	43.55	11,151,859	58.05
Capitation Expenses										
Vision		1.00		1.00		1.00		1.00		
Behavioral Health		2.50		2.50		2.50		2.50		
Other		0.50		0.50		0.50		0.50		
Total	1,340	4.00	110,244	4.00	478,500	4.00	178,392	4.00	768,476	4.00
Reinsurance Expenses										
Gross Premium		1.25		1.25		1.25		1.25		
Projected Reinsurance Recoveries		0.75		0.75		0.75		0.75		
Net Reinsurance Cost	168	0.50	13,781	0.50	59,813	0.50	22,299	0.50	96,060	0.50

Sample Health Plan
 Experienced Based Renewal Rating
 Projection Period: FY2023 (9/1/2022 - 8/31/2023)

	<1		1-5		6-14		15-18		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Administrative Expenses										
Fixed Amount	3,015	9.00	248,049	9.00	1,076,625	9.00	401,382	9.00	1,729,071	9.00
Percentage of Premium	5.25 %	5.78	5.25 %	4.53	5.25 %	4.32	5.25 %	3.28	5.25 %	4.11
Risk Margin	1.50 %	1.65	1.50 %	1.29	1.50 %	1.23	1.50 %	0.94	1.50 %	1.17
Premium Tax	1.75 %	1.93	1.75 %	1.51	1.75 %	1.44	1.75 %	1.09	1.75 %	1.37
Maintenance Tax	24	0.0725	1,998	0.0725	8,673	0.0725	3,233	0.0725	13,929	0.0725
Projected Total Cost	36,901	110.15	2,375,941	86.21	9,840,592	82.26	2,784,155	62.43	15,037,590	78.27
Experience Rate Increase		-8.8%		1.1%		9.7%		-30.6%		-2.2%

Attachment 3

Community Experience Analysis - Medical

The following exhibits present a summary of the experience analysis performed for each service area. HHSC utilizes an adjusted community rating methodology in setting the CHIP premium rates. The base community rates by age group vary by service area but are the same for each health plan in a service area. The community rates are developed by a weighted average of the projected FY2023 cost for each health plan in the service area. The weights used in this formula are the projected number of FY2023 members enrolled in each health plan.

Below is a brief description of each of the exhibits contained in the attachment. The exhibits present the derivation of the FY2023 CHIP medical community premium rates for the following service areas:

- Exhibit A.1 – Bexar Area
- Exhibit B.1 – Dallas Area
- Exhibit C.1 – El Paso Area
- Exhibit D.1 – Harris Area
- Exhibit E.1 – Jefferson Area
- Exhibit F.1 – Lubbock Area
- Exhibit G.1 – Nueces Area
- Exhibit H.1 – Rural Service Area (RSA)
- Exhibit I.1 – Tarrant Area
- Exhibit J.1 – Travis Area
- Exhibit K.1 – Statewide

These exhibits show projected FY2023 experience for each of the service areas. These amounts were derived by summing amounts from each individual health plan in the service area. The experience analysis for individual HMOs is described in Attachment 2. The top of the exhibit shows summary base period enrollment, premium and claims experience. Trend assumptions are used to project the average base period claims cost to FY2023. Following that are several adjustments to the base period claims cost to account for benefit and provider reimbursement changes.

In addition to incurred claims, provision is also made for services that are capitated by the HMOs, such as vision and behavioral health services. The cost of reinsurance is also considered. In developing the cost of reinsurance we make an assumption regarding how much the HMO is expected to receive in reinsurance recoveries (reimbursements from the reinsurance company for large claims). We have assumed that the net cost of reinsurance (reinsurance premium less reinsurance recoveries) is the minimum of (a) the actual reinsurance premium rate and (b) \$0.50 pmpm.

The rating methodology includes an explicit provision for administrative expenses. The amount allocated for administrative expenses is \$9.00 per member per month (pmpm) for the CHIP non-Perinate program and \$13.50 pmpm for the CHIP Perinate program plus 5.25% of gross premium. Provisions are also included for risk margin (1.50% of gross premium), premium tax (1.75%) and maintenance tax (\$.0725 pmpm).

At the bottom of the exhibit is a summary of the projected FY2023 cost based on these assumptions. Cost projections are presented both with and without the inclusion of maternity expenses.

Community Experience Analysis – Pharmacy

The following exhibits present a summary of the pharmacy experience analysis performed for each CHIP service area for pharmacy services. As with medical, HHSC utilizes a community rating methodology in setting the pharmacy capitation rates. The base community rates by risk group vary by service area but are the same for each health plan in a service area.

Below is a brief description of the exhibits contained in this attachment. The exhibits present the derivation of the FY2023 CHIP pharmacy community capitation rates for the following service areas:

- Exhibit A.2 – Bexar Area
- Exhibit B.2 – Dallas Area
- Exhibit C.2 – El Paso Area
- Exhibit D.2 – Harris Area
- Exhibit E.2 – Jefferson Area
- Exhibit F.2 – Lubbock Area
- Exhibit G.2 – Nueces Area
- Exhibit H.2 – Rural Service Area (RSA)
- Exhibit I.2 – Tarrant Area
- Exhibit J.2 – Travis Area
- Exhibit K.2 – Statewide

These exhibits present projected FY2023 experience for each service area and risk group. These amounts were derived by summing amounts from each individual health plan in the service area. The experience analysis for individual health plans is described in Attachment 2. The top portion of the exhibit shows summary base period experience and projected FY2023 enrollment and incurred claims experience.

A provision for administrative expenses is included in the amount of \$1.60 pmpm. Additional provisions are also included for premium tax (1.75% of premium) and risk margin (1.50% of premium).

The bottom of the exhibit shows a summary of the projected FY2023 cost based on these assumptions.

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	62		86,984		199,238		69,368	
Estimated Incurred Claims								
Professional	15,902	256.48	5,164,353	59.37	6,317,585	31.71	2,393,817	34.51
Emergency Room	16	0.26	368,181	4.23	607,644	3.05	278,300	4.01
Outpatient Facility	109	1.76	1,211,573	13.93	2,469,587	12.40	1,300,390	18.75
Inpatient Facility	262	4.22	1,174,944	13.51	3,385,740	16.99	767,560	11.07
Others	0	0.00	1,110,379	12.77	1,368,863	6.87	545,359	7.86
Total	16,289	262.72	9,029,429	103.81	14,149,419	71.02	5,285,426	76.19
Projected FY2023 Member Months	15		14,772		57,216		22,788	
Projected FY2023 Premiums								
Current Rates	4,236	282.42	1,998,878	135.32	5,624,256	98.30	2,355,298	103.36
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Adj.	1.0575		1.0235		1.0162		1.0196	
Other Reimbursement Changes	1.0000		1.0008		1.0060		1.0023	
Inpatient Reimbursement Changes	1.0000		0.9982		0.9959		0.9976	
FQHC & Other Adjustments	0.9483		0.9755		0.9773		0.9791	
PHE Related Adjustment	1.0000		1.0370		0.9662		0.9299	
Projected Incurred Claims	4,735	315.66	1,900,335	128.64	4,680,188	81.80	1,930,887	84.73
Capitation & Other Expenses/Refunds								
Total	7	0.44	16,306	1.10	70,414	1.23	30,863	1.35
Reinsurance Expenses								
Net Reinsurance Cost	1	0.04	3,880	0.26	17,143	0.30	7,322	0.32
Administrative Expenses								
Fixed Amount	135	9.00	132,948	9.00	514,944	9.00	205,092	9.00
Percentage of Premium	5.25 %	18.66	5.25 %	7.98	5.25 %	5.30	5.25 %	5.48
Risk Margin	1.50 %	5.33	1.50 %	2.28	1.50 %	1.51	1.50 %	1.57
Premium Tax	1.75 %	6.22	1.75 %	2.66	1.75 %	1.77	1.75 %	1.83
Maintenance Tax	1	0.073	1,071	0.073	4,148	0.073	1,652	0.073
Projected Total Cost	5,331	355.42	2,245,398	152.00	5,777,965	100.99	2,377,942	104.35
Adjusted Total Cost	5,331	355.42	2,245,398	152.00	5,777,965	100.99	2,377,942	104.35
Experience Rate Increase		25.8 %		12.3 %		2.7 %		1.0 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	109		16,176		373		372,310	
Estimated Incurred Claims								
Professional	11,259	103.29	3,654,692	225.93	49,834	133.60		
Emergency Room	205	1.88	25,022	1.55	0	0.00		
Outpatient Facility	1,421	13.04	1,329,928	82.22	6,892	18.48		
Inpatient Facility	50,265	461.15	181,629	11.23	19,473	52.21		
Others	235	2.16	540,484	33.41	7,186	19.27		
Total	63,385	581.51	5,731,755	354.34	83,386	223.55	34,359,089	92.29
Projected FY2023 Member Months	38		15,900		180		110,909	
Projected FY2023 Premiums								
Current Rates	19,438	511.53	6,087,208	382.84	53,944	299.69	16,143,258	145.55
Current DSP Rates	0	0.00	0	0.00	20,300	112.78	20,300	0.18
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Adj.	1.0021		0.9968		0.9991			
Other Reimbursement Changes	1.0000		1.0000		1.0000			
Inpatient Reimbursement Changes	0.9999		1.0015		0.9995			
FQHC & Other Adjustments	0.9961		0.8899		0.7360			
PHE Related Adjustment	1.0000		1.0506		1.0000			
Projected Incurred Claims	24,877	654.65	5,931,356	373.04	33,358	185.32	14,505,737	130.79
Capitation & Other Expenses/Refunds								
Total	-43	-1.13	-27,345	-1.72	-111	-0.62	90,090	0.81
Reinsurance Expenses								
Net Reinsurance Cost	0	0.00	559	0.04	6	0.03	28,911	0.26
Administrative Expenses								
Fixed Amount	513	13.50	214,650	13.50	2,430	13.50	1,070,712	9.65
Percentage of Premium	5.25 %	38.28	5.25 %	22.09	5.25 %	11.38	5.25 %	8.12
Risk Margin	1.50 %	10.94	1.50 %	6.31	1.50 %	3.25	1.50 %	2.32
Premium Tax	1.75 %	12.76	1.75 %	7.36	1.75 %	3.79	1.75 %	2.71
Maintenance Tax	3	0.073	1,153	0.073	13	0.073	8,041	0.073
Projected Total Cost	27,705	729.07	6,688,932	420.69	39,012	216.73	17,162,285	154.74
Adjusted Total Cost	27,705	729.07	6,688,932	420.69	18,712	103.96	17,141,985	154.56
Experience Rate Increase		42.5 %		9.9 %		-65.3 %		6.2 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	135		165,607		404,048		134,327	
Estimated Incurred Claims								
Professional	9,156	67.82	7,084,372	42.78	9,823,845	24.31	2,956,845	22.01
Emergency Room	2,378	17.62	4,287,972	25.89	6,012,944	14.88	2,034,930	15.15
Outpatient Facility	8,830	65.40	5,467,806	33.02	9,334,034	23.10	3,846,869	28.64
Inpatient Facility	0	0.00	1,669,704	10.08	5,840,874	14.46	2,035,023	15.15
Others	101	0.75	2,643,327	15.96	3,397,840	8.41	1,398,232	10.41
Total	20,465	151.59	21,153,181	127.73	34,409,537	85.16	12,271,899	91.36
Projected FY2023 Member Months	49		30,048		118,176		47,604	
Projected FY2023 Premiums								
Current Rates	13,839	282.42	5,060,679	168.42	13,636,750	115.39	5,864,513	123.19
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Adj.	1.0101		1.0146		1.0064		1.0036	
Other Reimbursement Changes	1.0000		1.0004		1.0024		1.0026	
Inpatient Reimbursement Changes	0.9723		0.9932		1.0021		0.9855	
FQHC & Other Adjustments	0.9950		0.9906		0.9908		0.9923	
PHE Related Adjustment	1.0000		0.9952		0.9349		0.9788	
Projected Incurred Claims	8,697	177.50	4,570,057	152.09	11,291,331	95.55	5,018,645	105.42
Capitation & Other Expenses/Refunds								
Total	162	3.31	79,324	2.64	316,753	2.68	119,863	2.52
Reinsurance Expenses								
Net Reinsurance Cost	1	0.01	1,410	0.05	4,404	0.04	1,842	0.04
Administrative Expenses								
Fixed Amount	441	9.00	270,432	9.00	1,063,584	9.00	428,436	9.00
Percentage of Premium	5.25 %	10.90	5.25 %	9.40	5.25 %	6.16	5.25 %	6.72
Risk Margin	1.50 %	3.11	1.50 %	2.69	1.50 %	1.76	1.50 %	1.92
Premium Tax	1.75 %	3.63	1.75 %	3.13	1.75 %	2.05	1.75 %	2.24
Maintenance Tax	4	0.073	2,178	0.073	8,568	0.073	3,451	0.073
Projected Total Cost	10,169	207.53	5,380,767	179.07	13,862,994	117.31	6,089,877	127.93
Adjusted Total Cost	10,169	207.53	5,380,767	179.07	13,862,994	117.31	6,089,877	127.93
Experience Rate Increase		-26.5 %		6.3 %		1.7 %		3.8 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	272		69,156		840		774,385	
Estimated Incurred Claims								
Professional	17,631	64.82	11,965,306	173.02	164,303	195.60		
Emergency Room	4,003	14.72	151,619	2.19	15,034	17.90		
Outpatient Facility	1,257	4.62	11,871,119	171.66	110,058	131.02		
Inpatient Facility	27,337	100.50	83,542	1.21	57,972	69.01		
Others	1,842	6.77	1,062,297	15.36	18,880	22.48		
Total	52,070	191.43	25,133,884	363.44	366,248	436.01	93,407,284	120.62
Projected FY2023 Member Months	96		64,668		732		261,373	
Projected FY2023 Premiums								
Current Rates	49,107	511.53	25,693,550	397.31	219,373	299.69	50,537,811	193.36
Current DSP Rates	0	0.00	0	0.00	199,440	272.46	199,440	0.76
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Adj.	1.0081		1.0007		0.9959			
Other Reimbursement Changes	1.0000		1.0000		1.0000			
Inpatient Reimbursement Changes	1.0011		0.8853		0.9621			
FQHC & Other Adjustments	0.9415		0.9631		0.9574			
PHE Related Adjustment	1.0000		0.9468		1.0000			
Projected Incurred Claims	19,697	205.18	21,416,124	331.17	330,249	451.16	42,654,800	163.20
Capitation & Other Expenses/Refunds								
Total	-372	-3.87	19,365	0.30	331	0.45	535,427	2.05
Reinsurance Expenses								
Net Reinsurance Cost	30	0.31	9,366	0.14	114	0.16	17,167	0.07
Administrative Expenses								
Fixed Amount	1,296	13.50	873,018	13.50	9,882	13.50	2,647,089	10.13
Percentage of Premium	5.25 %	12.35	5.25 %	19.81	5.25 %	26.70	5.25 %	10.07
Risk Margin	1.50 %	3.53	1.50 %	5.66	1.50 %	7.63	1.50 %	2.88
Premium Tax	1.75 %	4.12	1.75 %	6.60	1.75 %	8.90	1.75 %	3.36
Maintenance Tax	7	0.073	4,688	0.073	53	0.073	18,950	0.073
Projected Total Cost	22,577	235.18	24,396,242	377.25	372,272	508.57	50,134,899	191.81
Adjusted Total Cost	22,577	235.18	24,396,242	377.25	172,832	236.11	49,935,458	191.05
Experience Rate Increase		-54.0 %		-5.0 %		-21.2 %		-1.2 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	9		33,328		88,347		35,154	
Estimated Incurred Claims								
Professional	828	92.02	2,042,057	61.27	3,346,108	37.87	1,386,666	39.45
Emergency Room	0	0.00	183,924	5.52	326,090	3.69	178,618	5.08
Outpatient Facility	0	0.00	416,822	12.51	731,752	8.28	402,320	11.44
Inpatient Facility	928	103.06	224,982	6.75	643,477	7.28	331,912	9.44
Others	0	0.00	75,863	2.28	202,238	2.29	193,290	5.50
Total	1,756	195.07	2,943,648	88.32	5,249,665	59.42	2,492,805	70.91
Projected FY2023 Member Months	24		6,060		26,472		12,036	
Projected FY2023 Premiums								
Current Rates	6,778	282.42	735,266	121.33	2,335,225	88.21	1,223,136	101.62
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Adj.	1.0128		1.0223		1.0160		1.0128	
Other Reimbursement Changes	1.0000		1.0013		1.0076		1.0100	
Inpatient Reimbursement Changes	0.9961		0.9985		1.0027		0.9982	
FQHC & Other Adjustments	1.0000		0.9960		0.9932		0.9886	
PHE Related Adjustment	1.0000		0.9499		0.9671		0.9869	
Projected Incurred Claims	5,659	235.79	620,096	102.33	1,858,252	70.20	1,018,735	84.64
Capitation & Other Expenses/Refunds								
Total	51	2.15	15,990	2.64	70,689	2.67	32,003	2.66
Reinsurance Expenses								
Net Reinsurance Cost	7	0.30	2,276	0.38	10,073	0.38	4,559	0.38
Administrative Expenses								
Fixed Amount	216	9.00	54,540	9.00	238,248	9.00	108,324	9.00
Percentage of Premium	5.25 %	14.19	5.25 %	6.56	5.25 %	4.72	5.25 %	5.55
Risk Margin	1.50 %	4.05	1.50 %	1.88	1.50 %	1.35	1.50 %	1.59
Premium Tax	1.75 %	4.73	1.75 %	2.19	1.75 %	1.57	1.75 %	1.85
Maintenance Tax	2	0.073	439	0.073	1,919	0.073	873	0.073
Projected Total Cost	6,487	270.28	757,750	125.04	2,381,618	89.97	1,272,671	105.74
Adjusted Total Cost	6,487	270.28	757,750	125.04	2,381,618	89.97	1,272,671	105.74
Experience Rate Increase		-4.3 %		3.1 %		2.0 %		4.0 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	53		7,021		133		164,045	
Estimated Incurred Claims								
Professional	5,692	107.40	1,931,638	275.12	32,951	247.75		
Emergency Room	0	0.00	14,423	2.05	48	0.36		
Outpatient Facility	275	5.19	251,183	35.78	1,424	10.71		
Inpatient Facility	552	10.42	2,868	0.41	16,177	121.63		
Others	300	5.65	2,012	0.29	0	0.00		
Total	6,819	128.66	2,202,123	313.65	50,600	380.45	12,947,415	78.93
Projected FY2023 Member Months	24		5,580		49		50,245	
Projected FY2023 Premiums								
Current Rates	12,277	511.53	2,163,139	387.66	14,685	299.69	6,490,507	129.18
Current DSP Rates	0	0.00	0	0.00	21,243	433.53	21,243	0.42
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Adj.	1.0493		0.9959		0.9986			
Other Reimbursement Changes	1.0000		1.0000		1.0000			
Inpatient Reimbursement Changes	0.9997		1.0000		0.9992			
FQHC & Other Adjustments	1.0000		0.9943		1.0000			
PHE Related Adjustment	1.0000		0.9730		1.0000			
Projected Incurred Claims	3,654	152.24	1,901,925	340.85	20,981	428.18	5,429,301	108.06
Capitation & Other Expenses/Refunds								
Total	4	0.15	630	0.11	40	0.81	119,406	2.38
Reinsurance Expenses								
Net Reinsurance Cost	7	0.30	1,734	0.31	5	0.11	18,662	0.37
Administrative Expenses								
Fixed Amount	324	13.50	75,330	13.50	662	13.50	477,644	9.51
Percentage of Premium	5.25 %	9.54	5.25 %	20.36	5.25 %	25.40	5.25 %	6.91
Risk Margin	1.50 %	2.73	1.50 %	5.82	1.50 %	7.26	1.50 %	1.97
Premium Tax	1.75 %	3.18	1.75 %	6.79	1.75 %	8.47	1.75 %	2.30
Maintenance Tax	2	0.073	405	0.073	4	0.073	3,643	0.073
Projected Total Cost	4,361	181.70	2,163,960	387.81	23,706	483.80	6,610,552	131.57
Adjusted Total Cost	4,361	181.70	2,163,960	387.81	2,463	50.27	6,589,309	131.14
Experience Rate Increase		-64.5 %		0.0 %		-83.2 %		1.5 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	253		270,029		633,941		220,457	
Estimated Incurred Claims								
Professional	28,778	113.75	16,845,446	62.38	19,736,381	31.13	7,237,159	32.83
Emergency Room	5,509	21.77	5,879,060	21.77	9,714,470	15.32	5,213,511	23.65
Outpatient Facility	10,922	43.17	9,445,761	34.98	16,468,521	25.98	9,564,722	43.39
Inpatient Facility	74,459	294.30	7,452,581	27.60	9,848,261	15.53	5,855,643	26.56
Others	261	1.03	1,215,665	4.50	4,052,258	6.39	2,343,359	10.63
Total	119,928	474.02	40,838,512	151.24	59,819,892	94.36	30,214,394	137.05
Projected FY2023 Member Months	122		48,792		188,124		76,500	
Projected FY2023 Premiums								
Current Rates	34,455	282.42	9,293,934	190.48	22,857,383	121.50	13,216,994	172.77
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Adj.	1.0155		1.0122		1.0104		1.0089	
Other Reimbursement Changes	1.0000		1.0005		1.0031		1.0033	
Inpatient Reimbursement Changes	0.9690		0.9704		0.9685		0.9618	
FQHC & Other Adjustments	0.9901		0.9747		0.9623		0.9735	
PHE Related Adjustment	1.0000		0.9199		0.9681		0.9846	
Projected Incurred Claims	67,506	553.33	7,790,011	159.66	19,449,224	103.39	11,722,841	153.24
Capitation & Other Expenses/Refunds								
Total	308	2.53	126,776	2.60	489,491	2.60	195,488	2.56
Reinsurance Expenses								
Net Reinsurance Cost	12	0.09	5,333	0.11	20,886	0.11	8,416	0.11
Administrative Expenses								
Fixed Amount	1,098	9.00	439,128	9.00	1,693,116	9.00	688,500	9.00
Percentage of Premium	5.25 %	32.42	5.25 %	9.84	5.25 %	6.61	5.25 %	9.47
Risk Margin	1.50 %	9.26	1.50 %	2.81	1.50 %	1.89	1.50 %	2.70
Premium Tax	1.75 %	10.81	1.75 %	3.28	1.75 %	2.20	1.75 %	3.16
Maintenance Tax	9	0.073	3,537	0.073	13,639	0.073	5,546	0.073
Projected Total Cost	75,336	617.51	9,141,842	187.36	23,679,078	125.87	13,793,214	180.30
Adjusted Total Cost	75,336	617.51	9,141,842	187.36	23,679,078	125.87	13,793,214	180.30
Experience Rate Increase		118.6 %		-1.6 %		3.6 %		4.4 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	550		123,603		1,335		1,250,168	
Estimated Incurred Claims								
Professional	67,926	123.50	40,513,890	327.77	378,856	283.79		
Emergency Room	6,903	12.55	730,827	5.91	7,944	5.95		
Outpatient Facility	41,459	75.38	11,623,299	94.04	86,780	65.00		
Inpatient Facility	65,587	119.25	52,985	0.43	376,645	282.13		
Others	487	0.89	2,256,970	18.26	3,571	2.67		
Total	182,363	331.57	55,177,971	446.41	853,796	639.55	187,206,856	149.75
Projected FY2023 Member Months	288		106,344		852		421,022	
Projected FY2023 Premiums								
Current Rates	147,321	511.53	50,454,329	474.44	255,336	299.69	96,259,753	228.63
Current DSP Rates	0	0.00	0	0.00	244,333	286.78	244,333	0.58
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Adj.	1.0078		0.9975		0.9990			
Other Reimbursement Changes	0.9999		1.0000		1.0000			
Inpatient Reimbursement Changes	0.9640		0.9976		0.9979			
FQHC & Other Adjustments	0.9685		0.8824		0.9531			
PHE Related Adjustment	1.0000		1.0065		1.0000			
Projected Incurred Claims	101,340	351.88	47,322,020	444.99	584,003	685.45	87,036,946	206.73
Capitation & Other Expenses/Refunds								
Total	311	1.08	74,028	0.70	551	0.65	886,954	2.11
Reinsurance Expenses								
Net Reinsurance Cost	43	0.15	16,150	0.15	110	0.13	50,950	0.12
Administrative Expenses								
Fixed Amount	3,888	13.50	1,435,644	13.50	11,502	13.50	4,272,876	10.15
Percentage of Premium	5.25 %	21.04	5.25 %	26.36	5.25 %	40.15	5.25 %	12.58
Risk Margin	1.50 %	6.01	1.50 %	7.53	1.50 %	11.47	1.50 %	3.59
Premium Tax	1.75 %	7.01	1.75 %	8.79	1.75 %	13.38	1.75 %	4.19
Maintenance Tax	21	0.073	7,710	0.073	62	0.073	30,524	0.073
Projected Total Cost	115,413	400.74	53,394,047	502.09	651,616	764.81	100,850,546	239.54
Adjusted Total Cost	115,413	400.74	53,394,047	502.09	407,283	478.03	100,606,213	238.96
Experience Rate Increase		-21.7 %		5.8 %		59.5 %		4.5 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	15		20,623		49,657		15,938	
Estimated Incurred Claims								
Professional	719	47.95	1,233,294	59.80	1,555,419	31.32	572,659	35.93
Emergency Room	512	34.14	303,480	14.72	424,500	8.55	164,591	10.33
Outpatient Facility	946	63.09	591,466	28.68	999,943	20.14	593,099	37.21
Inpatient Facility	0	0.00	274,844	13.33	1,218,540	24.54	1,790,907	112.37
Others	0	0.00	66,632	3.23	193,900	3.90	137,656	8.64
Total	2,178	145.18	2,469,717	119.76	4,392,301	88.45	3,258,912	204.47
Projected FY2023 Member Months	5		3,744		16,104		6,264	
Projected FY2023 Premiums								
Current Rates	1,412	282.42	569,725	152.17	1,791,998	111.28	1,321,049	210.90
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Adj.	1.0070		1.0171		1.0139		1.0123	
Other Reimbursement Changes	1.0000		1.0006		1.0034		1.0022	
Inpatient Reimbursement Changes	1.0000		0.9847		0.9844		0.9585	
FQHC & Other Adjustments	0.9763		0.9788		0.9785		0.9852	
PHE Related Adjustment	1.0000		0.9350		1.0963		2.3945	
Projected Incurred Claims	855	171.01	492,651	131.58	1,833,434	113.85	3,520,363	562.00
Capitation & Other Expenses/Refunds								
Total	5	1.02	7,214	1.93	31,423	1.95	11,473	1.83
Reinsurance Expenses								
Net Reinsurance Cost	1	0.17	383	0.10	1,745	0.11	659	0.11
Administrative Expenses								
Fixed Amount	45	9.00	33,696	9.00	144,936	9.00	56,376	9.00
Percentage of Premium	5.25 %	10.40	5.25 %	8.19	5.25 %	7.17	5.25 %	32.88
Risk Margin	1.50 %	2.97	1.50 %	2.34	1.50 %	2.05	1.50 %	9.39
Premium Tax	1.75 %	3.47	1.75 %	2.73	1.75 %	2.39	1.75 %	10.96
Maintenance Tax	0	0.073	271	0.073	1,168	0.073	454	0.073
Projected Total Cost	991	198.11	583,842	155.94	2,199,678	136.59	3,922,760	626.24
Adjusted Total Cost	991	198.11	583,842	155.94	2,199,678	136.59	3,922,760	626.24
Experience Rate Increase		-29.9 %		2.5 %		22.8 %		196.9 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	45		6,046		121		92,445	
Estimated Incurred Claims								
Professional	1,290	28.67	1,476,712	244.25	16,970	140.25		
Emergency Room	0	0.00	30,229	5.00	174	1.44		
Outpatient Facility	12	0.27	946,425	156.54	5,467	45.18		
Inpatient Facility	3,353	74.52	4,532	0.75	11,916	98.48		
Others	0	0.00	79,604	13.17	0	0.00		
Total	4,656	103.46	2,537,502	419.70	34,527	285.35	12,699,792	137.38
Projected FY2023 Member Months	38		6,096		98		32,349	
Projected FY2023 Premiums								
Current Rates	19,438	511.53	3,156,594	517.81	29,370	299.69	6,889,586	212.98
Current DSP Rates	0	0.00	0	0.00	17,686	180.47	17,686	0.55
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Adj.	1.0125		0.9971		0.9968			
Other Reimbursement Changes	1.0000		1.0000		1.0000			
Inpatient Reimbursement Changes	1.0196		0.9990		1.0121			
FQHC & Other Adjustments	0.9558		0.9448		0.9993			
PHE Related Adjustment	1.0000		1.0048		1.0000			
Projected Incurred Claims	4,375	115.14	2,728,903	447.65	31,800	324.49	8,612,383	266.23
Capitation & Other Expenses/Refunds								
Total	2	0.06	33,364	5.47	14	0.14	83,495	2.58
Reinsurance Expenses								
Net Reinsurance Cost	4	0.10	996	0.16	14	0.14	3,801	0.12
Administrative Expenses								
Fixed Amount	513	13.50	82,296	13.50	1,323	13.50	319,185	9.87
Percentage of Premium	5.25 %	7.39	5.25 %	26.79	5.25 %	19.41	5.25 %	16.00
Risk Margin	1.50 %	2.11	1.50 %	7.65	1.50 %	5.55	1.50 %	4.57
Premium Tax	1.75 %	2.46	1.75 %	8.93	1.75 %	6.47	1.75 %	5.33
Maintenance Tax	3	0.073	442	0.073	7	0.073	2,345	0.073
Projected Total Cost	5,352	140.85	3,110,385	510.23	36,239	369.78	9,859,246	304.78
Adjusted Total Cost	5,352	140.85	3,110,385	510.23	18,552	189.31	9,841,560	304.23
Experience Rate Increase		-72.5 %		-1.5 %		-36.8 %		42.8 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	31		25,686		59,999		20,489	
Estimated Incurred Claims								
Professional	14,502	467.80	1,129,937	43.99	1,706,210	28.44	568,918	27.77
Emergency Room	240	7.73	139,455	5.43	221,659	3.69	118,553	5.79
Outpatient Facility	1,368	44.12	630,595	24.55	633,917	10.57	281,842	13.76
Inpatient Facility	0	0.00	203,482	7.92	561,031	9.35	376,184	18.36
Others	0	0.00	328,477	12.79	372,478	6.21	112,730	5.50
Total	16,109	519.65	2,431,946	94.68	3,495,296	58.26	1,458,226	71.17
Projected FY2023 Member Months	2		4,452		16,224		6,612	
Projected FY2023 Premiums								
Current Rates	565	282.42	563,991	126.68	1,391,665	85.78	596,554	90.22
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Adj.	1.0280		1.0264		1.0210		1.0237	
Other Reimbursement Changes	1.0000		1.0009		1.0060		1.0073	
Inpatient Reimbursement Changes	1.0000		1.0070		0.9938		1.0117	
FQHC & Other Adjustments	1.0000		0.9808		0.9696		0.9548	
PHE Related Adjustment	1.0000		0.9828		0.9918		1.0125	
Projected Incurred Claims	1,280	640.04	503,604	113.12	1,111,607	68.52	568,626	86.00
Capitation & Other Expenses/Refunds								
Total	1	0.49	610	0.14	8,499	0.52	4,098	0.62
Reinsurance Expenses								
Net Reinsurance Cost	0	0.25	1,117	0.25	3,926	0.24	1,559	0.24
Administrative Expenses								
Fixed Amount	18	9.00	40,068	9.00	146,016	9.00	59,508	9.00
Percentage of Premium	5.25 %	37.29	5.25 %	7.03	5.25 %	4.50	5.25 %	5.50
Risk Margin	1.50 %	10.65	1.50 %	2.01	1.50 %	1.28	1.50 %	1.57
Premium Tax	1.75 %	12.43	1.75 %	2.34	1.75 %	1.50	1.75 %	1.83
Maintenance Tax	0	0.073	323	0.073	1,176	0.073	479	0.073
Projected Total Cost	1,420	710.21	596,418	133.97	1,389,316	85.63	693,192	104.84
Adjusted Total Cost	1,420	710.21	596,418	133.97	1,389,316	85.63	693,192	104.84
Experience Rate Increase		151.5 %		5.7 %		-0.2 %		16.2 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	42		4,349		126		110,722	
Estimated Incurred Claims								
Professional	2,371	56.45	986,971	226.94	17,679	140.31		
Emergency Room	409	9.74	30,093	6.92	1,859	14.76		
Outpatient Facility	475	11.30	316,158	72.70	12,612	100.09		
Inpatient Facility	627	14.92	2,855	0.66	20,623	163.67		
Others	0	0.00	90,301	20.76	0	0.00		
Total	3,882	92.42	1,426,379	327.98	52,773	418.84	8,884,611	80.24
Projected FY2023 Member Months	2		3,180		72		30,544	
Projected FY2023 Premiums								
Current Rates	1,023	511.53	1,138,094	357.89	21,578	299.69	3,713,469	121.58
Current DSP Rates	0	0.00	0	0.00	18,890	262.36	18,890	0.62
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Adj.	1.0205		1.0161		1.0132			
Other Reimbursement Changes	1.0000		1.0000		1.0000			
Inpatient Reimbursement Changes	0.9986		0.9999		1.0773			
FQHC & Other Adjustments	1.0000		0.8865		0.9877			
PHE Related Adjustment	1.0000		1.0379		1.0000			
Projected Incurred Claims	212	106.23	1,099,692	345.81	36,672	509.33	3,321,693	108.75
Capitation & Other Expenses/Refunds								
Total	1	0.42	985	0.31	-165	-2.30	14,029	0.46
Reinsurance Expenses								
Net Reinsurance Cost	0	0.25	729	0.23	21	0.29	7,353	0.24
Administrative Expenses								
Fixed Amount	27	13.50	42,930	13.50	972	13.50	289,539	9.48
Percentage of Premium	5.25 %	6.91	5.25 %	20.65	5.25 %	29.89	5.25 %	6.83
Risk Margin	1.50 %	1.97	1.50 %	5.90	1.50 %	8.54	1.50 %	1.95
Premium Tax	1.75 %	2.30	1.75 %	6.88	1.75 %	9.96	1.75 %	2.28
Maintenance Tax	0	0.073	231	0.073	5	0.073	2,214	0.073
Projected Total Cost	263	131.66	1,250,891	393.36	40,989	569.29	3,972,490	130.06
Adjusted Total Cost	263	131.66	1,250,891	393.36	22,099	306.93	3,953,600	129.44
Experience Rate Increase		-74.3 %		9.9 %		2.4 %		6.5 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	6		23,454		54,351		19,215	
Estimated Incurred Claims								
Professional	1,670	278.37	1,090,096	46.48	1,582,289	29.11	593,239	30.87
Emergency Room	0	0.00	539,274	22.99	1,018,617	18.74	412,166	21.45
Outpatient Facility	0	0.00	812,630	34.65	1,464,197	26.94	664,775	34.60
Inpatient Facility	0	0.00	171,864	7.33	422,507	7.77	422,712	22.00
Others	0	0.00	114,296	4.87	371,270	6.83	435,940	22.69
Total	1,670	278.37	2,728,160	116.32	4,858,880	89.40	2,528,833	131.61
Projected FY2023 Member Months	3		3,720		15,828		6,516	
Projected FY2023 Premiums								
Current Rates	847	282.42	637,487	171.37	2,328,769	147.13	1,376,982	211.32
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Adj.	1.0726		1.0125		1.0142		1.0130	
Other Reimbursement Changes	1.0000		1.0010		1.0057		1.0057	
Inpatient Reimbursement Changes	1.0000		0.9968		0.9985		0.9929	
FQHC & Other Adjustments	0.5538		0.9944		0.9953		0.9977	
PHE Related Adjustment	1.0000		1.0091		1.0070		0.9096	
Projected Incurred Claims	594	198.10	525,573	141.28	1,730,508	109.33	943,171	144.75
Capitation & Other Expenses/Refunds								
Total	28	9.33	92,373	24.83	391,411	24.73	165,324	25.37
Reinsurance Expenses								
Net Reinsurance Cost	1	0.20	1,536	0.41	6,550	0.41	2,743	0.42
Administrative Expenses								
Fixed Amount	27	9.00	33,480	9.00	142,452	9.00	58,644	9.00
Percentage of Premium	5.25 %	12.43	5.25 %	10.08	5.25 %	8.24	5.25 %	10.31
Risk Margin	1.50 %	3.55	1.50 %	2.88	1.50 %	2.35	1.50 %	2.94
Premium Tax	1.75 %	4.14	1.75 %	3.36	1.75 %	2.75	1.75 %	3.44
Maintenance Tax	0	0.073	270	0.073	1,148	0.073	472	0.073
Projected Total Cost	711	236.83	713,914	191.91	2,483,135	156.88	1,279,076	196.30
Adjusted Total Cost	711	236.83	713,914	191.91	2,483,135	156.88	1,279,076	196.30
Experience Rate Increase		-16.1 %		12.0 %		6.6 %		-7.1 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	61		2,679		106		99,872	
Estimated Incurred Claims								
Professional	6,109	100.15	769,619	287.28	25,218	237.90		
Emergency Room	156	2.56	25,559	9.54	742	7.00		
Outpatient Facility	972	15.93	60,750	22.68	225	2.12		
Inpatient Facility	12,501	204.93	44,525	16.62	7,033	66.35		
Others	0	0.00	57,454	21.45	625	5.90		
Total	19,738	323.57	957,907	357.56	33,842	319.27	11,129,030	111.43
Projected FY2023 Member Months	3		2,172		96		28,338	
Projected FY2023 Premiums								
Current Rates	1,535	511.53	907,444	417.79	28,770	299.69	5,281,834	186.39
Current DSP Rates	0	0.00	0	0.00	38,167	397.58	38,167	1.35
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Adj.	1.0011		1.0016		0.9992			
Other Reimbursement Changes	1.0000		1.0000		1.0000			
Inpatient Reimbursement Changes	0.9971		1.0015		1.0017			
FQHC & Other Adjustments	1.0000		0.9783		0.9948			
PHE Related Adjustment	1.0000		1.0214		1.0000			
Projected Incurred Claims	1,093	364.31	878,037	404.25	34,421	358.55	4,113,398	145.15
Capitation & Other Expenses/Refunds								
Total	28	9.21	36,566	16.84	2,055	21.41	687,784	24.27
Reinsurance Expenses								
Net Reinsurance Cost	1	0.20	706	0.32	37	0.39	11,573	0.41
Administrative Expenses								
Fixed Amount	41	13.50	29,322	13.50	1,296	13.50	265,262	9.36
Percentage of Premium	5.25 %	22.22	5.25 %	24.96	5.25 %	22.60	5.25 %	10.29
Risk Margin	1.50 %	6.35	1.50 %	7.13	1.50 %	6.46	1.50 %	2.94
Premium Tax	1.75 %	7.41	1.75 %	8.32	1.75 %	7.53	1.75 %	3.43
Maintenance Tax	0	0.073	157	0.073	7	0.073	2,055	0.073
Projected Total Cost	1,270	423.27	1,032,556	475.39	41,329	430.51	5,551,990	195.92
Adjusted Total Cost	1,270	423.27	1,032,556	475.39	3,162	32.94	5,513,823	194.57
Experience Rate Increase		-17.3 %		13.8 %		-89.0 %		4.4 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	245		229,763		526,572		188,541	
Estimated Incurred Claims								
Professional	189,478	773.38	11,834,572	51.51	15,718,718	29.85	5,546,612	29.42
Emergency Room	658	2.68	1,409,087	6.13	2,328,223	4.42	1,299,900	6.89
Outpatient Facility	8,284	33.81	2,996,704	13.04	4,221,410	8.02	3,227,855	17.12
Inpatient Facility	0	0.00	2,377,205	10.35	4,238,206	8.05	2,517,065	13.35
Others	1,195	4.88	3,095,645	13.47	3,079,613	5.85	1,314,450	6.97
Total	199,615	814.75	21,713,214	94.50	29,586,170	56.19	13,905,882	73.76
Projected FY2023 Member Months	120		41,604		160,380		67,608	
Projected FY2023 Premiums								
Current Rates	33,890	282.42	4,974,606	119.57	12,754,791	79.53	6,986,786	103.34
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Adj.	1.0309		1.0273		1.0273		1.0285	
Other Reimbursement Changes	1.0000		1.0011		1.0059		1.0063	
Inpatient Reimbursement Changes	1.0000		0.9956		1.0005		1.0039	
FQHC & Other Adjustments	0.9879		0.9470		0.9379		0.9523	
PHE Related Adjustment	1.0000		0.9580		0.9745		1.0013	
Projected Incurred Claims	119,294	994.11	4,375,837	105.18	10,201,953	63.61	5,919,075	87.55
Capitation & Other Expenses/Refunds								
Total	78	0.65	25,888	0.62	113,870	0.71	47,662	0.70
Reinsurance Expenses								
Net Reinsurance Cost	22	0.18	7,904	0.19	30,779	0.19	13,562	0.20
Administrative Expenses								
Fixed Amount	1,080	9.00	374,436	9.00	1,443,420	9.00	608,472	9.00
Percentage of Premium	5.25 %	57.61	5.25 %	6.60	5.25 %	4.22	5.25 %	5.60
Risk Margin	1.50 %	16.46	1.50 %	1.89	1.50 %	1.21	1.50 %	1.60
Premium Tax	1.75 %	19.20	1.75 %	2.20	1.75 %	1.41	1.75 %	1.87
Maintenance Tax	9	0.073	3,016	0.073	11,628	0.073	4,902	0.073
Projected Total Cost	131,675	1,097.29	5,231,784	125.75	12,897,977	80.42	7,206,199	106.59
Adjusted Total Cost	131,675	1,097.29	5,231,784	125.75	12,897,977	80.42	7,206,199	106.59
Experience Rate Increase		288.5 %		5.2 %		1.1 %		3.1 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	424		68,393		958		1,014,896	
Estimated Incurred Claims								
Professional	62,848	148.23	20,121,137	294.20	246,589	257.40		
Emergency Room	3,195	7.54	350,424	5.12	5,773	6.03		
Outpatient Facility	3,033	7.15	2,284,998	33.41	29,819	31.13		
Inpatient Facility	64,827	152.89	75,730	1.11	137,801	143.84		
Others	1,308	3.08	374,666	5.48	2,233	2.33		
Total	135,211	318.89	23,206,955	339.32	422,215	440.73	89,169,261	87.86
Projected FY2023 Member Months	132		57,156		684		327,684	
Projected FY2023 Premiums								
Current Rates	67,522	511.53	21,688,777	379.47	204,988	299.69	46,711,361	142.55
Current DSP Rates	0	0.00	0	0.00	177,154	259.00	177,154	0.54
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Adj.	1.0195		1.0046		1.0064			
Other Reimbursement Changes	1.0000		1.0000		1.0000			
Inpatient Reimbursement Changes	1.0123		1.0010		1.0498			
FQHC & Other Adjustments	0.9430		0.8881		0.9533			
PHE Related Adjustment	1.0000		1.0000		1.0000			
Projected Incurred Claims	46,208	350.06	19,537,264	341.82	342,456	500.67	40,542,087	123.72
Capitation & Other Expenses/Refunds								
Total	120	0.91	63,842	1.12	670	0.98	252,131	0.77
Reinsurance Expenses								
Net Reinsurance Cost	32	0.25	15,114	0.26	198	0.29	67,612	0.21
Administrative Expenses								
Fixed Amount	1,782	13.50	771,606	13.50	9,234	13.50	3,210,030	9.80
Percentage of Premium	5.25 %	20.93	5.25 %	20.47	5.25 %	29.58	5.25 %	7.72
Risk Margin	1.50 %	5.98	1.50 %	5.85	1.50 %	8.45	1.50 %	2.21
Premium Tax	1.75 %	6.98	1.75 %	6.82	1.75 %	9.86	1.75 %	2.57
Maintenance Tax	10	0.073	4,144	0.073	50	0.073	23,757	0.073
Projected Total Cost	52,625	398.68	22,286,305	389.92	385,364	563.40	48,191,930	147.07
Adjusted Total Cost	52,625	398.68	22,286,305	389.92	208,210	304.40	48,014,776	146.53
Experience Rate Increase		-22.1 %		2.8 %		1.6 %		2.8 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	101		125,780		286,987		91,861	
Estimated Incurred Claims								
Professional	7,033	69.63	5,028,131	39.98	6,043,454	21.06	2,051,977	22.34
Emergency Room	1,864	18.46	2,591,271	20.60	3,415,804	11.90	1,281,893	13.95
Outpatient Facility	2,552	25.26	2,550,229	20.28	3,754,477	13.08	2,266,938	24.68
Inpatient Facility	0	0.00	2,719,521	21.62	3,010,387	10.49	2,115,889	23.03
Others	1,297	12.84	2,229,607	17.73	3,448,517	12.02	1,639,345	17.85
Total	12,745	126.19	15,118,759	120.20	19,672,639	68.55	9,356,041	101.85
Projected FY2023 Member Months	48		22,548		84,684		31,692	
Projected FY2023 Premiums								
Current Rates	13,556	282.42	3,606,895	159.97	7,949,703	93.87	4,331,356	136.67
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Adj.	1.0540		1.0150		1.0101		1.0073	
Other Reimbursement Changes	1.0000		1.0004		1.0054		1.0061	
Inpatient Reimbursement Changes	1.0000		0.9900		0.9877		0.9960	
FQHC & Other Adjustments	0.9948		0.9983		0.9984		0.9977	
PHE Related Adjustment	1.0000		0.9628		0.9757		1.0133	
Projected Incurred Claims	7,609	158.53	3,137,404	139.14	6,795,795	80.25	3,946,326	124.52
Capitation & Other Expenses/Refunds								
Total	-25	-0.52	7,601	0.34	27,535	0.33	12,157	0.38
Reinsurance Expenses								
Net Reinsurance Cost	4	0.08	1,584	0.07	5,787	0.07	2,176	0.07
Administrative Expenses								
Fixed Amount	432	9.00	202,932	9.00	762,156	9.00	285,228	9.00
Percentage of Premium	5.25 %	9.59	5.25 %	8.53	5.25 %	5.15	5.25 %	7.69
Risk Margin	1.50 %	2.74	1.50 %	2.44	1.50 %	1.47	1.50 %	2.20
Premium Tax	1.75 %	3.20	1.75 %	2.84	1.75 %	1.72	1.75 %	2.56
Maintenance Tax	3	0.073	1,635	0.073	6,140	0.073	2,298	0.073
Projected Total Cost	8,769	182.69	3,662,465	162.43	8,303,183	98.05	4,642,825	146.50
Adjusted Total Cost	8,769	182.69	3,662,465	162.43	8,303,183	98.05	4,642,825	146.50
Experience Rate Increase		-35.3 %		1.5 %		4.4 %		7.2 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	223		33,872		748		539,572	
Estimated Incurred Claims								
Professional	18,128	81.29	6,176,577	182.35	109,602	146.53		
Emergency Room	1,390	6.23	73,172	2.16	10,247	13.70		
Outpatient Facility	392	1.76	2,084,432	61.54	25,126	33.59		
Inpatient Facility	7,865	35.27	5,040	0.15	14,979	20.03		
Others	435	1.95	1,313,516	38.78	3,582	4.79		
Total	28,210	126.50	9,652,736	284.98	163,535	218.63	54,004,666	100.09
Projected FY2023 Member Months	84		28,404		372		167,832	
Projected FY2023 Premiums								
Current Rates	42,969	511.53	9,658,214	340.03	111,485	299.69	25,714,178	153.21
Current DSP Rates	0	0.00	0	0.00	69,080	185.70	69,080	0.41
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Adj.	1.0176		1.0018		1.0016			
Other Reimbursement Changes	1.0000		1.0000		1.0000			
Inpatient Reimbursement Changes	0.9968		1.0001		1.0000			
FQHC & Other Adjustments	0.9747		0.9569		0.9013			
PHE Related Adjustment	1.0000		0.9808		1.0000			
Projected Incurred Claims	11,850	141.07	8,585,570	302.27	82,817	222.63	22,567,371	134.46
Capitation & Other Expenses/Refunds								
Total	-1,054	-12.55	-20,957	-0.74	-553	-1.49	24,704	0.15
Reinsurance Expenses								
Net Reinsurance Cost	4	0.04	1,121	0.04	2	0.00	10,678	0.06
Administrative Expenses								
Fixed Amount	1,134	13.50	383,454	13.50	5,022	13.50	1,640,358	9.77
Percentage of Premium	5.25 %	8.16	5.25 %	18.08	5.25 %	13.47	5.25 %	8.29
Risk Margin	1.50 %	2.33	1.50 %	5.17	1.50 %	3.85	1.50 %	2.37
Premium Tax	1.75 %	2.72	1.75 %	6.03	1.75 %	4.49	1.75 %	2.76
Maintenance Tax	6	0.073	2,059	0.073	27	0.073	12,168	0.073
Projected Total Cost	13,048	155.34	9,782,785	344.42	95,426	256.52	26,508,501	157.95
Adjusted Total Cost	13,048	155.34	9,782,785	344.42	26,346	70.82	26,439,421	157.54
Experience Rate Increase		-69.6 %		1.3 %		-76.4 %		2.8 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	63		72,046		157,105		50,823	
Estimated Incurred Claims								
Professional	14,886	236.28	4,114,806	57.11	5,579,058	35.51	1,916,918	37.72
Emergency Room	0	0.00	492,706	6.84	713,493	4.54	298,825	5.88
Outpatient Facility	121	1.92	1,326,456	18.41	993,022	6.32	447,624	8.81
Inpatient Facility	0	0.00	2,197,104	30.50	1,282,865	8.17	1,795,739	35.33
Others	816	12.95	1,291,429	17.93	1,362,820	8.67	426,743	8.40
Total	15,822	251.15	9,422,500	130.78	9,931,257	63.21	4,885,850	96.13
Projected FY2023 Member Months	25		13,644		48,528		18,060	
Projected FY2023 Premiums								
Current Rates	7,061	282.42	2,141,295	156.94	3,896,725	80.30	1,917,207	106.16
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Adj.	1.0142		1.0129		1.0107		1.0086	
Other Reimbursement Changes	1.0000		1.0003		1.0057		1.0074	
Inpatient Reimbursement Changes	1.0000		0.9887		0.9961		0.9986	
FQHC & Other Adjustments	0.6583		0.8969		0.8522		0.9092	
PHE Related Adjustment	1.0000		0.9326		1.0170		0.9624	
Projected Incurred Claims	5,022	200.89	1,791,512	131.30	3,225,142	66.46	1,846,740	102.26
Capitation & Other Expenses/Refunds								
Total	52	2.08	22,035	1.62	76,743	1.58	27,559	1.53
Reinsurance Expenses								
Net Reinsurance Cost	6	0.24	3,191	0.23	10,609	0.22	4,021	0.22
Administrative Expenses								
Fixed Amount	225	9.00	122,796	9.00	436,752	9.00	162,540	9.00
Percentage of Premium	5.25 %	12.18	5.25 %	8.16	5.25 %	4.44	5.25 %	6.49
Risk Margin	1.50 %	3.48	1.50 %	2.33	1.50 %	1.27	1.50 %	1.85
Premium Tax	1.75 %	4.06	1.75 %	2.72	1.75 %	1.48	1.75 %	2.16
Maintenance Tax	2	0.073	989	0.073	3,518	0.073	1,309	0.073
Projected Total Cost	5,800	232.01	2,120,790	155.44	4,101,382	84.52	2,231,880	123.58
Adjusted Total Cost	5,800	232.01	2,120,790	155.44	4,101,382	84.52	2,231,880	123.58
Experience Rate Increase		-17.8 %		-1.0 %		5.3 %		16.4 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	101		24,469		307		304,914	
Estimated Incurred Claims								
Professional	17,781	176.05	10,402,608	425.13	95,168	309.99		
Emergency Room	788	7.80	136,262	5.57	302	0.98		
Outpatient Facility	113	1.12	274,898	11.23	1,334	4.34		
Inpatient Facility	13,425	132.92	404,331	16.52	22,861	74.47		
Others	0	0.00	1,539,850	62.93	13,430	43.75		
Total	32,107	317.89	12,757,949	521.39	133,094	433.53	37,178,579	121.93
Projected FY2023 Member Months	48		23,268		240		103,813	
Projected FY2023 Premiums								
Current Rates	24,553	511.53	9,022,347	387.76	71,926	299.69	17,081,114	164.54
Current DSP Rates	0	0.00	0	0.00	52,095	217.06	52,095	0.50
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Adj.	1.0063		0.9982		0.9983			
Other Reimbursement Changes	1.0000		1.0000		1.0000			
Inpatient Reimbursement Changes	1.0264		1.0003		1.0036			
FQHC & Other Adjustments	0.8539		0.6117		0.8177			
PHE Related Adjustment	1.0000		0.9992		1.0000			
Projected Incurred Claims	15,179	316.23	8,350,983	358.90	96,153	400.64	15,330,732	147.68
Capitation & Other Expenses/Refunds								
Total	63	1.31	-24,928	-1.07	23	0.09	101,546	0.98
Reinsurance Expenses								
Net Reinsurance Cost	8	0.18	3,841	0.17	60	0.25	21,737	0.21
Administrative Expenses								
Fixed Amount	648	13.50	314,118	13.50	3,240	13.50	1,040,319	10.02
Percentage of Premium	5.25 %	19.01	5.25 %	21.32	5.25 %	23.79	5.25 %	9.12
Risk Margin	1.50 %	5.43	1.50 %	6.09	1.50 %	6.80	1.50 %	2.61
Premium Tax	1.75 %	6.34	1.75 %	7.11	1.75 %	7.93	1.75 %	3.04
Maintenance Tax	3	0.073	1,687	0.073	17	0.073	7,526	0.073
Projected Total Cost	17,379	362.07	9,448,854	406.09	108,736	453.07	18,034,820	173.72
Adjusted Total Cost	17,379	362.07	9,448,854	406.09	56,641	236.00	17,982,725	173.22
Experience Rate Increase		-29.2 %		4.7 %		-21.3 %		5.3 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	920		1,053,300		2,460,245		846,173	
Estimated Incurred Claims								
Professional	283,622	308.28	55,582,497	52.77	71,506,268	29.06	25,207,326	29.79
Emergency Room	10,955	11.91	16,207,195	15.39	24,696,586	10.04	11,275,833	13.33
Outpatient Facility	31,676	34.43	25,455,764	24.17	40,911,289	16.63	22,594,797	26.70
Inpatient Facility	85,633	93.08	18,556,609	17.62	30,398,642	12.36	18,195,860	21.50
Others	3,758	4.09	12,200,133	11.58	17,813,825	7.24	8,530,653	10.08
Total	415,644	451.79	128,002,199	121.52	185,326,610	75.33	85,804,469	101.40
Projected FY2023 Member Months	413		189,384		731,736		295,680	
Projected FY2023 Premiums								
Current Rates	116,639	282.42	29,582,756	156.21	74,567,266	101.90	39,189,876	132.54
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Adj.	1.0257		1.0169		1.0134		1.0124	
Other Reimbursement Changes	1.0000		1.0006		1.0043		1.0045	
Inpatient Reimbursement Changes	0.9893		0.9862		0.9881		0.9828	
FQHC & Other Adjustments	0.9754		0.9704		0.9645		0.9731	
PHE Related Adjustment	1.0000		0.9573		0.9708		1.0429	
Projected Incurred Claims	221,252	535.72	25,707,081	135.74	62,177,434	84.97	36,435,411	123.23
Capitation & Other Expenses/Refunds								
Total	668	1.62	394,118	2.08	1,596,827	2.18	646,489	2.19
Reinsurance Expenses								
Net Reinsurance Cost	53	0.13	28,613	0.15	111,902	0.15	46,860	0.16
Administrative Expenses								
Fixed Amount	3,717	9.00	1,704,456	9.00	6,585,624	9.00	2,661,120	9.00
Percentage of Premium	5.25 %	31.36	5.25 %	8.44	5.25 %	5.53	5.25 %	7.73
Risk Margin	1.50 %	8.96	1.50 %	2.41	1.50 %	1.58	1.50 %	2.21
Premium Tax	1.75 %	10.45	1.75 %	2.81	1.75 %	1.84	1.75 %	2.58
Maintenance Tax	30	0.073	13,730	0.073	53,051	0.073	21,437	0.073
Projected Total Cost	246,689	597.31	30,434,971	160.71	77,076,326	105.33	43,509,636	147.15
Adjusted Total Cost	246,689	597.31	30,434,971	160.71	77,076,326	105.33	43,509,636	147.15
Experience Rate Increase		111.5 %		2.9 %		3.4 %		11.0 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	1,880		355,764		5,047		4,723,329	
Estimated Incurred Claims								
Professional	211,322	112.41	97,702,302	274.63	1,155,661	228.98		
Emergency Room	17,525	9.32	1,551,057	4.36	44,141	8.75		
Outpatient Facility	59,918	31.87	31,577,845	88.76	301,788	59.80		
Inpatient Facility	236,603	125.85	909,147	2.56	684,547	135.63		
Others	4,229	2.25	7,438,783	20.91	54,791	10.86		
Total	529,596	281.70	139,179,135	391.21	2,240,928	444.01	541,498,580	114.64
Projected FY2023 Member Months	753		312,768		3,375		1,534,109	
Projected FY2023 Premiums								
Current Rates	385,182	511.53	129,969,696	415.55	1,011,454	299.69	274,822,869	179.14
Current DSP Rates	0	0.00	0	0.00	858,389	254.34	858,389	0.56
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Adj.	1.0106		0.9997		1.0002			
Other Reimbursement Changes	1.0000		1.0000		1.0000			
Inpatient Reimbursement Changes	0.9885		0.9773		1.0033			
FQHC & Other Adjustments	0.9560		0.8790		0.9391			
PHE Related Adjustment	1.0000		0.9935		1.0000			
Projected Incurred Claims	228,485	303.43	117,751,874	376.48	1,592,912	471.97	244,114,449	159.12
Capitation & Other Expenses/Refunds								
Total	-940	-1.25	155,551	0.50	2,854	0.85	2,795,566	1.82
Reinsurance Expenses								
Net Reinsurance Cost	130	0.17	50,317	0.16	568	0.17	238,442	0.16
Administrative Expenses								
Fixed Amount	10,166	13.50	4,222,368	13.50	45,563	13.50	15,233,013	9.93
Percentage of Premium	5.25 %	18.13	5.25 %	22.42	5.25 %	27.92	5.25 %	9.82
Risk Margin	1.50 %	5.18	1.50 %	6.41	1.50 %	7.98	1.50 %	2.80
Premium Tax	1.75 %	6.04	1.75 %	7.47	1.75 %	9.31	1.75 %	3.27
Maintenance Tax	55	0.073	22,676	0.073	245	0.073	111,223	0.073
Projected Total Cost	259,995	345.28	133,554,956	427.01	1,794,688	531.76	286,877,260	187.00
Adjusted Total Cost	259,995	345.28	133,554,956	427.01	936,299	277.42	286,018,871	186.44
Experience Rate Increase		-32.5 %		2.8 %		-7.4 %		4.1 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	62		86,984		199,238		69,368	
Estimated Pharmacy Claims								
Incurred Claims	39	0.62	1,475,469	16.96	5,321,632	26.71	2,074,898	29.91
Other Pharmacy Cost	-5	-0.07	-21,510	-0.25	-47,072	-0.24	-15,841	-0.23
Total	34	0.55	1,453,959	16.72	5,274,560	26.47	2,059,057	29.68
Projected FY2023 Member Months	15		14,772		57,216		22,788	
Projected FY2023 Premiums								
Current Rates	133	8.84	290,118	19.64	1,867,376	32.64	832,311	36.52
Annual Trend Assumption	6.7 %		6.7 %		6.7 %		6.7 %	
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		0.8903		0.9721		1.0000	
PHE Related Adj.	1.0000		0.8304		0.9676		0.9084	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	10	0.69	229,072	15.51	1,787,853	31.25	771,024	33.83
Administrative Expenses	24	1.60	23,635	1.60	91,546	1.60	36,461	1.60
Risk Margin	1.50 %	0.04	1.50 %	0.27	1.50 %	0.51	1.50 %	0.55
Premium Tax	1.75 %	0.04	1.75 %	0.31	1.75 %	0.59	1.75 %	0.64
Projected Total Cost	35	2.36	261,196	17.68	1,942,531	33.95	834,610	36.62
Experience Rate Increase		-73.3 %		-10.0 %		4.0 %		0.3 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	109		16,176		373		372,310	
Estimated Pharmacy Claims								
Incurred Claims	22	0.20	871,293	53.86	26,971	72.31		
Other Pharmacy Cost	-48	-0.44	-7,175	-0.44	-147	-0.40		
Total	-25	-0.23	864,117	53.42	26,824	71.91	9,678,527	26.00
Projected FY2023 Member Months	38		15,900		180		110,909	
Projected FY2023 Premiums								
Current Rates	323	8.50	1,044,169	65.67	12,564	69.80	4,046,994	36.49
Annual Trend Assumption	6.7 %		6.7 %		6.7 %			
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		1.0000		1.0000			
PHE Related Adj.	1.0000		0.9624		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	-11	-0.29	1,025,722	64.51	16,243	90.24	3,829,914	34.53
Administrative Expenses	61	1.60	25,440	1.60	288	1.60	177,454	1.60
Risk Margin	1.50 %	0.02	1.50 %	1.02	1.50 %	1.42	1.50 %	0.56
Premium Tax	1.75 %	0.02	1.75 %	1.20	1.75 %	1.66	1.75 %	0.65
Projected Total Cost	51	1.35	1,086,473	68.33	17,086	94.92	4,141,983	37.35
Experience Rate Increase		-84.1 %		4.1 %		36.0 %		2.3 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	135		165,607		404,048		134,327	
Estimated Pharmacy Claims								
Incurred Claims	974	7.22	2,244,643	13.55	10,276,656	25.43	4,152,096	30.91
Other Pharmacy Cost	-2	-0.01	-12,343	-0.07	-29,435	-0.07	-10,046	-0.07
Total	973	7.21	2,232,299	13.48	10,247,221	25.36	4,142,051	30.84
Projected FY2023 Member Months	49		30,048		118,176		47,604	
Projected FY2023 Premiums								
Current Rates	433	8.84	489,461	16.29	3,468,250	29.35	1,770,844	37.20
Annual Trend Assumption	6.7 %		6.7 %		6.7 %		6.7 %	
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		0.8531		0.9355		0.9908	
PHE Related Adj.	1.0000		0.9408		0.9521		0.9675	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	443	9.04	407,887	13.57	3,349,535	28.34	1,765,747	37.09
Administrative Expenses	78	1.60	48,077	1.60	189,082	1.60	76,166	1.60
Risk Margin	1.50 %	0.16	1.50 %	0.24	1.50 %	0.46	1.50 %	0.60
Premium Tax	1.75 %	0.19	1.75 %	0.27	1.75 %	0.54	1.75 %	0.70
Projected Total Cost	539	11.00	471,281	15.68	3,657,485	30.95	1,903,787	39.99
Experience Rate Increase		24.4 %		-3.7 %		5.5 %		7.5 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	272		69,156		840		774,385	
Estimated Pharmacy Claims								
Incurred Claims	570	2.09	1,753,485	25.36	27,401	32.62		
Other Pharmacy Cost	-79	-0.29	-11,532	-0.17	-154	-0.18		
Total	491	1.80	1,741,953	25.19	27,247	32.44	18,392,234	23.75
Projected FY2023 Member Months	96		64,668		732		261,373	
Projected FY2023 Premiums								
Current Rates	816	8.50	1,946,239	30.10	51,094	69.80	7,727,138	29.56
Annual Trend Assumption	6.7 %		6.7 %		6.7 %			
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		1.0000		1.0000			
PHE Related Adj.	1.0000		0.9664		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	217	2.26	1,975,279	30.54	29,794	40.70	7,528,903	28.81
Administrative Expenses	154	1.60	103,469	1.60	1,171	1.60	418,197	1.60
Risk Margin	1.50 %	0.06	1.50 %	0.50	1.50 %	0.66	1.50 %	0.47
Premium Tax	1.75 %	0.07	1.75 %	0.58	1.75 %	0.77	1.75 %	0.55
Projected Total Cost	383	3.99	2,148,576	33.22	32,005	43.72	8,214,056	31.43
Experience Rate Increase		-53.0 %		10.4 %		-37.4 %		6.3 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	10		33,328		88,347		35,154	
Estimated Pharmacy Claims								
Incurred Claims	80	7.97	354,980	10.65	2,397,727	27.14	1,596,651	45.42
Other Pharmacy Cost	-4	-0.38	-10,270	-0.31	-26,815	-0.30	-10,728	-0.31
Total	76	7.59	344,711	10.34	2,370,912	26.84	1,585,923	45.11
Projected FY2023 Member Months	24		6,060		26,472		12,036	
Projected FY2023 Premiums								
Current Rates	212	8.84	74,437	12.28	884,291	33.40	429,668	35.70
Annual Trend Assumption	6.7 %		6.7 %		6.7 %		6.7 %	
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		0.8692		1.0000		0.6393	
PHE Related Adj.	1.0000		0.8377		0.9019		0.9037	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	228	9.52	57,265	9.45	803,978	30.37	393,623	32.70
Administrative Expenses	38	1.60	9,696	1.60	42,355	1.60	19,258	1.60
Risk Margin	1.50 %	0.17	1.50 %	0.17	1.50 %	0.50	1.50 %	0.53
Premium Tax	1.75 %	0.20	1.75 %	0.20	1.75 %	0.58	1.75 %	0.62
Projected Total Cost	276	11.49	69,210	11.42	874,763	33.04	426,750	35.46
Experience Rate Increase		30.0 %		-7.0 %		-1.1 %		-0.7 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	53		7,021		133		164,046	
Estimated Pharmacy Claims								
Incurred Claims	59	1.12	453,718	64.62	4,024	30.26		
Other Pharmacy Cost	-53	-1.01	-7,220	-1.03	-78	-0.59		
Total	6	0.11	446,497	63.59	3,946	29.67	4,752,071	28.97
Projected FY2023 Member Months	24		5,580		49		50,245	
Projected FY2023 Premiums								
Current Rates	204	8.50	429,737	77.01	3,420	69.80	1,821,969	36.26
Annual Trend Assumption	6.7 %		6.7 %		6.7 %			
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		1.0000		1.0000			
PHE Related Adj.	1.0000		0.9162		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	3	0.14	407,962	73.11	1,824	37.23	1,664,884	33.14
Administrative Expenses	38	1.60	8,928	1.60	78	1.60	80,392	1.60
Risk Margin	1.50 %	0.03	1.50 %	1.16	1.50 %	0.60	1.50 %	0.54
Premium Tax	1.75 %	0.03	1.75 %	1.35	1.75 %	0.70	1.75 %	0.63
Projected Total Cost	43	1.80	430,894	77.22	1,967	40.14	1,803,903	35.90
Experience Rate Increase		-78.8 %		0.3 %		-42.5 %		-1.0 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	253		270,029		633,941		220,457	
Estimated Pharmacy Claims								
Incurred Claims	1,672	6.61	3,660,873	13.56	16,276,832	25.68	6,622,644	30.04
Other Pharmacy Cost	-76	-0.30	-72,677	-0.27	-168,191	-0.27	-58,726	-0.27
Total	1,596	6.31	3,588,196	13.29	16,108,640	25.41	6,563,918	29.77
Projected FY2023 Member Months	122		48,792		188,124		76,500	
Projected FY2023 Premiums								
Current Rates	1,078	8.84	824,993	16.91	5,962,421	31.69	2,590,181	33.86
Annual Trend Assumption	6.7 %		6.7 %		6.7 %		6.7 %	
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		0.9878		0.9875		0.8956	
PHE Related Adj.	1.0000		0.9638		0.9400		1.0346	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	966	7.91	774,560	15.87	5,567,800	29.60	2,648,312	34.62
Administrative Expenses	195	1.60	78,067	1.60	300,998	1.60	122,400	1.60
Risk Margin	1.50 %	0.15	1.50 %	0.27	1.50 %	0.48	1.50 %	0.56
Premium Tax	1.75 %	0.17	1.75 %	0.32	1.75 %	0.56	1.75 %	0.66
Projected Total Cost	1,200	9.83	881,268	18.06	6,065,942	32.24	2,863,785	37.44
Experience Rate Increase		11.2 %		6.8 %		1.7 %		10.6 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	550		123,603		1,335		1,250,168	
Estimated Pharmacy Claims								
Incurred Claims	1,290	2.35	8,276,440	66.96	84,814	63.53		
Other Pharmacy Cost	-390	-0.71	-83,621	-0.68	-868	-0.65		
Total	901	1.64	8,192,819	66.28	83,946	62.88	34,540,016	27.63
Projected FY2023 Member Months	288		106,344		852		421,022	
Projected FY2023 Premiums								
Current Rates	2,448	8.50	8,503,263	79.96	59,470	69.80	17,943,854	42.62
Annual Trend Assumption	6.7 %		6.7 %		6.7 %			
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		1.0000		1.0000			
PHE Related Adj.	1.0000		0.9425		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	592	2.05	8,336,316	78.39	67,226	78.90	17,395,771	41.32
Administrative Expenses	461	1.60	170,150	1.60	1,363	1.60	673,635	1.60
Risk Margin	1.50 %	0.06	1.50 %	1.24	1.50 %	1.25	1.50 %	0.67
Premium Tax	1.75 %	0.07	1.75 %	1.45	1.75 %	1.46	1.75 %	0.78
Projected Total Cost	1,088	3.78	8,792,213	82.68	70,893	83.21	18,676,388	44.36
Experience Rate Increase		-55.6 %		3.4 %		19.2 %		4.1 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	18		20,623		49,657		15,938	
Estimated Pharmacy Claims								
Incurred Claims	107	5.95	206,333	10.00	9,284,742	186.98	399,599	25.07
Other Pharmacy Cost	-6	-0.33	-6,553	-0.32	-15,964	-0.32	-5,164	-0.32
Total	101	5.62	199,780	9.69	9,268,778	186.66	394,435	24.75
Projected FY2023 Member Months	5		3,744		16,104		6,264	
Projected FY2023 Premiums								
Current Rates	44	8.84	51,586	13.78	667,068	41.42	208,733	33.32
Annual Trend Assumption	6.7 %		6.7 %		6.7 %		6.7 %	
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		1.0000		0.1570		0.9446	
PHE Related Adj.	1.0000		0.8980		0.9440		0.9959	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	35	7.05	40,868	10.92	559,078	34.72	182,998	29.21
Administrative Expenses	8	1.60	5,990	1.60	25,766	1.60	10,022	1.60
Risk Margin	1.50 %	0.13	1.50 %	0.19	1.50 %	0.56	1.50 %	0.48
Premium Tax	1.75 %	0.16	1.75 %	0.23	1.75 %	0.66	1.75 %	0.56
Projected Total Cost	45	8.94	48,433	12.94	604,490	37.54	199,504	31.85
Experience Rate Increase		1.1 %		-6.1 %		-9.4 %		-4.4 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	46		6,046		122		92,450	
Estimated Pharmacy Claims								
Incurred Claims	0	0.00	364,537	60.29	6,833	56.01		
Other Pharmacy Cost	-15	-0.33	-1,691	-0.28	-30	-0.25		
Total	-15	-0.33	362,846	60.01	6,802	55.76	10,232,727	110.68
Projected FY2023 Member Months	38		6,096		98		32,349	
Projected FY2023 Premiums								
Current Rates	323	8.50	457,373	75.03	6,840	69.80	1,391,968	43.03
Annual Trend Assumption	6.7 %		6.7 %		6.7 %			
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		1.0000		1.0000			
PHE Related Adj.	1.0000		0.9402		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	-16	-0.41	431,613	70.80	6,857	69.97	1,221,434	37.76
Administrative Expenses	61	1.60	9,754	1.60	157	1.60	51,758	1.60
Risk Margin	1.50 %	0.02	1.50 %	1.12	1.50 %	1.11	1.50 %	0.61
Premium Tax	1.75 %	0.02	1.75 %	1.31	1.75 %	1.29	1.75 %	0.71
Projected Total Cost	47	1.22	456,193	74.83	7,249	73.97	1,315,961	40.68
Experience Rate Increase		-85.6 %		-0.3 %		6.0 %		-5.5 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	31		25,686		59,999		20,489	
Estimated Pharmacy Claims								
Incurred Claims	12	0.40	250,471	9.75	1,927,031	32.12	753,956	36.80
Other Pharmacy Cost	-12	-0.39	-9,697	-0.38	-23,329	-0.39	-8,129	-0.40
Total	1	0.02	240,774	9.37	1,903,702	31.73	745,827	36.40
Projected FY2023 Member Months	2		4,452		16,224		6,612	
Projected FY2023 Premiums								
Current Rates	18	8.84	48,737	10.95	578,094	35.63	260,110	39.34
Annual Trend Assumption	6.7 %		6.7 %		6.7 %		6.7 %	
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		1.0000		0.9105		1.0000	
PHE Related Adj.	1.0000		0.8666		0.9612		1.0637	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	0	0.02	45,380	10.19	565,312	34.84	321,251	48.59
Administrative Expenses	3	1.60	7,123	1.60	25,958	1.60	10,579	1.60
Risk Margin	1.50 %	0.03	1.50 %	0.18	1.50 %	0.57	1.50 %	0.78
Premium Tax	1.75 %	0.03	1.75 %	0.21	1.75 %	0.66	1.75 %	0.91
Projected Total Cost	3	1.67	54,267	12.19	611,132	37.67	342,977	51.87
Experience Rate Increase		-81.1 %		11.3 %		5.7 %		31.9 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	42		4,349		126		110,722	
Estimated Pharmacy Claims								
Incurred Claims	384	9.15	184,419	42.40	3,646	28.94		
Other Pharmacy Cost	-16	-0.39	-1,762	-0.41	-41	-0.32		
Total	368	8.76	182,656	42.00	3,605	28.61	3,076,933	27.79
Projected FY2023 Member Months	2		3,180		72		30,544	
Projected FY2023 Premiums								
Current Rates	17	8.50	156,434	49.19	5,026	69.80	1,048,434	34.33
Annual Trend Assumption	6.7 %		6.7 %		6.7 %			
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		1.0000		1.0000			
PHE Related Adj.	1.0000		0.8854		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	22	11.00	148,384	46.66	2,585	35.90	1,082,934	35.45
Administrative Expenses	3	1.60	5,088	1.60	115	1.60	48,870	1.60
Risk Margin	1.50 %	0.20	1.50 %	0.75	1.50 %	0.58	1.50 %	0.57
Premium Tax	1.75 %	0.23	1.75 %	0.87	1.75 %	0.68	1.75 %	0.67
Projected Total Cost	26	13.02	158,628	49.88	2,791	38.76	1,169,824	38.30
Experience Rate Increase		53.2 %		1.4 %		-44.5 %		11.6 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	7		23,454		54,351		19,215	
Estimated Pharmacy Claims								
Incurred Claims	23	3.30	429,229	18.30	2,713,578	49.93	787,475	40.98
Other Pharmacy Cost	-6	-0.88	-9,908	-0.42	-22,611	-0.42	-7,775	-0.40
Total	17	2.42	419,321	17.88	2,690,967	49.51	779,700	40.58
Projected FY2023 Member Months	3		3,720		15,828		6,516	
Projected FY2023 Premiums								
Current Rates	27	8.84	58,565	15.74	869,904	54.96	331,242	50.84
Annual Trend Assumption	6.7 %		6.7 %		6.7 %		6.7 %	
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		0.7106		0.8973		1.0000	
PHE Related Adj.	1.0000		0.8427		0.8913		0.9902	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	9	3.04	49,975	13.43	786,453	49.69	328,524	50.42
Administrative Expenses	5	1.60	5,952	1.60	25,325	1.60	10,426	1.60
Risk Margin	1.50 %	0.07	1.50 %	0.23	1.50 %	0.80	1.50 %	0.81
Premium Tax	1.75 %	0.08	1.75 %	0.27	1.75 %	0.93	1.75 %	0.94
Projected Total Cost	14	4.79	57,806	15.54	839,047	53.01	350,335	53.77
Experience Rate Increase		-45.8 %		-1.3 %		-3.5 %		5.8 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	61		2,679		106		99,873	
Estimated Pharmacy Claims								
Incurred Claims	25	0.41	169,966	63.44	5,534	52.21		
Other Pharmacy Cost	-54	-0.89	-1,629	-0.61	-52	-0.49		
Total	-29	-0.48	168,337	62.84	5,482	51.72	4,063,794	40.69
Projected FY2023 Member Months	3		2,172		96		28,338	
Projected FY2023 Premiums								
Current Rates	26	8.50	151,104	69.57	6,701	69.80	1,417,567	50.02
Annual Trend Assumption	6.7 %		6.7 %		6.7 %			
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		1.0000		1.0000			
PHE Related Adj.	1.0000		1.0698		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	-2	-0.61	183,208	84.35	6,230	64.89	1,354,397	47.79
Administrative Expenses	5	1.60	3,475	1.60	154	1.60	45,341	1.60
Risk Margin	1.50 %	0.02	1.50 %	1.33	1.50 %	1.03	1.50 %	0.77
Premium Tax	1.75 %	0.02	1.75 %	1.55	1.75 %	1.20	1.75 %	0.89
Projected Total Cost	3	1.03	192,954	88.84	6,598	68.73	1,446,757	51.05
Experience Rate Increase		-87.9 %		27.7 %		-1.5 %		2.1 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	245		229,763		526,572		188,541	
Estimated Pharmacy Claims								
Incurred Claims	1,950	7.96	3,968,672	17.27	14,793,347	28.09	5,062,256	26.85
Other Pharmacy Cost	-135	-0.55	-125,452	-0.55	-286,904	-0.54	-101,744	-0.54
Total	1,815	7.41	3,843,220	16.73	14,506,443	27.55	4,960,512	26.31
Projected FY2023 Member Months	120		41,604		160,380		67,608	
Projected FY2023 Premiums								
Current Rates	1,061	8.84	776,186	18.66	5,232,583	32.63	2,048,892	30.31
Annual Trend Assumption	6.7 %		6.7 %		6.7 %		6.7 %	
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		0.8787		0.9547		0.9216	
PHE Related Adj.	1.0000		0.9540		0.9479		1.0228	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	1,115	9.30	731,977	17.59	5,016,990	31.28	2,103,826	31.12
Administrative Expenses	192	1.60	66,566	1.60	256,608	1.60	108,173	1.60
Risk Margin	1.50 %	0.17	1.50 %	0.30	1.50 %	0.51	1.50 %	0.51
Premium Tax	1.75 %	0.20	1.75 %	0.35	1.75 %	0.59	1.75 %	0.59
Projected Total Cost	1,351	11.26	825,368	19.84	5,450,747	33.99	2,286,304	33.82
Experience Rate Increase		27.4 %		6.3 %		4.2 %		11.6 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	424		68,393		958		1,014,896	
Estimated Pharmacy Claims								
Incurred Claims	952	2.25	4,451,918	65.09	44,437	46.39		
Other Pharmacy Cost	-293	-0.69	-48,065	-0.70	-688	-0.72		
Total	659	1.56	4,403,853	64.39	43,749	45.67	27,760,251	27.35
Projected FY2023 Member Months	132		57,156		684		327,684	
Projected FY2023 Premiums								
Current Rates	1,122	8.50	4,460,625	78.04	47,743	69.80	12,568,212	38.35
Annual Trend Assumption	6.7 %		6.7 %		6.7 %			
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		1.0000		1.0000			
PHE Related Adj.	1.0000		0.9373		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	258	1.95	4,328,497	75.73	39,195	57.30	12,221,858	37.30
Administrative Expenses	211	1.60	91,450	1.60	1,094	1.60	524,294	1.60
Risk Margin	1.50 %	0.06	1.50 %	1.20	1.50 %	0.91	1.50 %	0.60
Premium Tax	1.75 %	0.06	1.75 %	1.40	1.75 %	1.07	1.75 %	0.70
Projected Total Cost	485	3.67	4,568,420	79.93	41,643	60.88	13,174,317	40.20
Experience Rate Increase		-56.8 %		2.4 %		-12.8 %		4.8 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	101		125,780		286,987		91,861	
Estimated Pharmacy Claims								
Incurred Claims	29	0.29	1,485,281	11.81	7,331,936	25.55	3,416,411	37.19
Other Pharmacy Cost	-12	-0.12	-16,470	-0.13	-53,305	-0.19	-19,925	-0.22
Total	17	0.17	1,468,811	11.68	7,278,630	25.36	3,396,486	36.97
Projected FY2023 Member Months	48		22,548		84,684		31,692	
Projected FY2023 Premiums								
Current Rates	424	8.84	315,017	13.97	2,652,774	31.33	1,387,104	43.77
Annual Trend Assumption	6.7 %		6.7 %		6.7 %		6.7 %	
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		0.9068		0.9927		0.9652	
PHE Related Adj.	1.0000		1.0101		0.8940		1.0134	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	10	0.21	302,619	13.42	2,391,724	28.24	1,438,245	45.38
Administrative Expenses	77	1.60	36,077	1.60	135,494	1.60	50,707	1.60
Risk Margin	1.50 %	0.03	1.50 %	0.23	1.50 %	0.46	1.50 %	0.73
Premium Tax	1.75 %	0.03	1.75 %	0.27	1.75 %	0.54	1.75 %	0.85
Projected Total Cost	90	1.87	350,073	15.53	2,612,112	30.85	1,538,969	48.56
Experience Rate Increase		-78.9 %		11.1 %		-1.5 %		10.9 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	223		33,872		748		539,572	
Estimated Pharmacy Claims								
Incurred Claims	222	0.99	2,972,698	87.76	35,152	46.99		
Other Pharmacy Cost	155	0.69	-22,129	-0.65	-174	-0.23		
Total	376	1.69	2,950,570	87.11	34,978	46.76	15,129,868	28.04
Projected FY2023 Member Months	84		28,404		372		167,832	
Projected FY2023 Premiums								
Current Rates	714	8.50	2,976,222	104.78	25,966	69.80	7,358,222	43.84
Annual Trend Assumption	6.7 %		6.7 %		6.7 %			
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		1.0000		1.0000			
PHE Related Adj.	1.0000		0.9064		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	178	2.12	2,814,103	99.07	21,828	58.68	6,968,707	41.52
Administrative Expenses	134	1.60	45,446	1.60	595	1.60	268,531	1.60
Risk Margin	1.50 %	0.06	1.50 %	1.56	1.50 %	0.93	1.50 %	0.67
Premium Tax	1.75 %	0.07	1.75 %	1.82	1.75 %	1.09	1.75 %	0.78
Projected Total Cost	323	3.84	2,955,606	104.06	23,176	62.30	7,480,349	44.57
Experience Rate Increase		-54.8 %		-0.7 %		-10.7 %		1.7 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	63		72,046		157,105		50,823	
Estimated Pharmacy Claims								
Incurred Claims	132	2.09	703,824	9.77	5,426,744	34.54	1,566,275	30.82
Other Pharmacy Cost	-5	-0.08	-16,725	-0.23	-40,500	-0.26	-13,721	-0.27
Total	126	2.00	687,100	9.54	5,386,244	34.28	1,552,554	30.55
Projected FY2023 Member Months	25		13,644		48,528		18,060	
Projected FY2023 Premiums								
Current Rates	221	8.84	175,729	12.88	1,828,360	37.68	722,837	40.02
Annual Trend Assumption	6.7 %		6.7 %		6.7 %		6.7 %	
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		0.9589		0.8833		1.0000	
PHE Related Adj.	1.0000		0.8389		0.9209		0.9798	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	63	2.51	131,338	9.63	1,698,252	35.00	678,293	37.56
Administrative Expenses	40	1.60	21,830	1.60	77,645	1.60	28,896	1.60
Risk Margin	1.50 %	0.06	1.50 %	0.17	1.50 %	0.57	1.50 %	0.61
Premium Tax	1.75 %	0.07	1.75 %	0.20	1.75 %	0.66	1.75 %	0.71
Projected Total Cost	106	4.25	158,314	11.60	1,835,552	37.82	730,944	40.47
Experience Rate Increase		-51.9 %		-9.9 %		0.4 %		1.1 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	101		24,469		307		304,914	
Estimated Pharmacy Claims								
Incurred Claims	2,703	26.76	643,858	26.31	11,068	36.05		
Other Pharmacy Cost	-31	-0.30	-5,922	-0.24	-99	-0.32		
Total	2,672	26.46	637,937	26.07	10,969	35.73	8,277,602	27.15
Projected FY2023 Member Months	48		23,268		240		103,813	
Projected FY2023 Premiums								
Current Rates	408	8.50	713,805	30.68	16,752	69.80	3,458,112	33.31
Annual Trend Assumption	6.7 %		6.7 %		6.7 %			
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		1.0000		1.0000			
PHE Related Adj.	1.0000		0.8823		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	1,594	33.20	671,602	28.86	10,760	44.83	3,191,901	30.75
Administrative Expenses	77	1.60	37,229	1.60	384	1.60	166,101	1.60
Risk Margin	1.50 %	0.54	1.50 %	0.47	1.50 %	0.72	1.50 %	0.50
Premium Tax	1.75 %	0.63	1.75 %	0.55	1.75 %	0.84	1.75 %	0.59
Projected Total Cost	1,726	35.97	732,642	31.49	11,518	47.99	3,470,803	33.43
Experience Rate Increase		323.1 %		2.6 %		-31.2 %		0.4 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	925		1,053,300		2,460,245		846,173	
Estimated Pharmacy Claims								
Incurred Claims	5,424	5.86	14,744,099	14.00	76,491,593	31.09	26,373,445	31.17
Other Pharmacy Cost	-284	-0.31	-301,276	-0.29	-718,725	-0.29	-252,806	-0.30
Total	5,141	5.56	14,442,824	13.71	75,772,868	30.80	26,120,639	30.87
Projected FY2023 Member Months	413		189,384		731,736		295,680	
Projected FY2023 Premiums								
Current Rates	3,651	8.84	3,104,828	16.39	24,011,124	32.81	10,581,922	35.79
Annual Trend Assumption	6.7 %		6.7 %		6.7 %		6.7 %	
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		0.9090		0.8506		0.9303	
PHE Related Adj.	1.0000		0.9355		0.9365		0.9978	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	2,880	6.97	2,770,940	14.63	22,526,976	30.79	10,631,844	35.96
Administrative Expenses	661	1.60	303,014	1.60	1,170,778	1.60	473,088	1.60
Risk Margin	1.50 %	0.13	1.50 %	0.25	1.50 %	0.50	1.50 %	0.58
Premium Tax	1.75 %	0.16	1.75 %	0.29	1.75 %	0.59	1.75 %	0.68
Projected Total Cost	3,660	8.86	3,177,214	16.78	24,493,802	33.47	11,477,966	38.82
Experience Rate Increase		0.2 %		2.3 %		2.0 %		8.5 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - 3/19-2/20								
Member Months	1,881		355,764		5,048		4,723,336	
Estimated Pharmacy Claims								
Incurred Claims	6,483	3.45	19,841,133	55.77	243,726	48.28		
Other Pharmacy Cost	-840	-0.45	-186,761	-0.52	-2,301	-0.46		
Total	5,643	3.00	19,654,372	55.25	241,425	47.83	136,242,911	28.84
Projected FY2023 Member Months	753		312,768		3,375		1,534,109	
Projected FY2023 Premiums								
Current Rates	6,401	8.50	20,838,970	66.63	235,575	69.80	58,782,470	38.32
Annual Trend Assumption	6.7 %		6.7 %		6.7 %			
Pharmacy Adjustments								
Hemostatic Carveout	1.0000		1.0000		1.0000			
PHE Related Adj.	1.0000		0.9373		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	2,835	3.76	20,322,686	64.98	202,540	60.01	56,460,700	36.80
Administrative Expenses	1,205	1.60	500,429	1.60	5,400	1.60	2,454,574	1.60
Risk Margin	1.50 %	0.08	1.50 %	1.03	1.50 %	0.96	1.50 %	0.60
Premium Tax	1.75 %	0.10	1.75 %	1.20	1.75 %	1.11	1.75 %	0.69
Projected Total Cost	4,175	5.54	21,522,599	68.81	214,926	63.68	60,894,341	39.69
Experience Rate Increase		-34.8 %		3.3 %		-8.8 %		3.6 %

Attachment 4

Trend Analysis – Medical

The rating methodology uses assumed trend factors to adjust the base period claims cost to the projection period. The cost trend factors used in this analysis are a combination of utilization and inflation components. The projected trend rate assumptions were developed by the actuary based on an analysis of recent experience under the CHIP program. A single trend assumption applies to all service areas but varies by CHIP Perinate versus CHIP non-Perinate programs.

The trend analysis included a review of health plan claims experience data through February 2022. The historical claims cost and trend experience was reviewed separately by service area and risk group. The service area trends were then combined into a statewide average using a weighted average formula with estimated incurred claims as the weights. CHIP experience after February 2020 has been excluded from the trend analysis due to the significant reduction in cost caused by the COVID-19 pandemic and the corresponding PHE declaration. These patterns are not expected to continue into the future and therefore the trends for this time period are not assigned any credibility. All historical trends have been calculated as the average cost per member per month during a specified time period (monthly, quarterly or annually) compared to the same time period from the prior year. For example, the FY2019 trend has been calculated as the change in average cost per member per month during the period September 1, 2018 through August 31, 2019 (FY2019) compared to the average cost per member per month during the period September 1, 2017 through August 31, 2018 (FY2018). The experience trends for all time periods were adjusted to remove the impact of various provider reimbursement changes and other revisions that have impacted the cost of the program.

The trend assumptions were then developed from an average of the FY2017, FY2018, FY2019 and September 2019 through February 2020 trends. The weighting of each time period was based on the number of months within each time period via the following formula:

$$\text{Trend Assumption} = \frac{\text{FY17 Trend} * 12 + \text{FY18 Trend} * 12 + \text{FY19 Trend} * 12 + 9/19-2/20 \text{ Trend} * 6}{42}$$

Attachment 4 – Exhibit A presents the derivation of the medical trend assumption. The trend analysis resulted in an annual trend assumption of 5.3% for CHIP non-Perinate program and 3.5% for CHIP Perinate program.

Trend Analysis – Pharmacy

The rating methodology uses assumed pharmacy trend factors to adjust the base period (March 2019 through February 2020) claims cost to the rating period (FY2023). The trend rate assumptions were developed by the actuary based on an analysis of recent pharmacy claims experience under the CHIP program and the actuary’s professional judgment regarding anticipated future cost changes. The trend rate assumption is the same for all risk groups and service areas.

The trend analysis included a review of CHIP utilization and cost experience data paid through March 2022. Incurred monthly utilization (days supply per member) and cost per service (plan payments per days supply) statistics were developed by risk group and drug type (brand, generic

and specialty) through February 2022. From this experience, the average annual utilization and cost per service were determined for each of the six 12-month periods ending February 2022.

Due to the impact on healthcare utilization and cost from the COVID-19 pandemic and the PHE, experience after February 2020 was deemed unusable for purposes of developing trend projections. As a result, we have used the four 12-month periods ending February 2020 in our trend analysis in order to exclude pandemic-related experience.

Certain drugs and drug categories are excluded from the pharmacy trend analysis. Direct-acting antivirals (DAA) used for the treatment of the Hepatitis C virus and the drug Orkambi were carved in to the managed care contract effective September 1, 2018 but they were excluded from the trend analysis due to their extraordinary one-time impact on recent trends. Please note that effective March 1, 2021, Hepatitis C DAAs have been carved out of the managed care arrangement due to significant changes to the prior authorization criteria for these medications. In addition to these drugs, experience for the anti-viral influenza medications and progestational agent drug classes were removed from our trend analysis. Anti-virals were removed due to the significant variation in the intensity of flu season from year to year. Progestational agents were removed due to its one-time distortion of pharmacy trends for pregnant women. Hemostatic agents are also excluded from the pharmacy trend analysis. Effective September 1, 2020, hemophilia medications were carved out of the managed care arrangement. Please note that while excluded from the pharmacy trend analysis, the historical managed care claims for all of these drugs were included in the base period experience used in developing the pharmacy component of the rates. Factors were later applied to adjust for the carve-out to exclude Hepatitis C DAAs and hemostatics.

The CHIP pharmacy trend assumptions from March 2020 through FY2023 were developed using the following formula. For each risk group/drug type combination, the utilization and cost per service trend assumptions were set equal to one-sixth of the experience trend rate for the 12-month period ending February 2018 plus two-sixths of the experience trend rate for the 12-month period ending February 2019 plus three-sixths of the experience trend rate for the 12-month period ending February 2020. The final cost trend assumptions were then determined by applying the assumed utilization and cost per service trends by individual drug type to actual experience for the 12-month period ending February 2020 and combining the results into a single trend assumption.

Attachment 4 Exhibit B includes a summary of the CHIP pharmacy trend analysis and the derivation of the trend assumptions used in the rating analysis. The trend analysis resulted in a pharmacy annual trend rate assumption of 6.7%.

Please note that the MCOs were provided a detailed trend analysis file which included the historical utilization and cost experience as well as all of the formulas and assumptions used in developing the trend assumptions.

FY2023 CHIP Rating
Trend Analysis
Medical

	Actual Trends (1)				Selected (3)
	FY2017	FY2018	FY2019	FY2020Q2 (2)	
Traditional CHIP					
Bexar	-5.1%	7.9%	2.3%	16.6%	
Dallas	20.2%	4.7%	1.9%	11.0%	
El Paso	1.2%	12.6%	9.1%	-1.2%	
Harris	8.6%	-1.2%	14.4%	0.6%	
Jefferson	5.2%	29.5%	-1.6%	10.2%	
Lubbock	-0.6%	8.4%	-4.6%	11.6%	
Nueces	-8.7%	3.6%	4.1%	17.9%	
RSA	3.9%	5.7%	3.5%	2.3%	
Tarrant	1.8%	-4.7%	8.0%	22.1%	
Travis	-11.8%	6.5%	-0.3%	21.8%	
Total	5.3%	3.5%	6.2%	8.2%	
Case-Mix Adj.	5.0%	3.2%	6.3%	8.3%	5.3%
CHIP Perinate					
Bexar	2.7%	9.2%	3.6%	30.0%	
Dallas	0.9%	-0.1%	6.2%	-4.3%	
El Paso	-0.9%	6.4%	11.0%	7.4%	
Harris	4.2%	6.7%	1.8%	6.2%	
Jefferson	-5.3%	-4.0%	0.1%	4.6%	
Lubbock	5.3%	1.7%	2.4%	3.2%	
Nueces	-5.2%	2.6%	3.1%	0.4%	
RSA	4.5%	0.5%	3.5%	2.4%	
Tarrant	-3.2%	2.9%	-1.0%	3.4%	
Travis	5.3%	3.2%	8.8%	4.9%	
Total	2.9%	3.7%	3.7%	4.3%	
Case-Mix Adj.	2.9%	3.5%	3.6%	4.1%	3.5%

Notes:

- (1) Actual trends adjusted to remove various reimbursement changes that have impacted the program.
- (2) FY2020 trends through February 28, 2020.
- (3) Weighted average trend using number of months as weights for each fiscal year.

FY2023 Prescription Drug Rating Analysis
CHIP Pharmacy Trends

	<u>Traditional CHIP</u>	<u>CHIP Perinatal</u>	<u>Total</u>	<u>Case-Mix Adjusted</u>
Annual Trend in Number of Scripts per Member per Month				
Brand Drugs				
3/2014-2/2015	-9.8 %	6.8 %	-4.1 %	-6.1 %
3/2015-2/2016	-8.1 %	14.3 %	-1.5 %	-2.7 %
3/2016-2/2017	-14.5 %	13.4 %	-9.3 %	-7.8 %
3/2017-2/2018	-10.9 %	-0.7 %	-10.3 %	-7.4 %
3/2018-2/2019	-14.6 %	-1.8 %	-11.4 %	-10.4 %
3/2019-2/2020	-4.6 %	-3.7 %	-3.5 %	-4.3 %
3/2020-2/2021	-32.0 %	-6.8 %	-22.1 %	-23.5 %
3/2021-2/2022	85.6 %	-9.9 %	66.1 %	40.1 %
Use**	-8.1 %	-2.6 %	-5.4 %	-6.4 %
Generic Drugs				
3/2014-2/2015	6.1 %	13.2 %	6.9 %	6.0 %
3/2015-2/2016	-0.8 %	4.6 %	0.0 %	-1.2 %
3/2016-2/2017	-3.7 %	10.7 %	-2.4 %	-2.0 %
3/2017-2/2018	7.4 %	-0.7 %	6.1 %	6.3 %
3/2018-2/2019	-0.1 %	7.6 %	0.5 %	0.6 %
3/2019-2/2020	3.7 %	1.7 %	3.6 %	3.5 %
3/2020-2/2021	-32.0 %	1.3 %	-28.3 %	-27.6 %
3/2021-2/2022	25.6 %	-1.4 %	25.6 %	20.6 %
Use**	2.9 %	3.2 %	3.0 %	3.1 %
Specialty Drugs				
3/2014-2/2015	-0.7 %	22.4 %	1.0 %	2.2 %
3/2015-2/2016	4.6 %	21.2 %	6.6 %	7.7 %
3/2016-2/2017	0.1 %	5.1 %	0.4 %	0.9 %
3/2017-2/2018	3.7 %	27.0 %	5.7 %	6.6 %
3/2018-2/2019	3.8 %	34.0 %	7.4 %	8.3 %
3/2019-2/2020	10.9 %	-20.7 %	6.2 %	5.8 %
3/2020-2/2021	-6.1 %	-17.8 %	-7.3 %	-8.5 %
3/2021-2/2022	12.4 %	-31.7 %	6.6 %	3.9 %
Use**	8.9 %	5.5 %	8.6 %	7.8 %
All Drugs				
3/2014-2/2015	2.2 %	10.6 %	4.0 %	2.8 %
3/2015-2/2016	-2.3 %	8.6 %	-0.3 %	-1.5 %
3/2016-2/2017	-5.9 %	11.8 %	-4.0 %	-3.3 %
3/2017-2/2018	4.0 %	-0.5 %	2.5 %	3.3 %
3/2018-2/2019	-2.4 %	3.8 %	-1.7 %	-1.5 %
3/2019-2/2020	2.6 %	-0.7 %	2.4 %	2.1 %
3/2020-2/2021	-31.7 %	-2.0 %	-27.0 %	-26.7 %
3/2021-2/2022	33.2 %	-4.8 %	32.5 %	23.9 %
Use**	1.7 %	1.1 %	1.8 %	1.7 %

FY2023 Prescription Drug Rating Analysis
CHIP Pharmacy Trends

	<u>Traditional CHIP</u>	<u>CHIP Perinatal</u>	<u>Total</u>	<u>Case-Mix Adjusted</u>
Annual Trend in Days Supply per Member per Month				
Brand Drugs				
3/2014-2/2015	-9.2 %	8.4 %	-2.3 %	-4.7 %
3/2015-2/2016	-9.6 %	14.1 %	-1.7 %	-2.9 %
3/2016-2/2017	-15.8 %	12.4 %	-9.9 %	-8.1 %
3/2017-2/2018	-8.7 %	0.6 %	-8.6 %	-5.3 %
3/2018-2/2019	-14.5 %	-1.9 %	-10.9 %	-9.8 %
3/2019-2/2020	-6.1 %	-4.0 %	-4.4 %	-5.3 %
3/2020-2/2021	-31.8 %	-1.3 %	-18.6 %	-20.4 %
3/2021-2/2022	-6.3 %	-19.2 %	12.3 %	-14.2 %
Use**	-8.4 %	-2.5 %	-5.2 %	-6.3 %
Generic Drugs				
3/2014-2/2015	5.7 %	19.8 %	6.4 %	6.5 %
3/2015-2/2016	2.3 %	9.2 %	2.9 %	2.8 %
3/2016-2/2017	-0.5 %	16.0 %	1.0 %	1.3 %
3/2017-2/2018	7.7 %	0.9 %	6.8 %	7.1 %
3/2018-2/2019	3.2 %	8.7 %	3.7 %	3.8 %
3/2019-2/2020	4.0 %	4.5 %	4.1 %	4.2 %
3/2020-2/2021	-17.1 %	11.6 %	-14.2 %	-14.0 %
3/2021-2/2022	17.8 %	-2.6 %	17.6 %	13.0 %
Use**	4.7 %	5.3 %	4.8 %	4.6 %
Specialty Drugs				
3/2014-2/2015	-2.3 %	20.7 %	-0.7 %	1.0 %
3/2015-2/2016	3.1 %	25.9 %	5.6 %	7.4 %
3/2016-2/2017	6.3 %	10.8 %	6.5 %	7.0 %
3/2017-2/2018	4.5 %	21.6 %	5.9 %	6.9 %
3/2018-2/2019	4.9 %	31.9 %	8.0 %	8.8 %
3/2019-2/2020	12.1 %	-13.8 %	8.5 %	8.4 %
3/2020-2/2021	-1.0 %	-17.0 %	-2.8 %	-4.5 %
3/2021-2/2022	14.3 %	-29.5 %	8.5 %	5.4 %
Use**	10.6 %	7.3 %	10.3 %	9.3 %
All Drugs				
3/2014-2/2015	0.6 %	12.9 %	3.2 %	2.4 %
3/2015-2/2016	-1.3 %	12.2 %	1.4 %	0.9 %
3/2016-2/2017	-4.6 %	13.8 %	-2.5 %	-1.7 %
3/2017-2/2018	3.7 %	0.8 %	2.2 %	3.3 %
3/2018-2/2019	-0.5 %	2.8 %	-0.2 %	0.1 %
3/2019-2/2020	2.3 %	-0.5 %	2.1 %	1.9 %
3/2020-2/2021	-19.3 %	4.4 %	-15.0 %	-15.3 %
3/2021-2/2022	14.3 %	-11.3 %	16.3 %	6.9 %
Use**	2.9 %	1.3 %	2.9 %	2.4 %

FY2023 Prescription Drug Rating Analysis
CHIP Pharmacy Trends

	<u>Traditional CHIP</u>	<u>CHIP Perinatal</u>	<u>Total</u>	<u>Case-Mix Adjusted</u>
Annual Trend in Incurred Claims per Days Supply				
Brand Drugs				
3/2014-2/2015	11.4 %	17.4 %	5.5 %	12.8 %
3/2015-2/2016	9.7 %	31.6 %	6.9 %	15.3 %
3/2016-2/2017	3.8 %	16.6 %	3.3 %	7.3 %
3/2017-2/2018	5.1 %	9.0 %	6.2 %	5.9 %
3/2018-2/2019	2.4 %	-2.7 %	-0.3 %	0.7 %
3/2019-2/2020	5.4 %	-5.3 %	2.1 %	2.7 %
3/2020-2/2021	30.8 %	-5.0 %	11.7 %	20.3 %
3/2021-2/2022	24.6 %	6.1 %	5.1 %	19.5 %
Use**	4.7 %	-2.1 %	1.4 %	2.9 %
Generic Drugs				
3/2014-2/2015	1.1 %	31.1 %	1.3 %	3.6 %
3/2015-2/2016	-0.6 %	7.9 %	-0.3 %	1.1 %
3/2016-2/2017	-8.4 %	-5.4 %	-8.2 %	-8.5 %
3/2017-2/2018	-11.1 %	-9.3 %	-10.8 %	-10.7 %
3/2018-2/2019	-2.1 %	5.9 %	-1.5 %	-1.0 %
3/2019-2/2020	-19.0 %	-14.4 %	-18.6 %	-18.5 %
3/2020-2/2021	-7.0 %	-10.5 %	-7.5 %	-9.2 %
3/2021-2/2022	-8.2 %	-5.7 %	-7.9 %	-8.0 %
Use**	-11.4 %	-6.8 %	-10.9 %	-11.2 %
Specialty Drugs				
3/2014-2/2015	7.5 %	-21.3 %	4.0 %	5.8 %
3/2015-2/2016	18.0 %	-3.1 %	14.4 %	18.5 %
3/2016-2/2017	-5.4 %	27.9 %	-3.6 %	-6.0 %
3/2017-2/2018	16.0 %	-15.9 %	14.2 %	14.6 %
3/2018-2/2019	5.4 %	0.8 %	3.2 %	4.3 %
3/2019-2/2020	19.8 %	33.6 %	22.8 %	18.4 %
3/2020-2/2021	12.6 %	-4.4 %	13.0 %	12.8 %
3/2021-2/2022	9.8 %	19.6 %	8.9 %	10.4 %
Use**	14.6 %	14.4 %	14.6 %	14.8 %
All Drugs				
3/2014-2/2015	2.6 %	15.5 %	1.1 %	4.6 %
3/2015-2/2016	4.6 %	25.5 %	5.1 %	8.2 %
3/2016-2/2017	-4.8 %	11.9 %	-3.0 %	-3.4 %
3/2017-2/2018	-2.8 %	5.2 %	-1.4 %	-1.4 %
3/2018-2/2019	-2.8 %	-2.2 %	-2.8 %	-2.7 %
3/2019-2/2020	1.9 %	-7.1 %	0.6 %	0.8 %
3/2020-2/2021	16.6 %	-10.5 %	10.9 %	10.2 %
3/2021-2/2022	3.8 %	-2.3 %	0.0 %	1.8 %
Use**	5.6 %	-2.0 %	4.6 %	4.2 %

FY2023 Prescription Drug Rating Analysis
CHIP Pharmacy Trends

	<u>Traditional CHIP</u>	<u>CHIP Perinatal</u>	<u>Total</u>	<u>Case-Mix Adjusted</u>
Annual Trend in Incurred Claims per Member per Month				
Brand Drugs				
3/2014-2/2015	1.1 %	27.3 %	3.1 %	4.4 %
3/2015-2/2016	-0.8 %	50.1 %	5.0 %	6.1 %
3/2016-2/2017	-12.6 %	31.0 %	-6.9 %	-6.3 %
3/2017-2/2018	-4.1 %	9.6 %	-2.9 %	-1.1 %
3/2018-2/2019	-12.5 %	-4.5 %	-11.2 %	-10.5 %
3/2019-2/2020	-1.1 %	-9.1 %	-2.4 %	-2.7 %
3/2020-2/2021	-10.8 %	-6.2 %	-9.1 %	-10.6 %
3/2021-2/2022	16.8 %	-14.3 %	18.0 %	5.3 %
Use**	-4.1 %	-4.5 %	-3.9 %	-4.8 %
Generic Drugs				
3/2014-2/2015	6.8 %	57.0 %	7.8 %	9.2 %
3/2015-2/2016	1.7 %	17.8 %	2.6 %	3.5 %
3/2016-2/2017	-8.9 %	9.8 %	-7.4 %	-7.0 %
3/2017-2/2018	-4.2 %	-8.6 %	-4.7 %	-4.4 %
3/2018-2/2019	1.1 %	15.1 %	2.1 %	2.6 %
3/2019-2/2020	-15.7 %	-10.5 %	-15.2 %	-15.0 %
3/2020-2/2021	-22.9 %	-0.1 %	-20.6 %	-21.4 %
3/2021-2/2022	8.1 %	-8.2 %	8.3 %	3.5 %
Use**	-7.2 %	-1.9 %	-6.6 %	-7.2 %
Specialty Drugs				
3/2014-2/2015	5.1 %	-5.0 %	3.3 %	6.4 %
3/2015-2/2016	21.6 %	21.9 %	20.8 %	25.4 %
3/2016-2/2017	0.6 %	41.7 %	2.6 %	2.2 %
3/2017-2/2018	21.3 %	2.3 %	20.9 %	21.0 %
3/2018-2/2019	10.6 %	32.9 %	11.5 %	11.2 %
3/2019-2/2020	34.3 %	15.1 %	33.3 %	33.6 %
3/2020-2/2021	11.4 %	-20.7 %	9.8 %	8.5 %
3/2021-2/2022	25.4 %	-15.7 %	18.2 %	18.1 %
Use**	26.7 %	22.8 %	26.4 %	25.5 %
All Drugs				
3/2014-2/2015	3.3 %	30.3 %	4.4 %	6.1 %
3/2015-2/2016	3.2 %	40.7 %	6.6 %	8.1 %
3/2016-2/2017	-9.2 %	27.4 %	-5.5 %	-5.1 %
3/2017-2/2018	0.8 %	6.1 %	0.8 %	2.0 %
3/2018-2/2019	-3.4 %	0.5 %	-3.0 %	-2.6 %
3/2019-2/2020	4.2 %	-7.5 %	2.8 %	2.7 %
3/2020-2/2021	-5.9 %	-6.6 %	-5.7 %	-7.0 %
3/2021-2/2022	18.7 %	-13.3 %	16.3 %	9.7 %
Use**	8.6 %	-0.7 %	7.6 %	6.7 %

** Exclude experience after February 2020.

Attachment 5

Provider Reimbursement and Benefit Revisions Adjustment

This attachment presents information regarding rating adjustments for the various provider reimbursement and benefit revisions that became effective (or will become effective) after the base period used in rate setting and before the end of FY2023.

All adjustments have been calculated through an analysis of encounter data repriced using the old and new reimbursement terms and the impact determined as the relative change in cost. For each adjustment, the applicable March 2019 through February 2020 encounter data was repriced using the FFS reimbursement in place during this base period, the FFS reimbursement that will be in place during FY2023 and the applicable percentage change determined. Although the MCOs are not required to change their reimbursement levels based on changes implemented by HHSC, the Medicaid fee schedule serves as a primary negotiating tool for both MCOs and providers in Texas. Many MCO/provider reimbursement contracts are directly tied to the Medicaid FFS fee schedule through established percentages (e.g. 100%, 102%, 95% etc.). As a result, MCO reimbursement has historically changed in conjunction with Medicaid FFS fee schedule changes, both increases and decreases. Furthermore, it is common for provider reimbursement contracts that are directly tied to the Medicaid fee schedule (i.e. set at a percentage of Medicaid) to automatically adjust when the Medicaid fee schedule changes with no further need for recontracting. The correlation between managed care reimbursement and FFS fee schedules has been consistently observed throughout the history of the Texas managed care programs and is reiterated through discussions with the MCOs.

The attached exhibits present a summary of the derivation of these adjustment factors.

Exhibit A – Hospital Inpatient Reimbursement Changes. As a result of annual evaluations, several hospitals have had their Standard Dollar Amount (SDA) revised between the base period and FY2023. In addition, the universal mean used for outlier calculations was revised.

Exhibit B – Potentially Preventable Complications (PPC) Reimbursement Change. Effective March 1, 2014, HHSC implemented revisions to hospital reimbursement to account for Potentially Preventable Complications (PPC). The reimbursement reductions amount to 2-2.5% depending on a hospital's performance during the evaluation period and can change from one fiscal year to the next. A new PPC reduction list will become effective September 1, 2022. As a result, the adjustment factors represent the restoration of those reductions that were in place during the base period net of those reductions that will be in place during FY2023.

Exhibit C – Potentially Preventable Readmissions (PPR) Reimbursement Change. Beginning May 1, 2013, HHSC implemented revisions to hospital reimbursement to account for Potentially Preventable Readmissions (PPR). The reimbursement reductions amount to 1-2% depending on a hospital's performance during the evaluation period and can change from one fiscal year to the next. A new PPR reduction list will become effective September 1, 2022. As a result, the adjustment factors represent the restoration of those reductions that were in place during the base period net of those reductions that will be in place during FY2023.

Exhibit D – Potentially Preventable Readmissions (PPR) Quality Improvement. Effective September 1, 2019, HHSC began utilizing an adjustment to the base period data that analyzes

inefficiencies and potentially preventable expenses that unnecessarily increase managed care costs. This analysis was performed using the 3M™ PPR methodology which is a computerized algorithm to identify readmissions with a plausible clinical relationship to the care rendered during or immediately following a prior hospital admission. An expected reduction of PPR events of 10% has been applied for FY2023. The 10% PPR adjustment is intended to be an introductory step in improving the quality and efficiency of the managed care programs. This assumption will be monitored as actual experience develops and reassessed in future rating periods.

Exhibit E – DRG Grouper Change. Retroactive to October 1, 2019, the DRG Grouper utilized for pricing inpatient claims reverted from Version 37 to Version 36. A portion of the base period, October 2019 through February 2020, includes data prior to the retroactive change and therefore is based on Grouper 37 logic. The adjustment presents the impact of the Version 36 restoration and the corresponding rating adjustment factors associated with this revision.

Exhibit F – Limit Related Party Reimbursement to 100% of Medicaid. The rating methodology excludes from the base period claims experience any amounts paid by a health plan to a related party in excess of 100% of Medicaid.

Exhibit G – Therapy Reimbursement Change. Effective September 1, 2019, HHSC made revisions to the reimbursement rates for therapy services.

Exhibit H – Private Duty Nursing Reimbursement Change. Effective September 1, 2019, HHSC increased the reimbursement for private duty nursing (PDN) by 2.5%.

Exhibit I – Rural Hospital Outpatient Reimbursement Change. Effective September 1, 2021, HHSC made revisions to the reimbursement for outpatient services provided at rural hospitals.

Exhibit J – Ambulatory Surgical Center. Effective March 1, 2021, HHSC made revisions to the reimbursement for ambulatory surgical centers (ASC).

Exhibit K – Non-State Clinical Labs. Effective March 1, 2021, HHSC made revisions to the reimbursement for non-state clinical labs.

Exhibit L – Outpatient Behavioral Health. Effective March 1, 2022, HHSC made revisions to the reimbursement for outpatient behavioral health services.

Exhibit M – Radiology. Effective September 1, 2021, HHSC made revisions to the reimbursement for radiology services.

Exhibit N – Vaccine Administration. Effective September 1, 2022, HHSC will make revisions to the reimbursement for vaccine administration.

Exhibit O – Evaluation and Management. Effective September 1, 2021, HHSC made revisions to the reimbursement for evaluation and management (E&M) services.

Exhibit P – Invalid Clinician Administered Drug Adjustment. Invalid clinician administered drugs have been removed from the base period. HHSC has provided guidance to the MCOs which specifies the reporting requirements for a CAD to be considered a valid claim.

Exhibit Q – Mental Health CHIP Copay. Effective July 1, 2022, HHSC eliminated copays for mental health and substance use disorder for outpatient office visits and residential treatment services.

Exhibit R – FQHC Wrap Payment Removal. Effective March 1, 2018, FQHC wrap payments were carved out of managed care. HHSC has developed policy language to ensure that FQHCs are reimbursed their full encounter rate; however, the MCO will only be responsible for reimbursing the FQHC an amount no less than the rate paid to non-FQHC providers providing similar services. This adjustment was calculated by collecting the FQHC wrap payments paid by the MCOs during the base period.

Exhibit S.1 & S.2 – Hemostatic Drug Carve-out. Effective September 1, 2020, HHSC carved out all hemostatic drugs from the managed care capitated arrangement. These drugs continue to be covered services under the program but will be funded through a non-risk arrangement. Hemostatic drugs are rare and extremely high cost. The purpose of this carve-out is to improve the balance of risk between various MCOs. Exhibit S.1 and S.2 presents the calculation of the hemostatic carve-out adjustment factors applicable to the medical and pharmacy rate development, respectively. The calculation includes the total hemostatic drug cost during the base period as compared to the total cost.

For ease of reporting purposes, the numerous provider reimbursement adjustments described above have been consolidated in the community rating exhibits included in Attachment 3. The key below includes a description of where each adjustment has been included in Attachment 3.

Attachment 3 Rating Adjustment Heading

Attachment 5 Exhibits

Medical – Inpatient Reimbursement Change
Medical - Provider Reimbursement Change
Medical - Other Reimbursement Change
Medical – Other Adjustments
Pharmacy – Hemostatic Carve-out

Exhibits A, B, C, D, E and F
Exhibits G, H, I, J, K, L, M, N and O
Exhibits P and Q
Exhibit R and S.1
Exhibit S.2

Attachment 5 Exhibit T presents the consolidated adjustment factors that are used in the community rating exhibits included in Attachment 3.

Please note that the incurred claims reported on Attachment 5 are developed from the FY2019 detail encounter data which only includes claims paid through November 2019 and the FY2020 detail encounter data which only includes claims paid through November 2020. As a result, the incurred claims reported on Attachment 3 vary slightly from Attachment 5 amounts for several reasons including: (i) Attachment 3 incurred claims include claims paid through February 2021, (ii) Attachment 3 incurred claims include a small amount of IBNR and (iii) certain subcapitated expenses provided by affiliated providers are included in Attachment 3 incurred claims but not available in the detailed encounter data files. As noted on pages 1-3 of this report, multiple data sources were used in the rate development process with each being checked for consistency. The detail encounter data is necessary for the adjustment factors presented in this attachment as it is the only data source that provides information at the claim level allowing for the repricing of claims under varying reimbursement levels.

All adjustments were calculated independently by both HHSC and the Rudd and Wisdom actuaries to ensure consistent results.

FY2023 CHIP Rating
 Inpatient Hospital Reimbursement Change
 Hospital Reimbursement Changes - Standard Dollar Amount

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	-13,760	-62,749	-12,639	-228	8,208	-73	-81,240
Dallas	0	-102,496	-297,263	-129,591	183	168	905	-528,095
El Paso	35	-6,699	-17,437	-4,762	0	0	133	-28,729
Harris	-92	-201,571	-217,414	-244,859	-92	48	472	-663,508
Jefferson	0	144	-90	-44,144	41	13	192	-43,845
Lubbock	0	1,270	-28,831	-5,284	2	-191	3,353	-29,683
Nueces	0	-10,633	-19,409	-21,795	-87	1,417	66	-50,442
RSA	0	-61,352	-79,424	42,202	1,382	21,832	13,757	-61,603
Tarrant	0	-161,540	-201,782	-52,711	-20	682	217	-415,153
Travis	0	-146,140	-67,266	-15,887	274	2,322	496	-226,200
Total	-57	-702,778	-991,664	-489,470	1,454	34,498	19,518	-2,128,498
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	0.00 %	-0.15 %	-0.51 %	-0.27 %	-0.04 %	0.15 %	-0.09 %	-0.25 %
Dallas	0.00 %	-0.48 %	-0.91 %	-1.08 %	0.42 %	0.00 %	0.32 %	-0.57 %
El Paso	1.13 %	-0.24 %	-0.34 %	-0.19 %	0.00 %	0.00 %	0.28 %	-0.23 %
Harris	-0.10 %	-0.52 %	-0.37 %	-0.85 %	-0.06 %	0.00 %	0.06 %	-0.37 %
Jefferson	0.00 %	0.01 %	0.00 %	-1.49 %	0.54 %	0.00 %	0.42 %	-0.35 %
Lubbock	0.00 %	0.05 %	-0.83 %	-0.36 %	0.04 %	-0.01 %	7.60 %	-0.34 %
Nueces	0.00 %	-0.38 %	-0.39 %	-0.84 %	-0.29 %	0.16 %	0.17 %	-0.45 %
RSA	0.00 %	-0.30 %	-0.27 %	0.31 %	1.31 %	0.10 %	4.96 %	-0.07 %
Tarrant	0.00 %	-1.07 %	-1.03 %	-0.58 %	-0.07 %	0.01 %	0.13 %	-0.77 %
Travis	0.00 %	-1.61 %	-0.68 %	-0.35 %	2.42 %	0.02 %	0.37 %	-0.63 %
Total	-0.03 %	-0.57 %	-0.55 %	-0.59 %	0.16 %	0.03 %	1.01 %	-0.40 %

Footnotes:

- (1) Equals the cost impact from application of the revised hospital Standard Dollar Amounts.
 (2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Inpatient Hospital Reimbursement Change
 Potentially Preventable Complication (PPC) Adjustment

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	6,949	11,437	4,911	133	36	-55	23,411
Dallas	0	-433	-2,195	-5,277	-42	31	152	-7,765
El Paso	-46	2,357	3,457	720	0	12	-153	6,346
Harris	-1,396	-90,576	-126,663	-62,836	-263	-62	-1,303	-283,098
Jefferson	0	-2,611	-8,115	-33,957	79	0	332	-44,271
Lubbock	0	3,055	4,799	327	0	56	112	8,349
Nueces	0	-3,376	-8,666	-6,230	0	0	0	-18,272
RSA	0	-14,824	-23,364	-19,464	-83	56	7	-57,671
Tarrant	0	-39,255	-54,343	-16,142	-103	-63	-237	-110,142
Travis	0	-934	370	-808	1	3,869	6	2,504
Total	-1,443	-139,647	-203,282	-138,756	-278	3,935	-1,140	-480,611
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	0.00 %	0.08 %	0.09 %	0.10 %	0.03 %	0.00 %	-0.07 %	0.07 %
Dallas	0.00 %	0.00 %	-0.01 %	-0.04 %	-0.10 %	0.00 %	0.05 %	-0.01 %
El Paso	-1.50 %	0.08 %	0.07 %	0.03 %	0.00 %	0.00 %	-0.32 %	0.05 %
Harris	-1.55 %	-0.23 %	-0.22 %	-0.22 %	-0.17 %	0.00 %	-0.16 %	-0.16 %
Jefferson	0.00 %	-0.11 %	-0.18 %	-1.14 %	1.05 %	0.00 %	0.72 %	-0.35 %
Lubbock	0.00 %	0.13 %	0.14 %	0.02 %	0.00 %	0.00 %	0.25 %	0.10 %
Nueces	0.00 %	-0.12 %	-0.18 %	-0.24 %	0.00 %	0.00 %	0.00 %	-0.16 %
RSA	0.00 %	-0.07 %	-0.08 %	-0.14 %	-0.08 %	0.00 %	0.00 %	-0.07 %
Tarrant	0.00 %	-0.26 %	-0.28 %	-0.18 %	-0.34 %	0.00 %	-0.15 %	-0.21 %
Travis	0.00 %	-0.01 %	0.00 %	-0.02 %	0.01 %	0.03 %	0.00 %	0.01 %
Total	-0.86 %	-0.11 %	-0.11 %	-0.17 %	-0.03 %	0.00 %	-0.06 %	-0.09 %

Footnotes:

(1) Equals the net cost/savings resulting from PPC adjustments.

(2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (ICHP provided encounter data).

(3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Inpatient Hospital Reimbursement Change
 Potentially Preventable Readmission (PPR) Adjustment

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	0	846	560	4	233	21	1,664
Dallas	0	216	3,814	6,864	89	23	63	11,069
El Paso	0	1,054	1,620	233	-2	0	-18	2,886
Harris	0	-3,196	-4,862	1,297	-46	163	-202	-6,847
Jefferson	0	-384	-586	-37	27	-23	34	-969
Lubbock	0	-859	448	200	-8	0	-57	-276
Nueces	0	203	2,255	1,975	0	0	0	4,434
RSA	0	664	13,523	1,756	3	15	62	16,022
Tarrant	0	95	6,991	1,696	28	-47	-251	8,511
Travis	0	21,518	15,182	12,391	22	-2,619	-14	46,481
Total	0	19,311	39,231	26,936	116	-2,255	-363	82,975
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	0.00 %	0.00 %	0.01 %	0.01 %	0.00 %	0.00 %	0.02 %	0.01 %
Dallas	0.00 %	0.00 %	0.01 %	0.06 %	0.21 %	0.00 %	0.02 %	0.01 %
El Paso	0.00 %	0.04 %	0.03 %	0.01 %	-0.03 %	0.00 %	-0.04 %	0.02 %
Harris	0.00 %	-0.01 %	-0.01 %	0.00 %	-0.03 %	0.00 %	-0.02 %	0.00 %
Jefferson	0.00 %	-0.02 %	-0.01 %	0.00 %	0.36 %	0.00 %	0.07 %	-0.01 %
Lubbock	0.00 %	-0.04 %	0.01 %	0.01 %	-0.18 %	0.00 %	-0.13 %	0.00 %
Nueces	0.00 %	0.01 %	0.05 %	0.08 %	0.00 %	0.00 %	0.00 %	0.04 %
RSA	0.00 %	0.00 %	0.05 %	0.01 %	0.00 %	0.00 %	0.02 %	0.02 %
Tarrant	0.00 %	0.00 %	0.04 %	0.02 %	0.09 %	0.00 %	-0.16 %	0.02 %
Travis	0.00 %	0.24 %	0.15 %	0.28 %	0.20 %	-0.02 %	-0.01 %	0.13 %
Total	0.00 %	0.02 %	0.02 %	0.03 %	0.01 %	0.00 %	-0.02 %	0.02 %

Footnotes:

(1) Equals the net cost/savings resulting from PPR adjustments.

(2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (ICHP provided encounter data).

(3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Inpatient Hospital Reimbursement Change
 Potentially Preventable Readmission (PPR) Quality Improvement Reduction

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	-25,260	-14,329	-4,959	0	0	0	-44,547
Dallas	0	-5,382	-29,631	-14,876	0	0	0	-49,890
El Paso	0	0	-2,019	-1,512	0	0	0	-3,531
Harris	-1,103	-13,963	-61,250	-41,108	-380	0	-271	-118,075
Jefferson	0	0	-1,860	-2,409	0	0	0	-4,269
Lubbock	0	0	-964	-2,744	0	0	0	-3,708
Nueces	0	0	-1,858	-1,405	0	0	0	-3,263
RSA	0	-10,439	-15,524	-7,779	0	0	0	-33,743
Tarrant	0	-5,649	-11,925	-9,564	0	0	0	-27,138
Travis	0	-13,169	-5,730	-7,578	0	-164	0	-26,641
Total	-1,103	-73,861	-145,091	-93,936	-380	-164	-271	-314,806
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	0.00 %	-0.28 %	-0.12 %	-0.10 %	0.00 %	0.00 %	0.00 %	-0.14 %
Dallas	0.00 %	-0.03 %	-0.09 %	-0.12 %	0.00 %	0.00 %	0.00 %	-0.05 %
El Paso	0.00 %	0.00 %	-0.04 %	-0.06 %	0.00 %	0.00 %	0.00 %	-0.03 %
Harris	-1.23 %	-0.04 %	-0.11 %	-0.14 %	-0.25 %	0.00 %	-0.03 %	-0.07 %
Jefferson	0.00 %	0.00 %	-0.04 %	-0.08 %	0.00 %	0.00 %	0.00 %	-0.03 %
Lubbock	0.00 %	0.00 %	-0.03 %	-0.19 %	0.00 %	0.00 %	0.00 %	-0.04 %
Nueces	0.00 %	0.00 %	-0.04 %	-0.05 %	0.00 %	0.00 %	0.00 %	-0.03 %
RSA	0.00 %	-0.05 %	-0.05 %	-0.06 %	0.00 %	0.00 %	0.00 %	-0.04 %
Tarrant	0.00 %	-0.04 %	-0.06 %	-0.10 %	0.00 %	0.00 %	0.00 %	-0.05 %
Travis	0.00 %	-0.15 %	-0.06 %	-0.17 %	0.00 %	0.00 %	0.00 %	-0.07 %
Total	-0.66 %	-0.06 %	-0.08 %	-0.11 %	-0.04 %	0.00 %	-0.01 %	-0.06 %

Footnotes:

(1) Equals the cost impact from a 10 percent reduction in PPR events.

(2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (ICHP provided encounter data).

(3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Inpatient Hospital Reimbursement Change
 DRG Grouper Update

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	15,440	14,423	1,163	0	0	71	31,098
Dallas	0	40,984	515,195	77,741	0	0	370	634,290
El Paso	0	-726	28,156	711	0	0	0	28,141
Harris	0	32,649	73,530	26,280	0	0	964	133,422
Jefferson	0	14,296	0	0	0	0	0	14,296
Lubbock	0	13,271	3,203	24,619	0	0	0	41,093
Nueces	0	4,823	19,994	8,982	0	-104	0	33,695
RSA	0	-4,810	115,067	37,215	0	0	0	147,472
Tarrant	0	56,203	18,653	40,327	0	0	288	115,472
Travis	0	37,398	19,400	5,181	0	0	0	61,979
Total	0	209,529	807,622	222,218	0	-104	1,694	1,240,958
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	0.00 %	0.17 %	0.12 %	0.02 %	0.00 %	0.00 %	0.09 %	0.10 %
Dallas	0.00 %	0.19 %	1.58 %	0.65 %	0.00 %	0.00 %	0.13 %	0.68 %
El Paso	0.00 %	-0.03 %	0.55 %	0.03 %	0.00 %	0.00 %	0.00 %	0.22 %
Harris	0.00 %	0.08 %	0.13 %	0.09 %	0.00 %	0.00 %	0.12 %	0.07 %
Jefferson	0.00 %	0.62 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.11 %
Lubbock	0.00 %	0.56 %	0.09 %	1.70 %	0.00 %	0.00 %	0.00 %	0.47 %
Nueces	0.00 %	0.17 %	0.41 %	0.34 %	0.00 %	-0.01 %	0.00 %	0.30 %
RSA	0.00 %	-0.02 %	0.40 %	0.27 %	0.00 %	0.00 %	0.00 %	0.17 %
Tarrant	0.00 %	0.37 %	0.10 %	0.44 %	0.00 %	0.00 %	0.18 %	0.22 %
Travis	0.00 %	0.41 %	0.20 %	0.12 %	0.00 %	0.00 %	0.00 %	0.17 %
Total	0.00 %	0.17 %	0.45 %	0.27 %	0.00 %	0.00 %	0.09 %	0.24 %

Footnotes:

- (1) Equals the net cost/savings resulting from PPC adjustments.
- (2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (ICHP provided encounter data).
- (3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Inpatient Hospital Reimbursement Change
 Limit Reimbursement to Related Parties

	< 1	1-5	6-14	15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Provider Reimbursement Reduction (1)								
Parkland - Dallas	-322	-80,405	-119,714	-110,278	-704	-3,733,011	-20,966	-4,065,399
TCHP - Harris	-244	-842,516	-1,457,698	-768,013	-3,336	-95,407	-1,145	-3,168,359
TCHP - Jefferson	0	-39,707	-51,040	-42,962	0	-1,970	0	-135,679
All Other	0	0	0	0	0	0	0	0
Total	-565	-962,629	-1,628,452	-921,252	-4,040	-3,830,388	-22,111	-7,369,437
3/19 - 2/20 Total Incurred Claims (2)								
Parkland - Dallas	8,573	8,935,470	12,351,343	4,405,767	17,242	13,967,925	130,363	39,816,683
TCHP - Harris	18,296	21,946,716	36,300,414	18,655,497	51,299	12,246,383	243,458	89,462,064
TCHP - Jefferson	1,338	1,171,577	1,662,709	2,174,699	3,493	621,221	11,683	5,646,720
All Other	139,369	91,893,081	129,581,493	57,275,293	848,422	109,569,497	1,542,973	390,850,128
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Adjustment Factor by Plan (3)								
Parkland - Dallas	-3.76 %	-0.90 %	-0.97 %	-2.50 %	-4.08 %	-26.73 %	-16.08 %	-10.21 %
TCHP - Harris	-1.33 %	-3.84 %	-4.02 %	-4.12 %	-6.50 %	-0.78 %	-0.47 %	-3.54 %
TCHP - Jefferson	0.00 %	-3.39 %	-3.07 %	-1.98 %	0.00 %	-0.32 %	0.00 %	-2.40 %
All Others	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Total	-0.34 %	-0.78 %	-0.91 %	-1.12 %	-0.44 %	-2.81 %	-1.15 %	-1.40 %
Adjustment Factor by SDA (4)								
Bexar	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
Dallas	-2.77 %	-0.37 %	-0.35 %	-0.92 %	-0.42 %	-11.47 %	-4.29 %	
El Paso	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
Harris	-0.25 %	-2.26 %	-2.59 %	-2.73 %	-3.10 %	-0.24 %	-0.18 %	
Jefferson	0.00 %	-2.02 %	-1.33 %	-1.50 %	0.00 %	-0.10 %	0.00 %	
Lubbock	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
Nueces	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
RSA	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
Tarrant	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
Travis	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	

Footnotes:

- (1) Equals the cost impact from limiting reimbursement to a related party to 100% of Medicaid.
- (2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (IHP provided encounter data).
- (3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.
- (4) Adjustment factor applied by service delivery area.

FY2023 CHIP Rating
 Provider Reimbursement Change
 Therapy Assistant Adjustments

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	169,869	39,899	4,012	0	0	0	213,780
Dallas	0	267,236	83,474	4,762	0	0	0	355,472
El Paso	0	44,716	28,101	1,388	82	0	0	74,287
Harris	50	260,748	92,400	2,305	0	0	0	355,503
Jefferson	0	17,406	3,452	194	0	0	0	21,052
Lubbock	0	40,275	7,698	314	0	0	0	48,287
Nueces	0	11,789	3,120	929	0	0	0	15,838
RSA	133	219,859	76,958	8,105	0	0	0	305,055
Tarrant	0	165,366	50,040	1,382	0	0	0	216,787
Travis	14	90,505	24,345	1,613	0	0	0	116,477
Total	197	1,287,769	409,487	25,004	82	0	0	1,722,540
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	0.00 %	1.88 %	0.33 %	0.08 %	0.00 %	0.00 %	0.00 %	0.66 %
Dallas	0.00 %	1.25 %	0.26 %	0.04 %	0.00 %	0.00 %	0.00 %	0.38 %
El Paso	0.00 %	1.59 %	0.55 %	0.06 %	1.18 %	0.00 %	0.00 %	0.58 %
Harris	0.06 %	0.68 %	0.16 %	0.01 %	0.00 %	0.00 %	0.00 %	0.20 %
Jefferson	0.00 %	0.75 %	0.07 %	0.01 %	0.00 %	0.00 %	0.00 %	0.17 %
Lubbock	0.00 %	1.71 %	0.22 %	0.02 %	0.00 %	0.00 %	0.00 %	0.55 %
Nueces	0.00 %	0.42 %	0.06 %	0.04 %	0.00 %	0.00 %	0.00 %	0.14 %
RSA	0.46 %	1.07 %	0.26 %	0.06 %	0.00 %	0.00 %	0.00 %	0.35 %
Tarrant	0.00 %	1.10 %	0.26 %	0.02 %	0.00 %	0.00 %	0.00 %	0.40 %
Travis	0.24 %	1.00 %	0.24 %	0.04 %	0.00 %	0.00 %	0.00 %	0.32 %
Total	0.12 %	1.04 %	0.23 %	0.03 %	0.01 %	0.00 %	0.00 %	0.33 %

Footnotes:

- (1) Equals the cost impact resulting from reimbursement changes for therapy assistants.
 (2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Provider Reimbursement Change
 Private Duty Nursing (PDN) Adjustments

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	578	41	0	0	0	0	618
Dallas	0	3,044	1,984	0	0	0	0	5,028
El Paso	0	0	238	0	0	0	0	238
Harris	0	5,511	1,191	0	0	0	0	6,702
Jefferson	0	0	0	0	0	0	0	0
Lubbock	0	0	497	0	0	0	0	497
Nueces	0	0	0	1,703	0	0	0	1,703
RSA	0	2,758	2,807	0	0	0	0	5,566
Tarrant	0	2,894	548	144	0	0	0	3,585
Travis	0	0	0	0	0	0	0	0
Total	0	14,785	7,306	1,847	0	0	0	23,938
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	0.00 %	0.01 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Dallas	0.00 %	0.01 %	0.01 %	0.00 %	0.00 %	0.00 %	0.00 %	0.01 %
El Paso	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Harris	0.00 %	0.01 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Jefferson	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Lubbock	0.00 %	0.00 %	0.01 %	0.00 %	0.00 %	0.00 %	0.00 %	0.01 %
Nueces	0.00 %	0.00 %	0.00 %	0.07 %	0.00 %	0.00 %	0.00 %	0.02 %
RSA	0.00 %	0.01 %	0.01 %	0.00 %	0.00 %	0.00 %	0.00 %	0.01 %
Tarrant	0.00 %	0.02 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.01 %
Travis	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Total	0.00 %	0.01 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %

Footnotes:

- (1) Equals the cost impact from reimbursement changes for PDN services.
- (2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (ICHP provided encounter data).
- (3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Provider Reimbursement Change
 Rural Hospital Outpatient Reimbursement Changes

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	7,471	47,910	45,094	0	4,593	0	105,068
Dallas	0	2,873	4,705	4,481	14	792	0	12,864
El Paso	0	317	57	369	0	0	0	743
Harris	0	14,129	33,254	11,394	0	17,712	181	76,670
Jefferson	0	8,699	30,805	25,988	0	3,507	0	69,000
Lubbock	0	13,709	42,559	26,499	0	32,626	669	116,062
Nueces	0	16,399	39,427	27,185	0	9,520	261	92,793
RSA	125	270,097	491,553	296,860	351	248,168	2,626	1,309,780
Tarrant	0	8,746	19,042	23,613	0	13,411	184	64,997
Travis	0	11,313	36,993	17,840	0	13,973	59	80,178
Total	125	353,753	746,306	479,323	365	344,303	3,979	1,928,154
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	0.00 %	0.08 %	0.39 %	0.95 %	0.00 %	0.08 %	0.00 %	0.33 %
Dallas	0.00 %	0.01 %	0.01 %	0.04 %	0.03 %	0.00 %	0.00 %	0.01 %
El Paso	0.00 %	0.01 %	0.00 %	0.01 %	0.00 %	0.00 %	0.00 %	0.01 %
Harris	0.00 %	0.04 %	0.06 %	0.04 %	0.00 %	0.03 %	0.02 %	0.04 %
Jefferson	0.00 %	0.38 %	0.67 %	0.88 %	0.00 %	0.14 %	0.00 %	0.55 %
Lubbock	0.00 %	0.58 %	1.23 %	1.83 %	0.00 %	2.31 %	1.52 %	1.33 %
Nueces	0.00 %	0.59 %	0.80 %	1.04 %	0.00 %	1.04 %	0.66 %	0.82 %
RSA	0.44 %	1.31 %	1.69 %	2.16 %	0.33 %	1.08 %	0.95 %	1.51 %
Tarrant	0.00 %	0.06 %	0.10 %	0.26 %	0.00 %	0.14 %	0.11 %	0.12 %
Travis	0.00 %	0.12 %	0.37 %	0.40 %	0.00 %	0.11 %	0.04 %	0.22 %
Total	0.07 %	0.29 %	0.41 %	0.58 %	0.04 %	0.25 %	0.21 %	0.37 %

Footnotes:

- (1) Equals the cost impact from adjustments to rural hospital outpatient reimbursement.
 (2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Provider Reimbursement Change
 Ambulatory Surgical Centers (ASC) Fee Change

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	0	0	0	0	0	0	0
Dallas	0	0	0	0	0	0	0	0
El Paso	0	0	0	0	0	0	0	0
Harris	0	0	0	0	0	0	0	0
Jefferson	0	0	0	0	0	0	0	0
Lubbock	0	0	0	0	0	0	0	0
Nueces	0	0	0	0	0	0	0	0
RSA	0	0	0	0	0	0	0	0
Tarrant	0	0	0	0	0	0	0	0
Travis	0	0	516	0	0	0	0	516
Total	0	0	516	0	0	0	0	516
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Dallas	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
El Paso	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Harris	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Jefferson	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Lubbock	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Nueces	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
RSA	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Tarrant	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Travis	0.00 %	0.00 %	0.01 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Total	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %

Footnotes:

- (1) Equals the cost impact from ASC fee change.
- (2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (ICHP provided encounter data).
- (3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Provider Reimbursement Change
 Non-State Clinical Lab Fee Change

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	-18	-21,203	-34,262	-22,109	-45	-47,723	-459	-125,820
Dallas	-36	-59,330	-135,783	-75,971	-10	-176,138	-1,358	-448,626
El Paso	0	-4,156	-13,253	-10,638	0	-23,370	-239	-51,656
Harris	-40	-79,043	-171,617	-115,215	-317	-398,024	-3,043	-767,300
Jefferson	-3	-3,996	-9,312	-5,588	-1	-21,835	-267	-41,001
Lubbock	-17	-4,649	-7,241	-5,369	-11	-10,707	-182	-28,177
Nueces	0	-12,603	-27,460	-18,567	-57	-10,946	-398	-70,030
RSA	-23	-55,213	-91,168	-53,621	-188	-195,136	-1,387	-396,736
Tarrant	-12	-31,889	-53,665	-33,195	-16	-73,671	-1,010	-193,459
Travis	-1	-10,169	-24,829	-15,471	-8	-45,514	-349	-96,342
Total	-150	-282,252	-568,591	-355,744	-654	-1,003,064	-8,692	-2,219,147
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	-0.36 %	-0.23 %	-0.28 %	-0.47 %	-0.01 %	-0.85 %	-0.55 %	-0.39 %
Dallas	-0.18 %	-0.28 %	-0.42 %	-0.63 %	-0.02 %	-0.67 %	-0.48 %	-0.48 %
El Paso	-0.01 %	-0.15 %	-0.26 %	-0.43 %	0.00 %	-1.04 %	-0.51 %	-0.41 %
Harris	-0.04 %	-0.20 %	-0.29 %	-0.40 %	-0.21 %	-0.76 %	-0.37 %	-0.43 %
Jefferson	-0.05 %	-0.17 %	-0.20 %	-0.19 %	-0.02 %	-0.86 %	-0.58 %	-0.33 %
Lubbock	-0.70 %	-0.20 %	-0.21 %	-0.37 %	-0.24 %	-0.76 %	-0.41 %	-0.32 %
Nueces	0.00 %	-0.45 %	-0.56 %	-0.71 %	-0.19 %	-1.20 %	-1.00 %	-0.62 %
RSA	-0.08 %	-0.27 %	-0.31 %	-0.39 %	-0.18 %	-0.85 %	-0.50 %	-0.46 %
Tarrant	-0.20 %	-0.21 %	-0.27 %	-0.36 %	-0.05 %	-0.76 %	-0.62 %	-0.36 %
Travis	-0.02 %	-0.11 %	-0.25 %	-0.35 %	-0.07 %	-0.37 %	-0.26 %	-0.27 %
Total	-0.09 %	-0.23 %	-0.32 %	-0.43 %	-0.07 %	-0.74 %	-0.45 %	-0.42 %

Footnotes:

(1) Equals the cost impact from Non-State Clinical Lab fee change.

(2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (ICHP provided encounter data).

(3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Provider Reimbursement Change
 Outpatient BH Reimbursement Change

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	4,045	50,789	22,710	0	0	0	77,544
Dallas	0	4,094	41,266	15,324	0	-4	0	60,679
El Paso	0	1,411	21,789	15,570	0	0	0	38,770
Harris	0	9,076	97,273	44,662	0	39	0	151,051
Jefferson	0	747	7,066	3,515	0	0	0	11,327
Lubbock	0	1,071	12,850	5,741	0	0	0	19,662
Nueces	0	1,993	17,371	6,241	0	0	0	25,605
RSA	0	12,194	113,665	45,536	0	0	0	171,394
Tarrant	0	4,954	59,773	22,224	0	0	0	86,951
Travis	0	1,386	27,707	15,850	0	0	0	44,943
Total	0	40,971	449,549	197,372	0	34	0	687,926
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	0.00 %	0.04 %	0.42 %	0.48 %	0.00 %	0.00 %	0.00 %	0.24 %
Dallas	0.00 %	0.02 %	0.13 %	0.13 %	0.00 %	0.00 %	0.00 %	0.07 %
El Paso	0.00 %	0.05 %	0.42 %	0.63 %	0.00 %	0.00 %	0.00 %	0.30 %
Harris	0.00 %	0.02 %	0.17 %	0.15 %	0.00 %	0.00 %	0.00 %	0.08 %
Jefferson	0.00 %	0.03 %	0.15 %	0.12 %	0.00 %	0.00 %	0.00 %	0.09 %
Lubbock	0.00 %	0.05 %	0.37 %	0.40 %	0.00 %	0.00 %	0.00 %	0.23 %
Nueces	0.00 %	0.07 %	0.35 %	0.24 %	0.00 %	0.00 %	0.00 %	0.23 %
RSA	0.00 %	0.06 %	0.39 %	0.33 %	0.00 %	0.00 %	0.00 %	0.20 %
Tarrant	0.00 %	0.03 %	0.31 %	0.24 %	0.00 %	0.00 %	0.00 %	0.16 %
Travis	0.00 %	0.02 %	0.28 %	0.35 %	0.00 %	0.00 %	0.00 %	0.12 %
Total	0.00 %	0.03 %	0.25 %	0.24 %	0.00 %	0.00 %	0.00 %	0.13 %

Footnotes:

- (1) Equals the cost impact from Non-State Clinical Lab fee change.
- (2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (ICHP provided encounter data).
- (3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Provider Reimbursement Change
 Radiology Reimbursement Change

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	37	6,038	26,366	15,494	36	13,126	211	61,308
Dallas	27	25,320	71,163	33,105	18	102,867	-363	232,137
El Paso	0	996	8,403	5,882	-7	7,707	67	23,048
Harris	427	102,838	293,112	198,938	130	177,967	1,460	774,871
Jefferson	9	7,245	15,154	4,940	0	4,852	41	32,240
Lubbock	0	1,735	4,181	2,173	-6	-208	69	7,945
Nueces	0	4,854	19,633	7,727	0	117	0	32,331
RSA	29	22,922	68,221	34,552	204	12,754	77	138,758
Tarrant	0	7,778	17,272	12,054	0	27,588	484	65,175
Travis	0	2,011	6,084	3,554	0	3,050	-28	14,671
Total	529	181,736	529,589	318,418	376	349,819	2,018	1,382,485
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	0.73 %	0.07 %	0.22 %	0.33 %	0.01 %	0.23 %	0.25 %	0.19 %
Dallas	0.13 %	0.12 %	0.22 %	0.28 %	0.04 %	0.39 %	-0.13 %	0.25 %
El Paso	0.00 %	0.04 %	0.16 %	0.24 %	-0.09 %	0.34 %	0.14 %	0.18 %
Harris	0.48 %	0.27 %	0.50 %	0.69 %	0.09 %	0.34 %	0.18 %	0.43 %
Jefferson	0.15 %	0.31 %	0.33 %	0.17 %	0.00 %	0.19 %	0.09 %	0.26 %
Lubbock	0.00 %	0.07 %	0.12 %	0.15 %	-0.12 %	-0.01 %	0.16 %	0.09 %
Nueces	0.00 %	0.17 %	0.40 %	0.30 %	0.00 %	0.01 %	0.00 %	0.29 %
RSA	0.10 %	0.11 %	0.23 %	0.25 %	0.19 %	0.06 %	0.03 %	0.16 %
Tarrant	0.00 %	0.05 %	0.09 %	0.13 %	0.00 %	0.28 %	0.30 %	0.12 %
Travis	0.00 %	0.02 %	0.06 %	0.08 %	0.00 %	0.02 %	-0.02 %	0.04 %
Total	0.32 %	0.15 %	0.29 %	0.39 %	0.04 %	0.26 %	0.10 %	0.26 %

Footnotes:

- (1) Equals the cost impact from radiology fee schedule changes effective March 1, 2022.
 (2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Provider Reimbursement Change
 Vaccine Administration Reimbursement Change

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	262	32,985	45,537	20,562	104	7,031	74	106,554
Dallas	191	46,832	97,234	44,947	256	70,586	340	260,387
El Paso	33	13,816	26,290	13,520	247	959	6	54,871
Harris	863	108,186	182,661	84,438	1,237	29,030	152	406,567
Jefferson	26	5,401	10,440	4,680	93	3,198	35	23,874
Lubbock	86	9,023	10,664	4,017	110	996	23	24,919
Nueces	31	11,433	15,887	7,237	86	1,042	32	35,748
RSA	589	64,007	91,304	42,395	1,063	11,931	158	211,446
Tarrant	323	51,396	73,044	27,978	434	30,466	313	183,954
Travis	67	16,585	26,882	11,468	59	3,315	41	58,417
Total	2,471	359,663	579,943	261,241	3,689	158,556	1,175	1,366,739
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	5.16 %	0.36 %	0.37 %	0.43 %	0.02 %	0.13 %	0.09 %	0.33 %
Dallas	0.93 %	0.22 %	0.30 %	0.37 %	0.59 %	0.27 %	0.12 %	0.28 %
El Paso	1.07 %	0.49 %	0.51 %	0.55 %	3.52 %	0.04 %	0.01 %	0.43 %
Harris	0.96 %	0.28 %	0.31 %	0.29 %	0.81 %	0.06 %	0.02 %	0.23 %
Jefferson	0.45 %	0.23 %	0.23 %	0.16 %	1.24 %	0.13 %	0.08 %	0.19 %
Lubbock	3.52 %	0.38 %	0.31 %	0.28 %	2.38 %	0.07 %	0.05 %	0.29 %
Nueces	7.26 %	0.41 %	0.32 %	0.28 %	0.29 %	0.11 %	0.08 %	0.32 %
RSA	2.06 %	0.31 %	0.31 %	0.31 %	1.01 %	0.05 %	0.06 %	0.24 %
Tarrant	5.48 %	0.34 %	0.37 %	0.31 %	1.44 %	0.31 %	0.19 %	0.34 %
Travis	1.17 %	0.18 %	0.27 %	0.26 %	0.52 %	0.03 %	0.03 %	0.16 %
Total	1.47 %	0.29 %	0.32 %	0.32 %	0.40 %	0.12 %	0.06 %	0.26 %

Footnotes:

- (1) Equals the cost impact from vaccine administration fee schedule change effective September 1, 2022.
 (2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (IHP provided encounter data).
 (3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Provider Reimbursement Change
 Evaluation and Management Fee Schedule Change

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	10	11,946	19,377	7,129	994	5,300	104	44,859
Dallas	26	22,950	42,866	15,217	72	20,850	224	102,206
El Paso	7	5,374	10,766	5,364	19	5,898	105	27,532
Harris	76	47,852	78,163	32,461	138	41,659	382	200,731
Jefferson	9	3,850	6,066	2,254	3	2,916	40	15,136
Lubbock	0	798	1,331	777	2	340	2	3,250
Nueces	0	1,170	2,332	1,044	4	1,918	75	6,543
RSA	27	22,619	38,275	16,546	621	30,205	284	108,579
Tarrant	7	16,378	29,729	11,633	111	20,273	297	78,427
Travis	1	5,381	8,696	3,546	21	3,295	57	20,997
Total	164	138,318	237,600	95,971	1,983	132,655	1,570	608,261
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	0.19 %	0.13 %	0.16 %	0.15 %	0.19 %	0.09 %	0.12 %	0.14 %
Dallas	0.13 %	0.11 %	0.13 %	0.13 %	0.17 %	0.08 %	0.08 %	0.11 %
El Paso	0.22 %	0.19 %	0.21 %	0.22 %	0.27 %	0.26 %	0.22 %	0.22 %
Harris	0.08 %	0.12 %	0.13 %	0.11 %	0.09 %	0.08 %	0.05 %	0.11 %
Jefferson	0.15 %	0.17 %	0.13 %	0.08 %	0.03 %	0.11 %	0.09 %	0.12 %
Lubbock	0.00 %	0.03 %	0.04 %	0.05 %	0.04 %	0.02 %	0.00 %	0.04 %
Nueces	0.00 %	0.04 %	0.05 %	0.04 %	0.01 %	0.21 %	0.19 %	0.06 %
RSA	0.09 %	0.11 %	0.13 %	0.12 %	0.59 %	0.13 %	0.10 %	0.13 %
Tarrant	0.12 %	0.11 %	0.15 %	0.13 %	0.37 %	0.21 %	0.18 %	0.15 %
Travis	0.03 %	0.06 %	0.09 %	0.08 %	0.18 %	0.03 %	0.04 %	0.06 %
Total	0.10 %	0.11 %	0.13 %	0.12 %	0.22 %	0.10 %	0.08 %	0.12 %

Footnotes:

- (1) Equals the cost impact from evaluation and management fee schedule changes effective September 1, 2021.
 (2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Other Reimbursement Change
 Remove Invalid Clinician Administered Drug (CAD) Encounters

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	-22	-122	-23,696	0	-53	0	-23,894
Dallas	0	-4	-372	-39	0	-227	0	-641
El Paso	0	0	0	0	0	0	0	0
Harris	0	-509	-2,426	-1,416	-14	-784	0	-5,148
Jefferson	0	-110	0	-65	0	-64	0	-239
Lubbock	0	-12	-69	-73	0	0	0	-154
Nueces	0	0	0	0	0	0	0	0
RSA	0	-10	-17	-4	0	0	0	-32
Tarrant	0	-8	-176	-24	0	0	0	-208
Travis	0	0	-16	0	0	0	0	-16
Total	0	-675	-3,198	-25,318	-14	-1,128	0	-30,333
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	0.00 %	0.00 %	0.00 %	-0.50 %	0.00 %	0.00 %	0.00 %	-0.07 %
Dallas	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
El Paso	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Harris	0.00 %	0.00 %	0.00 %	0.00 %	-0.01 %	0.00 %	0.00 %	0.00 %
Jefferson	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Lubbock	0.00 %	0.00 %	0.00 %	-0.01 %	0.00 %	0.00 %	0.00 %	0.00 %
Nueces	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
RSA	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Tarrant	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Travis	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Total	0.00 %	0.00 %	0.00 %	-0.03 %	0.00 %	0.00 %	0.00 %	-0.01 %

Footnotes:

- (1) Equals the cost impact from removing invalid CADs.
 (2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Other Reimbursement Change
 Remove Mental Health CHIP Copayment

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	6,835	73,645	34,485	0	0	0	114,965
Dallas	0	7,685	78,170	31,828	0	0	0	117,683
El Paso	0	3,605	38,995	24,620	0	0	0	67,220
Harris	0	19,490	180,950	94,780	0	0	0	295,220
Jefferson	0	1,425	15,615	6,420	0	0	0	23,460
Lubbock	0	2,195	20,870	10,775	0	0	0	33,840
Nueces	0	2,875	28,120	14,895	0	0	0	45,890
RSA	0	22,430	170,735	87,287	0	0	0	280,452
Tarrant	0	6,605	106,540	55,360	0	0	0	168,505
Travis	0	2,655	56,790	32,940	0	0	0	92,385
Total	0	75,800	770,430	393,389	0	0	0	1,239,619
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	0.00 %	0.08 %	0.60 %	0.73 %	0.00 %	0.00 %	0.00 %	0.36 %
Dallas	0.00 %	0.04 %	0.24 %	0.26 %	0.00 %	0.00 %	0.00 %	0.13 %
El Paso	0.00 %	0.13 %	0.76 %	1.00 %	0.00 %	0.00 %	0.00 %	0.53 %
Harris	0.00 %	0.05 %	0.31 %	0.33 %	0.00 %	0.00 %	0.00 %	0.16 %
Jefferson	0.00 %	0.06 %	0.34 %	0.22 %	0.00 %	0.00 %	0.00 %	0.19 %
Lubbock	0.00 %	0.09 %	0.60 %	0.74 %	0.00 %	0.00 %	0.00 %	0.39 %
Nueces	0.00 %	0.10 %	0.57 %	0.57 %	0.00 %	0.00 %	0.00 %	0.41 %
RSA	0.00 %	0.11 %	0.59 %	0.63 %	0.00 %	0.00 %	0.00 %	0.32 %
Tarrant	0.00 %	0.04 %	0.54 %	0.61 %	0.00 %	0.00 %	0.00 %	0.31 %
Travis	0.00 %	0.03 %	0.57 %	0.74 %	0.00 %	0.00 %	0.00 %	0.26 %
Total	0.00 %	0.06 %	0.43 %	0.48 %	0.00 %	0.00 %	0.00 %	0.24 %

Footnotes:

- (1) Equals the cost impact from removing member copay for BH services effective July 1, 2022.
- (2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (ICHP provided encounter data).
- (3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Other Adjustments
 FQHC Wrap Payment Carve Out

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
FQHC Wrap Payment Carve Out (1)								
Bexar	-262	-221,553	-276,656	-99,498	-2,078	-615,997	-21,984	-1,238,028
Dallas	-103	-199,583	-297,611	-92,217	-2,530	-975,193	-12,024	-1,579,261
El Paso	0	-11,387	-34,763	-28,069	0	-12,909	0	-87,128
Harris	-886	-973,344	-1,790,232	-677,110	-4,790	-6,150,134	-38,057	-9,634,553
Jefferson	-137	-49,218	-99,375	-38,077	-331	-140,480	-31	-327,649
Lubbock	0	-45,363	-105,091	-65,525	0	-160,516	-542	-377,037
Nueces	-189	-15,606	-23,240	-6,013	0	-19,807	-208	-65,063
RSA	-348	-1,090,500	-1,804,674	-656,503	-6,020	-2,565,956	-12,974	-6,136,974
Tarrant	-31	-26,105	-31,750	-12,156	-762	-418,075	-15,983	-504,861
Travis	-1,960	-933,323	-1,470,223	-406,636	-1,659	-4,786,621	-24,481	-7,624,902
Total	-3,916	-3,565,982	-5,933,615	-2,081,803	-18,169	-15,845,688	-126,284	-27,575,456
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	-5.17 %	-2.45 %	-2.26 %	-2.09 %	-0.39 %	-11.01 %	-26.40 %	-3.84 %
Dallas	-0.50 %	-0.94 %	-0.91 %	-0.77 %	-5.85 %	-3.69 %	-4.26 %	-1.70 %
El Paso	0.00 %	-0.40 %	-0.68 %	-1.14 %	0.00 %	-0.57 %	0.00 %	-0.68 %
Harris	-0.99 %	-2.52 %	-3.07 %	-2.34 %	-3.15 %	-11.76 %	-4.69 %	-5.38 %
Jefferson	-2.37 %	-2.12 %	-2.15 %	-1.28 %	-4.42 %	-5.52 %	-0.07 %	-2.62 %
Lubbock	0.00 %	-1.92 %	-3.04 %	-4.52 %	0.00 %	-11.35 %	-1.23 %	-4.32 %
Nueces	-44.62 %	-0.56 %	-0.47 %	-0.23 %	0.00 %	-2.17 %	-0.52 %	-0.57 %
RSA	-1.21 %	-5.30 %	-6.21 %	-4.77 %	-5.70 %	-11.19 %	-4.67 %	-7.07 %
Tarrant	-0.52 %	-0.17 %	-0.16 %	-0.13 %	-2.53 %	-4.31 %	-9.87 %	-0.94 %
Travis	-34.17 %	-10.31 %	-14.78 %	-9.08 %	-14.61 %	-38.83 %	-18.23 %	-21.21 %
Total	-2.34 %	-2.88 %	-3.30 %	-2.52 %	-1.97 %	-11.62 %	-6.55 %	-5.24 %

Footnotes:

- (1) Equals the cost impact from carving out the wrap payment portion of FQHC reimbursement.
- (2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (ICHP provided encounter data).
- (3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Other Adjustments
 Hemostatic Drug Carve-Out

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	0	-1,184	0	0	0	0	-1,184
Dallas	0	0	-3,776	0	0	0	0	-3,776
El Paso	0	0	0	0	0	0	0	0
Harris	0	-2,035	-420,466	-90,760	0	0	0	-513,261
Jefferson	0	0	0	-5,985	0	0	0	-5,985
Lubbock	0	0	0	0	0	0	0	0
Nueces	0	0	0	0	0	0	0	0
RSA	0	-666	0	0	0	0	0	-666
Tarrant	0	0	0	-9,360	0	0	0	-9,360
Travis	0	0	0	0	0	0	0	0
Total	0	-2,701	-425,425	-106,106	0	0	0	-534,232
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	5,071	9,052,829	12,230,779	4,752,083	528,847	5,596,095	83,267	32,248,971
Dallas	20,638	21,322,085	32,629,889	12,012,170	43,279	26,441,915	282,400	92,752,376
El Paso	3,098	2,818,613	5,142,892	2,467,074	6,997	2,245,984	47,249	12,731,907
Harris	89,819	38,562,441	58,314,180	28,901,318	152,175	52,279,568	812,007	179,111,508
Jefferson	5,800	2,318,772	4,617,329	2,969,754	7,492	2,542,887	45,863	12,507,896
Lubbock	2,441	2,361,304	3,460,669	1,449,654	4,644	1,413,727	44,132	8,736,572
Nueces	423	2,792,972	4,935,070	2,605,899	29,978	912,626	39,669	11,316,638
RSA	28,647	20,581,934	29,055,982	13,765,367	105,613	22,937,109	277,587	86,752,238
Tarrant	5,903	15,079,393	19,563,533	9,111,477	30,080	9,708,712	161,978	53,661,075
Travis	5,737	9,056,501	9,945,636	4,476,459	11,351	12,326,403	134,325	35,956,411
Total	167,577	123,946,845	179,895,959	82,511,255	920,456	136,405,026	1,928,477	525,775,594
Rate Adjustment (3)								
Bexar	0.00 %	0.00 %	-0.01 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Dallas	0.00 %	0.00 %	-0.01 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
El Paso	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Harris	0.00 %	-0.01 %	-0.72 %	-0.31 %	0.00 %	0.00 %	0.00 %	-0.29 %
Jefferson	0.00 %	0.00 %	0.00 %	-0.20 %	0.00 %	0.00 %	0.00 %	-0.05 %
Lubbock	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Nueces	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
RSA	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Tarrant	0.00 %	0.00 %	0.00 %	-0.10 %	0.00 %	0.00 %	0.00 %	-0.02 %
Travis	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Total	0.00 %	0.00 %	-0.24 %	-0.13 %	0.00 %	0.00 %	0.00 %	-0.10 %

Footnotes:

- (1) Equals the cost impact from carving out hemostatic drugs.
- (2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (IHP provided encounter data).
- (3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

FY2023 CHIP Rating
 Pharmacy Rating Adjustment
 Hemostatic Carve-Out

	< 1	1-5	6-14	15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Hemostatic Carve Out (1)								
Bexar	0	-172,776	-147,851	0	0	0	0	-320,626
Dallas	0	-321,271	-661,866	-37,294	0	0	0	-1,020,431
El Paso	0	-47,683	0	-589,498	0	0	0	-637,180
Harris	0	-43,918	-204,607	-680,331	0	0	0	-928,855
Jefferson	0	0	-10,313,952	-22,136	0	0	0	-10,336,087
Lubbock	0	0	-176,220	0	0	0	0	-176,220
Nueces	0	-126,441	-282,465	0	0	0	0	-408,905
RSA	0	-457,825	-666,533	-395,797	0	0	0	-1,520,155
Tarrant	0	-146,311	-55,901	-106,926	0	0	0	-309,139
Travis	0	-28,584	-665,130	0	0	0	0	-693,715
Total	0	-1,344,808	-13,174,525	-1,831,981	0	0	0	-16,351,314
3/19 - 2/20 Total Incurred Claims (2)								
Bexar	9	1,575,590	5,306,971	2,019,278	101	838,618	31,334	9,771,900
Dallas	541	2,186,369	10,254,745	4,074,507	989	1,688,335	15,788	18,221,274
El Paso	143	364,459	2,381,290	1,634,229	55	448,202	5,912	4,834,290
Harris	1,883	3,605,865	16,335,815	6,517,400	888	8,321,038	78,867	34,861,756
Jefferson	131	208,218	12,235,078	399,784	0	366,220	7,589	13,217,020
Lubbock	10	256,697	1,969,210	749,697	259	180,728	2,299	3,158,900
Nueces	14	436,919	2,750,877	786,750	39	159,731	5,056	4,139,386
RSA	1,547	3,773,217	14,703,015	5,046,030	1,206	4,356,917	22,091	27,904,023
Tarrant	268	1,569,251	7,636,933	3,074,727	149	2,909,661	35,082	15,226,072
Travis	58	694,727	5,701,226	1,537,751	904	625,089	7,449	8,567,204
Total	4,605	14,671,311	79,275,161	25,840,153	4,591	19,894,538	211,467	139,901,826
Adjustment Factor (3)								
Bexar	0.00 %	-10.97 %	-2.79 %	0.00 %	0.00 %	0.00 %	0.00 %	-3.28 %
Dallas	0.00 %	-14.69 %	-6.45 %	-0.92 %	0.00 %	0.00 %	0.00 %	-5.60 %
El Paso	0.00 %	-13.08 %	0.00 %	-36.07 %	0.00 %	0.00 %	0.00 %	-13.18 %
Harris	0.00 %	-1.22 %	-1.25 %	-10.44 %	0.00 %	0.00 %	0.00 %	-2.66 %
Jefferson	0.00 %	0.00 %	-84.30 %	-5.54 %	0.00 %	0.00 %	0.00 %	-78.20 %
Lubbock	0.00 %	0.00 %	-8.95 %	0.00 %	0.00 %	0.00 %	0.00 %	-5.58 %
Nueces	0.00 %	-28.94 %	-10.27 %	0.00 %	0.00 %	0.00 %	0.00 %	-9.88 %
RSA	0.00 %	-12.13 %	-4.53 %	-7.84 %	0.00 %	0.00 %	0.00 %	-5.45 %
Tarrant	0.00 %	-9.32 %	-0.73 %	-3.48 %	0.00 %	0.00 %	0.00 %	-2.03 %
Travis	0.00 %	-4.11 %	-11.67 %	0.00 %	0.00 %	0.00 %	0.00 %	-8.10 %
Total	0.00 %	-9.17 %	-16.62 %	-7.09 %	0.00 %	0.00 %	0.00 %	-11.69 %

Footnotes:

(1) Equals the cost impact from carving out Hemostatic drugs.

(2) Equals 3/19 - 2/20 health plan fee-for-service claims for all services (ICHP provided encounter data).

(3) Cost impact divided by 3/19 - 2/20 Total Incurred Claims.

Summary of All Reimbursement Adjustments

	<u>< 1</u>	<u>1-5</u>	<u>6-14</u>	<u>15-18</u>	<u>Newborn 198%-202%</u>	<u>Perinate <198%</u>	<u>Perinate 198%-202%</u>
Medical - Provider Reimbursement Change Factor (1)							
Bexar	1.0575	1.0235	1.0162	1.0196	1.0021	0.9968	0.9991
Dallas	1.0101	1.0146	1.0064	1.0036	1.0081	1.0007	0.9959
El Paso	1.0128	1.0223	1.0160	1.0128	1.0493	0.9959	0.9986
Harris	1.0155	1.0122	1.0104	1.0089	1.0078	0.9975	0.9990
Jefferson	1.0070	1.0171	1.0139	1.0123	1.0125	0.9971	0.9968
Lubbock	1.0280	1.0264	1.0210	1.0237	1.0205	1.0161	1.0132
Nueces	1.0726	1.0125	1.0142	1.0130	1.0011	1.0016	0.9992
RSA	1.0309	1.0273	1.0273	1.0285	1.0195	1.0046	1.0064
Tarrant	1.0540	1.0150	1.0101	1.0073	1.0176	1.0018	1.0016
Travis	1.0142	1.0129	1.0107	1.0086	1.0063	0.9982	0.9983
Medical - Other Reimbursement Change Factor (2)							
Bexar	1.0000	1.0008	1.0060	1.0023	1.0000	1.0000	1.0000
Dallas	1.0000	1.0004	1.0024	1.0026	1.0000	1.0000	1.0000
El Paso	1.0000	1.0013	1.0076	1.0100	1.0000	1.0000	1.0000
Harris	1.0000	1.0005	1.0031	1.0033	0.9999	1.0000	1.0000
Jefferson	1.0000	1.0006	1.0034	1.0022	1.0000	1.0000	1.0000
Lubbock	1.0000	1.0009	1.0060	1.0073	1.0000	1.0000	1.0000
Nueces	1.0000	1.0010	1.0057	1.0057	1.0000	1.0000	1.0000
RSA	1.0000	1.0011	1.0059	1.0063	1.0000	1.0000	1.0000
Tarrant	1.0000	1.0004	1.0054	1.0061	1.0000	1.0000	1.0000
Travis	1.0000	1.0003	1.0057	1.0074	1.0000	1.0000	1.0000
Medical - Inpatient Reimbursement Change Factor (3)							
Bexar	1.0000	0.9982	0.9959	0.9976	0.9999	1.0015	0.9995
Dallas	0.9723	0.9932	1.0021	0.9855	1.0011	0.8853	0.9621
El Paso	0.9961	0.9985	1.0027	0.9982	0.9997	1.0000	0.9992
Harris	0.9690	0.9704	0.9685	0.9618	0.9640	0.9976	0.9979
Jefferson	1.0000	0.9847	0.9844	0.9585	1.0196	0.9990	1.0121
Lubbock	1.0000	1.0070	0.9938	1.0117	0.9986	0.9999	1.0773
Nueces	1.0000	0.9968	0.9985	0.9929	0.9971	1.0015	1.0017
RSA	1.0000	0.9956	1.0005	1.0039	1.0123	1.0010	1.0498
Tarrant	1.0000	0.9900	0.9877	0.9960	0.9968	1.0001	1.0000
Travis	1.0000	0.9887	0.9961	0.9986	1.0264	1.0003	1.0036

Summary of All Reimbursement Adjustments

	<u>< 1</u>	<u>1-5</u>	<u>6-14</u>	<u>15-18</u>	<u>Newborn 198%-202%</u>	<u>Perinate <198%</u>	<u>Perinate 198%-202%</u>
Medical - Other Adjustments (4)							
Bexar	0.9483	0.9755	0.9773	0.9791	0.9961	0.8899	0.7360
Dallas	0.9950	0.9906	0.9908	0.9923	0.9415	0.9631	0.9574
El Paso	1.0000	0.9960	0.9932	0.9886	1.0000	0.9943	1.0000
Harris	0.9901	0.9747	0.9623	0.9735	0.9685	0.8824	0.9531
Jefferson	0.9763	0.9788	0.9785	0.9852	0.9558	0.9448	0.9993
Lubbock	1.0000	0.9808	0.9696	0.9548	1.0000	0.8865	0.9877
Nueces	0.5538	0.9944	0.9953	0.9977	1.0000	0.9783	0.9948
RSA	0.9879	0.9470	0.9379	0.9523	0.9430	0.8881	0.9533
Tarrant	0.9948	0.9983	0.9984	0.9977	0.9747	0.9569	0.9013
Travis	0.6583	0.8969	0.8522	0.9092	0.8539	0.6117	0.8177

Footnotes:

(1) The Provider Reimbursement Change Factor consolidates the following adjustments

- Exhibit G - Therapy Assistant Adjustments
- Exhibit H - Private Duty Nursing (PDN) Adjustments
- Exhibit I - Rural Hospital Outpatient Reimbursement Changes
- Exhibit J - Ambulatory Surgical Centers (ASC) Fee Change
- Exhibit K - Non-State Clinical Lab Fee Change
- Exhibit L - Outpatient BH Reimbursement Change
- Exhibit M - Radiology Reimbursement Change
- Exhibit N - Vaccine Administration Reimbursement Change
- Exhibit O - Evaluation and Management Fee Schedule Change

(2) The Other Reimbursement Change Factor consolidates the following adjustments

- Exhibit P - Remove Invalid Clinician Administered Drug (CAD) Encounters
- Exhibit Q - Remove Mental Health CHIP Copayment

(3) The Inpatient Reimbursement Change Factor consolidates the following adjustments

- Exhibit A - Hospital Reimbursement Changes - Standard Dollar Amount
- Exhibit B - Potentially Preventable Complication (PPC) Adjustment
- Exhibit C - Potentially Preventable Readmission (PPR) Adjustment
- Exhibit D - Potentially Preventable Readmission (PPR) Quality Improvement Reduction
- Exhibit E - DRG Groupers Update
- Exhibit F - Limit Reimbursement to Related Parties

(4) The Other Adjustments Factors consolidates the following adjustments

- Exhibit R - FQHC Wrap Payment Carve Out
- Exhibit S.1 - Hemostatic Drug Carve-Out

Attachment 6

PHE Related Cost Adjustment

The COVID-19 pandemic and the resulting Public Health Emergency (PHE) have had a significant impact on the CHIP program. Beginning March 2020, CHIP enrollment has reduced significantly as members transition to Medicaid and average cost for all services has decreased from the pre-pandemic historical norms. While a return to the pre-pandemic levels is expected, we believe the return will be gradual and won't occur until the termination of the PHE. In order to estimate the continued impact of the PHE on the FY2023 average costs, we have studied the actual, quarterly average cost separately for medical and pharmacy and compared to expected per-capita cost absent the PHE.

Based on historical claims and enrollment information prior to the PHE we have estimated incurred claims during each quarter beginning March 2020 through November 2021. The expected (absent the PHE) quarterly average cost was developed based on the trend assumption described in Attachment 4 and benefit and provider reimbursement changes that have impacted the program such as those described in Attachment 5. In addition, COVID-19 related claims reimbursed on a non-risk basis have been excluded from the analysis. Actual average claims net of COVID non-risk expenditures were then compared to the expected average claims to determine the actual to expected ratio which is assumed to be representative of the impact of the PHE on program costs during each observed quarter.

The PHE-related cost impact has been defined as the average of the actual to expected ratio during the period March 2021 through August 2021, the last two quarters of FY2021. This period was selected as representative of the ongoing impact on future cost of the PHE because it represents a relatively stable period which was not overly influenced by a spike in COVID-19 infections and hospitalizations.

Currently, the PHE is assumed to end October 13, 2022 at which time it is expected that the PHE impact on eligibility and average cost will begin to unwind and members will transition from Medicaid to CHIP. As a result, we have assumed that the PHE-related cost impact described above will impact the first quarter of FY2023. Much uncertainty remains as to how the unwinding process will impact each program and we believe using one quarter of the PHE-related cost impact allows for the potential for pent-up demand, elimination of temporary behavior change which has reduced recent expenditures, benefit rush as members lose eligibility and the eventual return to a more normal cost pattern.

Exhibits A and B provides additional information and description for the development of the medical and pharmacy adjustment factors.

	<u>Age <1</u>	<u>Age 1-5</u>	<u>Age 6-14</u>	<u>Age 15-18</u>	<u>Newborn 198%-202%</u>	<u>Perinate <198%</u>	<u>Perinate 198%-202%</u>
Ratio - Actual PMPM vs. Expected PMPM (1)							
Bexar	1.0000	1.1478	0.8648	0.7195	1.0000	1.2025	1.0000
Dallas	1.0000	0.9810	0.7396	0.9151	1.0000	0.7873	1.0000
El Paso	1.0000	0.7995	0.8683	0.9478	1.0000	0.8920	1.0000
Harris	1.0000	0.6797	0.8723	0.9382	1.0000	1.0261	1.0000
Jefferson	1.0000	0.7401	1.3850	6.5780	1.0000	1.0191	1.0000
Lubbock	1.0000	0.9314	0.9670	1.0500	1.0000	1.1517	1.0000
Nueces	1.0000	1.0364	1.0281	0.6382	1.0000	1.0856	1.0000
RSA	1.0000	0.8319	0.8981	1.0054	1.0000	1.0001	1.0000
Tarrant	1.0000	0.8513	0.9028	1.0531	1.0000	0.9231	1.0000
Travis	1.0000	0.7304	1.0679	0.8495	1.0000	0.9967	1.0000
Adjustment Factor (2)							
Bexar	1.0000	1.0370	0.9662	0.9299	1.0000	1.0506	1.0000
Dallas	1.0000	0.9952	0.9349	0.9788	1.0000	0.9468	1.0000
El Paso	1.0000	0.9499	0.9671	0.9869	1.0000	0.9730	1.0000
Harris	1.0000	0.9199	0.9681	0.9846	1.0000	1.0065	1.0000
Jefferson	1.0000	0.9350	1.0963	2.3945	1.0000	1.0048	1.0000
Lubbock	1.0000	0.9828	0.9918	1.0125	1.0000	1.0379	1.0000
Nueces	1.0000	1.0091	1.0070	0.9096	1.0000	1.0214	1.0000
RSA	1.0000	0.9580	0.9745	1.0013	1.0000	1.0000	1.0000
Tarrant	1.0000	0.9628	0.9757	1.0133	1.0000	0.9808	1.0000
Travis	1.0000	0.9326	1.0170	0.9624	1.0000	0.9992	1.0000

Footnotes:

- (1) Expected PMPM defined as pre-COVID experience trended forward and adjusted for reimbursement and policy changes..
 PHE related impact defined as ratio of actual PMPM to expected PMPM.
 The selected ratio is the average ratio for the periods FY21Q3 and FY21Q4.
- (2) Assume PHE continues to impact program cost through Q1 of FY2023, 25% of Ratio - Actual PMPM vs. Expected PMPM (1).

	<u>Age <1</u>	<u>Age 1-5</u>	<u>Age 6-14</u>	<u>Age 15-18</u>	<u>Newborn 198%-202%</u>	<u>Perinate <198%</u>	<u>Perinate 198%-202%</u>
Ratio - Actual PMPM vs. Expected PMPM (1)							
Bexar	1.0000	0.3217	0.8705	0.6338	1.0000	0.8496	1.0000
Dallas	1.0000	0.7631	0.8083	0.8701	1.0000	0.8655	1.0000
El Paso	1.0000	0.3507	0.6077	0.6147	1.0000	0.6649	1.0000
Harris	1.0000	0.8551	0.7598	1.1385	1.0000	0.7700	1.0000
Jefferson	1.0000	0.5921	0.7762	0.9838	1.0000	0.7610	1.0000
Lubbock	1.0000	0.4666	0.8447	1.2549	1.0000	0.5417	1.0000
Nueces	1.0000	0.3709	0.5652	0.9608	1.0000	1.2791	1.0000
RSA	1.0000	0.8160	0.7915	1.0911	1.0000	0.7492	1.0000
Tarrant	1.0000	1.0403	0.5761	1.0536	1.0000	0.6255	1.0000
Travis	1.0000	0.3555	0.6835	0.9191	1.0000	0.5291	1.0000
Adjustment Factor (2)							
Bexar	1.0000	0.8304	0.9676	0.9084	1.0000	0.9624	1.0000
Dallas	1.0000	0.9408	0.9521	0.9675	1.0000	0.9664	1.0000
El Paso	1.0000	0.8377	0.9019	0.9037	1.0000	0.9162	1.0000
Harris	1.0000	0.9638	0.9400	1.0346	1.0000	0.9425	1.0000
Jefferson	1.0000	0.8980	0.9440	0.9959	1.0000	0.9402	1.0000
Lubbock	1.0000	0.8666	0.9612	1.0637	1.0000	0.8854	1.0000
Nueces	1.0000	0.8427	0.8913	0.9902	1.0000	1.0698	1.0000
RSA	1.0000	0.9540	0.9479	1.0228	1.0000	0.9373	1.0000
Tarrant	1.0000	1.0101	0.8940	1.0134	1.0000	0.9064	1.0000
Travis	1.0000	0.8389	0.9209	0.9798	1.0000	0.8823	1.0000

Footnotes:

- (1) Expected PMPM defined as pre-COVID experience trended forward and adjusted for reimbursement and policy changes..
 PHE related impact defined as ratio of actual PMPM to expected PMPM.
 The selected ratio is the average ratio for the periods FY21Q3 and FY21Q4.
- (2) Assume PHE continues to impact program cost through Q1 of FY2023, 25% of Ratio - Actual PMPM vs. Expected PMPM (1).

Attachment 7

Acuity Risk Adjustment

The rate setting methodology incorporates a risk adjustment technique that is designed to adjust the base community rate in each service area to reflect the health status, or acuity, of the population enrolled in each health plan. The purpose of acuity risk adjustment is to recognize the anticipated cost differential between multiple health plans in a service area by analyzing the health status of their respective members. The risk analysis was performed by the University of Florida's Institute for Child Health Policy (ICHP). The methodology used to incorporate the risk adjustment is the Chronic Illness and Disability Payment System (CDPS). The attached exhibits (provided by ICHP) present a summary of the risk adjustment analysis. There is a separate exhibit for each age group (Exhibit A-D).

The column titled Case Mix on the chart is the risk adjustment factor. It is the ratio of the predicted average cost of the individual health plan's membership divided by the predicted average cost of the entire service area's membership.

If necessary, an additional adjustment was made to the risk adjustment factors to ensure that, in total, they produce the same premium as the community rates (budget neutral). Exhibit E summarizes the raw, unadjusted risk adjustment factors (case-mix), the budget neutral adjustment applied equally to each risk group within each service area along with the resulting adjusted risk adjustment factors which are used to calculate the risk adjusted community rates.

The risk adjustment factors determined by ICHP for the Under Age 1, Newborn 198%-202% and Perinate 198%-202% risk groups were not applied in developing the FY2023 premium rates due to the small size and the resulting variation in acuity scores.

TEXAS CHIP						
SDA/Health Plan	Number of Enrollees	Percent Affected	Actual PMPM Expenditures Based on Paid Amounts	Predicted PMPM Payment	Case Mix	Spend Ratio
CDPS						
Age 1-5	101,025	100.00	142.48	142.48	1.00	1.00
Bexar	8,372	100.00	140.25	144.28	1.00	0.97
Aetna - Bexar	693	8.28	107.61	114.36	0.79	0.94
Amerigroup - Bexar	226	2.70	90.22	134.96	0.94	0.67
CFHP - Bexar	4,077	48.70	112.37	131.21	0.91	0.86
Superior - Bexar	3,376	40.32	184.96	167.34	1.16	1.11
Dallas	15,878	100.00	151.92	136.40	1.00	1.11
Amerigroup - Dallas	8,867	55.84	143.80	132.96	0.97	1.08
Molina - Dallas	1,029	6.48	119.66	123.77	0.91	0.97
Parkland - Dallas	5,982	37.67	169.35	143.62	1.05	1.18
El Paso	3,141	100.00	101.96	123.53	1.00	0.83
El Paso Health - El Paso	1,931	61.48	110.17	126.30	1.02	0.87
Superior - El Paso	1,210	38.52	88.40	118.96	0.96	0.74
Harris	25,884	100.00	170.63	147.98	1.00	1.15
Amerigroup - Harris	1,706	6.59	134.53	136.79	0.92	0.98
CHC - Harris	6,998	27.04	181.84	148.52	1.00	1.22
Molina - Harris	228	0.88	69.14	108.12	0.73	0.64
TCHP - Harris	14,902	57.57	168.19	150.02	1.01	1.12
United - Harris	2,050	7.92	190.98	144.61	0.98	1.32
Jefferson	1,990	100.00	131.03	132.31	1.00	0.99
Amerigroup - Jefferson	100	5.03	95.62	93.82	0.71	1.02
CHC - Jefferson	472	23.72	120.02	124.77	0.94	0.96
Molina - Jefferson	82	4.12	60.15	81.26	0.61	0.74
TCHP - Jefferson	919	46.18	151.50	134.57	1.02	1.13
United - Jefferson	417	20.95	120.46	155.02	1.17	0.78
Lubbock	2,514	100.00	112.32	139.98	1.00	0.80
Firstcare - Lubbock	1,338	53.22	121.80	136.73	0.98	0.89
Superior - Lubbock	1,176	46.78	101.38	143.72	1.03	0.71
Nueces	2,245	100.00	141.65	137.70	1.00	1.03
Driscoll - Nueces	1,862	82.94	140.46	130.25	0.95	1.08
Superior - Nueces	356	15.86	155.28	180.31	1.31	0.86
United - Nueces	27	1.20	52.85	109.02	0.79	0.48
RSA	21,935	100.00	114.20	141.48	1.00	0.81
Molina - RSA	3,684	16.80	122.26	134.71	0.95	0.91
Superior - RSA	18,251	83.20	112.52	142.88	1.01	0.79
Tarrant	12,137	100.00	139.57	137.81	1.00	1.01
Aetna - Tarrant	2,430	20.02	136.59	131.72	0.96	1.04
Amerigroup - Tarrant	4,004	32.99	156.37	142.87	1.04	1.09
Cook - Tarrant	5,703	46.99	129.08	136.82	0.99	0.94
Travis	6,929	100.00	145.72	159.05	1.00	0.92
BCBS - Travis	1,777	25.65	223.86	200.87	1.26	1.11
DCHP - Travis	2,278	32.88	125.82	156.65	0.98	0.80
Superior - Travis	2,874	41.48	113.50	135.06	0.85	0.84

Note: CDPS results are based on information in enrollment and encounter datasets. CDPS results were obtained for those enrollees who had been in the program for at least 1 months (age<1) and for those who had been in the program for at least 4 continuous months (age ≥1) (permitting one month lapse in enrollment within the 4 months period).

2. Small numbers of enrollees in a row mean that great care should be taken in interpreting the case-mix index and any associated year-to-year changes.

TEXAS CHIP						
SDA/Health Plan	Number of Enrollees	Percent Affected	Actual PMPM Expenditures Based on Paid Amounts	Predicted PMPM Payment	Case Mix	Spend Ratio
CDPS						
Age 6-14	257,863	100.00	107.03	107.03	1.00	1.00
Bexar	20,875	100.00	103.22	112.37	1.00	0.92
Aetna - Bexar	1,738	8.33	63.37	85.84	0.76	0.74
Amerigroup - Bexar	537	2.57	87.98	140.64	1.25	0.63
CFHP - Bexar	11,576	55.45	97.11	115.17	1.02	0.84
Superior - Bexar	7,024	33.65	124.90	112.19	1.00	1.11
Dallas	42,263	100.00	117.42	105.50	1.00	1.11
Amerigroup - Dallas	24,160	57.17	119.49	105.21	1.00	1.14
Molina - Dallas	2,499	5.91	66.41	92.06	0.87	0.72
Parkland - Dallas	15,604	36.92	122.18	108.05	1.02	1.13
El Paso	8,962	100.00	88.70	104.38	1.00	0.85
El Paso Health - El Paso	5,870	65.50	91.21	108.04	1.04	0.84
Superior - El Paso	3,092	34.50	83.81	97.25	0.93	0.86
Harris	66,446	100.00	122.00	105.11	1.00	1.16
Amerigroup - Harris	5,545	8.35	104.55	93.23	0.89	1.12
CHC - Harris	17,144	25.80	115.30	98.07	0.93	1.18
Molina - Harris	677	1.02	57.48	67.93	0.65	0.85
TCHP - Harris	38,570	58.05	131.40	111.14	1.06	1.18
United - Harris	4,510	6.79	97.03	99.92	0.95	0.97
Jefferson	5,292	100.00	134.35	108.67	1.00	1.24
Amerigroup - Jefferson	271	5.12	649.81	105.61	0.97	6.15
CHC - Jefferson	1,283	24.24	125.38	109.13	1.00	1.15
Molina - Jefferson	208	3.93	53.21	90.68	0.83	0.59
TCHP - Jefferson	2,389	45.14	102.73	104.87	0.97	0.98
United - Jefferson	1,141	21.56	109.38	119.92	1.10	0.91
Lubbock	6,295	100.00	94.06	108.94	1.00	0.86
Firstcare - Lubbock	3,284	52.17	100.25	110.04	1.01	0.91
Superior - Lubbock	3,011	47.83	87.21	107.73	0.99	0.81
Nueces	5,797	100.00	143.79	117.73	1.00	1.22
Driscoll - Nueces	4,709	81.23	149.00	121.40	1.03	1.23
Superior - Nueces	987	17.03	127.71	104.90	0.89	1.22
United - Nueces	101	1.74	49.95	66.67	0.57	0.75
RSA	54,987	100.00	86.59	106.63	1.00	0.81
Molina - RSA	10,955	19.92	96.42	112.53	1.06	0.86
Superior - RSA	44,032	80.08	84.08	105.12	0.99	0.80
Tarrant	30,318	100.00	98.42	105.70	1.00	0.93
Aetna - Tarrant	4,617	15.23	80.70	87.89	0.83	0.92
Amerigroup - Tarrant	11,292	37.25	92.86	94.54	0.89	0.98
Cook - Tarrant	14,409	47.53	108.31	119.98	1.14	0.90
Travis	16,628	100.00	102.49	112.29	1.00	0.91
BCBS - Travis	3,715	22.34	97.61	110.74	0.99	0.88
DCHP - Travis	5,001	30.08	93.46	113.44	1.01	0.82
Superior - Travis	7,912	47.58	110.61	112.27	1.00	0.99

Note: CDPS results are based on information in enrollment and encounter datasets. CDPS results were obtained for those enrollees who had been in the program for at least 1 months (age<1) and for those who had been in the program for at least 4 continuous months (age ≥1) (permitting one month lapse in enrollment within the 4 months period).

2. Small numbers of enrollees in a row mean that great care should be taken in interpreting the case-mix index and any associated year-to-year changes.

TEXAS CHIP						
SDA/Health Plan	Number of Enrollees	Percent Affected	Actual PMPM Expenditures Based on Paid Amounts	Predicted PMPM Payment	Case Mix	Spend Ratio
CDPS						
Age 15-18	104,998	100.00	134.78	134.78	1.00	1.00
Bexar	8,684	100.00	112.45	125.70	1.00	0.89
Aetna - Bexar	672	7.74	121.45	119.04	0.95	1.02
Amerigroup - Bexar	245	2.82	87.50	150.36	1.20	0.58
CFHP - Bexar	5,066	58.34	113.78	128.96	1.03	0.88
Superior - Bexar	2,701	31.10	109.77	118.84	0.95	0.92
Dallas	16,704	100.00	124.32	130.80	1.00	0.95
Amerigroup - Dallas	9,613	57.55	121.89	133.63	1.02	0.91
Molina - Dallas	1,105	6.62	107.51	116.08	0.89	0.93
Parkland - Dallas	5,986	35.84	131.28	128.89	0.99	1.02
El Paso	4,239	100.00	107.35	154.97	1.00	0.69
El Paso Health - El Paso	2,793	65.89	115.60	154.72	1.00	0.75
Superior - El Paso	1,446	34.11	90.89	155.49	1.00	0.58
Harris	27,301	100.00	167.52	137.55	1.00	1.22
Amerigroup - Harris	2,707	9.92	129.75	109.84	0.80	1.18
CHC - Harris	6,580	24.10	161.63	126.93	0.92	1.27
Molina - Harris	381	1.40	62.99	81.26	0.59	0.78
TCHP - Harris	15,401	56.41	184.80	151.32	1.10	1.22
United - Harris	2,232	8.18	126.64	115.24	0.84	1.10
Jefferson	2,031	100.00	208.03	141.79	1.00	1.47
Amerigroup - Jefferson	117	5.76	75.24	130.46	0.92	0.58
CHC - Jefferson	473	23.29	127.77	161.47	1.14	0.79
Molina - Jefferson	87	4.28	50.96	76.31	0.54	0.67
TCHP - Jefferson	852	41.95	339.14	152.16	1.07	2.23
United - Jefferson	502	24.72	114.70	119.31	0.84	0.96
Lubbock	2,528	100.00	112.25	138.26	1.00	0.81
Firstcare - Lubbock	1,307	51.70	128.23	122.78	0.89	1.04
Superior - Lubbock	1,221	48.30	95.34	154.65	1.12	0.62
Nueces	2,348	100.00	180.34	178.16	1.00	1.01
Driscoll - Nueces	1,911	81.39	160.96	167.55	0.94	0.96
Superior - Nueces	383	16.31	295.58	246.51	1.38	1.20
United - Nueces	54	2.30	89.51	91.61	0.51	0.98
RSA	23,312	100.00	106.64	130.50	1.00	0.82
Molina - RSA	5,182	22.23	120.80	134.76	1.03	0.90
Superior - RSA	18,130	77.77	102.44	129.23	0.99	0.79
Tarrant	11,504	100.00	147.66	131.79	1.00	1.12
Aetna - Tarrant	1,657	14.40	83.70	99.55	0.76	0.84
Amerigroup - Tarrant	4,562	39.66	151.01	138.86	1.05	1.09
Cook - Tarrant	5,285	45.94	163.88	135.35	1.03	1.21
Travis	6,347	100.00	119.20	133.43	1.00	0.89
BCBS - Travis	1,419	22.36	121.16	122.29	0.92	0.99
DCHP - Travis	1,905	30.01	108.98	142.68	1.07	0.76
Superior - Travis	3,023	47.63	124.91	132.66	0.99	0.94

Note: CDPS results are based on information in enrollment and encounter datasets. CDPS results were obtained for those enrollees who had been in the program for at least 1 months (age<1) and for those who had been in the program for at least 4 continuous months (age ≥1) (permitting one month lapse in enrollment within the 4 months period).

2. Small numbers of enrollees in a row mean that great care should be taken in interpreting the case-mix index and any associated year-to-year changes.

TEXAS CHIP						
SDA/Health Plan	Number of Enrollees	Percent Affected	Actual PMPM Expenditures Based on Paid Amounts	Predicted PMPM Payment	Case Mix	Spend Ratio
CDPS						
Perinatal <= 198% FPL	47,388	100.00	450.09	450.09	1.00	1.00
Bexar	2,159	100.00	408.16	444.49	1.00	0.92
Aetna - Bexar	203	9.40	374.32	408.62	0.92	0.92
Amerigroup - Bexar	258	11.95	319.92	425.48	0.96	0.75
CFHP - Bexar	814	37.70	463.90	465.70	1.05	1.00
Superior - Bexar	884	40.94	389.17	438.16	0.99	0.89
Dallas	9,289	100.00	405.88	467.27	1.00	0.87
Amerigroup - Dallas	3,222	34.69	330.25	473.64	1.01	0.70
Molina - Dallas	2,074	22.33	327.15	447.61	0.96	0.73
Parkland - Dallas	3,993	42.99	507.52	472.20	1.01	1.07
El Paso	921	100.00	394.76	465.26	1.00	0.85
El Paso Health - El Paso	620	67.32	411.19	464.77	1.00	0.88
Superior - El Paso	301	32.68	360.46	466.27	1.00	0.77
Harris	16,458	100.00	502.27	449.16	1.00	1.12
Amerigroup - Harris	2,174	13.21	440.04	430.42	0.96	1.02
CHC - Harris	5,880	35.73	558.78	450.89	1.00	1.24
Molina - Harris	1,577	9.58	488.93	415.35	0.92	1.18
TCHP - Harris	4,646	28.23	463.89	465.64	1.04	1.00
United - Harris	2,181	13.25	503.17	452.34	1.01	1.11
Jefferson	805	100.00	492.24	457.44	1.00	1.08
Amerigroup - Jefferson	108	13.42	508.38	453.58	0.99	1.12
CHC - Jefferson	183	22.73	516.47	471.98	1.03	1.09
Molina - Jefferson	97	12.05	466.41	430.78	0.94	1.08
TCHP - Jefferson	232	28.82	462.22	464.45	1.02	1.00
United - Jefferson	185	22.98	510.53	450.67	0.99	1.13
Lubbock	560	100.00	373.46	451.71	1.00	0.83
Firstcare - Lubbock	269	48.04	408.10	444.49	0.98	0.92
Superior - Lubbock	291	51.96	341.88	458.28	1.01	0.75
Nueces	360	100.00	409.86	429.50	1.00	0.95
Driscoll - Nueces	194	53.89	462.41	437.75	1.02	1.06
Superior - Nueces	106	29.44	346.09	411.07	0.96	0.84
United - Nueces	60	16.67	347.01	434.55	1.01	0.80
RSA	9,039	100.00	413.36	433.73	1.00	0.95
Molina - RSA	2,994	33.12	415.50	424.89	0.98	0.98
Superior - RSA	6,045	66.88	412.29	438.12	1.01	0.94
Tarrant	4,508	100.00	390.41	467.48	1.00	0.84
Aetna - Tarrant	1,065	23.62	336.51	451.63	0.97	0.75
Amerigroup - Tarrant	1,885	41.81	391.56	473.36	1.01	0.83
Cook - Tarrant	1,558	34.56	426.25	471.33	1.01	0.90
Travis	3,289	100.00	547.77	426.66	1.00	1.28
BCBS - Travis	1,141	34.69	594.99	426.72	1.00	1.39
DCHP - Travis	742	22.56	556.47	422.28	0.99	1.32
Superior - Travis	1,406	42.75	504.60	428.97	1.01	1.18

Note: CDPS results are based on information in enrollment and encounter datasets. CDPS results were obtained for those enrollees who had been in the program for at least 1 months (age<1) and for those who had been in the program for at least 4 continuous months (age ≥1) (permitting one month lapse in enrollment within the 4 months period).

2. Small numbers of enrollees in a row mean that great care should be taken in interpreting the case-mix index and any associated year-to-year changes.

FY2023 CHIP Rating Summary
Adjusted Acuity Scores

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%
Raw Unadjusted Acuity Scores (1)							
Aetna - Bexar	1.000	0.793	0.764	0.947	1.000	0.919	1.000
Amerigroup - Bexar	1.000	0.935	1.252	1.196	1.000	0.957	1.000
CFHP - Bexar	1.000	0.909	1.025	1.026	1.000	1.048	1.000
Superior - Bexar	1.000	1.160	0.998	0.945	1.000	0.986	1.000
Amerigroup - Dallas	1.000	0.975	0.997	1.022	1.000	1.014	1.000
Molina - Dallas	1.000	0.907	0.873	0.887	1.000	0.958	1.000
Parkland - Dallas	1.000	1.053	1.024	0.985	1.000	1.011	1.000
El Paso Health - El Paso	1.000	1.022	1.035	0.998	1.000	0.999	1.000
Superior - El Paso	1.000	0.963	0.932	1.003	1.000	1.002	1.000
Amerigroup - Harris	1.000	0.924	0.887	0.799	1.000	0.958	1.000
CHC - Harris	1.000	1.004	0.933	0.923	1.000	1.004	1.000
Molina - Harris	1.000	0.731	0.646	0.591	1.000	0.925	1.000
TCHP - Harris	1.000	1.014	1.057	1.100	1.000	1.037	1.000
United - Harris	1.000	0.977	0.951	0.838	1.000	1.007	1.000
Amerigroup - Jefferson	1.000	0.709	0.972	0.920	1.000	0.992	1.000
CHC - Jefferson	1.000	0.943	1.004	1.139	1.000	1.032	1.000
Molina - Jefferson	1.000	0.614	0.834	0.538	1.000	0.942	1.000
TCHP - Jefferson	1.000	1.017	0.965	1.073	1.000	1.015	1.000
United - Jefferson	1.000	1.172	1.104	0.841	1.000	0.985	1.000
Firstcare - Lubbock	1.000	0.977	1.010	0.888	1.000	0.984	1.000
Superior - Lubbock	1.000	1.027	0.989	1.119	1.000	1.015	1.000
United - Nueces	1.000	0.792	0.566	0.514	1.000	1.012	1.000
Driscoll - Nueces	1.000	0.946	1.031	0.940	1.000	1.019	1.000
Superior - Nueces	1.000	1.309	0.891	1.384	1.000	0.957	1.000
Aetna - Tarrant	1.000	0.956	0.831	0.755	1.000	0.966	1.000
Amerigroup - Tarrant	1.000	1.037	0.894	1.054	1.000	1.013	1.000
Cook - Tarrant	1.000	0.993	1.135	1.027	1.000	1.008	1.000
BCBS - Travis	1.000	1.263	0.986	0.917	1.000	1.000	1.000
DCHP - Travis	1.000	0.985	1.010	1.069	1.000	0.990	1.000
Superior - Travis	1.000	0.849	1.000	0.994	1.000	1.005	1.000
Molina - RSA	1.000	0.952	1.055	1.033	1.000	0.980	1.000
Superior - RSA	1.000	1.010	0.986	0.990	1.000	1.010	1.000

FY2023 CHIP Rating Summary
Adjusted Acuity Scores

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%
Budget Neutrality Adjustment Factor (2)							
Aetna - Bexar	1.000	1.023	1.008	1.001	1.000	1.007	1.000
Amerigroup - Bexar	1.000	1.023	1.008	1.001	1.000	1.007	1.000
CFHP - Bexar	1.000	1.023	1.008	1.001	1.000	1.007	1.000
Superior - Bexar	1.000	1.023	1.008	1.001	1.000	1.007	1.000
Amerigroup - Dallas	1.000	1.003	1.002	1.001	1.000	1.003	1.000
Molina - Dallas	1.000	1.003	1.002	1.001	1.000	1.003	1.000
Parkland - Dallas	1.000	1.003	1.002	1.001	1.000	1.003	1.000
El Paso Health - El Paso	1.000	0.996	0.996	1.000	1.000	1.000	1.000
Superior - El Paso	1.000	0.996	0.996	1.000	1.000	1.000	1.000
Amerigroup - Harris	1.000	1.000	0.997	0.993	1.000	1.004	1.000
CHC - Harris	1.000	1.000	0.997	0.993	1.000	1.004	1.000
Molina - Harris	1.000	1.000	0.997	0.993	1.000	1.004	1.000
TCHP - Harris	1.000	1.000	0.997	0.993	1.000	1.004	1.000
United - Harris	1.000	1.000	0.997	0.993	1.000	1.004	1.000
Amerigroup - Jefferson	1.000	0.993	1.002	0.995	1.000	0.997	1.000
CHC - Jefferson	1.000	0.993	1.002	0.995	1.000	0.997	1.000
Molina - Jefferson	1.000	0.993	1.002	0.995	1.000	0.997	1.000
TCHP - Jefferson	1.000	0.993	1.002	0.995	1.000	0.997	1.000
United - Jefferson	1.000	0.993	1.002	0.995	1.000	0.997	1.000
Firstcare - Lubbock	1.000	0.999	1.001	0.990	1.000	0.999	1.000
Superior - Lubbock	1.000	0.999	1.001	0.990	1.000	0.999	1.000
United - Nueces	1.000	1.010	1.011	1.017	1.000	0.998	1.000
Driscoll - Nueces	1.000	1.010	1.011	1.017	1.000	0.998	1.000
Superior - Nueces	1.000	1.010	1.011	1.017	1.000	0.998	1.000
Aetna - Tarrant	1.000	1.002	1.008	1.007	1.000	1.003	1.000
Amerigroup - Tarrant	1.000	1.002	1.008	1.007	1.000	1.003	1.000
Cook - Tarrant	1.000	1.002	1.008	1.007	1.000	1.003	1.000
BCBS - Travis	1.000	0.987	1.000	0.996	1.000	1.000	1.000
DCHP - Travis	1.000	0.987	1.000	0.996	1.000	1.000	1.000
Superior - Travis	1.000	0.987	1.000	0.996	1.000	1.000	1.000
Molina - RSA	1.000	1.003	0.998	0.999	1.000	1.002	1.000
Superior - RSA	1.000	1.003	0.998	0.999	1.000	1.002	1.000

FY2023 CHIP Rating Summary
Adjusted Acuity Scores

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%
Budget Neutral Acuity Scores (3)							
Aetna - Bexar	1.000	0.811	0.770	0.948	1.000	0.926	1.000
Amerigroup - Bexar	1.000	0.957	1.261	1.198	1.000	0.964	1.000
CFHP - Bexar	1.000	0.930	1.033	1.027	1.000	1.055	1.000
Superior - Bexar	1.000	1.186	1.006	0.947	1.000	0.993	1.000
Amerigroup - Dallas	1.000	0.978	1.000	1.023	1.000	1.017	1.000
Molina - Dallas	1.000	0.911	0.875	0.889	1.000	0.961	1.000
Parkland - Dallas	1.000	1.057	1.027	0.987	1.000	1.014	1.000
El Paso Health - El Paso	1.000	1.018	1.031	0.998	1.000	0.998	1.000
Superior - El Paso	1.000	0.959	0.928	1.003	1.000	1.002	1.000
Amerigroup - Harris	1.000	0.924	0.884	0.793	1.000	0.962	1.000
CHC - Harris	1.000	1.004	0.930	0.917	1.000	1.008	1.000
Molina - Harris	1.000	0.731	0.644	0.587	1.000	0.928	1.000
TCHP - Harris	1.000	1.014	1.054	1.093	1.000	1.041	1.000
United - Harris	1.000	0.977	0.948	0.832	1.000	1.011	1.000
Amerigroup - Jefferson	1.000	0.704	0.974	0.915	1.000	0.989	1.000
CHC - Jefferson	1.000	0.937	1.006	1.133	1.000	1.029	1.000
Molina - Jefferson	1.000	0.610	0.836	0.535	1.000	0.939	1.000
TCHP - Jefferson	1.000	1.010	0.967	1.067	1.000	1.012	1.000
United - Jefferson	1.000	1.164	1.106	0.837	1.000	0.982	1.000
Firstcare - Lubbock	1.000	0.976	1.011	0.879	1.000	0.983	1.000
Superior - Lubbock	1.000	1.026	0.990	1.107	1.000	1.014	1.000
United - Nueces	1.000	0.800	0.572	0.523	1.000	1.010	1.000
Driscoll - Nueces	1.000	0.956	1.042	0.957	1.000	1.017	1.000
Superior - Nueces	1.000	1.323	0.901	1.408	1.000	0.955	1.000
Aetna - Tarrant	1.000	0.958	0.838	0.760	1.000	0.969	1.000
Amerigroup - Tarrant	1.000	1.039	0.901	1.061	1.000	1.016	1.000
Cook - Tarrant	1.000	0.995	1.144	1.034	1.000	1.011	1.000
BCBS - Travis	1.000	1.246	0.986	0.913	1.000	1.001	1.000
DCHP - Travis	1.000	0.972	1.010	1.065	1.000	0.990	1.000
Superior - Travis	1.000	0.838	1.000	0.990	1.000	1.006	1.000
Molina - RSA	1.000	0.955	1.053	1.032	1.000	0.982	1.000
Superior - RSA	1.000	1.013	0.984	0.989	1.000	1.013	1.000

Footnotes:

- (1) Raw acuity scores as developed by ICHP. Equals the case mix factors from Exhibits A-D.
- (2) Budget neutral adjustment applied uniformly within each service area to ensure acuity adjustment is budget neutral in total.
- (3) Adjusted acuity scores applied to FY2022 Community Rates.

Attachment 8

Delivery Supplemental Payment

The rate setting methodology includes a risk adjustment technique designed to provide uniform treatment of the health plans for costs related to maternity services. In order to recognize the potential inequity that might arise between health plans with respect to the proportion of maternity cases, HHSC reimburses each plan \$3,100 for each birth.

Attachment 9

Pay for Quality Program

The medical Pay-for-Quality (P4Q) Program creates incentives and disincentives for managed care organizations based on their performance on certain quality measures. Health plans that excel on meeting the measures are eligible for a bonus while health plans that don't meet their measures are subject to a penalty.

The table below provides a description of the at risk and bonus measures and the calendar year(s) to which each applies for each program. The medical P4Q program was suspended for 2020 and 2021; MCOs will not be subject to any recoupments or distributions based on calendar year 2020 or 2021 performance.

At-Risk Measures

Measure	STAR+PLUS	STAR	STAR Kids	CHIP
Potentially Preventable Emergency Room Visits (PPVs)	2018 2019 2022 2023	2018 2019 2022 2023	2022 2023	2018 2019 2022 2023
Potentially Preventable Admissions (PPAs)		2022 2023		
Potentially Preventable Readmissions (PPRs)	2022 2023			
Appropriate Treatment for Children with Upper Respiratory Infection (URI)		2018 2019		2018 2019 2022 2023
Prenatal and Postpartum Care (PPC)		2018 2022 2023		

Well Child Visits in the First 30 months of Life (W30), First 15 Months of Life ⁱ		2018 2019		
Diabetes Control - HbA1c < 8% (CDC)	2018 2019 2022 2023			
Diabetes Screening for Members with Schizophrenia or Bipolar Disorder Who are Using Antipsychotics (SSD)	2018 2019			
Cervical Cancer Screening (CCS)	2018 2019 2022 2023			
Child and Adolescent Well-Care Visits (WCV), 12-21 years of age ⁱⁱ				2018 2019
Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents (WCC) ⁱⁱⁱ				2018 2019 2022 2023
Follow-up After Hospitalization for Mental Illness (FUH)	2022 2023		2022 2023	
Childhood Immunization Status (CIS) Combination 10		2022 2023		2022 2023
Follow-up Care for Children Prescribed ADHD Medication (ADD) ^{iv}		2022 2023		
Getting Specialized Services Composite			2022 2023	
Assistance with Care Coordination			2022 2023	

ⁱ For Measurement Years 2018 and 2019, this measure was Well Child Visits in the first 15 Months of Life (W15).

ⁱⁱ For Measurement Years 2018 and 2019, this measure was Adolescent Well Care (AWC).

ⁱⁱⁱ For 2018 and 2019, the counseling for nutrition and counseling for physical activity submeasures are used. For 2022 and 2023, only the BMI percentile documentation submeasure is used.

^{iv} For 2022 and 2023, only the initiation submeasure is used.

Bonus Pool Measures

Measure	STAR+PLUS	STAR	STAR Kids	CHIP
Potentially Preventable Readmissions (PPR)	2018 2019			
Potentially Preventable Admissions (PPA)		2018 2019		
Prevention Quality Indicator (PQI) Composite	2018 2019 2022 2023			
Potentially Preventable Complications (PPC)	2018 2019 2022 2023			
Follow-up Care for Children Prescribed ADHD Medication (ADD) - Initiation Submeasure			2022 2023	
Low Birth Weight		2018 2019 2022 2023		
Childhood Immunization Status (CIS) Combination 10				2018 2019
Immunizations for Adolescents (IMA) Combination 2				2022 2023
Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM) - Glucose and Cholesterol Combined, All Ages		2022 2023		
Chlamydia Screening in Women (CHL)		2022 2023		
Cesarean Sections, uncomplicated deliveries		2022 2023		
Risk of Continued Opioid Use, Total Members have ≥ 15 Days coverage	2022 2023			
Adherence to Antipsychotic Medications for Individuals with Schizophrenia, 80% Coverage	2022 2023			
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics			2022 2023	

Breast Cancer Screening, Non-Medicare Total	2022 2023			
Appropriate Treatment for Children with Upper Respiratory Infection (URI) – All Ages			2022 2023	
Pregnancy-Associated Outcomes - severe maternal morbidity among all deliveries excluding cases identified only by transfusion		2022 2023		
Good Access to Urgent Care	2018 2019	2018 2019		2018 2019
Rating Health Plan a 9 or 10	2018 2019	2018 2019		2018 2019
Rating Their Child's Personal Doctor a 9 or 10				2022 2023
Getting Care Quickly Composite				2022 2023
Transition to Care as an Adult			2022 2023	
Access to Routine Care, adult survey		2022 2023		
How well doctors communicate composite				2022 2023

The medical P4Q program assesses MCOs based on three categories:

- Performance Against Benchmarks
- Performance Against Self (comparison of an MCO's performance to their prior year performance)
- Bonus pool measures

The performance against self and performance against benchmarks measures are the at-risk components of the program: MCOs can lose money based on their performance on these measures. Utilizing both the performance against self and performance against benchmarks rewards high performing MCOs while still incentivizing improvement regardless of current level performance. The total percent capitation earned/lost for each at-risk measure in a program is added to determine the total capitation earned/lost for each MCO across all at-risk measures for that program.

The bonus pool measures provide an additional way for MCOs to earn rewards, without the risk of losing money. Bonus pool measures encourage improvement in new areas with no financial risk to the health MCOs. Bonus pool incentives are only available if penalties exceed rewards on the at-risk measures.

Three percent of the MCOs' capitation is at-risk. The MCO's at-risk capitation is distributed equally across the at-risk measures. Some HEDIS quality measures have submeasures. The capitation at-risk for that measure will be divided evenly across the submeasures.

Overall penalties are limited to 3% and bonuses are limited to 5%. However, historically the impact of the P4Q program on total premium has been immaterial. In 2018 the maximum loss any MCO experienced was less than 1.5% and the most earned by any MCO was less than 0.1%. In 2019, the maximum loss any MCO experienced was less than 0.7% and the most earned by any MCO was less than 0.5%. As a result, we do not believe the P4Q program has a material impact on the premium rate development. As a result, it is confirmed that the total payment plus any bonus payments will not exceed 105 percent of the capitation payments.

Attachment 10

FY2023 CHIP Rate Certification Index

The index below includes the pages of this report that correspond to the applicable sections of the 2022-2023 Medicaid Managed Care Rate Development Guide, dated April 2022.

Section I. Medicaid Managed Care Rates

1. General Information

A. Rate Development Standards

- i. Rate ranges are not being utilized in this rate development.
- ii. Rates are for the period September 1, 2022 through August 31, 2023 (FY2023).
- iii.
 - (a) The certification letter is on page 18 of the report.
 - (b) The final capitation rates are shown on pages 15-16 of the report.
 - (c)
 - (i) See pages 1 through 6 of the report.
 - (ii) See page 1 through 6 of the report.
 - (iii) See page 1 through 6 of the report.
 - (iv) There have been no changes to program eligibility.
 - (v) See Attachment 9 pages 130 through 134 of the report.
 - (vi) Not applicable.
- iv. Acknowledged.
- v. Acknowledged.
- vi. Acknowledged.
- vii. Acknowledged.
- viii. Not applicable.
- ix. Not applicable.
- x. Acknowledged.

- xi. Acknowledged.
- xii. See pages 9 through 11 and Attachment 6 pages 118 through 120 for discussion on how COVID-19 and the PHE have been accounted for in the FY2023 rate development.
- xiii. Acknowledged.

B. Appropriate Documentation

- i. The actuary is certifying capitation rates. See page 18 of the report.
- ii. Acknowledged.
- iii. Acknowledged.
- iv. Not applicable.
- v. Acknowledged.
- vi. Acknowledged. See page 18 of the report.
- vii. Not applicable.
- viii.
 - a) See Attachment 1 pages 20 through 30 of the report.
 - b) Not applicable. All rating adjustment factors have been included in the report.
 - c) FY2022 rates were not adjusted by a *de minimis* amount using the authority in 42 C.F.R 438.7(c)(3).
- ix. Not applicable. There are no known amendments at this time.
- x.
 - (a) Texas Medicaid Managed Care data has been studied for all programs, risk groups and service delivery areas through December 2021 to study the impact of COVID and the PHE.
 - (b) See pages 9 through 11 and Attachment 6 pages 118 through 120 of the report.
 - (c) See page 10 the report.
 - (d) See pages 9 through 11 and Attachment 6 pages 118 through 120 of the report.

2. Data

A. Rate Development Standards

- i. (a) Acknowledged.
- (b) Acknowledged.
- (c) Acknowledged.
- (d) Not applicable.

B. Appropriate Documentation

- i. (a) See pages 1 through 3 of the report.
- ii. (a) See pages 1 through 3 of the report.
- (b) See pages 1 through 3 of the report.
- (c) See pages 1 through 3 of the report.
- (d) Not applicable.
- iii. (a) Base period data is fully credible.
- (b) See page 4 of the report.
- (c) No errors found in the data.
- (d) See pages 7 through 11 of the report.
- (e) See page 5 of the report. In addition, value added services and non-capitated services have been excluded from the analysis.

3. Projected Benefit Costs and Trends

A. Rate Development Standards

- i. Acknowledged.
- ii. Acknowledged.
- iii. Acknowledged.
- iv. Not applicable. IMD regulation does not impact the CHIP program.

B. Appropriate Documentation

- i. See pages 15 through 16 and Attachment 1 pages 20 through 30 of the report.
- ii. (a) See Attachment 3 pages 39 through 84 of the report.
 - (b) There have been no significant changes in the development of the benefit cost since the last certification.
 - (c) All recoupments and recoveries resulting from overpayments to providers have been netted out of the claim payments used in the rate development. MCOs are required to adjust encounter data to remove all overpayments and correct the submitted information. Any provider recoveries not adjusted for in the submitted encounter data are excluded from the base period as a negative add-on payment.
- iii. (a) See Attachment 4 pages 85 through 91 of the report.
 - (b) See Attachment 4 pages 85 through 91 of the report.
 - (c) See Attachment 4 pages 85 through 91 of the report.
 - (d) See Attachment 4 pages 85 through 91 of the report.
 - (e) Not applicable.
- iv. Not applicable.
- v. Not applicable.
- vi. (a) Restorative enrollment can occur when an individual is deemed to have been CHIP eligible during a prior period. If the individual was eligible for and enrolled in CHIP managed care during the prior period, then the individual is retrospectively enrolled in the same managed care plan as their prior enrollment segment. The managed care plan is then retrospectively responsible for all CHIP expenses incurred during this retrospective period and is also paid a retrospective premium for this time period.
 - (b) All claims paid during retroactive enrollment periods are included in the base period data used to develop the FY2023 premium rate.
 - (c) All enrollment data during retroactive enrollment periods are included in the base period data used to develop the FY2023 premium rate.
 - (d) No adjustments are necessary to account for retroactive enrollment periods because the enrollment criteria have not changed from the base period to the rating period. All retroactive enrollment and claims information has been included in the base period data, the trend calculations and all other adjustment factors.

- vii. See Attachment 5 pages 92 through 117 of the report.
- viii. See Attachment 5 pages 92 through 117 of the report.

4. Special Contract Provisions Related to Payment

A. Incentive Arrangements

- i. Rate Development Standards
Acknowledged.
- ii. Appropriate Documentation
 - (a) See Attachment 9 pages 130 through 134 of the report.

B. Withhold Arrangements

- i. Rate Development Standards
Acknowledged.
- ii. Appropriate Documentation
 - (a) See Attachment 9 pages 130 through 134 of the report.
 - (b) Acknowledged.

C. Risk-Sharing Arrangements

- i. Rate Development Standards
Acknowledged.
- ii. Appropriate Documentation

HHSC includes an experience rebate provision in its uniform managed care contracts which requires the MCOs to return a portion of net income before taxes if greater than the specified percentages. The net income is measured by the financial statistical reports (FSRs) submitted by the MCOs and audited by an external auditor. Net income is aggregated across all programs and service delivery areas. The table below presents the revised experience rebate tiers resulting in a max profit of 4.6% for each health plan.

Pre-tax Income as a % of Revenues	MCO Share	HHSC Share
≤ 3%	100%	0%
> 3% and ≤ 5%	80%	20%
> 5% and ≤ 7%	0%	100%
> 7% and ≤ 9%	0%	100%
> 9% and ≤ 12%	0%	100%
> 12%	0%	100%

D. State Directed Payments

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

(a) Not applicable.

E. Pass-Through Payments

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

(a) Not applicable.

5. Projected Non-Benefit Costs

A. Rate Development Standards

i. Acknowledged.

ii. Acknowledged.

iii. Acknowledged.

iv. Acknowledged.

B. Appropriate Documentation

i. See pages 12 through 13 of the report.

ii. See pages 12 through 13 of the report.

- iii. See pages 12 through 13 of the report.

6. Risk Adjustment and Acuity Adjustments

A. Rate Development Standards

- i. Acknowledged.
- ii. Acknowledged.
- iii. Acknowledged.

B. Appropriate Documentation

- i. See Attachment 7 pages 121 through 128 of the report.
- ii. Not applicable, risk adjustment is only applied on a prospective basis.
- iii. No material changes have been made to the risk adjustment model other than annual updates of the data since the last rating period.
- iv. Risk adjustment has been applied in a budget neutral manner in accordance with 42 CFR 438.5(g).