

**STATE OF TEXAS
CHILDREN'S HEALTH INSURANCE
PROGRAM
CHIP RATE SETTING
STATE FISCAL YEAR 2025**

Prepared for:

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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 2025 (FY2025, September 1, 2024 through August 31, 2025) 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 40 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 FY2025 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 2020 and a projection of future enrollment through August 2025. These projections were prepared by HHS Forecasting staff.
- Detailed MCO encounter data for FY2023. The encounter data is a dataset that includes detail claim information for every claim incurred during FY2023 and paid through November 30, 2023. 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 2020 through February 2024. These reports were provided by the health plans and include monthly paid claims by month of service. These reports summarize the detail encounter data.
- Financial Statistical Reports (FSR) for each MCO participating in the CHIP program for FY2020, FY2021, FY2022, FY2023 and the first six months of FY2024. 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 (FY2024) premium rates for each health plan.
- The number of maternity deliveries by health plan and risk group for the period September 2020 through February 2024.
- 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 behavioral health and vision.
 - Subcapitated services make up approximately 2.5% of total medical cost and are most commonly vision and behavioral health arrangements. Information about these arrangements was provided by the health plans and verified with the audited FSRs. These items were reviewed for reasonableness by comparing the reported expense amounts from the various health plans to those arrangements of other health plans.
- FY2023 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 FY2023 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 FY2023, FY2024 and FY2025 Medicaid provider reimbursement rate changes.

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. Further discussion of the base data development and review is included in Section II.

II. Base Period Data

The actuarial model used to derive the FY2025 CHIP plan premium rates relies primarily on historical health plan experience. The base period was defined as FY2023 (September 1, 2022 through August 31, 2023). Estimates of the base period included an evaluation of incurred but unpaid claims (IBNR). Given that there are six months of runout beyond the base period, the IBNR estimates are immaterial. The IBNR estimate is based on claims paid through February 2024 and represents the following percentage of claims by type of service:

- Medical - 0.08%
- Prescription Drugs - 0.0%

The rating analysis primarily relies on three data sources: i) Financial Statistical Report (FSR), ii) MCO Supplemental Data and iii) Encounter Data.

- Financial Statistical Report – The FSR provides high-level, summary information of paid claims, subcapitated expenses, reinsurance expenses and administrative costs. The FSRs are used to determine the experience rebate for each MCO and the allowability of expenses which impact the calculation of the FSR-reported net income for experience rebate purposes. As a result, the MCOs are required to only report “allowable” expense on the FSRs. The FSRs are subject to audit by an external auditor.
- MCO Supplemental Data – The MCO supplemental data provides HHSC-specified data such as subcapitated expenses by type of service, claim lag data by type of service, other medical expenses and large claimant information. All expense items such as claim lag, capitation, direct service expense, etc. are reconciled to the FSR by risk group for each MCO to ensure the accuracy and consistency of the data sources. MCOs are asked to explain any material difference between the two data sources and, if necessary, provide revised supplemental data. Once all issues have been resolved, Rudd and Wisdom aggregates the information from the MCO Supplemental Data into a “Data Book” and provides all information to the MCOs in order to confirm the accuracy. The Data Book is used to determine base year data used in the rating analysis.
- Encounter Data – The detailed encounter data provides claim data at the most granular level including information for individual claims such as provider, procedure code, diagnostic information, etc. The encounter data is primarily used to develop rating adjustment factors for various provider reimbursement and benefit revisions. For each rating adjustment, the applicable base period encounter data is repriced using the FFS reimbursement in place during the base period, the FFS reimbursement that will be in place during the rating period and the applicable percentage change determined.

HHSC employs the Institute for Child Health Policy (ICHP) as an External Quality Review Organization. ICHP reviews the detailed encounter data and provides certification of the data quality. ICHP performs four types of analyses:

- Volume analysis based on service category
- Data validity and completeness analysis
- Pharmacy encounter analysis

- Consistency analysis between encounter data and FSRs provided by the MCO by service area (SA)

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.*

The ICHP encounter data to FSR reconciliation is done at an aggregate level by Medicaid program, service area and MCO. In addition to ICHP's encounter data to FSR comparison, Rudd and Wisdom performs a similar analysis by risk group to review for reasonableness. Risk group codes are added to the encounter data by mapping Medicaid ID from the encounter data to the eligibility files.

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. The comparison includes (i) the claim lag reports provided by the MCOs in the supplemental data request, (ii) the claim amounts reported in the FSRs and (iii) the claim amounts included in the encounter data files. The three data sources are compared to ensure consistent results such that the three are considered interchangeable in aggregate. The use of these multiple data sources allows for a dynamic, flexible rating model that is not constrained to the data limitations of a single source.

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 of high quality and we have no concerns over the availability or applicability to the FY2025 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.

III. 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 FY2025”.

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
- Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Medical Services
- Family Planning and Genetics Services
- Hearing Services
- Home Health Services
- Emergency Room Services
- Ambulance Services
- Vision Services
- Prescription Drugs
- COVID-19 related expenses for testing, treatments and vaccines

Services specifically excluded from the analysis include:

- Dental and Orthodontia Services
- Hemostatic Drugs
- Certain High Cost Carve-out Drugs
- Value-Added Services and Non-Covered Services
- Applied Behavioral Analysis Services

We projected the FY2025 cost for each individual health plan by estimating their base period average claims cost and then applying trend along with various programmatic, reimbursement, benefit and policy-related adjustment factors. These adjustment factors are described in Section IV. We added capitation expenses for services capitated by the health plan (such as vision and behavioral health), a reasonable provision for administrative expenses, a net cost of reinsurance, taxes and risk margin in order to project the total FY2025 cost under the plan. Attachment 2 presents a description and an example of the experience analysis for a sample health plan. These projected total cost rates were determined separately for each risk group for each health plan. 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 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 FY2025 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 FY2025 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 FY2025 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 FY2025 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 IV below under Risk Adjustment and in Attachment 7.

The FY2025 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 eight 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.

IV. Adjustment Factors

This section contains a description of the adjustment factors used in the FY2025 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 were 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 increase 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 the CHIP non-Perinate program and 3.5% for the 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 (FY2025). The trend rate assumptions were developed by the actuary based on an analysis of recent pharmacy claims experience under the CHIP program. CHIP experience after February 2020 has been excluded from the trend analysis due to the significant increase in cost caused by the COVID-19 pandemic and the corresponding Public Health Emergency (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 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 7.0%.

Provider Reimbursement Adjustments

Medicaid provider reimbursement changes were recognized for the following: inpatient hospital, potentially preventable readmissions (PPR), potentially preventable complications (PPC), clinical lab, dental anesthesia, private duty nursing, ground ambulance, rural hospital outpatient services,

birth and women's health related surgeries, evaluation and management services and ambulatory surgical center fee schedule.

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.

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 A 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 prior hospital admission. An expected reduction of PPR events of 10% has been applied for FY2025. Exhibit C 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 (PPR) 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 P 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, a National Drug Code (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 O of Attachment 5 presents a summary of the derivation of this adjustment factor.

Insulin Price Adjustment

Effective January 1, 2024, the three pharmaceutical manufacturers Eli Lilly, Novo Nordisk and Sanofi reduced the list price for certain insulins by as much as 70%. The base period unit cost for the impacted insulins were repriced assuming the unit cost is the same as for the periods January 2024 through March 2024. Exhibit R of Attachment 5 includes additional information regarding the application of the insulin price adjustment factors.

Makena Formulary Adjustment

Effective April 7, 2023, Makena and its generic equivalent hydroxyprogesterone were removed from the formulary. The rating adjustment was determined by removing the base period experience for Makena and its generic equivalent hydroxyprogesterone. Exhibit S of Attachment 5 includes additional information regarding the application of the Makena formulary adjustment factors.

Pharmacy Pricing Efficiency Adjustment

The base period claims experience excludes gross pharmacy reimbursement in excess of 100% of the Medicaid fee-for-service reimbursement. One MCO was impacted and reimbursed pharmacies in excess of the Medicaid FFS reimbursement. However, all MCOs in the affected service areas are impacted because the pharmacy pricing efficiency adjustment lowers the community rate applicable to all of the MCOs in that area. Exhibit T of Attachment 5 includes additional information regarding the application of the pharmacy pricing efficiency adjustment factors.

Hepatitis C Carve-In Adjustment

HHSC currently excludes Hepatitis C Direct Acting Antiviral (DAA) drugs from the capitated arrangement. These drugs are covered services under the plan but their cost is reimbursed to the MCOs using a non-risk arrangement. We have now accumulated sufficient experience to project utilization and cost for Hepatitis C DAA drugs. Effective September 1, 2024, Hepatitis C DAA drugs will be carved-in and added to capitated services. Exhibit U of Attachment 5 includes additional information regarding the application of the Hepatitis C carve-in adjustment factors.

AMP Cap Removal

Prior to January 1, 2024, there was a rebate cap that prevented Medicaid programs from receiving rebate payments that exceed the Average Manufacturer Price (AMP) for a drug. Effective January

1, 2024, a provision in the American Rescue Plan Act of 2021 removed the cap. Pharmacy manufacturers reduced the list price for Symbicort, Advair and Victoza in response to legislation to prevent paying rebates that exceeded the gross cost. The base period unit cost for the impacted drugs were repriced assuming the unit cost is the same as for the periods January 2024 through March 2024. Exhibit V of Attachment 5 includes additional information regarding the application of the AMP-Cap removal adjustment factors.

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.

Public Health Emergency Related Cost Adjustment

Beginning in March 2020 and continuing into 2023, the PHE has had a significant impact on average CHIP expenditures. Average enrollment during the FY2023 base period is 75% less than the expected enrollment during the FY2025 rating period. The PHE officially ended May 11, 2023 and the PHE unwind process began with disenrollment in the Medicaid programs beginning in June 2023. The majority of Medicaid disenrollment is expected to occur during June 2023 through February 2024 and the entire unwinding process will be complete prior to September 1, 2024. The PHE unwinding process resulted in members being disenrolled from Medicaid and transferring to CHIP for qualified members. Given the disenrollment from Medicaid during FY2024, the CHIP average cost during the FY2025 rating period will be impacted as CHIP enrollment increases. A rate adjustment was calculated in order to estimate the impact of the PHE unwinding process on average cost in FY2025. Attachment 6 presents a summary of the derivation of this adjustment factor.

COVID-19

COVID-19 and the associated PHE have had an unprecedented impact on the historical enrollment and claims data beginning March 2020 and continuing through the FY2023 base period. Significant enrollment growth has resulted in reductions in average cost which varies by program and risk group. During the FY2020 through FY2023 rating periods, HHSC addressed the additional risk associated with the PHE with multiple approaches including paying COVID-19 related expenditures on a non-risk basis, adjusting the base period used in rate development and

revising the experience rebate structure.

With the expiration of the PHE on May 11, 2023 and the commencement of the PHE unwinding process, the Medicaid and CHIP programs are expected to eventually return to enrollment and average cost patterns that are in line with historical pre-PHE norms. In our opinion, the pre-PHE base period, March 2019 through February 2020, which was used for the FY2022 and FY2023 rate developments is outdated for use in developing FY2025 rates. As a result, the base period has been updated to FY2023, which aligns with managed care regulations. Given that this data was during the middle of the PHE, it must be adjusted to reflect the expected impact of the PHE unwinding process. The PHE Related Cost adjustment described above and included in Attachment 6 has been developed based on an extensive review of program-specific data and information about the PHE unwinding process including disenrollment by member. The PHE-related cost adjustment is intended to adjust the base period for expected changes to the enrollment, acuity and average cost for each program.

Effective September 1, 2023, all COVID-19 related expenses for testing, treatments and vaccines transitioned to being covered under the capitation rate with no further non-risk payments. Given the historical information available regarding COVID-19 and the stabilization of the monthly cost patterns, we believe the FY2023 base period data is a reasonable basis for projecting future expenses. The FY2023 base period includes claims experience for all COVID-19 related expenses and no further adjustment is needed to account for the carve-in of COVID-19 related expenses. While we cannot predict future COVID-19 outbreaks or variants, just like we cannot predict higher or lower than average flu seasons, we believe the FY2023 data demonstrates sufficient consistency to be an appropriate basis for rate development.

Given the adjustments to the base period, utilizing FY2023 data, and transitioning COVID-19 services into the capitation rate, HHSC reverted the experience rebate structure to its original structure effective September 1, 2023. No further changes are applicable to FY2025.

Pre-tax Income as a % of Revenues	MCO Share	HHSC Share
≤ 3%	100%	0%
> 3% and ≤ 5%	80%	20%
> 5% and ≤ 7%	60%	40%
> 7% and ≤ 9%	40%	60%
> 9% and ≤ 12%	20%	80%
> 12%	0%	100%

V. Administrative Fees, Taxes and Risk Margin

The rating methodology includes an explicit provision for administrative services. The amount allocated for administrative expenses is \$10.00 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 administrative fee amounts were determined based on a review of the administrative expenses of the health plan as reported in their audited Financial Statistical Reports (FSRs). The table below summarizes the reported administrative expenses for the past seven fiscal years for the CHIP program. The table includes actual reported expenses along with estimated inflation adjusted expenses.

	Administrative Expense PMPM		
	Actual	Average Annual ECI	Inflation Adjusted
FY2017	13.06	3.50%	17.20
FY2018	13.44	3.60%	17.22
FY2019	17.78	3.80%	22.24
FY2020	17.24	4.00%	20.97
FY2021	20.13	3.90%	23.45
FY2022	22.91	3.50%	25.40
FY2023	26.28	3.10%	27.94
Average FY17-FY23			22.06

The actual administrative expenses reported by year were adjusted for inflation by applying the annual growth in the Employee Cost Index (ECI) as reported by the US Bureau of Labor and Statistics. Based on this analysis, the expected range of administrative costs for FY2025 was deemed to be around \$22.

Based on the administrative fee formula included in the rate development, the average administrative expense included in the FY2025 premium rate is \$22.74 which is in line with the range of historical average cost. The FY2022 and FY2023 average administrative cost appears to be an outlier and is attributable to the significant enrollment reduction for the CHIP program. As the PHE ends and enrollment increases to pre-PHE levels, it is expected that per capita administrative cost will decrease to pre-PHE levels.

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 - \$7.00 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 (\$0.071 pmpm) and a risk margin (1.50% of premium). The premium tax and maintenance tax are based on Texas Department of Insurance requirements.

VI. 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 FY2025”.

VII. Summary

The chart below presents the results of the FY2025 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
FY2025 CHIP Premium Rates pmpm					
Aetna - Bexar	394.20	125.56	163.89	174.37	3,100.00
Amerigroup - Bexar	394.20	480.24	179.85	142.75	3,100.00
CFHP - Bexar	394.20	229.74	135.80	173.97	3,100.00
Superior - Bexar	394.20	278.45	260.43	286.29	3,100.00
Amerigroup - Dallas	394.20	209.18	174.70	258.85	3,100.00
Molina - Dallas	394.20	143.72	110.96	101.80	3,100.00
Parkland - Dallas	394.20	615.91	264.24	227.00	3,100.00
El Paso Health - El Paso	394.20	281.00	178.31	284.74	3,100.00
Superior - El Paso	394.20	181.91	189.60	329.49	3,100.00
Amerigroup - Harris	394.20	230.31	133.57	160.95	3,100.00
CHC - Harris	394.20	281.68	198.62	348.30	3,100.00
Molina - Harris	394.20	102.26	59.98	80.48	3,100.00
TCHP - Harris	394.20	360.02	199.64	309.16	3,100.00
United - Harris	394.20	254.13	93.82	549.13	3,100.00
Amerigroup - Jefferson	394.20	277.93	66.70	178.85	3,100.00
CHC - Jefferson	394.20	197.30	115.17	378.50	3,100.00
Molina - Jefferson	394.20	103.54	169.61	61.17	3,100.00
TCHP - Jefferson	394.20	317.08	279.27	202.34	3,100.00
United - Jefferson	394.20	290.04	205.58	244.35	3,100.00
Firstcare - Lubbock	394.20	402.80	126.13	274.09	3,100.00
Superior - Lubbock	394.20	320.29	168.15	139.21	3,100.00
Driscoll - Nueces	394.20	412.58	313.53	371.57	3,100.00
Superior - Nueces	394.20	225.72	159.63	196.57	3,100.00
United - Nueces	394.20	60.90	66.30	68.75	3,100.00
Aetna - Tarrant	394.20	400.48	194.22	233.21	3,100.00
Amerigroup - Tarrant	394.20	213.83	179.00	239.30	3,100.00
Cook - Tarrant	394.20	195.44	175.64	205.00	3,100.00
BCBS - Travis	394.20	56.57	118.45	164.97	3,100.00
DCHP - Travis	394.20	213.35	151.74	258.89	3,100.00
Superior - Travis	394.20	156.05	212.99	496.42	3,100.00
Molina - RSA	394.20	165.00	198.73	193.91	3,100.00
Superior - RSA	394.20	298.35	168.12	197.25	3,100.00

Health Plan	CHIP Perinate - Medical & Prescription Drug Rates			
	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2025 CHIP Perinate Premium Rates pmpm				
Aetna - Bexar	1,003.37	432.00	311.41	3,100.00
Amerigroup - Bexar	1,003.37	425.28	311.41	3,100.00
CFHP - Bexar	1,003.37	472.82	311.41	3,100.00
Superior - Bexar	1,003.37	471.34	311.41	3,100.00
Amerigroup - Dallas	1,003.37	425.97	311.41	3,100.00
Molina - Dallas	1,003.37	433.74	311.41	3,100.00
Parkland - Dallas	1,003.37	435.89	311.41	3,100.00
El Paso Health - El Paso	1,003.37	411.83	311.41	3,100.00
Superior - El Paso	1,003.37	407.93	311.41	3,100.00
Amerigroup - Harris	1,003.37	463.74	311.41	3,100.00
CHC - Harris	1,003.37	627.52	311.41	3,100.00
Molina - Harris	1,003.37	624.53	311.41	3,100.00
TCHP - Harris	1,003.37	623.25	311.41	3,100.00
United - Harris	1,003.37	567.18	311.41	3,100.00
Amerigroup - Jefferson	1,003.37	581.21	311.41	3,100.00
CHC - Jefferson	1,003.37	575.94	311.41	3,100.00
Molina - Jefferson	1,003.37	699.19	311.41	3,100.00
TCHP - Jefferson	1,003.37	604.58	311.41	3,100.00
United - Jefferson	1,003.37	601.65	311.41	3,100.00
Firstcare - Lubbock	1,003.37	507.66	311.41	3,100.00
Superior - Lubbock	1,003.37	479.76	311.41	3,100.00
Driscoll - Nueces	1,003.37	613.37	311.41	3,100.00
Superior - Nueces	1,003.37	559.74	311.41	3,100.00
United - Nueces	1,003.37	507.66	311.41	3,100.00
Aetna - Tarrant	1,003.37	446.70	311.41	3,100.00
Amerigroup - Tarrant	1,003.37	499.73	311.41	3,100.00
Cook - Tarrant	1,003.37	466.40	311.41	3,100.00
BCBS - Travis	1,003.37	521.33	311.41	3,100.00
DCHP - Travis	1,003.37	564.51	311.41	3,100.00
Superior - Travis	1,003.37	497.65	311.41	3,100.00
Molina - RSA	1,003.37	435.62	311.41	3,100.00
Superior - RSA	1,003.37	457.38	311.41	3,100.00

The chart below presents the results of the FY2025 CHIP Dental rating analysis.

Health Plan	CHIP Dental Rates			
	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18
FY2025 Premium Rates pmpm				
Dentaquest	2.42	19.35	24.49	23.02
MCNA	2.42	19.35	24.49	23.02
United	2.41	18.37	24.27	22.75

Attachment 1 presents additional information regarding the FY2025 CHIP medical and pharmacy rates including a comparison to current (FY2024) rates. This report details the development of the medical and prescription drug components 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 FY2025”.

Attachment 10 presents the required rating index summarizing the applicable sections from the 2024-2025 Medicaid Managed Care Rate Development Guide.

The implied medical loss ratio based on the FY2025 rate development and assumptions detailed in this report is 89.1% which exceeds the 85% minimum as required per 42 CFR 438.4(b)(9). The premium rates have been calculated such that they are adequate to cover all reasonable expenses projected under the CHIP program for FY2025.

The medical loss ratios have varied significantly in recent years due to the unprecedented volatility associated with the PHE and the unwinding process. The medical loss ratio for FY2023 was 80% due to the unexpected continuation of the PHE and the enrollment decline experienced in the dental programs. Through the first six months of FY2024, the medical loss ratio has increased to 88% due to the PHE unwinding process and the increase in average cost. The medical loss ratio is expected to continue increasing throughout the remainder of FY2024. While the FY2025 rates are not calculated based solely on the loss ratios of prior years, they have been calculated based on the actual expenditures that generated these loss ratios adjusted for expected changes in enrollment, reimbursement and program policy.

VIII. Actuarial Certification of FY2025 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, 2024 through August 31, 2025 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.

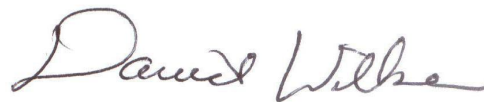
We have relied on historical experience data and program information provided to us by HHSC. We have reviewed the data for reasonableness but have not audited the data.

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.

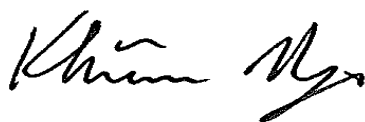
Please note that actual health plan contractor experience will differ from these projections. Rudd and Wisdom has developed these rates on behalf of the State to demonstrate compliance with the CMS requirements under 42 CFR 438.3(c), 438.3(e), 438.4, 438.5, 438.6 and 438.7. Any health plan contracting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

IX. Attachments

Attachment 1 – Summary of FY2025 CHIP Medical and Pharmacy Rating Analysis

Attachment 2 – Individual Health Plan Experience Analysis

Attachment 3 – Community Experience Analysis

Attachment 4 – Trend Analysis

Attachment 5 – Rating Adjustment Factors

Attachment 6 – PHE Related Adjustment

Attachment 7 – Acuity Risk Adjustment

Attachment 8 – Delivery Supplemental Payment

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

Attachment 10 – Index for 2024-2025 Medicaid Managed Care Rate Development Guide

Attachment 1

Summary of FY2025 CHIP Medical and Pharmacy Rating Analysis

Exhibit A presents summary information regarding the FY2025 CHIP health plan rates. Included on the exhibit are current (FY2024) premium rates, split between medical, prescription drug, and delivery supplemental payment (DSP) components; FY2025 premium rates, split between medical, prescription drug and DSP components; and a comparison of FY2024 and FY2025 premium rates.

Exhibit B presents a comparison of the projected expenditures under the current (FY2024) premium rates and the FY2025 premium rates. The projection is split by medical (includes DSP), pharmacy and dental.

The reasons for the rate changes are numerous and vary from SDA to SDA and risk group to risk group. The overall premium rates increased by an average of 24.8% which is primarily attributed to (a) the updating of the base period to FY2023 and (b) the PHE unwinding process which has resulted in increased enrollment and increased average cost.

FY2025 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 FY2024 Medical Premium Rates pmpm								
Aetna - Bexar	842.82	120.03	64.82	75.18	1,524.89	385.66	355.72	3,100.00
Amerigroup - Bexar	842.82	98.00	83.79	95.98	1,524.89	430.58	355.72	3,100.00
CFHP - Bexar	842.82	156.22	88.32	91.09	1,524.89	415.25	355.72	3,100.00
Superior - Bexar	842.82	198.70	116.08	78.69	1,524.89	424.17	355.72	3,100.00
Amerigroup - Dallas	842.82	151.13	131.57	153.31	1,524.89	415.06	355.72	3,100.00
Molina - Dallas	842.82	66.69	117.55	83.98	1,524.89	400.30	355.72	3,100.00
Parkland - Dallas	842.82	249.12	177.45	162.53	1,524.89	420.28	355.72	3,100.00
El Paso Health - El Paso	842.82	135.61	128.28	128.88	1,524.89	334.36	355.72	3,100.00
Superior - El Paso	842.82	196.99	147.81	123.32	1,524.89	367.55	355.72	3,100.00
Amerigroup - Harris	842.82	132.94	103.88	145.94	1,524.89	388.05	355.72	3,100.00
CHC - Harris	842.82	183.99	121.82	177.82	1,524.89	554.66	355.72	3,100.00
Molina - Harris	842.82	50.45	36.89	63.31	1,524.89	566.74	355.72	3,100.00
TCHP - Harris	842.82	212.98	136.76	229.37	1,524.89	555.97	355.72	3,100.00
United - Harris	842.82	266.08	92.54	170.70	1,524.89	538.42	355.72	3,100.00
Amerigroup - Jefferson	842.82	197.71	86.87	3,133.06	1,524.89	589.20	355.72	3,100.00
CHC - Jefferson	842.82	211.18	146.80	263.52	1,524.89	547.98	355.72	3,100.00
Molina - Jefferson	842.82	43.44	38.56	44.24	1,524.89	648.02	355.72	3,100.00
TCHP - Jefferson	842.82	172.77	153.90	161.19	1,524.89	693.07	355.72	3,100.00
United - Jefferson	842.82	179.84	116.94	159.30	1,524.89	549.98	355.72	3,100.00
Firstcare - Lubbock	842.82	118.70	78.91	125.23	1,524.89	397.85	355.72	3,100.00
Superior - Lubbock	842.82	181.33	90.01	77.28	1,524.89	376.51	355.72	3,100.00
Driscoll - Nueces	842.82	220.88	185.38	207.49	1,524.89	498.55	355.72	3,100.00
Superior - Nueces	842.82	200.47	148.51	121.74	1,524.89	462.87	355.72	3,100.00
United - Nueces	842.82	47.53	102.05	84.97	1,524.89	266.09	355.72	3,100.00
Aetna - Tarrant	842.82	192.97	136.48	127.68	1,524.89	355.63	355.72	3,100.00
Amerigroup - Tarrant	842.82	185.94	116.04	141.96	1,524.89	378.14	355.72	3,100.00
Cook - Tarrant	842.82	232.69	136.35	158.79	1,524.89	369.82	355.72	3,100.00
BCBS - Travis	842.82	105.78	71.68	115.70	1,524.89	452.04	355.72	3,100.00
DCHP - Travis	842.82	131.21	98.29	120.49	1,524.89	506.89	355.72	3,100.00
Superior - Travis	842.82	117.07	92.79	185.74	1,524.89	456.48	355.72	3,100.00
Molina - RSA	842.82	80.97	91.99	85.45	1,524.89	390.20	355.72	3,100.00
Superior - RSA	842.82	150.03	89.52	105.88	1,524.89	416.49	355.72	3,100.00

FY2025 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 FY2024 Prescription Drug Premium Rates pmpm								
Aetna - Bexar	23.12	6.10	31.48	32.38	2.16	30.70	45.45	
Amerigroup - Bexar	23.12	4.98	40.69	41.35	2.16	34.27	45.45	
CFHP - Bexar	23.12	7.93	42.89	39.24	2.16	33.05	45.45	
Superior - Bexar	23.12	10.09	56.37	33.90	2.16	33.76	45.45	
Amerigroup - Dallas	23.12	15.99	32.26	57.23	2.16	20.48	45.45	
Molina - Dallas	23.12	7.06	28.82	31.35	2.16	19.75	45.45	
Parkland - Dallas	23.12	26.36	43.51	60.68	2.16	20.74	45.45	
El Paso Health - El Paso	23.12	6.67	22.39	16.72	2.16	32.71	45.45	
Superior - El Paso	23.12	9.69	25.80	16.00	2.16	35.96	45.45	
Amerigroup - Harris	23.12	6.54	39.30	23.09	2.16	42.47	45.45	
CHC - Harris	23.12	14.54	27.56	48.06	2.16	50.89	45.45	
Molina - Harris	23.12	3.20	10.40	8.73	2.16	36.26	45.45	
TCHP - Harris	23.12	16.83	30.94	61.99	2.16	51.01	45.45	
United - Harris	23.12	21.03	20.94	46.13	2.16	49.40	45.45	
Amerigroup - Jefferson	23.12	14.27	44.10	237.36	2.16	48.84	45.45	
CHC - Jefferson	23.12	15.24	74.51	19.96	2.16	45.42	45.45	
Molina - Jefferson	23.12	3.80	28.71	9.98	2.16	30.28	45.45	
TCHP - Jefferson	23.12	14.00	54.77	36.45	2.16	57.45	45.45	
United - Jefferson	23.12	11.48	35.91	54.05	2.16	56.41	45.45	
Firstcare - Lubbock	23.12	6.82	26.94	136.54	2.16	39.92	45.45	
Superior - Lubbock	23.12	8.75	28.91	28.22	2.16	45.87	45.45	
Driscoll - Nueces	23.12	11.52	45.17	60.70	2.16	42.77	45.45	
Superior - Nueces	23.12	7.53	41.04	76.96	2.16	30.13	45.45	
United - Nueces	23.12	11.98	6.09	15.85	2.16	9.04	45.45	
Aetna - Tarrant	23.12	28.74	30.37	32.90	2.16	38.85	45.45	
Amerigroup - Tarrant	23.12	27.69	25.82	36.58	2.16	41.31	45.45	
Cook - Tarrant	23.12	34.65	30.34	40.91	2.16	40.40	45.45	
BCBS - Travis	23.12	6.06	32.40	39.75	2.16	18.58	45.45	
DCHP - Travis	23.12	7.81	38.64	84.62	2.16	15.48	45.45	
Superior - Travis	23.12	6.71	41.94	63.81	2.16	18.76	45.45	
Molina - RSA	23.12	6.15	39.20	37.37	2.16	38.77	45.45	
Superior - RSA	23.12	11.39	38.14	46.31	2.16	41.38	45.45	

FY2025 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 FY2024 Total Premium Rates pmpm								
Aetna - Bexar	865.94	126.13	96.30	107.56	1,527.05	416.36	401.17	3,100.00
Amerigroup - Bexar	865.94	102.98	124.48	137.33	1,527.05	464.85	401.17	3,100.00
CFHP - Bexar	865.94	164.15	131.21	130.33	1,527.05	448.30	401.17	3,100.00
Superior - Bexar	865.94	208.79	172.45	112.59	1,527.05	457.93	401.17	3,100.00
Amerigroup - Dallas	865.94	167.12	163.83	210.54	1,527.05	435.54	401.17	3,100.00
Molina - Dallas	865.94	73.75	146.37	115.33	1,527.05	420.05	401.17	3,100.00
Parkland - Dallas	865.94	275.48	220.96	223.21	1,527.05	441.02	401.17	3,100.00
El Paso Health - El Paso	865.94	142.28	150.67	145.60	1,527.05	367.07	401.17	3,100.00
Superior - El Paso	865.94	206.68	173.61	139.32	1,527.05	403.51	401.17	3,100.00
Amerigroup - Harris	865.94	139.48	143.18	169.03	1,527.05	430.52	401.17	3,100.00
CHC - Harris	865.94	198.53	149.38	225.88	1,527.05	605.55	401.17	3,100.00
Molina - Harris	865.94	53.65	47.29	72.04	1,527.05	603.00	401.17	3,100.00
TCHP - Harris	865.94	229.81	167.70	291.36	1,527.05	606.98	401.17	3,100.00
United - Harris	865.94	287.11	113.48	216.83	1,527.05	587.82	401.17	3,100.00
Amerigroup - Jefferson	865.94	211.98	130.97	3,370.42	1,527.05	638.04	401.17	3,100.00
CHC - Jefferson	865.94	226.42	221.31	283.48	1,527.05	593.40	401.17	3,100.00
Molina - Jefferson	865.94	47.24	67.27	54.22	1,527.05	678.30	401.17	3,100.00
TCHP - Jefferson	865.94	186.77	208.67	197.64	1,527.05	750.52	401.17	3,100.00
United - Jefferson	865.94	191.32	152.85	213.35	1,527.05	606.39	401.17	3,100.00
Firstcare - Lubbock	865.94	125.52	105.85	261.77	1,527.05	437.77	401.17	3,100.00
Superior - Lubbock	865.94	190.08	118.92	105.50	1,527.05	422.38	401.17	3,100.00
Driscoll - Nueces	865.94	232.40	230.55	268.19	1,527.05	541.32	401.17	3,100.00
Superior - Nueces	865.94	208.00	189.55	198.70	1,527.05	493.00	401.17	3,100.00
United - Nueces	865.94	59.51	108.14	100.82	1,527.05	275.13	401.17	3,100.00
Aetna - Tarrant	865.94	221.71	166.85	160.58	1,527.05	394.48	401.17	3,100.00
Amerigroup - Tarrant	865.94	213.63	141.86	178.54	1,527.05	419.45	401.17	3,100.00
Cook - Tarrant	865.94	267.34	166.69	199.70	1,527.05	410.22	401.17	3,100.00
BCBS - Travis	865.94	111.84	104.08	155.45	1,527.05	470.62	401.17	3,100.00
DCHP - Travis	865.94	139.02	136.93	205.11	1,527.05	522.37	401.17	3,100.00
Superior - Travis	865.94	123.78	134.73	249.55	1,527.05	475.24	401.17	3,100.00
Molina - RSA	865.94	87.12	131.19	122.82	1,527.05	428.97	401.17	3,100.00
Superior - RSA	865.94	161.42	127.66	152.19	1,527.05	457.87	401.17	3,100.00

FY2025 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
FY2025 Medical Premium Rates pmpm								
Aetna - Bexar	345.82	101.82	109.56	124.73	998.34	401.14	270.91	3,100.00
Amerigroup - Bexar	345.82	389.43	120.23	102.11	998.34	394.90	270.91	3,100.00
CFHP - Bexar	345.82	186.30	90.78	124.44	998.34	439.05	270.91	3,100.00
Superior - Bexar	345.82	225.80	174.10	204.79	998.34	437.67	270.91	3,100.00
Amerigroup - Dallas	345.82	193.76	140.99	193.27	998.34	407.17	270.91	3,100.00
Molina - Dallas	345.82	133.13	89.55	76.01	998.34	414.59	270.91	3,100.00
Parkland - Dallas	345.82	570.51	213.26	169.49	998.34	416.65	270.91	3,100.00
El Paso Health - El Paso	345.82	259.90	139.65	212.36	998.34	381.30	270.91	3,100.00
Superior - El Paso	345.82	168.25	148.49	245.74	998.34	377.69	270.91	3,100.00
Amerigroup - Harris	345.82	213.83	102.02	132.89	998.34	417.22	270.91	3,100.00
CHC - Harris	345.82	264.92	157.60	264.63	998.34	573.86	270.91	3,100.00
Molina - Harris	345.82	96.95	50.37	63.46	998.34	585.50	270.91	3,100.00
TCHP - Harris	345.82	338.60	158.41	234.89	998.34	569.95	270.91	3,100.00
United - Harris	345.82	233.15	64.00	435.07	998.34	523.66	270.91	3,100.00
Amerigroup - Jefferson	345.82	251.39	53.81	107.32	998.34	529.30	270.91	3,100.00
CHC - Jefferson	345.82	173.91	76.02	316.27	998.34	528.37	270.91	3,100.00
Molina - Jefferson	345.82	98.86	137.14	44.65	998.34	647.83	270.91	3,100.00
TCHP - Jefferson	345.82	279.49	184.33	169.07	998.34	554.65	270.91	3,100.00
United - Jefferson	345.82	255.65	135.69	204.18	998.34	551.96	270.91	3,100.00
Firstcare - Lubbock	345.82	386.92	79.70	114.55	998.34	475.81	270.91	3,100.00
Superior - Lubbock	345.82	311.76	115.68	110.39	998.34	448.29	270.91	3,100.00
Driscoll - Nueces	345.82	390.86	246.65	305.09	998.34	565.61	270.91	3,100.00
Superior - Nueces	345.82	213.83	125.58	161.40	998.34	516.16	270.91	3,100.00
United - Nueces	345.82	57.69	52.16	56.45	998.34	468.13	270.91	3,100.00
Aetna - Tarrant	345.82	330.62	158.97	179.01	998.34	412.65	270.91	3,100.00
Amerigroup - Tarrant	345.82	184.16	143.22	173.95	998.34	463.58	270.91	3,100.00
Cook - Tarrant	345.82	161.35	143.76	157.35	998.34	430.85	270.91	3,100.00
BCBS - Travis	345.82	51.97	83.60	129.59	998.34	502.74	270.91	3,100.00
DCHP - Travis	345.82	197.90	102.04	222.64	998.34	548.87	270.91	3,100.00
Superior - Travis	345.82	143.36	150.32	389.95	998.34	479.91	270.91	3,100.00
Molina - RSA	345.82	148.36	144.68	147.71	998.34	400.24	270.91	3,100.00
Superior - RSA	345.82	268.26	122.40	150.26	998.34	420.24	270.91	3,100.00

FY2025 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
FY2025 Prescription Drug Premium Rates pmpm								
Aetna - Bexar	48.38	23.74	54.33	49.64	5.03	30.86	40.50	
Amerigroup - Bexar	48.38	90.81	59.62	40.64	5.03	30.38	40.50	
CFHP - Bexar	48.38	43.44	45.02	49.53	5.03	33.77	40.50	
Superior - Bexar	48.38	52.65	86.33	81.50	5.03	33.67	40.50	
Amerigroup - Dallas	48.38	15.42	33.71	65.58	5.03	18.80	40.50	
Molina - Dallas	48.38	10.59	21.41	25.79	5.03	19.15	40.50	
Parkland - Dallas	48.38	45.40	50.98	57.51	5.03	19.24	40.50	
El Paso Health - El Paso	48.38	21.10	38.66	72.38	5.03	30.53	40.50	
Superior - El Paso	48.38	13.66	41.11	83.75	5.03	30.24	40.50	
Amerigroup - Harris	48.38	16.48	31.55	28.06	5.03	46.52	40.50	
CHC - Harris	48.38	16.76	41.02	83.67	5.03	53.66	40.50	
Molina - Harris	48.38	5.31	9.61	17.02	5.03	39.03	40.50	
TCHP - Harris	48.38	21.42	41.23	74.27	5.03	53.30	40.50	
United - Harris	48.38	20.98	29.82	114.06	5.03	43.52	40.50	
Amerigroup - Jefferson	48.38	26.54	12.89	71.53	5.03	51.91	40.50	
CHC - Jefferson	48.38	23.39	39.15	62.23	5.03	47.57	40.50	
Molina - Jefferson	48.38	4.68	32.47	16.52	5.03	51.36	40.50	
TCHP - Jefferson	48.38	37.59	94.94	33.27	5.03	49.93	40.50	
United - Jefferson	48.38	34.39	69.89	40.17	5.03	49.69	40.50	
Firstcare - Lubbock	48.38	15.88	46.43	159.54	5.03	31.85	40.50	
Superior - Lubbock	48.38	8.53	52.47	28.82	5.03	31.47	40.50	
Driscoll - Nueces	48.38	21.72	66.88	66.48	5.03	47.76	40.50	
Superior - Nueces	48.38	11.89	34.05	35.17	5.03	43.58	40.50	
United - Nueces	48.38	3.21	14.14	12.30	5.03	39.53	40.50	
Aetna - Tarrant	48.38	69.86	35.25	54.20	5.03	34.05	40.50	
Amerigroup - Tarrant	48.38	29.67	35.78	65.35	5.03	36.15	40.50	
Cook - Tarrant	48.38	34.09	31.88	47.65	5.03	35.55	40.50	
BCBS - Travis	48.38	4.60	34.85	35.38	5.03	18.59	40.50	
DCHP - Travis	48.38	15.45	49.70	36.25	5.03	15.64	40.50	
Superior - Travis	48.38	12.69	62.67	106.47	5.03	17.74	40.50	
Molina - RSA	48.38	16.64	54.05	46.20	5.03	35.38	40.50	
Superior - RSA	48.38	30.09	45.72	46.99	5.03	37.14	40.50	

FY2025 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
FY2025 Total Premium Rates pmpm								
Aetna - Bexar	394.20	125.56	163.89	174.37	1,003.37	432.00	311.41	3,100.00
Amerigroup - Bexar	394.20	480.24	179.85	142.75	1,003.37	425.28	311.41	3,100.00
CFHP - Bexar	394.20	229.74	135.80	173.97	1,003.37	472.82	311.41	3,100.00
Superior - Bexar	394.20	278.45	260.43	286.29	1,003.37	471.34	311.41	3,100.00
Amerigroup - Dallas	394.20	209.18	174.70	258.85	1,003.37	425.97	311.41	3,100.00
Molina - Dallas	394.20	143.72	110.96	101.80	1,003.37	433.74	311.41	3,100.00
Parkland - Dallas	394.20	615.91	264.24	227.00	1,003.37	435.89	311.41	3,100.00
El Paso Health - El Paso	394.20	281.00	178.31	284.74	1,003.37	411.83	311.41	3,100.00
Superior - El Paso	394.20	181.91	189.60	329.49	1,003.37	407.93	311.41	3,100.00
Amerigroup - Harris	394.20	230.31	133.57	160.95	1,003.37	463.74	311.41	3,100.00
CHC - Harris	394.20	281.68	198.62	348.30	1,003.37	627.52	311.41	3,100.00
Molina - Harris	394.20	102.26	59.98	80.48	1,003.37	624.53	311.41	3,100.00
TCHP - Harris	394.20	360.02	199.64	309.16	1,003.37	623.25	311.41	3,100.00
United - Harris	394.20	254.13	93.82	549.13	1,003.37	567.18	311.41	3,100.00
Amerigroup - Jefferson	394.20	277.93	66.70	178.85	1,003.37	581.21	311.41	3,100.00
CHC - Jefferson	394.20	197.30	115.17	378.50	1,003.37	575.94	311.41	3,100.00
Molina - Jefferson	394.20	103.54	169.61	61.17	1,003.37	699.19	311.41	3,100.00
TCHP - Jefferson	394.20	317.08	279.27	202.34	1,003.37	604.58	311.41	3,100.00
United - Jefferson	394.20	290.04	205.58	244.35	1,003.37	601.65	311.41	3,100.00
Firstcare - Lubbock	394.20	402.80	126.13	274.09	1,003.37	507.66	311.41	3,100.00
Superior - Lubbock	394.20	320.29	168.15	139.21	1,003.37	479.76	311.41	3,100.00
Driscoll - Nueces	394.20	412.58	313.53	371.57	1,003.37	613.37	311.41	3,100.00
Superior - Nueces	394.20	225.72	159.63	196.57	1,003.37	559.74	311.41	3,100.00
United - Nueces	394.20	60.90	66.30	68.75	1,003.37	507.66	311.41	3,100.00
Aetna - Tarrant	394.20	400.48	194.22	233.21	1,003.37	446.70	311.41	3,100.00
Amerigroup - Tarrant	394.20	213.83	179.00	239.30	1,003.37	499.73	311.41	3,100.00
Cook - Tarrant	394.20	195.44	175.64	205.00	1,003.37	466.40	311.41	3,100.00
BCBS - Travis	394.20	56.57	118.45	164.97	1,003.37	521.33	311.41	3,100.00
DCHP - Travis	394.20	213.35	151.74	258.89	1,003.37	564.51	311.41	3,100.00
Superior - Travis	394.20	156.05	212.99	496.42	1,003.37	497.65	311.41	3,100.00
Molina - RSA	394.20	165.00	198.73	193.91	1,003.37	435.62	311.41	3,100.00
Superior - RSA	394.20	298.35	168.12	197.25	1,003.37	457.38	311.41	3,100.00

FY2025 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
FY2025 Medical Premium Rate Change								
Aetna - Bexar	-59.0%	-15.2%	69.0%	65.9%	-34.5%	4.0%	-23.8%	0.0%
Amerigroup - Bexar	-59.0%	297.4%	43.5%	6.4%	-34.5%	-8.3%	-23.8%	0.0%
CFHP - Bexar	-59.0%	19.3%	2.8%	36.6%	-34.5%	5.7%	-23.8%	0.0%
Superior - Bexar	-59.0%	13.6%	50.0%	160.2%	-34.5%	3.2%	-23.8%	0.0%
Amerigroup - Dallas	-59.0%	28.2%	7.2%	26.1%	-34.5%	-1.9%	-23.8%	0.0%
Molina - Dallas	-59.0%	99.6%	-23.8%	-9.5%	-34.5%	3.6%	-23.8%	0.0%
Parkland - Dallas	-59.0%	129.0%	20.2%	4.3%	-34.5%	-0.9%	-23.8%	0.0%
El Paso Health - El Paso	-59.0%	91.7%	8.9%	64.8%	-34.5%	14.0%	-23.8%	0.0%
Superior - El Paso	-59.0%	-14.6%	0.5%	99.3%	-34.5%	2.8%	-23.8%	0.0%
Amerigroup - Harris	-59.0%	60.8%	-1.8%	-8.9%	-34.5%	7.5%	-23.8%	0.0%
CHC - Harris	-59.0%	44.0%	29.4%	48.8%	-34.5%	3.5%	-23.8%	0.0%
Molina - Harris	-59.0%	92.2%	36.5%	0.2%	-34.5%	3.3%	-23.8%	0.0%
TCHP - Harris	-59.0%	59.0%	15.8%	2.4%	-34.5%	2.5%	-23.8%	0.0%
United - Harris	-59.0%	-12.4%	-30.8%	154.9%	-34.5%	-2.7%	-23.8%	0.0%
Amerigroup - Jefferson	-59.0%	27.2%	-38.1%	-96.6%	-34.5%	-10.2%	-23.8%	0.0%
CHC - Jefferson	-59.0%	-17.6%	-48.2%	20.0%	-34.5%	-3.6%	-23.8%	0.0%
Molina - Jefferson	-59.0%	127.6%	255.7%	0.9%	-34.5%	0.0%	-23.8%	0.0%
TCHP - Jefferson	-59.0%	61.8%	19.8%	4.9%	-34.5%	-20.0%	-23.8%	0.0%
United - Jefferson	-59.0%	42.2%	16.0%	28.2%	-34.5%	0.4%	-23.8%	0.0%
Firstcare - Lubbock	-59.0%	226.0%	1.0%	-8.5%	-34.5%	19.6%	-23.8%	0.0%
Superior - Lubbock	-59.0%	71.9%	28.5%	42.8%	-34.5%	19.1%	-23.8%	0.0%
Driscoll - Nueces	-59.0%	77.0%	33.1%	47.0%	-34.5%	13.5%	-23.8%	0.0%
Superior - Nueces	-59.0%	6.7%	-15.4%	32.6%	-34.5%	11.5%	-23.8%	0.0%
United - Nueces	-59.0%	21.4%	-48.9%	-33.6%	-34.5%	75.9%	-23.8%	0.0%
Aetna - Tarrant	-59.0%	71.3%	16.5%	40.2%	-34.5%	16.0%	-23.8%	0.0%
Amerigroup - Tarrant	-59.0%	-1.0%	23.4%	22.5%	-34.5%	22.6%	-23.8%	0.0%
Cook - Tarrant	-59.0%	-30.7%	5.4%	-0.9%	-34.5%	16.5%	-23.8%	0.0%
BCBS - Travis	-59.0%	-50.9%	16.6%	12.0%	-34.5%	11.2%	-23.8%	0.0%
DCHP - Travis	-59.0%	50.8%	3.8%	84.8%	-34.5%	8.3%	-23.8%	0.0%
Superior - Travis	-59.0%	22.5%	62.0%	109.9%	-34.5%	5.1%	-23.8%	0.0%
Molina - RSA	-59.0%	83.2%	57.3%	72.9%	-34.5%	2.6%	-23.8%	0.0%
Superior - RSA	-59.0%	78.8%	36.7%	41.9%	-34.5%	0.9%	-23.8%	0.0%

FY2025 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
FY2025 Prescription Drug Premium Rate Change								
Aetna - Bexar	109.3%	289.2%	72.6%	53.3%	132.9%	0.5%	-10.9%	
Amerigroup - Bexar	109.3%	1723.5%	46.5%	-1.7%	132.9%	-11.4%	-10.9%	
CFHP - Bexar	109.3%	447.8%	5.0%	26.2%	132.9%	2.2%	-10.9%	
Superior - Bexar	109.3%	421.8%	53.1%	140.4%	132.9%	-0.3%	-10.9%	
Amerigroup - Dallas	109.3%	-3.6%	4.5%	14.6%	132.9%	-8.2%	-10.9%	
Molina - Dallas	109.3%	50.0%	-25.7%	-17.7%	132.9%	-3.0%	-10.9%	
Parkland - Dallas	109.3%	72.2%	17.2%	-5.2%	132.9%	-7.2%	-10.9%	
El Paso Health - El Paso	109.3%	216.3%	72.7%	332.9%	132.9%	-6.7%	-10.9%	
Superior - El Paso	109.3%	41.0%	59.3%	423.4%	132.9%	-15.9%	-10.9%	
Amerigroup - Harris	109.3%	152.0%	-19.7%	21.5%	132.9%	9.5%	-10.9%	
CHC - Harris	109.3%	15.3%	48.8%	74.1%	132.9%	5.4%	-10.9%	
Molina - Harris	109.3%	65.9%	-7.6%	95.0%	132.9%	7.6%	-10.9%	
TCHP - Harris	109.3%	27.3%	33.3%	19.8%	132.9%	4.5%	-10.9%	
United - Harris	109.3%	-0.2%	42.4%	147.3%	132.9%	-11.9%	-10.9%	
Amerigroup - Jefferson	109.3%	86.0%	-70.8%	-69.9%	132.9%	6.3%	-10.9%	
CHC - Jefferson	109.3%	53.5%	-47.5%	211.8%	132.9%	4.7%	-10.9%	
Molina - Jefferson	109.3%	23.2%	13.1%	65.5%	132.9%	69.6%	-10.9%	
TCHP - Jefferson	109.3%	168.5%	73.3%	-8.7%	132.9%	-13.1%	-10.9%	
United - Jefferson	109.3%	199.6%	94.6%	-25.7%	132.9%	-11.9%	-10.9%	
Firstcare - Lubbock	109.3%	132.8%	72.3%	16.8%	132.9%	-20.2%	-10.9%	
Superior - Lubbock	109.3%	-2.5%	81.5%	2.1%	132.9%	-31.4%	-10.9%	
Driscoll - Nueces	109.3%	88.5%	48.1%	9.5%	132.9%	11.7%	-10.9%	
Superior - Nueces	109.3%	57.9%	-17.0%	-54.3%	132.9%	44.6%	-10.9%	
United - Nueces	109.3%	-73.2%	132.2%	-22.4%	132.9%	337.3%	-10.9%	
Aetna - Tarrant	109.3%	143.1%	16.1%	64.7%	132.9%	-12.4%	-10.9%	
Amerigroup - Tarrant	109.3%	7.2%	38.6%	78.6%	132.9%	-12.5%	-10.9%	
Cook - Tarrant	109.3%	-1.6%	5.1%	16.5%	132.9%	-12.0%	-10.9%	
BCBS - Travis	109.3%	-24.1%	7.6%	-11.0%	132.9%	0.1%	-10.9%	
DCHP - Travis	109.3%	97.8%	28.6%	-57.2%	132.9%	1.0%	-10.9%	
Superior - Travis	109.3%	89.1%	49.4%	66.9%	132.9%	-5.4%	-10.9%	
Molina - RSA	109.3%	170.6%	37.9%	23.6%	132.9%	-8.7%	-10.9%	
Superior - RSA	109.3%	164.2%	19.9%	1.5%	132.9%	-10.2%	-10.9%	

FY2025 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
FY2025 Total Premium Rate Change								
Aetna - Bexar	-54.5%	-0.5%	70.2%	62.1%	-34.3%	3.8%	-22.4%	0.0%
Amerigroup - Bexar	-54.5%	366.3%	44.5%	3.9%	-34.3%	-8.5%	-22.4%	0.0%
CFHP - Bexar	-54.5%	40.0%	3.5%	33.5%	-34.3%	5.5%	-22.4%	0.0%
Superior - Bexar	-54.5%	33.4%	51.0%	154.3%	-34.3%	2.9%	-22.4%	0.0%
Amerigroup - Dallas	-54.5%	25.2%	6.6%	22.9%	-34.3%	-2.2%	-22.4%	0.0%
Molina - Dallas	-54.5%	94.9%	-24.2%	-11.7%	-34.3%	3.3%	-22.4%	0.0%
Parkland - Dallas	-54.5%	123.6%	19.6%	1.7%	-34.3%	-1.2%	-22.4%	0.0%
El Paso Health - El Paso	-54.5%	97.5%	18.3%	95.6%	-34.3%	12.2%	-22.4%	0.0%
Superior - El Paso	-54.5%	-12.0%	9.2%	136.5%	-34.3%	1.1%	-22.4%	0.0%
Amerigroup - Harris	-54.5%	65.1%	-6.7%	-4.8%	-34.3%	7.7%	-22.4%	0.0%
CHC - Harris	-54.5%	41.9%	33.0%	54.2%	-34.3%	3.6%	-22.4%	0.0%
Molina - Harris	-54.5%	90.6%	26.8%	11.7%	-34.3%	3.6%	-22.4%	0.0%
TCHP - Harris	-54.5%	56.7%	19.0%	6.1%	-34.3%	2.7%	-22.4%	0.0%
United - Harris	-54.5%	-11.5%	-17.3%	153.3%	-34.3%	-3.5%	-22.4%	0.0%
Amerigroup - Jefferson	-54.5%	31.1%	-49.1%	-94.7%	-34.3%	-8.9%	-22.4%	0.0%
CHC - Jefferson	-54.5%	-12.9%	-48.0%	33.5%	-34.3%	-2.9%	-22.4%	0.0%
Molina - Jefferson	-54.5%	119.2%	152.1%	12.8%	-34.3%	3.1%	-22.4%	0.0%
TCHP - Jefferson	-54.5%	69.8%	33.8%	2.4%	-34.3%	-19.4%	-22.4%	0.0%
United - Jefferson	-54.5%	51.6%	34.5%	14.5%	-34.3%	-0.8%	-22.4%	0.0%
Firstcare - Lubbock	-54.5%	220.9%	19.2%	4.7%	-34.3%	16.0%	-22.4%	0.0%
Superior - Lubbock	-54.5%	68.5%	41.4%	32.0%	-34.3%	13.6%	-22.4%	0.0%
Driscoll - Nueces	-54.5%	77.5%	36.0%	38.5%	-34.3%	13.3%	-22.4%	0.0%
Superior - Nueces	-54.5%	8.5%	-15.8%	-1.1%	-34.3%	13.5%	-22.4%	0.0%
United - Nueces	-54.5%	2.3%	-38.7%	-31.8%	-34.3%	84.5%	-22.4%	0.0%
Aetna - Tarrant	-54.5%	80.6%	16.4%	45.2%	-34.3%	13.2%	-22.4%	0.0%
Amerigroup - Tarrant	-54.5%	0.1%	26.2%	34.0%	-34.3%	19.1%	-22.4%	0.0%
Cook - Tarrant	-54.5%	-26.9%	5.4%	2.7%	-34.3%	13.7%	-22.4%	0.0%
BCBS - Travis	-54.5%	-49.4%	13.8%	6.1%	-34.3%	10.8%	-22.4%	0.0%
DCHP - Travis	-54.5%	53.5%	10.8%	26.2%	-34.3%	8.1%	-22.4%	0.0%
Superior - Travis	-54.5%	26.1%	58.1%	98.9%	-34.3%	4.7%	-22.4%	0.0%
Molina - RSA	-54.5%	89.4%	51.5%	57.9%	-34.3%	1.6%	-22.4%	0.0%
Superior - RSA	-54.5%	84.8%	31.7%	29.6%	-34.3%	-0.1%	-22.4%	0.0%

FY2025 CHIP Rating Summary
Projected Expenditures

	Projected PMPM		Projected FY2025 Premium		% Rate Change
	<u>FY2024 Rates</u>	<u>FY2025 Rates</u>	<u>FY2024 Rates</u>	<u>FY2025 Rates</u>	
Medical (1)	164.59	204.16	620,013,574	769,066,055	24.0%
Pharmacy	33.09	42.60	124,644,588	160,459,903	28.7%
Dental (2)	21.51	22.89	74,209,330	78,971,536	6.4%
Total			818,867,492	1,008,497,493	23.2%

- Notes:
- (1) Includes Delivery Supplemental Payments.
 - (2) Excludes CHIP Perinate members.

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 2020 through February 2024. 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 2020 through February 2024.

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 29, 2024, (iii) estimated proportion of that month's incurred claims paid through February 29, 2024 (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 FY2025 cost based on the plan's actual experience. The top of the exhibit shows summary base period enrollment, premium and claims experience. Annual trend assumptions are used to project the average base period claims cost to FY2025. 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 \$10.00 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 (\$.071 pmpm).

At the bottom of Exhibit D is a summary of the projected FY2025 cost based on the above assumptions. A similar analysis was performed for prescription drug services.

Month	Number of Members				Total Members	Premium	Premium pmpm
	<1	1-5	6-14	15-18			
Sep-20	124	5,188	15,901	5,132	26,345	1,912,339	72.59
Oct-20	114	4,896	15,278	4,918	25,206	1,827,852	72.52
Nov-20	104	4,410	14,441	4,721	23,676	1,719,029	72.61
Dec-20	98	4,151	13,842	4,541	22,632	1,643,508	72.62
Jan-21	84	3,945	13,248	4,363	21,640	1,569,212	72.51
Feb-21	80	3,778	12,940	4,286	21,084	1,529,380	72.54
Mar-21	85	3,602	12,610	4,236	20,533	1,493,965	72.76
Apr-21	72	3,458	12,326	4,107	19,963	1,448,064	72.54
May-21	68	3,360	12,063	4,013	19,504	1,413,847	72.49
Jun-21	57	3,315	11,940	3,987	19,299	1,396,455	72.36
Jul-21	54	3,298	11,968	4,010	19,330	1,398,322	72.34
Aug-21	48	3,276	11,957	4,033	19,314	1,396,413	72.30
Sep-21	52	3,228	11,979	4,045	19,304	1,497,835	77.59
Oct-21	44	3,134	11,888	3,989	19,055	1,473,875	77.35
Nov-21	45	3,062	11,636	3,994	18,737	1,453,300	77.56
Dec-21	46	3,004	11,658	3,966	18,674	1,446,630	77.47
Jan-22	43	2,927	11,618	3,986	18,574	1,438,250	77.43
Feb-22	42	2,904	11,562	3,948	18,456	1,428,000	77.37
Mar-22	45	2,878	11,497	3,941	18,361	1,422,305	77.46
Apr-22	45	2,910	11,557	3,950	18,463	1,430,030	77.46
May-22	45	2,927	11,645	3,985	18,603	1,440,864	77.45
Jun-22	46	2,950	11,747	4,021	18,764	1,453,372	77.46
Jul-22	46	2,982	11,862	4,058	18,949	1,467,683	77.45
Aug-22	47	3,013	11,992	4,103	19,155	1,483,648	77.45
Sep-22	46	3,002	11,971	4,090	19,109	1,449,030	75.83
Oct-22	45	2,991	11,950	4,077	19,063	1,444,963	75.80
Nov-22	44	2,980	11,929	4,064	19,017	1,440,896	75.77
Dec-22	43	2,969	11,908	4,051	18,971	1,436,829	75.74
Jan-23	42	2,958	11,887	4,038	18,925	1,432,762	75.71
Feb-23	41	2,947	11,866	4,025	18,879	1,428,695	75.67
Mar-23	40	2,936	11,845	4,012	18,833	1,424,628	75.64
Apr-23	44	2,964	11,847	4,040	18,895	1,431,973	75.79
May-23	44	2,994	11,965	4,080	19,083	1,446,064	75.78
Jun-23	43	3,024	12,085	4,121	19,273	1,459,960	75.75
Jul-23	43	3,039	12,145	4,142	19,369	1,467,176	75.75
Aug-23	47	3,059	12,226	4,170	19,502	1,478,560	75.82
Sep-23	47	3,065	12,252	4,179	19,543	1,561,595	79.91
Oct-23	47	3,068	12,264	4,183	19,562	1,563,110	79.91
Nov-23	47	3,075	12,292	4,193	19,607	1,566,706	79.91
Dec-23	45	3,078	12,304	4,197	19,624	1,567,980	79.90
Jan-24	48	3,081	12,316	4,201	19,646	1,569,858	79.91
Feb-24	46	3,084	12,328	4,205	19,663	1,571,132	79.90
FY2021	988	46,677	158,514	52,347	258,526	18,748,386	72.52
FY2022	547	35,920	140,641	47,987	225,095	17,435,792	77.46
FY2023	520	35,865	143,623	48,913	228,922	17,341,535	75.75
Base Period	520	35,865	143,623	48,913	228,922	17,341,535	75.75

Sample Health Plan
CHIP Incurred Claims Summary Lag Report

Month Incurred	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21
Ages 6-14															
Sep-20	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-20		86,099	328,120	197,976	18,651	12,689	-1,201	-254	838	990	146	7,384	0	0	1,735
Nov-20			17,351	367,907	68,405	39,292	5,651	3,370	7,579	1,947	657	-57	0	-43	32
Dec-20				79,890	251,389	123,262	19,456	6,304	2,806	2,392	107	-157	-1,160	66	-30
Jan-21					17,198	383,437	95,120	15,460	4,917	5,241	94	3	849	301	371
Feb-21						58,788	330,673	63,094	25,904	8,509	2,334	-1,095	466	0	0
Mar-21							37,050	375,045	87,951	25,614	3,633	1,463	902	-2,288	956
Apr-21								49,356	358,033	79,963	16,664	7,310	348	3,833	720
May-21									50,126	340,480	109,840	31,914	7,497	6,509	1,813
Jun-21										43,481	290,289	255,510	13,292	7,486	1,683
Jul-21											20,983	305,586	130,515	70,186	4,511
Aug-21												32,812	371,147	109,441	16,108
Sep-21													50,488	529,966	240,552
Oct-21														6,091	398,876
Nov-21															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-20	15,901	558,351	1.000	558,351	35.11		5,132	197,614	1.000	197,614	38.51	
Oct-20	15,278	654,945	1.000	654,945	42.87		4,918	219,280	1.000	219,280	44.59	
Nov-20	14,441	512,126	1.000	512,126	35.46		4,721	145,363	1.000	145,363	30.79	
Dec-20	13,842	481,758	1.000	481,758	34.80		4,541	173,388	1.000	173,388	38.18	
Jan-21	13,248	524,336	1.000	524,336	39.58		4,363	152,657	1.000	152,657	34.99	
Feb-21	12,940	488,266	1.000	488,266	37.73		4,286	162,354	1.000	162,354	37.88	
Mar-21	12,610	530,040	1.000	530,040	42.03		4,236	194,139	1.000	194,139	45.83	
Apr-21	12,326	517,116	1.000	517,116	41.95		4,107	157,314	1.000	157,314	38.30	
May-21	12,063	546,601	1.000	546,601	45.31		4,013	124,140	1.000	124,140	30.93	
Jun-21	11,940	626,076	1.000	626,076	52.44		3,987	109,522	1.000	109,522	27.47	
Jul-21	11,968	543,697	1.000	543,697	45.43		4,010	164,529	1.000	164,529	41.03	
Aug-21	11,957	545,204	1.000	545,204	45.60		4,033	148,171	1.000	148,171	36.74	
Sep-21	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-21	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-21	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-21	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-22	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-22	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-22	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-22	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-22	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-22	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-22	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-22	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-22	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-22	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-22	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-22	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-23	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-23	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-23	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-23	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-23	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-23	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-23	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-23	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-23	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-23	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-23	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-23	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-24	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-24	12,328	37,308	0.758	49,220	3.99	0.091	4,205	117,532	0.650	180,819	43.00	1.041
FY2021	158,514			6,528,516	41.19		52,347			1,948,470	37.22	
FY2022	140,641			8,824,296	62.74	1.523	47,987			1,689,551	35.21	0.946
FY2023	143,623			7,559,003	52.63	0.839	48,913			2,128,554	43.52	1.236
Base Period	143,623			7,559,003	52.63		48,913			2,128,554	43.52	

Sample Health Plan
 Experienced Based Renewal Rating
 Projection Period: FY2025 (9/1/2024 - 8/31/2025)

	<1		1-5		6-14		15-18		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience (9/1/2022 - 8/31/2023)										
Member Months	520		35,865		143,623		48,913		228,922	
Premium Revenue	221,417	425.65	3,075,099	85.74	8,653,311	60.25	5,391,708	110.23	17,341,535	75.75
Adjusted Premium (Current Rates)	62,813	120.75	3,057,884	85.26	10,768,883	74.98	4,400,236	89.96	18,289,816	79.90
Estimated Incurred Claims	48,251	92.76	2,254,965	62.87	7,559,003	52.63	2,128,554	43.52	11,990,773	52.38
Projected FY2025 Member Months	335		27,561		119,625		44,598		192,119	
Projected FY2025 Premium Current Rates	40,451	120.75	2,349,851	85.26	8,969,483	74.98	2,776,226	62.25	14,136,010	73.58
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %			
Provider Reimbursement Change	1.0198		1.0019		1.0063		1.0083			
Other Reimbursement Change	1.0000		1.0007		1.0077		1.0161			
Inpatient Reimbursement Change	1.0000		1.0006		1.0000		0.9974			
Other Adjustments	1.0000		0.9449		0.9280		0.9263			
PHE Adjustment	1.0100		1.5536		1.0757		1.1771			
Projected Incurred Claims	35,488	105.94	2,829,586	102.67	7,066,368	59.07	2,397,601	53.76	12,329,043	64.17
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: FY2025 (9/1/2024 - 8/31/2025)

	<1		1-5		6-14		15-18		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Administrative Expenses										
Fixed Amount	3,350	10.00	275,610	10.00	1,196,250	10.00	445,980	10.00	1,921,190	10.00
Percentage of Premium	5.25 %	6.91	5.25 %	6.73	5.25 %	4.23	5.25 %	3.92	5.25 %	4.52
Risk Margin	1.50 %	1.98	1.50 %	1.92	1.50 %	1.21	1.50 %	1.12	1.50 %	1.29
Premium Tax	1.75 %	2.30	1.75 %	2.24	1.75 %	1.41	1.75 %	1.31	1.75 %	1.51
Maintenance Tax	24	0.0708	1,952	0.0708	8,473	0.0708	3,159	0.0708	13,608	0.0708
Projected Total Cost	44,120	131.70	3,531,337	128.13	9,627,764	80.48	3,330,525	74.68	16,533,746	86.06
Experience Rate Increase		9.1%		50.3%		7.3%		20.0%		17.0%

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 FY2025 cost for each health plan in the service area. The weights used in this formula are the projected number of FY2025 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 FY2025 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 FY2025 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 FY2025. 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 \$10.00 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 (\$.071 pmpm).

At the bottom of the exhibit is a summary of the projected FY2025 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 FY2025 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 FY2025 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 FY2025 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 FY2025 cost based on these assumptions.

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	15		5,612		32,002		12,917	
Estimated Incurred Claims								
Professional	1,655	110.33	329,041	58.63	1,416,831	44.27	509,408	39.44
Emergency Room	0	0.00	49,623	8.84	156,398	4.89	91,609	7.09
Outpatient Facility	-79	-5.29	56,201	10.01	312,980	9.78	181,006	14.01
Inpatient Facility	0	0.00	36,338	6.48	384,075	12.00	255,450	19.78
Others	0	0.00	89,257	15.90	478,383	14.95	180,787	14.00
Total	1,576	105.04	560,460	99.87	2,748,666	85.89	1,218,260	94.31
Projected FY2025 Member Months	40		64,867		154,773		52,827	
Projected FY2025 Premiums								
@Current Rates	33,307	842.82	10,333,159	159.30	14,310,970	92.46	4,533,485	85.82
@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 Change		1.0354		1.0259		1.0110		1.0458
Other Reimbursement Change		1.0000		1.0000		1.0000		1.0000
Inpatient Reimbursement Change		1.0000		0.9988		0.9978		0.9963
Other Adjustments		1.0000		0.9281		0.9416		0.9521
PHE Adjustment		1.0100		1.5536		1.0757		1.1771
Projected Incurred Claims	4,813	121.80	10,612,955	163.61	15,060,868	97.31	6,451,093	122.12
Capitation & Other Expenses/Refunds								
Total	38	0.95	85,712	1.32	208,324	1.35	73,692	1.39
Reinsurance Expenses								
Net Reinsurance Cost	6	0.14	13,994	0.22	39,588	0.26	14,832	0.28
Administrative Expenses								
Fixed Amount	395	10.00	648,667	10.00	1,547,732	10.00	528,272	10.00
Percentage of Premium	5.25 %	7.63	5.25 %	10.05	5.25 %	6.25	5.25 %	7.68
Risk Margin	1.50 %	2.18	1.50 %	2.87	1.50 %	1.79	1.50 %	2.19
Premium Tax	1.75 %	2.54	1.75 %	3.35	1.75 %	2.08	1.75 %	2.56
Maintenance Tax	3	0.071	4,595	0.071	10,963	0.071	3,742	0.071
Projected Total Cost	5,743	145.31	12,421,773	191.50	18,434,398	119.11	7,728,559	146.30
Adjusted Total Cost	5,743	145.31	12,421,773	191.50	18,434,398	119.11	7,728,559	146.30
Experience Rate Increase		-82.8 %		20.2 %		28.8 %		70.5 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	44		17,170		139		67,899	
Estimated Incurred Claims								
Professional	28,378	644.96	5,039,239	293.49	17,560	126.33		
Emergency Room	0	0.00	11,628	0.68	0	0.00		
Outpatient Facility	221	5.03	1,283,106	74.73	5,217	37.53		
Inpatient Facility	132,297	3,006.75	10,327	0.60	8,547	61.49		
Others	351	7.97	348,873	20.32	5,160	37.12		
Total	161,248	3,664.72	6,693,174	389.82	36,484	262.48	11,419,867	168.19
Projected FY2025 Member Months	101		14,581		295		287,484	
Projected FY2025 Premiums								
@Current Rates	154,014	1,524.89	6,065,576	415.99	104,937	355.72	35,535,449	123.61
@Current DSP Rates	0	0.00	0	0.00	46,045	156.09	46,045	0.16
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Change		1.0519		1.0116		1.0090		
Other Reimbursement Change		1.0000		1.0000		1.0000		
Inpatient Reimbursement Change		0.9997		1.0000		0.9978		
Other Adjustments		0.9841		0.8872		0.8893		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	410,306	4,062.43	5,464,351	374.76	74,262	251.73	38,078,647	132.46
Capitation & Other Expenses/Refunds								
Total	328	3.24	7,246	0.50	-84	-0.28	375,254	1.31
Reinsurance Expenses								
Net Reinsurance Cost	0	0.00	0	0.00	0	0.00	68,420	0.24
Administrative Expenses								
Fixed Amount	1,364	13.50	196,844	13.50	3,983	13.50	2,927,256	10.18
Percentage of Premium	5.25 %	234.06	5.25 %	22.31	5.25 %	15.21	5.25 %	8.28
Risk Margin	1.50 %	66.87	1.50 %	6.37	1.50 %	4.34	1.50 %	2.36
Premium Tax	1.75 %	78.02	1.75 %	7.44	1.75 %	5.07	1.75 %	2.76
Maintenance Tax	7	0.071	1,033	0.071	21	0.071	20,363	0.071
Projected Total Cost	450,278	4,458.20	6,196,145	424.95	85,444	289.64	45,322,339	157.65
Adjusted Total Cost	450,278	4,458.20	6,196,145	424.95	39,398	133.55	45,276,294	157.49
Experience Rate Increase		192.4 %		2.2 %		-62.5 %		27.4 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	40		10,932		65,886		26,426	
Estimated Incurred Claims								
Professional	2,545	63.62	413,281	37.80	1,500,130	22.77	607,186	22.98
Emergency Room	289	7.22	156,562	14.32	855,983	12.99	336,268	12.72
Outpatient Facility	413	10.33	408,593	37.38	2,097,113	31.83	892,038	33.76
Inpatient Facility	979	24.48	178,175	16.30	2,025,556	30.74	593,295	22.45
Others	1,651	41.27	243,872	22.31	989,162	15.01	383,872	14.53
Total	5,877	146.92	1,400,482	128.11	7,467,944	113.35	2,812,659	106.44
Projected FY2025 Member Months	112		126,258		318,667		108,029	
Projected FY2025 Premiums								
@Current Rates	94,562	842.82	22,269,840	176.38	46,627,813	146.32	16,280,100	150.70
@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 Change		1.0125		1.0177		1.0093		1.0305
Other Reimbursement Change		1.0000		1.0000		1.0000		0.9986
Inpatient Reimbursement Change		1.0000		0.9998		0.9980		1.0008
Other Adjustments		0.7275		0.9849		0.9894		0.9911
PHE Adjustment		1.0000		1.9000		1.0000		1.1418
Projected Incurred Claims	13,463	120.00	34,147,556	270.46	39,912,309	125.25	14,858,426	137.54
Capitation & Other Expenses/Refunds								
Total	1,332	11.87	1,486,682	11.77	3,983,406	12.50	1,346,148	12.46
Reinsurance Expenses								
Net Reinsurance Cost	1	0.01	6,442	0.05	13,396	0.04	4,290	0.04
Administrative Expenses								
Fixed Amount	1,122	10.00	1,262,579	10.00	3,186,666	10.00	1,080,291	10.00
Percentage of Premium	5.25 %	8.14	5.25 %	16.77	5.25 %	8.48	5.25 %	9.19
Risk Margin	1.50 %	2.33	1.50 %	4.79	1.50 %	2.42	1.50 %	2.62
Premium Tax	1.75 %	2.71	1.75 %	5.59	1.75 %	2.83	1.75 %	3.06
Maintenance Tax	8	0.071	8,943	0.071	22,572	0.071	7,652	0.071
Projected Total Cost	17,406	155.14	40,341,204	319.51	51,495,464	161.60	18,903,615	174.99
Adjusted Total Cost	17,406	155.14	40,341,204	319.51	51,495,464	161.60	18,903,615	174.99
Experience Rate Increase		-81.6 %		81.1 %		10.4 %		16.1 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	154		67,287		533		171,258	
Estimated Incurred Claims								
Professional	11,485	74.58	12,106,744	179.93	90,791	170.34		
Emergency Room	363	2.36	250,877	3.73	1,069	2.01		
Outpatient Facility	897	5.82	8,080,459	120.09	58,919	110.54		
Inpatient Facility	11,617	75.44	103,823	1.54	56,286	105.60		
Others	3,053	19.83	2,908,843	43.23	28,403	53.29		
Total	27,415	178.02	23,450,745	348.52	235,468	441.78	35,400,591	206.71
Projected FY2025 Member Months	245		60,707		642		614,660	
Projected FY2025 Premiums								
@Current Rates	373,598	1,524.89	25,073,475	413.02	228,372	355.72	110,947,761	180.50
@Current DSP Rates	0	0.00	0	0.00	208,418	324.64	208,418	0.34
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Change		1.0242		1.0102		1.0071		
Other Reimbursement Change		1.0000		1.0000		1.0000		
Inpatient Reimbursement Change		0.9875		1.0000		0.9978		
Other Adjustments		0.9827		0.9607		0.9580		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	46,437	189.54	21,994,931	362.31	292,475	455.57	111,265,597	181.02
Capitation & Other Expenses/Refunds								
Total	1,159	4.73	93,776	1.54	1,038	1.62	6,913,541	11.25
Reinsurance Expenses								
Net Reinsurance Cost	28	0.12	7,629	0.13	91	0.14	31,877	0.05
Administrative Expenses								
Fixed Amount	3,308	13.50	819,545	13.50	8,667	13.50	6,362,178	10.35
Percentage of Premium	5.25 %	11.93	5.25 %	21.66	5.25 %	27.02	5.25 %	11.63
Risk Margin	1.50 %	3.41	1.50 %	6.19	1.50 %	7.72	1.50 %	3.32
Premium Tax	1.75 %	3.98	1.75 %	7.22	1.75 %	9.01	1.75 %	3.88
Maintenance Tax	17	0.071	4,300	0.071	45	0.071	43,538	0.071
Projected Total Cost	55,683	227.28	25,049,378	412.63	330,400	514.64	136,193,148	221.57
Adjusted Total Cost	55,683	227.28	25,049,378	412.63	121,981	190.00	135,984,730	221.24
Experience Rate Increase		-85.1 %		-0.1 %		-46.6 %		22.6 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	2		2,578		16,132		6,924	
Estimated Incurred Claims								
Professional	320	160.16	225,060	87.30	771,882	47.85	358,775	51.82
Emergency Room	0	0.00	20,100	7.80	66,184	4.10	30,823	4.45
Outpatient Facility	0	0.00	49,799	19.32	125,622	7.79	337,834	48.79
Inpatient Facility	0	0.00	36,536	14.17	84,537	5.24	92,858	13.41
Others	0	0.00	3,056	1.19	56,308	3.49	96,541	13.94
Total	320	160.16	334,551	129.77	1,104,532	68.47	916,830	132.41
Projected FY2025 Member Months	1		29,766		78,015		28,316	
Projected FY2025 Premiums								
@Current Rates	421	842.82	4,595,758	154.40	10,459,702	134.07	3,604,307	127.29
@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 Change		1.0000		1.0126		1.0161		1.0263
Other Reimbursement Change		1.0000		1.0000		1.0000		1.0000
Inpatient Reimbursement Change		1.0000		0.9997		0.9995		0.9950
Other Adjustments		1.0000		0.9962		0.9843		0.9826
PHE Adjustment		1.0000		1.2327		1.2454		1.1330
Projected Incurred Claims	89	177.59	5,324,207	178.87	7,373,970	94.52	4,726,188	166.91
Capitation & Other Expenses/Refunds								
Total	9	17.51	680,452	22.86	1,969,145	25.24	728,413	25.72
Reinsurance Expenses								
Net Reinsurance Cost	0	0.25	10,328	0.35	27,438	0.35	10,104	0.36
Administrative Expenses								
Fixed Amount	5	10.00	297,662	10.00	780,152	10.00	283,162	10.00
Percentage of Premium	5.25 %	11.79	5.25 %	12.17	5.25 %	7.47	5.25 %	11.65
Risk Margin	1.50 %	3.37	1.50 %	3.48	1.50 %	2.13	1.50 %	3.33
Premium Tax	1.75 %	3.93	1.75 %	4.06	1.75 %	2.49	1.75 %	3.88
Maintenance Tax	0	0.071	2,108	0.071	5,526	0.071	2,006	0.071
Projected Total Cost	112	224.49	6,901,374	231.85	11,099,707	142.28	6,284,013	221.92
Adjusted Total Cost	112	224.49	6,901,374	231.85	11,099,707	142.28	6,284,013	221.92
Experience Rate Increase		-73.4 %		50.2 %		6.1 %		74.3 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	14		5,408		70		31,128	
Estimated Incurred Claims								
Professional	1,601	114.39	1,290,221	238.58	18,021	257.44		
Emergency Room	0	0.00	17,544	3.24	190	2.71		
Outpatient Facility	175	12.49	371,295	68.66	4,829	68.99		
Inpatient Facility	0	0.00	0	0.00	5,478	78.26		
Others	0	0.00	701	0.13	0	0.00		
Total	1,776	126.88	1,679,761	310.61	28,519	407.41	4,066,289	130.63
Projected FY2025 Member Months	48		6,509		114		142,769	
Projected FY2025 Premiums								
@Current Rates	73,195	1,524.89	2,260,194	347.24	40,552	355.72	21,034,129	147.33
@Current DSP Rates	0	0.00	0	0.00	20,186	177.07	20,186	0.14
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Change		1.0427		1.0141		1.0168		
Other Reimbursement Change		1.0000		1.0000		1.0000		
Inpatient Reimbursement Change		1.0000		1.0000		1.0049		
Other Adjustments		1.0000		0.9977		1.0000		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	6,802	141.72	2,191,296	336.66	50,837	445.94	19,673,388	137.80
Capitation & Other Expenses/Refunds								
Total	-24	-0.49	-19,045	-2.93	-160	-1.41	3,358,789	23.53
Reinsurance Expenses								
Net Reinsurance Cost	21	0.43	1,991	0.31	34	0.30	49,916	0.35
Administrative Expenses								
Fixed Amount	648	13.50	87,872	13.50	1,539	13.50	1,451,040	10.16
Percentage of Premium	5.25 %	8.91	5.25 %	19.94	5.25 %	26.30	5.25 %	9.86
Risk Margin	1.50 %	2.54	1.50 %	5.70	1.50 %	7.51	1.50 %	2.82
Premium Tax	1.75 %	2.97	1.75 %	6.65	1.75 %	8.77	1.75 %	3.29
Maintenance Tax	3	0.071	461	0.071	8	0.071	10,113	0.071
Projected Total Cost	8,143	169.64	2,472,759	379.90	57,112	500.98	26,823,219	187.88
Adjusted Total Cost	8,143	169.64	2,472,759	379.90	36,926	323.91	26,803,033	187.74
Experience Rate Increase		-88.9 %		9.4 %		-8.9 %		27.4 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	51		18,451		103,686		42,081	
Estimated Incurred Claims								
Professional	7,805	153.04	1,168,839	63.35	3,824,821	36.89	2,167,093	51.50
Emergency Room	259	5.07	508,424	27.56	1,609,485	15.52	1,050,612	24.97
Outpatient Facility	3,877	76.02	627,108	33.99	2,688,813	25.93	1,955,965	46.48
Inpatient Facility	554	10.86	1,414,910	76.68	2,911,392	28.08	2,328,027	55.32
Others	1,096	21.50	339,301	18.39	1,357,644	13.09	705,668	16.77
Total	13,591	266.50	4,058,581	219.97	12,392,155	119.52	8,207,365	195.04
Projected FY2025 Member Months	140		213,224		501,492		172,059	
Projected FY2025 Premiums								
@Current Rates	118,413	842.82	43,648,191	204.71	63,325,066	126.27	35,087,346	203.93
@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 Change		1.0141		1.0148		1.0124		1.0217
Other Reimbursement Change		1.0000		1.0000		0.9979		1.0000
Inpatient Reimbursement Change		1.0000		0.9280		0.9717		0.9545
Other Adjustments		0.9633		0.9495		0.9174		0.9473
PHE Adjustment		1.4228		1.2730		1.0340		1.0000
Projected Incurred Claims	57,703	410.71	59,191,914	277.60	61,887,564	123.41	34,372,051	199.77
Capitation & Other Expenses/Refunds								
Total	379	2.70	641,399	3.01	1,554,162	3.10	484,897	2.82
Reinsurance Expenses								
Net Reinsurance Cost	26	0.19	35,434	0.17	81,767	0.16	26,957	0.16
Administrative Expenses								
Fixed Amount	1,405	10.00	2,132,241	10.00	5,014,920	10.00	1,720,594	10.00
Percentage of Premium	5.25 %	24.31	5.25 %	16.69	5.25 %	7.85	5.25 %	12.21
Risk Margin	1.50 %	6.95	1.50 %	4.77	1.50 %	2.24	1.50 %	3.49
Premium Tax	1.75 %	8.10	1.75 %	5.56	1.75 %	2.62	1.75 %	4.07
Maintenance Tax	10	0.071	15,103	0.071	35,522	0.071	12,188	0.071
Projected Total Cost	65,053	463.02	67,777,148	317.87	74,944,192	149.44	40,018,236	232.58
Adjusted Total Cost	65,053	463.02	67,777,148	317.87	74,944,192	149.44	40,018,236	232.58
Experience Rate Increase		-45.1 %		55.3 %		18.3 %		14.1 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	217		107,940		693		273,119	
Estimated Incurred Claims								
Professional	22,388	103.17	39,706,004	367.85	165,396	238.67		
Emergency Room	4,396	20.26	703,040	6.51	8,691	12.54		
Outpatient Facility	3,562	16.41	9,595,246	88.89	36,469	52.62		
Inpatient Facility	44,103	203.24	578,053	5.36	202,289	291.90		
Others	1,100	5.07	6,720,649	62.26	25,045	36.14		
Total	75,548	348.15	57,302,991	530.88	437,890	631.88	82,488,122	302.02
Projected FY2025 Member Months	468		106,200		1,142		994,726	
Projected FY2025 Premiums								
@Current Rates	713,649	1,524.89	56,390,147	530.98	406,232	355.72	199,689,044	200.75
@Current DSP Rates	0	0.00	0	0.00	316,908	277.50	316,908	0.32
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Change		1.0142		1.0107		1.0073		
Other Reimbursement Change		1.0000		1.0000		1.0000		
Inpatient Reimbursement Change		0.9943		0.9985		0.9211		
Other Adjustments		0.9749		0.8680		0.9268		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	171,592	366.65	52,900,693	498.12	664,744	582.09	209,246,261	210.36
Capitation & Other Expenses/Refunds								
Total	1,019	2.18	143,472	1.35	1,494	1.31	2,826,821	2.84
Reinsurance Expenses								
Net Reinsurance Cost	100	0.21	22,915	0.22	239	0.21	167,437	0.17
Administrative Expenses								
Fixed Amount	6,318	13.50	1,433,700	13.50	15,417	13.50	10,324,595	10.38
Percentage of Premium	5.25 %	21.95	5.25 %	29.45	5.25 %	34.26	5.25 %	12.84
Risk Margin	1.50 %	6.27	1.50 %	8.41	1.50 %	9.79	1.50 %	3.67
Premium Tax	1.75 %	7.32	1.75 %	9.82	1.75 %	11.42	1.75 %	4.28
Maintenance Tax	33	0.071	7,523	0.071	81	0.071	70,460	0.071
Projected Total Cost	195,696	418.15	59,571,914	560.94	745,328	652.65	243,317,567	244.61
Adjusted Total Cost	195,696	418.15	59,571,914	560.94	428,420	375.15	243,000,659	244.29
Experience Rate Increase		-72.6 %		5.6 %		5.5 %		21.7 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	6		1,427		9,260		3,683	
Estimated Incurred Claims								
Professional	36	5.94	71,584	50.16	255,006	27.54	200,722	54.50
Emergency Room	0	0.00	18,343	12.85	158,728	17.14	72,873	19.79
Outpatient Facility	0	0.00	45,500	31.89	187,837	20.28	107,718	29.25
Inpatient Facility	0	0.00	0	0.00	83,829	9.05	46,265	12.56
Others	0	0.00	17,093	11.98	79,829	8.62	29,847	8.10
Total	36	5.94	152,520	106.88	765,229	82.64	457,425	124.20
Projected FY2025 Member Months	7		16,476		44,779		15,053	
Projected FY2025 Premiums								
@Current Rates	5,571	842.82	2,882,954	174.97	6,174,267	137.88	4,537,840	301.45
@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 Change		1.0000		1.0314		1.0194		1.0403
Other Reimbursement Change		1.0000		1.0000		1.0000		1.0000
Inpatient Reimbursement Change		1.0000		1.0000		0.9708		0.9968
Other Adjustments		1.0000		0.9488		0.9429		0.9515
PHE Adjustment		1.0000		2.1100		1.2161		1.3115
Projected Incurred Claims	44	6.58	4,031,773	244.70	4,656,241	103.98	2,682,526	178.20
Capitation & Other Expenses/Refunds								
Total	22	3.29	41,539	2.52	680,253	15.19	40,017	2.66
Reinsurance Expenses								
Net Reinsurance Cost	1	0.09	2,538	0.15	7,422	0.17	2,402	0.16
Administrative Expenses								
Fixed Amount	66	10.00	164,765	10.00	447,791	10.00	150,532	10.00
Percentage of Premium	5.25 %	1.15	5.25 %	14.77	5.25 %	7.43	5.25 %	10.96
Risk Margin	1.50 %	0.33	1.50 %	4.22	1.50 %	2.12	1.50 %	3.13
Premium Tax	1.75 %	0.38	1.75 %	4.92	1.75 %	2.48	1.75 %	3.65
Maintenance Tax	0	0.071	1,167	0.071	3,172	0.071	1,066	0.071
Projected Total Cost	145	21.89	4,635,826	281.36	6,333,200	141.43	3,143,763	208.84
Adjusted Total Cost	145	21.89	4,635,826	281.36	6,333,200	141.43	3,143,763	208.84
Experience Rate Increase		-97.4 %		60.8 %		2.6 %		-30.7 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	16		6,869		37		21,298	
Estimated Incurred Claims								
Professional	1,072	67.01	1,851,693	269.57	12,750	344.59		
Emergency Room	0	0.00	47,651	6.94	87	2.34		
Outpatient Facility	0	0.00	1,083,892	157.79	3,853	104.15		
Inpatient Facility	2,680	167.47	12,029	1.75	3,318	89.66		
Others	0	0.00	324,941	47.31	0	0.00		
Total	3,752	234.48	3,320,206	483.36	20,008	540.74	4,719,176	221.58
Projected FY2025 Member Months	35		5,120		97		81,567	
Projected FY2025 Premiums								
@Current Rates	52,609	1,524.89	3,119,455	609.27	34,505	355.72	16,807,201	206.05
@Current DSP Rates	0	0.00	0	0.00	32,507	335.13	32,507	0.40
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Change		1.0137		1.0113		1.0055		
Other Reimbursement Change		1.0000		1.0000		1.0000		
Inpatient Reimbursement Change		1.0004		0.9999		1.0059		
Other Adjustments		0.9694		0.9280		0.9795		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	8,519	246.94	2,487,820	485.90	55,663	573.85	13,922,585	170.69
Capitation & Other Expenses/Refunds								
Total	77	2.23	4,998	0.98	154	1.59	767,059	9.40
Reinsurance Expenses								
Net Reinsurance Cost	7	0.19	1,044	0.20	7	0.07	13,421	0.16
Administrative Expenses								
Fixed Amount	466	13.50	69,120	13.50	1,310	13.50	834,049	10.23
Percentage of Premium	5.25 %	15.09	5.25 %	28.73	5.25 %	33.80	5.25 %	10.93
Risk Margin	1.50 %	4.31	1.50 %	8.21	1.50 %	9.66	1.50 %	3.12
Premium Tax	1.75 %	5.03	1.75 %	9.58	1.75 %	11.27	1.75 %	3.64
Maintenance Tax	2	0.071	363	0.071	7	0.071	5,778	0.071
Projected Total Cost	9,914	287.36	2,801,470	547.16	62,449	643.80	16,986,767	208.26
Adjusted Total Cost	9,914	287.36	2,801,470	547.16	29,941	308.67	16,954,260	207.86
Experience Rate Increase		-81.2 %		-10.2 %		-13.2 %		0.9 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	6		1,442		8,283		3,259	
Estimated Incurred Claims								
Professional	3,248	541.37	65,093	45.14	327,229	39.51	90,729	27.84
Emergency Room	123	20.50	6,972	4.84	39,482	4.77	15,070	4.62
Outpatient Facility	160	26.67	39,029	27.07	107,659	13.00	44,910	13.78
Inpatient Facility	0	0.00	2,521	1.75	61,591	7.44	29,214	8.96
Others	0	0.00	39,993	27.73	58,880	7.11	28,521	8.75
Total	3,531	588.53	153,608	106.52	594,842	71.81	208,444	63.96
Projected FY2025 Member Months	17		16,661		40,055		13,337	
Projected FY2025 Premiums								
@Current Rates	14,184	842.82	2,477,374	148.69	3,391,999	84.68	1,335,794	100.16
@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 Change		1.0108		1.0255		1.0147		1.0477
Other Reimbursement Change		1.0000		1.0000		1.0000		1.0000
Inpatient Reimbursement Change		1.0000		1.0000		1.0020		1.0210
Other Adjustments		1.0000		0.9944		0.9525		0.8516
PHE Adjustment		1.0100		2.0997		1.1018		1.4227
Projected Incurred Claims	11,212	666.21	4,213,898	252.92	3,403,291	84.97	1,225,817	91.91
Capitation & Other Expenses/Refunds								
Total	-41	-2.44	-39,264	-2.36	-95,596	-2.39	-31,680	-2.38
Reinsurance Expenses								
Net Reinsurance Cost	4	0.24	3,126	0.19	6,918	0.17	2,291	0.17
Administrative Expenses								
Fixed Amount	168	10.00	166,612	10.00	400,546	10.00	133,366	10.00
Percentage of Premium	5.25 %	38.68	5.25 %	14.97	5.25 %	5.33	5.25 %	5.73
Risk Margin	1.50 %	11.05	1.50 %	4.28	1.50 %	1.52	1.50 %	1.64
Premium Tax	1.75 %	12.89	1.75 %	4.99	1.75 %	1.78	1.75 %	1.91
Maintenance Tax	1	0.071	1,180	0.071	2,837	0.071	945	0.071
Projected Total Cost	12,398	736.71	4,749,237	285.05	4,063,384	101.45	1,454,359	109.05
Adjusted Total Cost	12,398	736.71	4,749,237	285.05	4,063,384	101.45	1,454,359	109.05
Experience Rate Increase		-12.6 %		91.7 %		19.8 %		8.9 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	19		3,534		44		16,587	
Estimated Incurred Claims								
Professional	1,117	58.77	974,472	275.74	9,809	222.94		
Emergency Room	0	0.00	34,324	9.71	0	0.00		
Outpatient Facility	0	0.00	357,604	101.19	2,935	66.71		
Inpatient Facility	0	0.00	18,929	5.36	0	0.00		
Others	0	0.00	59,749	16.91	0	0.00		
Total	1,117	58.77	1,445,079	408.91	12,745	289.65	2,419,365	145.86
Projected FY2025 Member Months	37		3,667		72		73,845	
Projected FY2025 Premiums								
@Current Rates	56,421	1,524.89	1,418,795	386.91	25,612	355.72	8,720,179	118.09
@Current DSP Rates	0	0.00	0	0.00	5,071	70.43	5,071	0.07
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Change		1.0473		1.0246		1.0147		
Other Reimbursement Change		1.0000		1.0000		1.0000		
Inpatient Reimbursement Change		1.0000		0.9997		1.0000		
Other Adjustments		1.0000		0.9343		0.9655		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	2,440	65.94	1,537,178	419.19	21,887	303.99	10,415,724	141.05
Capitation & Other Expenses/Refunds								
Total	-105	-2.83	-12,283	-3.35	-1,033	-14.35	-180,001	-2.44
Reinsurance Expenses								
Net Reinsurance Cost	2	0.06	643	0.18	14	0.19	12,998	0.18
Administrative Expenses								
Fixed Amount	500	13.50	49,505	13.50	972	13.50	751,668	10.18
Percentage of Premium	5.25 %	4.40	5.25 %	24.65	5.25 %	17.41	5.25 %	8.55
Risk Margin	1.50 %	1.26	1.50 %	7.04	1.50 %	4.97	1.50 %	2.44
Premium Tax	1.75 %	1.47	1.75 %	8.22	1.75 %	5.80	1.75 %	2.85
Maintenance Tax	3	0.071	260	0.071	5	0.071	5,231	0.071
Projected Total Cost	3,103	83.87	1,721,643	469.50	23,874	331.58	12,027,998	162.88
Adjusted Total Cost	3,103	83.87	1,721,643	469.50	18,803	261.15	12,022,928	162.81
Experience Rate Increase		-94.5 %		21.3 %		-26.6 %		37.9 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	3		1,593		9,488		4,011	
Estimated Incurred Claims								
Professional	0	0.00	113,168	71.04	345,365	36.40	145,987	36.40
Emergency Room	0	0.00	18,638	11.70	73,527	7.75	32,366	8.07
Outpatient Facility	0	0.00	84,381	52.97	352,970	37.20	211,032	52.61
Inpatient Facility	0	0.00	172,065	108.01	21,489	2.26	4,831	1.20
Others	0	0.00	9,372	5.88	123,436	13.01	49,245	12.28
Total	0	0.00	397,624	249.61	916,786	96.63	443,460	110.56
Projected FY2025 Member Months	1		18,393		45,882		16,410	
Projected FY2025 Premiums								
@Current Rates	632	842.82	3,851,423	209.39	8,106,514	176.68	3,120,995	190.19
@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 Change		1.0000		1.0122		1.0117		1.0302
Other Reimbursement Change		1.0000		1.0000		1.0000		1.0000
Inpatient Reimbursement Change		1.0000		0.9346		0.9966		1.0001
Other Adjustments		1.0000		0.9865		0.9640		0.9724
PHE Adjustment		1.0000		1.0000		1.3290		1.5251
Projected Incurred Claims	0	0.00	4,750,885	258.30	6,349,785	138.39	3,073,967	187.32
Capitation & Other Expenses/Refunds								
Total	16	21.47	1,020,975	55.51	2,456,093	53.53	877,405	53.47
Reinsurance Expenses								
Net Reinsurance Cost	0	0.17	7,742	0.42	18,666	0.41	6,670	0.41
Administrative Expenses								
Fixed Amount	8	10.00	183,931	10.00	458,816	10.00	164,102	10.00
Percentage of Premium	5.25 %	1.82	5.25 %	18.61	5.25 %	11.61	5.25 %	14.42
Risk Margin	1.50 %	0.52	1.50 %	5.32	1.50 %	3.32	1.50 %	4.12
Premium Tax	1.75 %	0.61	1.75 %	6.20	1.75 %	3.87	1.75 %	4.81
Maintenance Tax	0	0.071	1,303	0.071	3,250	0.071	1,162	0.071
Projected Total Cost	26	34.65	6,518,947	354.42	10,149,301	221.21	4,506,346	274.61
Adjusted Total Cost	26	34.65	6,518,947	354.42	10,149,301	221.21	4,506,346	274.61
Experience Rate Increase		-95.9 %		69.3 %		25.2 %		44.4 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	9		1,985		48		17,137	
Estimated Incurred Claims								
Professional	816	90.71	647,025	325.96	7,164	149.24		
Emergency Room	783	86.99	27,246	13.73	257	5.36		
Outpatient Facility	0	0.00	68,995	34.76	3,073	64.03		
Inpatient Facility	0	0.00	10,778	5.43	1,859	38.73		
Others	0	0.00	37,776	19.03	145	3.02		
Total	1,599	177.71	791,821	398.90	12,498	260.37	2,563,788	149.61
Projected FY2025 Member Months	43		2,272		77		83,078	
Projected FY2025 Premiums								
@Current Rates	65,951	1,524.89	1,049,106	461.75	27,390	355.72	16,222,012	195.26
@Current DSP Rates	0	0.00	0	0.00	4,971	64.56	4,971	0.06
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Change		1.0190		1.0206		1.0027		
Other Reimbursement Change		1.0000		1.0000		1.0000		
Inpatient Reimbursement Change		1.0000		1.0001		0.9980		
Other Adjustments		1.0000		0.9622		1.0000		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	8,390	193.98	953,535	419.69	21,492	279.11	15,158,054	182.46
Capitation & Other Expenses/Refunds								
Total	3,199	73.95	140,483	61.83	4,358	56.60	4,502,529	54.20
Reinsurance Expenses								
Net Reinsurance Cost	16	0.37	712	0.31	22	0.29	33,829	0.41
Administrative Expenses								
Fixed Amount	584	13.50	30,672	13.50	1,040	13.50	839,152	10.10
Percentage of Premium	5.25 %	16.17	5.25 %	28.42	5.25 %	20.06	5.25 %	14.19
Risk Margin	1.50 %	4.62	1.50 %	8.12	1.50 %	5.73	1.50 %	4.05
Premium Tax	1.75 %	5.39	1.75 %	9.47	1.75 %	6.69	1.75 %	4.73
Maintenance Tax	3	0.071	161	0.071	5	0.071	5,885	0.071
Projected Total Cost	13,324	308.07	1,230,124	541.43	29,418	382.05	22,447,485	270.20
Adjusted Total Cost	13,324	308.07	1,230,124	541.43	24,447	317.49	22,442,515	270.14
Experience Rate Increase		-79.8 %		17.3 %		-10.7 %		38.3 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	30		15,533		87,993		38,182	
Estimated Incurred Claims								
Professional	8,472	282.38	1,038,465	66.86	3,791,172	43.08	1,540,675	40.35
Emergency Room	0	0.00	138,369	8.91	626,524	7.12	354,032	9.27
Outpatient Facility	248	8.26	389,120	25.05	1,616,961	18.38	712,518	18.66
Inpatient Facility	0	0.00	226,481	14.58	1,816,973	20.65	401,811	10.52
Others	135	4.49	583,922	37.59	693,128	7.88	331,519	8.68
Total	8,854	295.14	2,376,357	152.99	8,544,758	97.11	3,340,556	87.49
Projected FY2025 Member Months	152		179,358		417,421		147,711	
Projected FY2025 Premiums								
@Current Rates	127,938	842.82	23,850,500	132.98	37,618,275	90.12	14,818,888	100.32
@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 Change		1.0157		1.0230		1.0151		1.0647
Other Reimbursement Change		1.0000		1.0000		1.0000		1.0000
Inpatient Reimbursement Change		1.0000		1.0034		1.0125		1.0371
Other Adjustments		0.8860		0.9606		0.9481		0.9393
PHE Adjustment		1.0100		1.2535		1.0315		1.2727
Projected Incurred Claims	45,151	297.44	37,603,660	209.66	45,178,474	108.23	18,914,860	128.05
Capitation & Other Expenses/Refunds								
Total	-1,041	-6.86	-264,911	-1.48	-612,233	-1.47	-206,338	-1.40
Reinsurance Expenses								
Net Reinsurance Cost	25	0.17	20,815	0.12	47,708	0.11	18,881	0.13
Administrative Expenses								
Fixed Amount	1,518	10.00	1,793,578	10.00	4,174,213	10.00	1,477,107	10.00
Percentage of Premium	5.25 %	17.26	5.25 %	12.53	5.25 %	6.71	5.25 %	7.85
Risk Margin	1.50 %	4.93	1.50 %	3.58	1.50 %	1.92	1.50 %	2.24
Premium Tax	1.75 %	5.75	1.75 %	4.18	1.75 %	2.24	1.75 %	2.62
Maintenance Tax	11	0.071	12,705	0.071	29,567	0.071	10,463	0.071
Projected Total Cost	49,906	328.77	42,804,205	238.65	53,352,710	127.82	22,092,866	149.57
Adjusted Total Cost	49,906	328.77	42,804,205	238.65	53,352,710	127.82	22,092,866	149.57
Experience Rate Increase		-61.0 %		79.5 %		41.8 %		49.1 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	153		56,872		479		199,242	
Estimated Incurred Claims								
Professional	18,602	121.58	19,318,888	339.69	133,990	279.73		
Emergency Room	144	0.94	391,980	6.89	3,733	7.79		
Outpatient Facility	886	5.79	1,919,004	33.74	15,931	33.26		
Inpatient Facility	12,623	82.50	165,321	2.91	69,252	144.58		
Others	0	0.00	229,582	4.04	1,432	2.99		
Total	32,255	210.82	22,024,775	387.27	224,338	468.35	36,551,893	183.45
Projected FY2025 Member Months	325		62,620		776		808,363	
Projected FY2025 Premiums								
@Current Rates	495,589	1,524.89	25,462,657	406.62	276,039	355.72	102,649,885	126.98
@Current DSP Rates	0	0.00	0	0.00	205,703	265.08	205,703	0.25
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Change		1.0209		1.0170		1.0120		
Other Reimbursement Change		1.0000		1.0000		1.0000		
Inpatient Reimbursement Change		1.0733		1.0010		1.0453		
Other Adjustments		0.9174		0.8740		0.9501		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	73,780	227.01	23,114,200	369.12	391,286	504.23	125,321,411	155.03
Capitation & Other Expenses/Refunds								
Total	-1,746	-5.37	-326,652	-5.22	-3,831	-4.94	-1,416,752	-1.75
Reinsurance Expenses								
Net Reinsurance Cost	52	0.16	11,047	0.18	149	0.19	98,678	0.12
Administrative Expenses								
Fixed Amount	4,388	13.50	845,370	13.50	10,476	13.50	8,306,649	10.28
Percentage of Premium	5.25 %	13.50	5.25 %	21.67	5.25 %	29.44	5.25 %	9.40
Risk Margin	1.50 %	3.86	1.50 %	6.19	1.50 %	8.41	1.50 %	2.68
Premium Tax	1.75 %	4.50	1.75 %	7.22	1.75 %	9.81	1.75 %	3.13
Maintenance Tax	23	0.071	4,436	0.071	55	0.071	57,259	0.071
Projected Total Cost	83,602	257.24	25,845,247	412.73	435,120	560.72	144,663,656	178.96
Adjusted Total Cost	83,602	257.24	25,845,247	412.73	229,417	295.64	144,457,953	178.70
Experience Rate Increase		-83.1 %		1.5 %		-16.9 %		40.7 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	32		8,926		47,546		17,774	
Estimated Incurred Claims								
Professional	2,155	67.35	405,614	45.44	1,353,881	28.48	456,311	25.67
Emergency Room	0	0.00	165,397	18.53	815,834	17.16	304,590	17.14
Outpatient Facility	45	1.41	264,703	29.66	1,111,959	23.39	416,455	23.43
Inpatient Facility	0	0.00	257,917	28.90	983,816	20.69	249,233	14.02
Others	661	20.67	294,766	33.02	1,031,121	21.69	512,552	28.84
Total	2,862	89.43	1,388,396	155.55	5,296,611	111.40	1,939,141	109.10
Projected FY2025 Member Months	90		103,085		229,897		72,642	
Projected FY2025 Premiums								
@Current Rates	75,650	842.82	21,484,506	208.42	29,737,905	129.35	10,684,158	147.08
@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 Change		1.0211		1.0189		1.0070		1.0326
Other Reimbursement Change		1.0000		1.0000		1.0000		1.0000
Inpatient Reimbursement Change		1.0000		1.0041		1.0005		1.0002
Other Adjustments		0.9063		0.9963		0.9956		0.9951
PHE Adjustment		1.0100		1.1275		1.0000		1.0565
Projected Incurred Claims	8,319	92.68	20,432,740	198.21	28,483,884	123.90	9,541,776	131.35
Capitation & Other Expenses/Refunds								
Total	259	2.88	76,075	0.74	785,542	3.42	258,812	3.56
Reinsurance Expenses								
Net Reinsurance Cost	29	0.33	22,827	0.22	50,836	0.22	16,684	0.23
Administrative Expenses								
Fixed Amount	898	10.00	1,030,847	10.00	2,298,967	10.00	726,420	10.00
Percentage of Premium	5.25 %	6.08	5.25 %	12.01	5.25 %	7.90	5.25 %	8.33
Risk Margin	1.50 %	1.74	1.50 %	3.43	1.50 %	2.26	1.50 %	2.38
Premium Tax	1.75 %	2.03	1.75 %	4.00	1.75 %	2.63	1.75 %	2.78
Maintenance Tax	6	0.071	7,302	0.071	16,284	0.071	5,145	0.071
Projected Total Cost	10,394	115.80	23,573,541	228.68	34,574,331	150.39	11,528,784	158.71
Adjusted Total Cost	10,394	115.80	23,573,541	228.68	34,574,331	150.39	11,528,784	158.71
Experience Rate Increase		-86.3 %		9.7 %		16.3 %		7.9 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	89		28,317		361		103,045	
Estimated Incurred Claims								
Professional	20,411	229.34	6,829,639	241.19	88,664	245.61		
Emergency Room	363	4.08	15,722	0.56	8,221	22.77		
Outpatient Facility	152	1.71	2,480,517	87.60	28,298	78.39		
Inpatient Facility	257,512	2,893.40	114,230	4.03	26,861	74.41		
Others	1,943	21.83	803,324	28.37	3,619	10.02		
Total	280,382	3,150.36	10,243,432	361.74	155,662	431.20	19,306,486	187.36
Projected FY2025 Member Months	201		29,271		503		435,688	
Projected FY2025 Premiums								
@Current Rates	306,503	1,524.89	10,799,645	368.95	178,927	355.72	73,267,294	168.16
@Current DSP Rates	0	0.00	0	0.00	146,426	291.10	146,426	0.34
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Change		1.0039		1.0138		1.0091		
Other Reimbursement Change		1.0000		1.0000		1.0000		
Inpatient Reimbursement Change		1.0182		1.0010		1.0046		
Other Adjustments		1.0000		0.9248		0.9500		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	693,363	3,449.57	10,644,913	363.67	223,747	444.82	70,028,741	160.73
Capitation & Other Expenses/Refunds								
Total	-8	-0.04	15,806	0.54	-1,842	-3.66	1,134,644	2.60
Reinsurance Expenses								
Net Reinsurance Cost	30	0.15	4,422	0.15	70	0.14	94,899	0.22
Administrative Expenses								
Fixed Amount	2,714	13.50	395,159	13.50	6,791	13.50	4,461,794	10.24
Percentage of Premium	5.25 %	198.71	5.25 %	21.68	5.25 %	26.10	5.25 %	9.98
Risk Margin	1.50 %	56.77	1.50 %	6.20	1.50 %	7.46	1.50 %	2.85
Premium Tax	1.75 %	66.24	1.75 %	7.23	1.75 %	8.70	1.75 %	3.33
Maintenance Tax	14	0.071	2,073	0.071	36	0.071	30,861	0.071
Projected Total Cost	760,780	3,784.97	12,090,025	413.04	250,056	497.13	82,787,911	190.02
Adjusted Total Cost	760,780	3,784.97	12,090,025	413.04	103,631	206.03	82,641,485	189.68
Experience Rate Increase		148.2 %		11.9 %		-42.1 %		12.8 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	20		4,907		26,120		9,846	
Estimated Incurred Claims								
Professional	25,403	1,270.14	305,093	62.18	1,135,403	43.47	577,050	58.61
Emergency Room	903	45.15	25,447	5.19	103,744	3.97	50,287	5.11
Outpatient Facility	789	39.46	99,319	20.24	288,447	11.04	178,927	18.17
Inpatient Facility	84,440	4,221.98	25,097	5.11	512,974	19.64	1,478,948	150.21
Others	0	0.00	52,831	10.77	274,438	10.51	107,608	10.93
Total	111,535	5,576.74	507,788	103.48	2,315,006	88.63	2,392,819	243.02
Projected FY2025 Member Months	53		56,669		126,349		40,324	
Projected FY2025 Premiums								
@Current Rates	44,917	842.82	6,750,683	119.13	11,336,314	89.72	5,859,053	145.30
@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 Change		1.0012		1.0176		1.0096		1.0104
Other Reimbursement Change		1.0000		0.9998		1.0000		0.9999
Inpatient Reimbursement Change		1.0000		1.0000		0.9978		0.9996
Other Adjustments		0.2024		0.8666		0.8683		0.9543
PHE Adjustment		1.0100		1.7212		1.1522		1.0000
Projected Incurred Claims	67,453	1,265.69	9,867,924	174.13	12,514,092	99.04	10,472,132	259.70
Capitation & Other Expenses/Refunds								
Total	-21,909	-411.10	-366,606	-6.47	-809,456	-6.41	-12,169	-0.30
Reinsurance Expenses								
Net Reinsurance Cost	9	0.18	5,845	0.10	13,820	0.11	4,221	0.10
Administrative Expenses								
Fixed Amount	533	10.00	566,688	10.00	1,263,486	10.00	403,244	10.00
Percentage of Premium	5.25 %	49.62	5.25 %	10.20	5.25 %	5.90	5.25 %	15.47
Risk Margin	1.50 %	14.18	1.50 %	2.92	1.50 %	1.69	1.50 %	4.42
Premium Tax	1.75 %	16.54	1.75 %	3.40	1.75 %	1.97	1.75 %	5.16
Maintenance Tax	4	0.071	4,014	0.071	8,950	0.071	2,856	0.071
Projected Total Cost	50,372	945.18	11,014,062	194.36	14,197,696	112.37	11,880,092	294.61
Adjusted Total Cost	50,372	945.18	11,014,062	194.36	14,197,696	112.37	11,880,092	294.61
Experience Rate Increase		12.1 %		63.2 %		25.2 %		102.8 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	69		24,505		218		65,685	
Estimated Incurred Claims								
Professional	9,895	143.40	14,025,892	572.37	88,598	406.41		
Emergency Room	559	8.11	149,076	6.08	1,467	6.73		
Outpatient Facility	0	0.00	445,935	18.20	3,174	14.56		
Inpatient Facility	7,628	110.55	1,012,949	41.34	19,040	87.34		
Others	375	5.44	29,974	1.22	715	3.28		
Total	18,458	267.50	15,663,826	639.21	112,994	518.32	21,122,426	321.57
Projected FY2025 Member Months	113		21,031		262		244,801	
Projected FY2025 Premiums								
@Current Rates	172,313	1,524.89	9,855,368	468.61	93,199	355.72	34,111,847	139.35
@Current DSP Rates	0	0.00	0	0.00	74,511	284.39	74,511	0.30
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Change		1.0067		1.0077		1.0066		
Other Reimbursement Change		1.0000		1.0000		1.0000		
Inpatient Reimbursement Change		1.0059		1.0007		1.0025		
Other Adjustments		0.8598		0.6251		0.7219		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	28,194	249.51	9,077,115	431.61	105,968	404.46	42,132,878	172.11
Capitation & Other Expenses/Refunds								
Total	36	0.32	-60,828	-2.89	34	0.13	-1,270,897	-5.19
Reinsurance Expenses								
Net Reinsurance Cost	9	0.08	1,598	0.08	21	0.08	25,524	0.10
Administrative Expenses								
Fixed Amount	1,526	13.50	283,919	13.50	3,537	13.50	2,522,933	10.31
Percentage of Premium	5.25 %	15.12	5.25 %	25.38	5.25 %	24.00	5.25 %	10.18
Risk Margin	1.50 %	4.32	1.50 %	7.25	1.50 %	6.86	1.50 %	2.91
Premium Tax	1.75 %	5.04	1.75 %	8.46	1.75 %	8.00	1.75 %	3.39
Maintenance Tax	8	0.071	1,490	0.071	19	0.071	17,340	0.071
Projected Total Cost	32,539	287.95	10,167,534	483.45	119,757	457.09	47,462,053	193.88
Adjusted Total Cost	32,539	287.95	10,167,534	483.45	45,246	172.70	47,387,541	193.58
Experience Rate Increase		-81.1 %		3.2 %		-51.5 %		38.9 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	205		71,401		406,396		165,103	
Estimated Incurred Claims								
Professional	53,225	259.63	4,135,244	57.92	14,710,186	36.20	6,654,288	40.30
Emergency Room	1,432	6.99	1,108,004	15.52	4,512,540	11.10	2,348,463	14.22
Outpatient Facility	5,215	25.44	2,063,733	28.90	8,896,284	21.89	5,062,905	30.67
Inpatient Facility	76,832	374.79	2,350,448	32.92	8,888,433	21.87	5,529,062	33.49
Others	3,414	16.65	1,673,356	23.44	5,150,326	12.67	2,438,487	14.77
Total	140,118	683.50	11,330,784	158.69	42,157,770	103.74	22,033,205	133.45
Projected FY2025 Member Months	612		824,757		1,957,329		666,709	
Projected FY2025 Premiums								
@Current Rates	515,595	842.82	142,144,388	172.35	231,088,826	118.06	99,861,968	149.78
@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 Change		1.0053		1.0183		1.0117		1.0312
Other Reimbursement Change		1.0000		1.0000		0.9994		0.9998
Inpatient Reimbursement Change		1.0000		0.9731		0.9930		0.9883
Other Adjustments		0.4071		0.9607		0.9491		0.9582
PHE Adjustment		1.0975		1.3767		1.0480		1.1037
Projected Incurred Claims	208,247	340.41	190,177,512	230.59	224,820,479	114.86	106,318,835	159.47
Capitation & Other Expenses/Refunds								
Total	-20,937	-34.22	3,362,053	4.08	10,119,639	5.17	3,559,197	5.34
Reinsurance Expenses								
Net Reinsurance Cost	102	0.17	129,090	0.16	307,559	0.16	107,332	0.16
Administrative Expenses								
Fixed Amount	6,118	10.00	8,247,569	10.00	19,573,290	10.00	6,667,090	10.00
Percentage of Premium	5.25 %	18.16	5.25 %	14.05	5.25 %	7.47	5.25 %	10.04
Risk Margin	1.50 %	5.19	1.50 %	4.01	1.50 %	2.14	1.50 %	2.87
Premium Tax	1.75 %	6.05	1.75 %	4.68	1.75 %	2.49	1.75 %	3.35
Maintenance Tax	43	0.071	58,420	0.071	138,644	0.071	47,225	0.071
Projected Total Cost	211,555	345.82	220,737,316	267.64	278,644,383	142.36	127,540,633	191.30
Adjusted Total Cost	211,555	345.82	220,737,316	267.64	278,644,383	142.36	127,540,633	191.30
Experience Rate Increase		-59.0 %		55.3 %		20.6 %		27.7 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2023								
Member Months	784		319,887		2,622		966,398	
Estimated Incurred Claims								
Professional	120,051	153.13	101,839,540	318.36	630,195	240.35		
Emergency Room	7,697	9.82	1,668,402	5.22	23,601	9.00		
Outpatient Facility	6,037	7.70	25,208,316	78.80	157,379	60.02		
Inpatient Facility	506,542	646.10	1,929,274	6.03	403,441	153.87		
Others	6,326	8.07	11,268,761	35.23	62,512	23.84		
Total	646,653	824.81	141,914,292	443.64	1,277,129	487.08	219,499,951	227.13
Projected FY2025 Member Months	1,616		311,978		3,980		3,766,980	
Projected FY2025 Premiums								
@Current Rates	2,463,841	1,524.89	141,494,417	453.54	1,415,766	355.72	618,984,801	164.32
@Current DSP Rates	0	0.00	0	0.00	1,060,747	266.52	1,060,747	0.28
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Change		1.0205		1.0120		1.0086		
Other Reimbursement Change		1.0000		1.0000		1.0000		
Inpatient Reimbursement Change		1.0112		0.9997		0.9797		
Other Adjustments		0.9841		0.8691		0.9270		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	1,449,823	897.31	130,366,032	417.87	1,902,359	477.98	655,243,286	173.94
Capitation & Other Expenses/Refunds								
Total	3,936	2.44	-13,028	-0.04	128	0.03	17,010,987	4.52
Reinsurance Expenses								
Net Reinsurance Cost	265	0.16	52,002	0.17	647	0.16	596,998	0.16
Administrative Expenses								
Fixed Amount	21,813	13.50	4,211,703	13.50	53,730	13.50	38,781,312	10.30
Percentage of Premium	5.25 %	52.41	5.25 %	24.76	5.25 %	28.21	5.25 %	10.84
Risk Margin	1.50 %	14.98	1.50 %	7.07	1.50 %	8.06	1.50 %	3.10
Premium Tax	1.75 %	17.47	1.75 %	8.25	1.75 %	9.40	1.75 %	3.61
Maintenance Tax	114	0.071	22,098	0.071	282	0.071	266,828	0.071
Projected Total Cost	1,613,060	998.34	147,146,238	471.66	2,138,957	537.43	778,032,143	206.54
Adjusted Total Cost	1,613,060	998.34	147,146,238	471.66	1,078,211	270.91	776,971,397	206.26
Experience Rate Increase		-34.5 %		4.0 %		-23.8 %		25.5 %

FY2025 CHIP Pharmacy Rating
Bexar

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2023)								
Member Months	15		5,612		32,002		12,917	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	204,856	36.50	1,585,595	49.55	568,358	44.00
Other Costs/Refunds	-1	-0.08	-626	-0.11	-4,941	-0.15	-2,114	-0.16
Total Cost	-1	-0.08	204,230	36.39	1,580,654	49.39	566,244	43.84
Projected FY2025 Member Months	40		64,867		154,773		52,827	
Projected FY2025 Premiums								
@ Current Rate	914	23.12	524,714	8.09	6,949,713	44.90	1,952,938	36.97
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0000		1.0000		1.0000		1.1310	
Adjustment 2 - Rx Pricing Efficiency	1.0000		1.0000		1.0000		1.0000	
Adjustment 3 - Insulin Price Adj.	1.0000		1.0000		0.9862		0.9705	
Adjustment 4 - Makena	1.0000		1.0000		1.0000		1.0000	
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000		1.0000	
Adjustment 6 - AMP Cap Price Adj.	1.0000		0.9985		0.9959		0.9935	
Projected FY2025 Incurred Claims	-3	-0.09	2,698,607	41.60	8,596,144	55.54	2,891,300	54.73
Administrative Expenses	63	1.60	103,787	1.60	247,637	1.60	84,524	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	62	1.56	2,896,531	44.65	9,140,859	59.06	3,075,787	58.22
Percentage Rate Increase		-93.2 %		452.0 %		31.5 %		57.5 %

FY2025 CHIP Pharmacy Rating
Bexar

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2023)								
Member Months	44		17,170		139		67,899	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	598,391	34.85	861	6.19	2,958,061	43.57
Other Costs/Refunds	-16	-0.36	-8,321	-0.48	-16	-0.12	-16,035	-0.24
Total Cost	-16	-0.36	590,070	34.37	844	6.08	2,942,026	43.33
Projected FY2025 Member Months	101		14,581		295		287,484	
Projected FY2025 Premiums								
@ Current Rate	218	2.16	482,775	33.11	13,408	45.45	9,924,681	34.52
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0000		1.0000		1.0000			
Adjustment 2 - Rx Pricing Efficiency	1.0000		1.0000		1.0000			
Adjustment 3 - Insulin Price Adj.	1.0000		0.8771		1.0000			
Adjustment 4 - Makena	1.0000		0.8703		1.0000			
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000			
Adjustment 6 - AMP Cap Price Adj.	1.0000		0.9997		1.0000			
Projected FY2025 Incurred Claims	-41	-0.41	437,800	30.03	2,052	6.96	14,625,858	50.88
Administrative Expenses	162	1.60	23,330	1.60	472	1.60	459,974	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	124	1.23	476,620	32.69	2,609	8.84	15,592,591	54.24
Percentage Rate Increase		-43.1 %		-1.3 %		-80.5 %		57.1 %

FY2025 CHIP Pharmacy Rating
Dallas

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2023)								
Member Months	40		10,932		65,886		26,426	
Experience Period Cost								
Estimated Incurred Claims	272	6.79	209,910	19.20	1,603,994	24.34	928,392	35.13
Other Costs/Refunds	22	0.54	3,910	0.36	28,936	0.44	11,441	0.43
Total Cost	293	7.33	213,820	19.56	1,632,930	24.78	939,833	35.56
Projected FY2025 Member Months	112		126,258		318,667		108,029	
Projected FY2025 Premiums								
@ Current Rate	2,594	23.12	2,356,375	18.66	11,432,792	35.88	6,077,613	56.26
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0000		1.0352		1.2825		1.4525	
Adjustment 2 - Rx Pricing Efficiency	1.0000		1.0000		1.0000		1.0000	
Adjustment 3 - Insulin Price Adj.	1.0000		0.9957		0.9884		0.9480	
Adjustment 4 - Makena	1.0000		1.0000		1.0000		1.0000	
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000		1.0000	
Adjustment 6 - AMP Cap Price Adj.	1.0000		0.9965		0.9947		0.9960	
Projected FY2025 Incurred Claims	942	8.39	2,904,051	23.00	11,401,469	35.78	6,032,696	55.84
Administrative Expenses	180	1.60	202,013	1.60	509,867	1.60	172,847	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	1,159	10.33	3,210,402	25.43	12,311,458	38.63	6,413,998	59.37
Percentage Rate Increase		-55.3 %		36.2 %		7.7 %		5.5 %

FY2025 CHIP Pharmacy Rating
Dallas

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2023)								
Member Months	154		67,287		533		171,258	
Experience Period Cost								
Estimated Incurred Claims	14	0.09	1,309,451	19.46	10,990	20.62	4,063,022	23.72
Other Costs/Refunds	-16	-0.11	-57,631	-0.86	-218	-0.41	-13,556	-0.08
Total Cost	-2	-0.01	1,251,821	18.60	10,772	20.21	4,049,466	23.65
Projected FY2025 Member Months	245		60,707		642		614,660	
Projected FY2025 Premiums								
@ Current Rate	529	2.16	1,237,208	20.38	29,179	45.45	21,136,291	34.39
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0000		1.0000		1.0000			
Adjustment 2 - Rx Pricing Efficiency	1.0000		1.0000		1.0000			
Adjustment 3 - Insulin Price Adj.	1.0000		0.8828		0.8733			
Adjustment 4 - Makena	1.0000		0.8956		1.0000			
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000			
Adjustment 6 - AMP Cap Price Adj.	1.0000		0.9997		1.0000			
Projected FY2025 Incurred Claims	-4	-0.02	1,022,029	16.84	12,972	20.21	21,374,156	34.77
Administrative Expenses	392	1.60	97,131	1.60	1,027	1.60	983,456	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	401	1.64	1,156,755	19.05	14,470	22.54	23,108,643	37.60
Percentage Rate Increase		-24.3 %		-6.5 %		-50.4 %		9.3 %

FY2025 CHIP Pharmacy Rating
El Paso

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2023)								
Member Months	2		2,578		16,132		6,924	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	28,394	11.01	444,499	27.55	126,422	18.26
Other Costs/Refunds	0	0.00	-143	-0.06	-1,702	-0.11	-494	-0.07
Total Cost	0	0.00	28,251	10.96	442,796	27.45	125,928	18.19
Projected FY2025 Member Months	1		29,766		78,015		28,316	
Projected FY2025 Premiums								
@ Current Rate	12	23.12	226,052	7.59	1,825,666	23.40	467,608	16.51
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0000		1.3622		1.1944		3.4865	
Adjustment 2 - Rx Pricing Efficiency	1.0000		1.0000		1.0000		1.0000	
Adjustment 3 - Insulin Price Adj.	1.0000		1.0000		0.9755		0.9891	
Adjustment 4 - Makena	1.0000		1.0000		1.0000		1.0000	
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000		1.0000	
Adjustment 6 - AMP Cap Price Adj.	1.0000		0.9720		0.9971		0.9968	
Projected FY2025 Incurred Claims	0	0.00	494,484	16.61	2,848,254	36.51	2,026,772	71.58
Administrative Expenses	1	1.60	47,626	1.60	124,824	1.60	45,306	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	1	1.65	560,320	18.82	3,072,949	39.39	2,141,683	75.63
Percentage Rate Increase		-92.8 %		147.9 %		68.3 %		358.0 %

FY2025 CHIP Pharmacy Rating
El Paso

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2023)								
Member Months	14		5,408		70		31,128	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	182,102	33.67	632	9.03	782,049	25.12
Other Costs/Refunds	-17	-1.20	-2,747	-0.51	-32	-0.46	-5,135	-0.16
Total Cost	-17	-1.20	179,355	33.16	600	8.58	776,914	24.96
Projected FY2025 Member Months	48		6,509		114		142,769	
Projected FY2025 Premiums								
@ Current Rate	104	2.16	221,120	33.97	5,181	45.45	2,745,743	19.23
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0000		1.0000		1.0000			
Adjustment 2 - Rx Pricing Efficiency	1.0000		1.0000		1.0000			
Adjustment 3 - Insulin Price Adj.	1.0000		0.9234		1.0000			
Adjustment 4 - Makena	1.0000		0.7936		1.0000			
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000			
Adjustment 6 - AMP Cap Price Adj.	1.0000		1.0000		1.0000			
Projected FY2025 Incurred Claims	-66	-1.37	181,113	27.83	1,119	9.82	5,551,677	38.89
Administrative Expenses	77	1.60	10,414	1.60	182	1.60	228,431	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	11	0.24	197,961	30.41	1,345	11.80	5,974,271	41.85
Percentage Rate Increase		-89.1 %		-10.5 %		-74.0 %		117.6 %

FY2025 CHIP Pharmacy Rating
Harris

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2023)								
Member Months	51		18,451		103,686		42,081	
Experience Period Cost								
Estimated Incurred Claims	124	2.43	327,400	17.74	3,122,408	30.11	2,619,923	62.26
Other Costs/Refunds	9	0.17	-49,562	-2.69	-125,291	-1.21	-2,863	-0.07
Total Cost	133	2.60	277,838	15.06	2,997,117	28.91	2,617,060	62.19
Projected FY2025 Member Months	140		213,224		501,492		172,059	
Projected FY2025 Premiums								
@ Current Rate	3,248	23.12	3,402,846	15.96	14,781,366	29.47	9,266,714	53.86
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.1135		1.0424		1.1143		1.0000	
Adjustment 2 - Rx Pricing Efficiency	1.0000		0.9966		0.9978		0.9971	
Adjustment 3 - Insulin Price Adj.	1.0000		0.9980		0.9809		0.9810	
Adjustment 4 - Makena	1.0000		1.0000		1.0000		1.0000	
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000		1.0000	
Adjustment 6 - AMP Cap Price Adj.	1.0000		0.9987		0.9984		0.9986	
Projected FY2025 Incurred Claims	466	3.32	3,806,248	17.85	18,071,331	36.04	11,966,655	69.55
Administrative Expenses	225	1.60	341,158	1.60	802,387	1.60	275,295	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	714	5.08	4,286,725	20.10	19,507,719	38.90	12,653,179	73.54
Percentage Rate Increase		-78.0 %		26.0 %		32.0 %		36.5 %

FY2025 CHIP Pharmacy Rating
Harris

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2023)								
Member Months	217		107,940		693		273,119	
Experience Period Cost								
Estimated Incurred Claims	136	0.62	5,673,330	52.56	44,855	64.73	11,788,176	43.16
Other Costs/Refunds	-4	-0.02	-153,124	-1.42	-158	-0.23	-330,993	-1.21
Total Cost	132	0.61	5,520,206	51.14	44,696	64.50	11,457,182	41.95
Projected FY2025 Member Months	468		106,200		1,142		994,726	
Projected FY2025 Premiums								
@ Current Rate	1,011	2.16	5,068,765	47.73	51,904	45.45	32,575,855	32.75
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0000		1.0000		1.0000			
Adjustment 2 - Rx Pricing Efficiency	1.0000		0.9957		0.9981			
Adjustment 3 - Insulin Price Adj.	1.0000		0.9472		0.9867			
Adjustment 4 - Makena	1.0000		0.8903		1.0000			
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000			
Adjustment 6 - AMP Cap Price Adj.	1.0000		0.9997		1.0000			
Projected FY2025 Incurred Claims	326	0.70	5,219,648	49.15	83,049	72.72	39,147,722	39.36
Administrative Expenses	749	1.60	169,920	1.60	1,827	1.60	1,591,562	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	1,111	2.37	5,570,613	52.45	87,727	76.82	42,107,787	42.33
Percentage Rate Increase		9.9 %		9.9 %		69.0 %		29.3 %

FY2025 CHIP Pharmacy Rating
Jefferson

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2023)								
Member Months	6		1,427		9,260		3,683	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	43,872	30.74	308,477	33.31	108,609	29.49
Other Costs/Refunds	0	0.00	-81	-0.06	-1,147	-0.12	-3,429	-0.93
Total Cost	0	0.00	43,790	30.69	307,330	33.19	105,180	28.56
Projected FY2025 Member Months	7		16,476		44,779		15,053	
Projected FY2025 Premiums								
@ Current Rate	153	23.12	216,606	13.15	2,430,988	54.29	658,448	43.74
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0000		1.0000		1.9456		1.2944	
Adjustment 2 - Rx Pricing Efficiency	1.0000		0.9966		0.9929		0.9916	
Adjustment 3 - Insulin Price Adj.	1.0000		1.0000		0.9388		0.9227	
Adjustment 4 - Makena	1.0000		1.0000		1.0000		1.0000	
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000		1.0000	
Adjustment 6 - AMP Cap Price Adj.	1.0000		1.0000		0.9995		0.9854	
Projected FY2025 Incurred Claims	0	0.00	576,910	35.01	3,084,266	68.88	574,389	38.16
Administrative Expenses	11	1.60	26,362	1.60	71,647	1.60	24,085	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	11	1.65	623,537	37.84	3,261,925	72.84	618,577	41.09
Percentage Rate Increase		-92.8 %		187.9 %		34.2 %		-6.1 %

FY2025 CHIP Pharmacy Rating
Jefferson

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2023)								
Member Months	16		6,869		37		21,298	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	372,619	54.25	1,347	36.42	834,924	39.20
Other Costs/Refunds	-8	-0.51	-14,842	-2.16	4	0.10	-19,504	-0.92
Total Cost	-8	-0.51	357,777	52.09	1,351	36.52	815,420	38.29
Projected FY2025 Member Months	35		5,120		97		81,567	
Projected FY2025 Premiums								
@ Current Rate	75	2.16	252,755	49.37	4,409	45.45	3,563,434	43.69
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0000		1.0000		1.0000			
Adjustment 2 - Rx Pricing Efficiency	1.0000		0.9958		1.0000			
Adjustment 3 - Insulin Price Adj.	1.0000		0.9524		1.0000			
Adjustment 4 - Makena	1.0000		0.8144		1.0000			
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000			
Adjustment 6 - AMP Cap Price Adj.	1.0000		1.0000		1.0000			
Projected FY2025 Incurred Claims	-20	-0.59	235,823	46.06	4,056	41.81	4,475,422	54.87
Administrative Expenses	55	1.60	8,192	1.60	155	1.60	130,507	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	36	1.05	252,211	49.26	4,352	44.87	4,760,650	58.37
Percentage Rate Increase		-51.5 %		-0.2 %		-1.3 %		33.6 %

FY2025 CHIP Pharmacy Rating
Lubbock

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2023)								
Member Months	6		1,442		8,283		3,259	
Experience Period Cost								
Estimated Incurred Claims	3,205	534.22	10,603	7.35	164,174	19.82	419,619	128.76
Other Costs/Refunds	0	-0.03	-28	-0.02	-129	-0.02	-51	-0.02
Total Cost	3,205	534.19	10,576	7.33	164,045	19.81	419,568	128.74
Projected FY2025 Member Months	17		16,661		40,055		13,337	
Projected FY2025 Premiums								
@ Current Rate	389	23.12	129,028	7.74	1,120,119	27.96	1,065,684	79.91
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0100		1.1578		2.5267		1.0000	
Adjustment 2 - Rx Pricing Efficiency	1.0000		1.0000		1.0000		1.0000	
Adjustment 3 - Insulin Price Adj.	1.0000		1.0000		0.9791		0.9864	
Adjustment 4 - Makena	1.0000		1.0000		1.0000		1.0000	
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000		1.0000	
Adjustment 6 - AMP Cap Price Adj.	1.0000		1.0000		0.9908		0.9997	
Projected FY2025 Incurred Claims	10,396	617.71	161,978	9.72	2,226,185	55.58	1,938,440	145.35
Administrative Expenses	27	1.60	26,658	1.60	64,087	1.60	21,339	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	10,773	640.11	194,973	11.70	2,367,207	59.10	2,025,611	151.88
Percentage Rate Increase		2668.7 %		51.1 %		111.3 %		90.1 %

FY2025 CHIP Pharmacy Rating
Lubbock

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2023)								
Member Months	19		3,534		44		16,587	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	97,950	27.72	1,005	22.85	696,557	41.99
Other Costs/Refunds	0	-0.02	-54	-0.02	-1	-0.01	-263	-0.02
Total Cost	0	-0.02	97,896	27.70	1,005	22.83	696,294	41.98
Projected FY2025 Member Months	37		3,667		72		73,845	
Projected FY2025 Premiums								
@ Current Rate	80	2.16	157,573	42.97	3,272	45.45	2,476,146	33.53
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0000		1.0000		1.0000			
Adjustment 2 - Rx Pricing Efficiency	1.0000		1.0000		1.0000			
Adjustment 3 - Insulin Price Adj.	1.0000		0.9113		1.0000			
Adjustment 4 - Makena	1.0000		0.9968		1.0000			
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000			
Adjustment 6 - AMP Cap Price Adj.	1.0000		1.0000		1.0000			
Projected FY2025 Incurred Claims	-1	-0.02	105,644	28.81	1,882	26.14	4,444,525	60.19
Administrative Expenses	59	1.60	5,867	1.60	115	1.60	118,152	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	60	1.63	115,257	31.43	2,064	28.67	4,715,946	63.86
Percentage Rate Increase		-24.4 %		-26.9 %		-36.9 %		90.5 %

FY2025 CHIP Pharmacy Rating
Nueces

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2023)								
Member Months	3		1,593		9,488		4,011	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	19,790	12.42	326,125	34.37	173,812	43.33
Other Costs/Refunds	0	0.00	-554	-0.35	-3,097	-0.33	-1,303	-0.32
Total Cost	0	0.00	19,235	12.07	323,028	34.05	172,509	43.01
Projected FY2025 Member Months	1		18,393		45,882		16,410	
Projected FY2025 Premiums								
@ Current Rate	17	23.12	204,698	11.13	1,974,124	43.03	1,011,538	61.64
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0000		1.3312		1.4585		1.1595	
Adjustment 2 - Rx Pricing Efficiency	1.0000		0.9995		0.9998		0.9993	
Adjustment 3 - Insulin Price Adj.	1.0000		1.0000		0.9948		0.9877	
Adjustment 4 - Makena	1.0000		1.0000		1.0000		1.0000	
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000		1.0000	
Adjustment 6 - AMP Cap Price Adj.	1.0000		0.9492		0.9980		0.9989	
Projected FY2025 Incurred Claims	0	0.00	321,137	17.46	2,589,154	56.43	923,747	56.29
Administrative Expenses	1	1.60	29,429	1.60	73,411	1.60	26,256	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	1	1.65	362,342	19.70	2,752,005	59.98	981,916	59.84
Percentage Rate Increase		-92.8 %		77.0 %		39.4 %		-2.9 %

FY2025 CHIP Pharmacy Rating
Nueces

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2023)								
Member Months	9		1,985		48		17,137	
Experience Period Cost								
Estimated Incurred Claims	15	1.72	98,381	49.56	839	17.48	618,963	36.12
Other Costs/Refunds	-2	-0.27	-530	-0.27	-11	-0.24	-5,498	-0.32
Total Cost	13	1.45	97,852	49.30	828	17.25	613,465	35.80
Projected FY2025 Member Months	43		2,272		77		83,078	
Projected FY2025 Premiums								
@ Current Rate	93	2.16	80,740	35.54	3,500	45.45	3,274,711	39.42
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0000		1.0000		1.0000			
Adjustment 2 - Rx Pricing Efficiency	1.0000		0.9979		1.0000			
Adjustment 3 - Insulin Price Adj.	1.0000		0.9147		1.0000			
Adjustment 4 - Makena	1.0000		0.8275		1.0000			
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000			
Adjustment 6 - AMP Cap Price Adj.	1.0000		1.0000		1.0000			
Projected FY2025 Incurred Claims	72	1.66	96,854	42.63	1,520	19.75	3,932,485	47.33
Administrative Expenses	69	1.60	3,635	1.60	123	1.60	132,925	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	146	3.37	103,865	45.72	1,699	22.06	4,201,973	50.58
Percentage Rate Increase		56.2 %		28.6 %		-51.5 %		28.3 %

FY2025 CHIP Pharmacy Rating
RSA

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2023)								
Member Months	30		15,533		87,993		38,182	
Experience Period Cost								
Estimated Incurred Claims	25	0.82	337,531	21.73	2,903,842	33.00	1,117,230	29.26
Other Costs/Refunds	-17	-0.58	-5,260	-0.34	-21,898	-0.25	-13,710	-0.36
Total Cost	7	0.24	332,271	21.39	2,881,944	32.75	1,103,520	28.90
Projected FY2025 Member Months	152		179,358		417,421		147,711	
Projected FY2025 Premiums								
@ Current Rate	3,510	23.12	1,810,815	10.10	16,028,045	38.40	6,481,342	43.88
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0100		1.0000		1.2232		1.3914	
Adjustment 2 - Rx Pricing Efficiency	1.0000		1.0000		1.0000		1.0000	
Adjustment 3 - Insulin Price Adj.	1.0000		0.9962		0.9758		0.9531	
Adjustment 4 - Makena	1.0000		1.0000		1.0000		1.0000	
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000		1.0000	
Adjustment 6 - AMP Cap Price Adj.	1.0000		0.9958		0.9964		0.9949	
Projected FY2025 Incurred Claims	42	0.28	4,357,561	24.30	18,615,365	44.60	6,448,681	43.66
Administrative Expenses	243	1.60	286,972	1.60	667,874	1.60	236,337	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	295	1.94	4,800,551	26.77	19,930,996	47.75	6,909,579	46.78
Percentage Rate Increase		-91.6 %		165.1 %		24.4 %		6.6 %

FY2025 CHIP Pharmacy Rating
RSA

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2023)								
Member Months	153		56,872		479		199,242	
Experience Period Cost								
Estimated Incurred Claims	88	0.58	2,295,699	40.37	13,721	28.64	6,668,136	33.47
Other Costs/Refunds	-79	-0.52	-100,473	-1.77	-621	-1.30	-142,059	-0.71
Total Cost	10	0.06	2,195,226	38.60	13,100	27.35	6,526,077	32.75
Projected FY2025 Member Months	325		62,620		776		808,363	
Projected FY2025 Premiums								
@ Current Rate	702	2.16	2,529,868	40.40	35,269	45.45	26,889,549	33.26
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0000		1.0000		1.0000			
Adjustment 2 - Rx Pricing Efficiency	1.0000		1.0000		1.0000			
Adjustment 3 - Insulin Price Adj.	1.0000		0.9006		0.9846			
Adjustment 4 - Makena	1.0000		0.8466		1.0000			
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000			
Adjustment 6 - AMP Cap Price Adj.	1.0000		1.0000		1.0000			
Projected FY2025 Incurred Claims	23	0.07	2,109,947	33.69	23,923	30.83	31,555,542	39.04
Administrative Expenses	520	1.60	100,192	1.60	1,242	1.60	1,293,380	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	561	1.73	2,284,381	36.48	26,010	33.52	33,952,375	42.00
Percentage Rate Increase		-20.0 %		-9.7 %		-26.3 %		26.3 %

FY2025 CHIP Pharmacy Rating
Tarrant

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2023)								
Member Months	32		8,926		47,546		17,774	
Experience Period Cost								
Estimated Incurred Claims	4,865	152.02	353,653	39.62	1,212,139	25.49	491,410	27.65
Other Costs/Refunds	11	0.35	1,541	0.17	8,720	0.18	6,333	0.36
Total Cost	4,876	152.37	355,194	39.79	1,220,859	25.68	497,744	28.00
Projected FY2025 Member Months	90		103,085		229,897		72,642	
Projected FY2025 Premiums								
@ Current Rate	2,075	23.12	3,199,442	31.04	6,617,143	28.78	2,752,846	37.90
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0100		1.0000		1.1044		1.4547	
Adjustment 2 - Rx Pricing Efficiency	1.0000		1.0000		1.0000		1.0000	
Adjustment 3 - Insulin Price Adj.	1.0000		0.9964		0.9490		0.9093	
Adjustment 4 - Makena	1.0000		1.0000		1.0000		1.0000	
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000		1.0618	
Adjustment 6 - AMP Cap Price Adj.	1.0000		0.9946		0.9953		0.9970	
Projected FY2025 Incurred Claims	15,815	176.19	4,654,276	45.15	7,050,150	30.67	3,261,329	44.90
Administrative Expenses	144	1.60	164,935	1.60	367,835	1.60	116,227	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	16,494	183.76	4,981,097	48.32	7,667,168	33.35	3,491,014	48.06
Percentage Rate Increase		694.8 %		55.7 %		15.9 %		26.8 %

FY2025 CHIP Pharmacy Rating
Tarrant

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2023)								
Member Months	89		28,317		361		103,045	
Experience Period Cost								
Estimated Incurred Claims	17	0.19	1,075,319	37.97	10,026	27.77	3,147,428	30.54
Other Costs/Refunds	44	0.49	-7,467	-0.26	-184	-0.51	8,999	0.09
Total Cost	61	0.69	1,067,852	37.71	9,842	27.26	3,156,427	30.63
Projected FY2025 Member Months	201		29,271		503		435,688	
Projected FY2025 Premiums								
@ Current Rate	434	2.16	1,179,793	40.31	22,861	45.45	13,774,595	31.62
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0000		1.0000		1.0000			
Adjustment 2 - Rx Pricing Efficiency	1.0000		1.0000		1.0000			
Adjustment 3 - Insulin Price Adj.	1.0000		0.9057		0.9227			
Adjustment 4 - Makena	1.0000		0.8026		1.0000			
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000			
Adjustment 6 - AMP Cap Price Adj.	1.0000		0.9996		1.0000			
Projected FY2025 Incurred Claims	158	0.79	918,288	31.37	14,487	28.80	15,914,502	36.53
Administrative Expenses	322	1.60	46,834	1.60	805	1.60	697,101	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	496	2.47	997,541	34.08	15,805	31.42	17,169,616	39.41
Percentage Rate Increase		14.2 %		-15.4 %		-30.9 %		24.6 %

FY2025 CHIP Pharmacy Rating
Travis

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2023)								
Member Months	20		4,907		26,120		9,846	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	32,038	6.53	807,150	30.90	660,293	67.06
Other Costs/Refunds	0	0.00	-17	0.00	-95	0.00	-39	0.00
Total Cost	0	0.00	32,021	6.53	807,055	30.90	660,254	67.06
Projected FY2025 Member Months	53		56,669		126,349		40,324	
Projected FY2025 Premiums								
@ Current Rate	1,232	23.12	392,922	6.93	4,838,343	38.29	2,664,442	66.08
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0000		2.0525		1.2664		1.0000	
Adjustment 2 - Rx Pricing Efficiency	1.0000		1.0000		1.0000		1.0000	
Adjustment 3 - Insulin Price Adj.	1.0000		0.9887		0.9797		0.9939	
Adjustment 4 - Makena	1.0000		1.0000		1.0000		1.0000	
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000		1.0000	
Adjustment 6 - AMP Cap Price Adj.	1.0000		0.9919		0.9963		0.9989	
Projected FY2025 Incurred Claims	0	0.00	852,213	15.04	5,524,874	43.73	3,073,631	76.22
Administrative Expenses	85	1.60	90,670	1.60	202,158	1.60	64,519	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	88	1.65	974,557	17.20	5,919,413	46.85	3,243,566	80.44
Percentage Rate Increase		-92.9 %		148.0 %		22.3 %		21.7 %

FY2025 CHIP Pharmacy Rating
Travis

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2023)								
Member Months	69		24,505		218		65,685	
Experience Period Cost								
Estimated Incurred Claims	2,581	37.40	432,337	17.64	3,287	15.08	1,937,686	29.50
Other Costs/Refunds	0	0.00	-93	0.00	-1	0.00	-245	0.00
Total Cost	2,581	37.40	432,244	17.64	3,286	15.07	1,937,441	29.50
Projected FY2025 Member Months	113		21,031		262		244,801	
Projected FY2025 Premiums								
@ Current Rate	244	2.16	374,494	17.81	11,908	45.45	8,283,585	33.84
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0000		1.0000		1.0000			
Adjustment 2 - Rx Pricing Efficiency	1.0000		1.0000		1.0000			
Adjustment 3 - Insulin Price Adj.	1.0000		0.7914		1.0000			
Adjustment 4 - Makena	1.0000		0.9818		1.0000			
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000			
Adjustment 6 - AMP Cap Price Adj.	1.0000		1.0000		1.0000			
Projected FY2025 Incurred Claims	4,839	42.82	330,005	15.69	4,521	17.26	9,790,084	39.99
Administrative Expenses	181	1.60	33,650	1.60	419	1.60	391,682	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	5,188	45.91	375,871	17.87	5,107	19.49	10,523,790	42.99
Percentage Rate Increase		2025.6 %		0.4 %		-57.1 %		27.0 %

FY2025 CHIP Pharmacy Rating
Statewide

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2023)								
Member Months	205		71,401		406,396		165,103	
Experience Period Cost								
Estimated Incurred Claims	7,997	39.01	1,568,064	21.96	12,474,557	30.70	7,244,893	43.88
Other Costs/Refunds	8	0.04	-50,842	-0.71	-120,732	-0.30	-5,565	-0.03
Total Cost	8,005	39.05	1,517,222	21.25	12,353,826	30.40	7,239,328	43.85
Projected FY2025 Member Months	612		824,757		1,957,329		666,709	
Projected FY2025 Premiums								
@ Current Rate	14,144	23.12	12,463,498	15.11	67,998,299	34.74	32,399,175	48.60
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0112		1.0470		1.2075		1.2106	
Adjustment 2 - Rx Pricing Efficiency	1.0000		0.9993		0.9992		0.9990	
Adjustment 3 - Insulin Price Adj.	1.0000		0.9970		0.9769		0.9652	
Adjustment 4 - Makena	1.0000		1.0000		1.0000		1.0000	
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000		1.0049	
Adjustment 6 - AMP Cap Price Adj.	1.0000		0.9952		0.9965		0.9969	
Projected FY2025 Incurred Claims	27,657	45.21	20,827,465	25.25	80,007,193	40.88	39,137,641	58.70
Administrative Expenses	979	1.60	1,319,611	1.60	3,131,726	1.60	1,066,734	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	29,597	48.38	22,891,035	27.75	85,931,700	43.90	41,554,910	62.33
Percentage Rate Increase		109.3 %		83.7 %		26.4 %		28.3 %

FY2025 CHIP Pharmacy Rating
Statewide

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2023)								
Member Months	784		319,887		2,622		966,398	
Experience Period Cost								
Estimated Incurred Claims	2,350	3.00	12,296,946	38.44	90,045	34.34	33,684,852	34.86
Other Costs/Refunds	-110	-0.14	-351,874	-1.10	-1,240	-0.47	-530,355	-0.55
Total Cost	2,240	2.86	11,945,071	37.34	88,805	33.87	33,154,497	34.31
Projected FY2025 Member Months	1,616		311,978		3,980		3,766,980	
Projected FY2025 Premiums								
@ Current Rate	3,490	2.16	11,585,091	37.13	180,891	45.45	124,644,588	33.09
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - PHE Adjustment	1.0000		1.0000		1.0000			
Adjustment 2 - Rx Pricing Efficiency	1.0000		0.9979		0.9990			
Adjustment 3 - Insulin Price Adj.	1.0000		0.9184		0.9702			
Adjustment 4 - Makena	1.0000		0.8721		1.0000			
Adjustment 5 - Hep C Carve-in	1.0000		1.0000		1.0000			
Adjustment 6 - AMP Cap Price Adj.	1.0000		0.9998		1.0000			
Projected FY2025 Incurred Claims	5,285	3.27	10,657,151	34.16	149,582	37.58	150,811,974	40.04
Administrative Expenses	2,585	1.60	499,165	1.60	6,368	1.60	6,027,169	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	8,135	5.03	11,531,075	36.96	161,189	40.50	162,107,641	43.03
Percentage Rate Increase		133.1 %		-0.5 %		-10.9 %		30.1 %

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 2024. The historical claims cost and trend experience were 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 increase in average 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 (FY2023) claims cost to the rating period (FY2025). The trend rate assumptions were developed by the actuary based on an analysis of recent pharmacy claims experience for CHIP clients. 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 2024. Incurred monthly utilization (days supply per member) and cost per service (plan payments per days supply) statistics were developed through February 2024. From this experience, the average annual utilization and cost per service were determined for each of the

seven 12-month periods ending February 2024.

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 into the managed care contract effective September 1, 2018, but they were excluded from the trend analysis due to their extraordinary one-time impact on trends. Please note that i) effective March 1, 2021, Hepatitis C DAAs were carved out of the managed care arrangement due to significant changes to the prior authorization criteria for these medications and ii) effective September 1, 2024, Hepatitis C DAAs will be carved back into managed care. In addition to these drugs, experience for the anti-viral and progestational agent drug classes was removed from our trend analysis. Anti-viral was removed due to the significant variation in the intensity of flu season from year to year. Progestational agent was 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 carve-in drugs were included in the base period experience used in developing the pharmacy component of the rates.

The CHIP pharmacy trend assumptions were developed using the following formula. 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 combining the assumed utilization and cost per service trends 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 7.0%.

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.

FY2025 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 2020.
- (3) Weighted average trend using number of months as weights for each fiscal year.

FY2025 CHIP Rating
Trend Analysis
Pharmacy

	Age <1	Age 1-5	Age 6-14	Age 15-18	CHIP Perinatal	Total	Case-Mix Adjusted
Annual Trend in Days Supply per Member per Month							
All Drugs							
3/2013-2/2014	-7.0 %	-2.3 %	-0.3 %	2.0 %	-2.7 %	-0.3 %	-0.5 %
3/2014-2/2015	42.9 %	4.4 %	0.8 %	-1.3 %	12.9 %	3.2 %	2.5 %
3/2015-2/2016	24.3 %	-2.1 %	-0.7 %	-0.2 %	12.2 %	1.4 %	0.9 %
3/2016-2/2017	-31.1 %	-10.5 %	-3.5 %	-1.9 %	13.8 %	-2.5 %	-1.7 %
3/2017-2/2018	14.6 %	3.5 %	3.4 %	5.2 %	0.8 %	2.2 %	3.3 %
3/2018-2/2019	-14.4 %	-0.3 %	-1.8 %	2.9 %	2.7 %	-0.2 %	0.1 %
3/2019-2/2020	2.7 %	2.1 %	2.0 %	3.6 %	-0.8 %	2.1 %	1.8 %
3/2020-2/2021	-49.6 %	-36.0 %	-19.9 %	-6.4 %	4.6 %	-15.0 %	-15.4 %
3/2021-2/2022	183.8 %	28.6 %	9.0 %	6.7 %	-11.9 %	15.6 %	6.3 %
3/2022-2/2023	-46.9 %	26.0 %	15.4 %	13.8 %	2.2 %	28.0 %	14.1 %
Use	0.1 %	2.6 %	1.9 %	4.9 %	1.4 %	2.9 %	2.5 %

Annual Trend in Incurred Claims per Days Supply

All Drugs							
3/2013-2/2014	-1.4 %	-9.6 %	-3.0 %	6.4 %	18.5 %	-0.5 %	0.1 %
3/2014-2/2015	-15.2 %	-0.3 %	4.9 %	2.3 %	15.5 %	1.1 %	4.6 %
3/2015-2/2016	-6.4 %	-0.7 %	5.6 %	10.5 %	25.5 %	5.1 %	8.1 %
3/2016-2/2017	-0.7 %	-9.2 %	-3.7 %	-7.6 %	11.9 %	-3.0 %	-3.4 %
3/2017-2/2018	6.4 %	-5.3 %	-2.5 %	-1.3 %	5.1 %	-1.4 %	-1.5 %
3/2018-2/2019	-47.0 %	-1.6 %	-1.6 %	-5.8 %	-2.4 %	-2.8 %	-2.7 %
3/2019-2/2020	-8.7 %	-2.7 %	-0.4 %	0.6 %	-10.2 %	-1.9 %	-1.8 %
3/2020-2/2021	-35.2 %	18.3 %	5.2 %	10.1 %	-8.4 %	6.6 %	5.8 %
3/2021-2/2022	249.8 %	-2.3 %	5.0 %	11.3 %	-2.8 %	3.0 %	5.0 %
3/2022-2/2023	135.7 %	6.4 %	10.7 %	4.9 %	-1.0 %	-2.5 %	7.5 %
Use	3.2 %	15.2 %	4.6 %	2.4 %	-3.1 %	4.6 %	4.3 %

Annual Trend in Incurred Claims per Member per Month

All Drugs							
3/2013-2/2014	-8.3 %	-11.7 %	-3.2 %	8.5 %	15.3 %	-0.8 %	-0.9 %
3/2014-2/2015	21.1 %	4.1 %	5.7 %	1.0 %	30.3 %	4.4 %	6.1 %
3/2015-2/2016	16.4 %	-2.8 %	4.8 %	10.4 %	40.7 %	6.6 %	8.1 %
3/2016-2/2017	-31.6 %	-18.7 %	-7.0 %	-9.4 %	27.4 %	-5.5 %	-5.1 %
3/2017-2/2018	21.9 %	-2.0 %	0.8 %	3.9 %	6.0 %	0.8 %	1.9 %
3/2018-2/2019	-54.6 %	-1.8 %	-3.4 %	-3.0 %	0.3 %	-3.0 %	-2.6 %
3/2019-2/2020	-6.3 %	-0.6 %	1.6 %	4.3 %	-10.9 %	0.2 %	0.0 %
3/2020-2/2021	-67.4 %	-24.3 %	-15.7 %	3.1 %	-4.2 %	-9.3 %	-10.7 %
3/2021-2/2022	892.8 %	25.7 %	14.5 %	18.8 %	-14.4 %	19.1 %	12.1 %
3/2022-2/2023	25.3 %	34.1 %	27.8 %	19.3 %	1.1 %	24.8 %	23.0 %
Use	3.3 %	18.2 %	6.6 %	7.4 %	-1.7 %	7.6 %	7.0 %

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 beginning of the base period used in rate setting and before the end of FY2025.

All adjustments have been calculated through an analysis of MCO 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 FY2023 encounter data was repriced using the FFS reimbursement in place during this base period, the FFS reimbursement that will be in place during FY2025 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% or 95%). 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.

Hospital Reimbursement Adjustments

Exhibit A – The rating methodology excludes from the claims experience base any amounts paid by an MCO to a related party in excess of 100% of Medicaid.

Exhibit B – As a result of annual evaluations, several hospitals have had their Standard Dollar Amount (SDA) revised between the base period and FY2025. In addition, increases were applied to the SDA applicable to rural hospital deliveries effective September 1, 2023.

Exhibit C – 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 FY2025. The 10% PPR adjustment is intended to be an incremental 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 D – 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, 2024. As a result, the adjustment factors shown in Exhibit D represent the restoration of those reductions that were in place during the base period net of those reductions that will be in place during FY2025.

Exhibit E – 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, 2024. As a result, the adjustment factors shown in Exhibit E represent the restoration of those reductions that were in place during the base period net of those reductions that will be in place during FY2025.

Exhibit F – During the summer of 2024, Driscoll Rio Grande Valley, a new children's hospital in the Hidalgo SDA, will open on the site of an existing hospital. All non-maternity related hospital care will transition from the existing facility to the new children's hospital which is reimbursed at a significantly higher standard dollar amount.

Provider Reimbursement Adjustments

Exhibit G – Effective March 1, 2024, HHSC made revisions to the reimbursement for clinical lab services.

Exhibit H – Effective September 1, 2023, HHSC will make revisions to the reimbursement for ground ambulance services.

Exhibit I – Effective September 1, 2023, HHSC will make revisions to the reimbursement for private duty nursing services.

Exhibit J – Effective September 1, 2023, HHSC will make revisions to the reimbursement for rural hospital outpatient services.

Exhibit K – Effective September 1, 2023, HHSC will make revisions to the reimbursement for birth and women's health related surgery services.

Exhibit L – Effective September 1, 2023, HHSC will make revisions to the reimbursement for evaluation and management services.

Exhibit M – Effective September 1, 2024, HHSC will make revisions to the reimbursement for dental anesthesia services

Exhibit N – Effective June 1, 2023, HHSC made revisions to the ambulatory surgical center fee schedule.

Other Reimbursement Adjustments

Exhibit O – 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.

FQHC and Other Adjustments

Exhibit P – 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.

Pharmacy Adjustments

Exhibit R – Effective January 1, 2024, the three pharmaceutical manufacturers Eli Lilly, Novo Nordisk and Sanofi reduced the list price for certain insulins by as much as 70%.

Exhibit S – Effective April 7, 2023, Makena and its generic equivalent hydroxyprogesterone were removed from the formulary.

Exhibit T – The base period claims experience excludes gross pharmacy reimbursement in excess of 100% of the Medicaid fee-for-service reimbursement.

Exhibit U – Effective September 1, 2024, Hepatitis C DAA drugs will be carved into managed care and added to capitated services.

Exhibit V – Effective January 1, 2024, a provision in the American Rescue Plan Act of 2021 removed the cap that prevented Medicaid programs from receiving rebate payments that exceed the Average Manufacturer Price (AMP) for a drug.

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

Medical – Inpatient Reimbursement Change
Medical - Provider Reimbursement Change
Medical - Other Reimbursement Change
Medical – FQHC and Other Adjustments

Attachment 5 Exhibits

Exhibits A, B, C, D, E and F
Exhibits G, H, I, J, K, L, M and N
Exhibit O
Exhibit P

Attachment 5 Exhibit Q presents the consolidated adjustment factors that are used in the community rating exhibits included in Attachment 3. The pharmacy adjustments are included separately in Attachment 3.

Please note that the incurred claims reported on Attachment 5 are developed from the FY2023 detail encounter data which only includes claims paid through November 2023. 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 2024, (ii) Attachment 3 incurred claims include a small amount of IBNR where applicable 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 1-4 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 detailed 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.

FY2025 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	0	0	0	0	-392	0	-1,074	-1,466
CHC - Harris	0	-13	-118	-40	0	-17,480	-8	-17,660
TCHP - Harris	0	-188,150	-310,529	-328,197	-728	-55,153	-35,207	-917,964
CHC - Jefferson	0	0	0	0	0	-229	0	-229
TCHP - Jefferson	0	0	-21,654	0	0	0	0	-21,654
Driscoll - Nueces	0	-28,676	-3,581	0	0	0	0	-32,257
All Other	0	0	0	0	0	0	0	0
Total	0	-216,839	-335,883	-328,237	-1,120	-72,861	-36,289	-991,230
FY2023 Total Claims Paid (2)								
Parkland - Dallas	683	620,467	3,956,408	835,262	10,772	8,816,758	83,635	14,323,984
CHC - Harris	5,651	730,023	3,410,568	2,232,894	23,503	17,512,186	119,290	24,034,115
TCHP - Harris	4,817	1,974,299	7,244,527	3,974,033	23,305	14,481,564	165,875	27,868,419
CHC - Jefferson	0	24,500	141,700	114,061	0	860,922	0	1,141,183
TCHP - Jefferson	0	89,354	460,613	137,889	244	878,097	19,066	1,585,263
Driscoll - Nueces	0	368,540	755,102	354,341	415	557,118	12,099	2,047,614
All Other	14,882	6,405,919	24,824,984	12,223,447	379,975	93,804,665	732,390	138,386,262
Total	26,032	10,213,103	40,793,901	19,871,927	438,213	136,911,309	1,132,354	209,386,839
Adjustment Factor by Plan (3)								
Parkland - Dallas	0.00 %	0.00 %	0.00 %	0.00 %	-3.64 %	0.00 %	-1.28 %	-0.01 %
CHC - Harris	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-0.10 %	-0.01 %	-0.07 %
TCHP - Harris	0.00 %	-9.53 %	-4.29 %	-8.26 %	-3.12 %	-0.38 %	-21.22 %	-3.29 %
CHC - Jefferson	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-0.03 %	0.00 %	-0.02 %
TCHP - Jefferson	0.00 %	0.00 %	-4.70 %	0.00 %	0.00 %	0.00 %	0.00 %	-1.37 %
Driscoll - Nueces	0.00 %	-7.78 %	-0.47 %	0.00 %	0.00 %	0.00 %	0.00 %	-1.58 %
All Other	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Total	0.00 %	-2.12 %	-0.82 %	-1.65 %	-0.26 %	-0.05 %	-3.20 %	-0.47 %
Adjustment Factor by SDA (4)								
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 %	-1.51 %	0.00 %	-0.46 %	0.00 %
El Paso	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Harris	0.00 %	-6.83 %	-2.72 %	-4.44 %	-1.03 %	-0.15 %	-8.55 %	0.00 %
Jefferson	0.00 %	0.00 %	-2.92 %	0.00 %	0.00 %	-0.01 %	0.00 %	0.00 %
Lubbock	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Nueces	0.00 %	-7.48 %	-0.40 %	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 %

Footnotes:

- (1) Equals the cost impact from limiting reimbursement to a related party to 100% of Medicaid.
 (2) Equals FY2023 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Cost impact divided by FY23 Total Claims Paid.
 (4) Adjustment factor applied by service delivery area.

FY2025 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	-60	113	-192	-1	-29	-10	-178
Dallas	0	-270	-4,321	-540	46	163	191	-4,731
El Paso	0	-413	-634	-1,399	0	7	15	-2,423
Harris	0	-473	-520	-1,435	104	1,141	1,109	-74
Jefferson	0	0	-71	-23	1	73	6	-15
Lubbock	0	0	1,196	3,847	0	-446	0	4,597
Nueces	0	391	184	67	0	385	24	1,052
RSA	0	-182	13	6,158	290	14,658	8,372	29,310
Tarrant	0	-239	-392	649	-95	8,542	132	8,597
Travis	0	-1	-20	-904	-10	4,007	27	3,100
Total	0	-1,247	-4,450	6,228	335	28,502	9,865	39,233
FY2023 Total Claims Paid (2)								
Bexar	821	564,198	2,634,555	1,206,347	19,596	6,589,422	45,433	11,060,372
Dallas	3,393	1,337,247	7,362,196	2,689,387	22,093	23,325,452	214,119	34,953,886
El Paso	0	332,461	1,094,897	894,535	2,096	1,666,440	17,220	4,007,649
Harris	11,422	3,092,986	11,724,246	6,797,384	70,568	53,212,435	390,282	75,299,323
Jefferson	0	150,343	742,184	330,680	3,488	3,269,662	32,243	4,528,601
Lubbock	3,531	153,267	581,439	202,417	1,116	1,415,358	6,666	2,363,794
Nueces	0	383,745	889,572	435,994	1,430	809,191	15,366	2,535,298
RSA	2,688	2,339,946	8,324,674	3,229,537	30,657	21,459,339	192,192	35,579,034
Tarrant	2,439	1,354,536	5,249,334	1,911,953	270,943	10,177,618	121,408	19,088,230
Travis	1,738	504,374	2,190,804	2,173,693	16,226	14,986,391	97,424	19,970,651
Total	26,032	10,213,103	40,793,901	19,871,927	438,213	136,911,309	1,132,354	209,386,839
Rate Adjustment (3)								
Bexar	0.00 %	-0.01 %	0.00 %	-0.02 %	-0.01 %	0.00 %	-0.02 %	0.00 %
Dallas	0.00 %	-0.02 %	-0.06 %	-0.02 %	0.21 %	0.00 %	0.09 %	-0.01 %
El Paso	0.00 %	-0.12 %	-0.06 %	-0.16 %	0.00 %	0.00 %	0.08 %	-0.06 %
Harris	0.00 %	-0.02 %	0.00 %	-0.02 %	0.15 %	0.00 %	0.28 %	0.00 %
Jefferson	0.00 %	0.00 %	-0.01 %	-0.01 %	0.03 %	0.00 %	0.02 %	0.00 %
Lubbock	0.00 %	0.00 %	0.21 %	1.90 %	0.00 %	-0.03 %	0.00 %	0.19 %
Nueces	0.00 %	0.10 %	0.02 %	0.02 %	0.00 %	0.05 %	0.16 %	0.04 %
RSA	0.00 %	-0.01 %	0.00 %	0.19 %	0.95 %	0.07 %	4.36 %	0.08 %
Tarrant	0.00 %	-0.02 %	-0.01 %	0.03 %	-0.04 %	0.08 %	0.11 %	0.05 %
Travis	0.00 %	0.00 %	0.00 %	-0.04 %	-0.06 %	0.03 %	0.03 %	0.02 %
Total	0.00 %	-0.01 %	-0.01 %	0.03 %	0.08 %	0.02 %	0.87 %	0.02 %

Footnotes:

- (1) Equals the cost impact from reimbursement changes for inpatient SDA changes effective 9/1/2023 and 9/1/2024.
 (2) Equals FY2023 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Cost impact divided by FY23 Total Claims Paid.

FY2025 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	0	-890	-978	0	0	0	-1,867
Dallas	0	0	-11,082	0	0	0	0	-11,082
El Paso	0	0	-446	-1,979	0	0	0	-2,425
Harris	0	-12,421	-20,704	-9,515	0	0	0	-42,640
Jefferson	0	0	0	-1,110	0	0	0	-1,110
Lubbock	0	0	0	0	0	0	0	0
Nueces	0	0	0	0	0	0	0	0
RSA	0	0	-12,223	-1,253	0	0	0	-13,476
Tarrant	0	0	-4,057	-4,351	0	0	0	-8,408
Travis	0	0	-5,230	-1,342	0	0	0	-6,572
Total	0	-12,421	-54,632	-20,528	0	0	0	-87,581
FY2023 Total Claims Paid (2)								
Bexar	821	564,198	2,634,555	1,206,347	19,596	6,589,422	45,433	11,060,372
Dallas	3,393	1,337,247	7,362,196	2,689,387	22,093	23,325,452	214,119	34,953,886
El Paso	0	332,461	1,094,897	894,535	2,096	1,666,440	17,220	4,007,649
Harris	11,422	3,092,986	11,724,246	6,797,384	70,568	53,212,435	390,282	75,299,323
Jefferson	0	150,343	742,184	330,680	3,488	3,269,662	32,243	4,528,601
Lubbock	3,531	153,267	581,439	202,417	1,116	1,415,358	6,666	2,363,794
Nueces	0	383,745	889,572	435,994	1,430	809,191	15,366	2,535,298
RSA	2,688	2,339,946	8,324,674	3,229,537	30,657	21,459,339	192,192	35,579,034
Tarrant	2,439	1,354,536	5,249,334	1,911,953	270,943	10,177,618	121,408	19,088,230
Travis	1,738	504,374	2,190,804	2,173,693	16,226	14,986,391	97,424	19,970,651
Total	26,032	10,213,103	40,793,901	19,871,927	438,213	136,911,309	1,132,354	209,386,839
Rate Adjustment (3)								
Bexar	0.00 %	0.00 %	-0.03 %	-0.08 %	0.00 %	0.00 %	0.00 %	-0.02 %
Dallas	0.00 %	0.00 %	-0.15 %	0.00 %	0.00 %	0.00 %	0.00 %	-0.03 %
El Paso	0.00 %	0.00 %	-0.04 %	-0.22 %	0.00 %	0.00 %	0.00 %	-0.06 %
Harris	0.00 %	-0.40 %	-0.18 %	-0.14 %	0.00 %	0.00 %	0.00 %	-0.06 %
Jefferson	0.00 %	0.00 %	0.00 %	-0.34 %	0.00 %	0.00 %	0.00 %	-0.02 %
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 %	-0.15 %	-0.04 %	0.00 %	0.00 %	0.00 %	-0.04 %
Tarrant	0.00 %	0.00 %	-0.08 %	-0.23 %	0.00 %	0.00 %	0.00 %	-0.04 %
Travis	0.00 %	0.00 %	-0.24 %	-0.06 %	0.00 %	0.00 %	0.00 %	-0.03 %
Total	0.00 %	-0.12 %	-0.13 %	-0.10 %	0.00 %	0.00 %	0.00 %	-0.04 %

Footnotes:

- (1) Equals the cost impact from a 10% reduction in PPR events.
 (2) Equals FY2023 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Cost impact divided by FY23 Total Claims Paid.

FY2025 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	-25	-378	-695	-4	-115	-34	-1,250
Dallas	0	0	-267	60	-4	-19	36	-193
El Paso	0	39	0	0	0	16	19	74
Harris	0	0	546	262	147	350	602	1,908
Jefferson	0	0	0	0	0	-59	179	120
Lubbock	0	0	62	0	0	25	0	87
Nueces	0	0	-77	-52	0	-328	-19	-475
RSA	0	0	-140	-542	3	204	37	-438
Tarrant	0	0	-108	-166	2	-443	-42	-757
Travis	0	0	516	736	87	3,525	97	4,961
Total	0	14	155	-396	231	3,156	876	4,036
FY2023 Total Claims Paid (2)								
Bexar	821	564,198	2,634,555	1,206,347	19,596	6,589,422	45,433	11,060,372
Dallas	3,393	1,337,247	7,362,196	2,689,387	22,093	23,325,452	214,119	34,953,886
El Paso	0	332,461	1,094,897	894,535	2,096	1,666,440	17,220	4,007,649
Harris	11,422	3,092,986	11,724,246	6,797,384	70,568	53,212,435	390,282	75,299,323
Jefferson	0	150,343	742,184	330,680	3,488	3,269,662	32,243	4,528,601
Lubbock	3,531	153,267	581,439	202,417	1,116	1,415,358	6,666	2,363,794
Nueces	0	383,745	889,572	435,994	1,430	809,191	15,366	2,535,298
RSA	2,688	2,339,946	8,324,674	3,229,537	30,657	21,459,339	192,192	35,579,034
Tarrant	2,439	1,354,536	5,249,334	1,911,953	270,943	10,177,618	121,408	19,088,230
Travis	1,738	504,374	2,190,804	2,173,693	16,226	14,986,391	97,424	19,970,651
Total	26,032	10,213,103	40,793,901	19,871,927	438,213	136,911,309	1,132,354	209,386,839
Rate Adjustment (3)								
Bexar	0.00 %	0.00 %	-0.01 %	-0.06 %	-0.02 %	0.00 %	-0.07 %	-0.01 %
Dallas	0.00 %	0.00 %	0.00 %	0.00 %	-0.02 %	0.00 %	0.02 %	0.00 %
El Paso	0.00 %	0.01 %	0.00 %	0.00 %	0.00 %	0.00 %	0.11 %	0.00 %
Harris	0.00 %	0.00 %	0.00 %	0.00 %	0.21 %	0.00 %	0.15 %	0.00 %
Jefferson	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.56 %	0.00 %
Lubbock	0.00 %	0.00 %	0.01 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Nueces	0.00 %	0.00 %	-0.01 %	-0.01 %	0.00 %	-0.04 %	-0.12 %	-0.02 %
RSA	0.00 %	0.00 %	0.00 %	-0.02 %	0.01 %	0.00 %	0.02 %	0.00 %
Tarrant	0.00 %	0.00 %	0.00 %	-0.01 %	0.00 %	0.00 %	-0.03 %	0.00 %
Travis	0.00 %	0.00 %	0.02 %	0.03 %	0.53 %	0.02 %	0.10 %	0.02 %
Total	0.00 %	0.00 %	0.00 %	0.00 %	0.05 %	0.00 %	0.08 %	0.00 %

Footnotes:

- (1) Equals the net cost/savings resulting from PPR reductions that will become effective 9/1/2024 versus those effective during FY2023.
 (2) Equals FY2023 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Cost impact divided by FY23 Total Claims Paid.

FY2025 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	-614	-4,634	-2,560	0	1	-57	-7,865
Dallas	0	0	762	2,754	17	214	274	4,021
El Paso	0	262	532	-1,049	0	0	51	-204
Harris	0	584	6,453	2,554	78	246	1,118	11,032
Jefferson	0	0	53	88	0	0	2	144
Lubbock	0	0	-105	407	0	-61	0	241
Nueces	0	3,511	439	3	0	0	-37	3,916
RSA	0	1,858	4,164	3,338	81	9	276	9,726
Tarrant	0	5,792	7,125	4,487	5,044	1,546	467	24,461
Travis	0	0	0	603	20	3,084	113	3,819
Total	0	11,393	14,788	10,624	5,240	5,039	2,207	49,292
FY2023 Total Claims Paid (2)								
Bexar	821	564,198	2,634,555	1,206,347	19,596	6,589,422	45,433	11,060,372
Dallas	3,393	1,337,247	7,362,196	2,689,387	22,093	23,325,452	214,119	34,953,886
El Paso	0	332,461	1,094,897	894,535	2,096	1,666,440	17,220	4,007,649
Harris	11,422	3,092,986	11,724,246	6,797,384	70,568	53,212,435	390,282	75,299,323
Jefferson	0	150,343	742,184	330,680	3,488	3,269,662	32,243	4,528,601
Lubbock	3,531	153,267	581,439	202,417	1,116	1,415,358	6,666	2,363,794
Nueces	0	383,745	889,572	435,994	1,430	809,191	15,366	2,535,298
RSA	2,688	2,339,946	8,324,674	3,229,537	30,657	21,459,339	192,192	35,579,034
Tarrant	2,439	1,354,536	5,249,334	1,911,953	270,943	10,177,618	121,408	19,088,230
Travis	1,738	504,374	2,190,804	2,173,693	16,226	14,986,391	97,424	19,970,651
Total	26,032	10,213,103	40,793,901	19,871,927	438,213	136,911,309	1,132,354	209,386,839
Rate Adjustment (3)								
Bexar	0.00 %	-0.11 %	-0.18 %	-0.21 %	0.00 %	0.00 %	-0.13 %	-0.07 %
Dallas	0.00 %	0.00 %	0.01 %	0.10 %	0.08 %	0.00 %	0.13 %	0.01 %
El Paso	0.00 %	0.08 %	0.05 %	-0.12 %	0.00 %	0.00 %	0.30 %	-0.01 %
Harris	0.00 %	0.02 %	0.06 %	0.04 %	0.11 %	0.00 %	0.29 %	0.01 %
Jefferson	0.00 %	0.00 %	0.01 %	0.03 %	0.01 %	0.00 %	0.01 %	0.00 %
Lubbock	0.00 %	0.00 %	-0.02 %	0.20 %	0.00 %	0.00 %	0.00 %	0.01 %
Nueces	0.00 %	0.92 %	0.05 %	0.00 %	0.00 %	0.00 %	-0.24 %	0.15 %
RSA	0.00 %	0.08 %	0.05 %	0.10 %	0.27 %	0.00 %	0.14 %	0.03 %
Tarrant	0.00 %	0.43 %	0.14 %	0.23 %	1.86 %	0.02 %	0.38 %	0.13 %
Travis	0.00 %	0.00 %	0.00 %	0.03 %	0.12 %	0.02 %	0.12 %	0.02 %
Total	0.00 %	0.11 %	0.04 %	0.05 %	1.20 %	0.00 %	0.19 %	0.02 %

Footnotes:

- (1) Equals the net cost/savings resulting from PPC reductions that will become effective 9/1/2024 versus those effective during FY2023.
 (2) Equals FY2023 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Cost impact divided by FY23 Total Claims Paid.

FY2025 CHIP Rating
 Inpatient Hospital Reimbursement Change
 Driscoll RGV Reimbursement 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	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	6,241	112,104	111,939	1,844	6,617	0	238,746
Tarrant	0	0	0	0	0	0	0	0
Travis	0	0	0	0	0	0	0	0
Total	0	6,241	112,104	111,939	1,844	6,617	0	238,746
FY2023 Total Claims Paid (2)								
Bexar	821	564,198	2,634,555	1,206,347	19,596	6,589,422	45,433	11,060,372
Dallas	3,393	1,337,247	7,362,196	2,689,387	22,093	23,325,452	214,119	34,953,886
El Paso	0	332,461	1,094,897	894,535	2,096	1,666,440	17,220	4,007,649
Harris	11,422	3,092,986	11,724,246	6,797,384	70,568	53,212,435	390,282	75,299,323
Jefferson	0	150,343	742,184	330,680	3,488	3,269,662	32,243	4,528,601
Lubbock	3,531	153,267	581,439	202,417	1,116	1,415,358	6,666	2,363,794
Nueces	0	383,745	889,572	435,994	1,430	809,191	15,366	2,535,298
RSA	2,688	2,339,946	8,324,674	3,229,537	30,657	21,459,339	192,192	35,579,034
Tarrant	2,439	1,354,536	5,249,334	1,911,953	270,943	10,177,618	121,408	19,088,230
Travis	1,738	504,374	2,190,804	2,173,693	16,226	14,986,391	97,424	19,970,651
Total	26,032	10,213,103	40,793,901	19,871,927	438,213	136,911,309	1,132,354	209,386,839
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 %	0.27 %	1.35 %	3.47 %	6.02 %	0.03 %	0.00 %	0.67 %
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 %	0.06 %	0.27 %	0.56 %	0.42 %	0.00 %	0.00 %	0.11 %

Footnotes:

- (1) Equals the cost impact from shifting utilization to Driscoll RGV effective September 1, 2024.
- (2) Equals FY2023 health plan fee-for-service claims for all services (IHP provided encounter data).
- (3) Cost impact divided by FY23 Total Claims Paid.

FY2025 CHIP Rating
 Provider Reimbursement Change
 Clinical Lab 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	-1,125	-4,869	-1,281	0	-698	0	-7,973
Dallas	-7	-3,920	-13,467	-3,153	0	-4,022	-30	-24,599
El Paso	0	-1,471	-4,719	-1,235	0	-41	0	-7,466
Harris	0	-6,444	-19,804	-4,488	-15	-4,345	-39	-35,135
Jefferson	0	-480	-1,099	-456	-8	-330	0	-2,374
Lubbock	-8	-248	-1,379	-277	0	-38	0	-1,950
Nueces	0	-522	-2,347	-789	0	-67	0	-3,725
RSA	-21	-7,339	-23,569	-7,003	-24	572	0	-37,384
Tarrant	-8	-3,403	-10,554	-2,623	-25	-856	-11	-17,480
Travis	0	-1,717	-5,913	-1,025	0	-747	-8	-9,409
Total	-44	-26,669	-87,720	-22,331	-72	-10,571	-88	-147,494
FY2023 Total Claims Paid (2)								
Bexar	821	564,198	2,634,555	1,206,347	19,596	6,589,422	45,433	11,060,372
Dallas	3,393	1,337,247	7,362,196	2,689,387	22,093	23,325,452	214,119	34,953,886
El Paso	0	332,461	1,094,897	894,535	2,096	1,666,440	17,220	4,007,649
Harris	11,422	3,092,986	11,724,246	6,797,384	70,568	53,212,435	390,282	75,299,323
Jefferson	0	150,343	742,184	330,680	3,488	3,269,662	32,243	4,528,601
Lubbock	3,531	153,267	581,439	202,417	1,116	1,415,358	6,666	2,363,794
Nueces	0	383,745	889,572	435,994	1,430	809,191	15,366	2,535,298
RSA	2,688	2,339,946	8,324,674	3,229,537	30,657	21,459,339	192,192	35,579,034
Tarrant	2,439	1,354,536	5,249,334	1,911,953	270,943	10,177,618	121,408	19,088,230
Travis	1,738	504,374	2,190,804	2,173,693	16,226	14,986,391	97,424	19,970,651
Total	26,032	10,213,103	40,793,901	19,871,927	438,213	136,911,309	1,132,354	209,386,839
Rate Adjustment (3)								
Bexar	0.00 %	-0.20 %	-0.18 %	-0.11 %	0.00 %	-0.01 %	0.00 %	-0.07 %
Dallas	-0.20 %	-0.29 %	-0.18 %	-0.12 %	0.00 %	-0.02 %	-0.01 %	-0.07 %
El Paso	0.00 %	-0.44 %	-0.43 %	-0.14 %	0.00 %	0.00 %	0.00 %	-0.19 %
Harris	0.00 %	-0.21 %	-0.17 %	-0.07 %	-0.02 %	-0.01 %	-0.01 %	-0.05 %
Jefferson	0.00 %	-0.32 %	-0.15 %	-0.14 %	-0.24 %	-0.01 %	0.00 %	-0.05 %
Lubbock	-0.23 %	-0.16 %	-0.24 %	-0.14 %	0.00 %	0.00 %	0.00 %	-0.08 %
Nueces	0.00 %	-0.14 %	-0.26 %	-0.18 %	0.00 %	-0.01 %	0.00 %	-0.15 %
RSA	-0.80 %	-0.31 %	-0.28 %	-0.22 %	-0.08 %	0.00 %	0.00 %	-0.11 %
Tarrant	-0.34 %	-0.25 %	-0.20 %	-0.14 %	-0.01 %	-0.01 %	-0.01 %	-0.09 %
Travis	0.00 %	-0.34 %	-0.27 %	-0.05 %	0.00 %	0.00 %	-0.01 %	-0.05 %
Total	-0.17 %	-0.26 %	-0.22 %	-0.11 %	-0.02 %	-0.01 %	-0.01 %	-0.07 %

Footnotes:

- (1) Equals the cost impact from reimbursement changes for clinical lab changes effective 3/1/2024.
 (2) Equals FY2023 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Cost impact divided by FY23 Total Claims Paid.

FY2025 CHIP Rating
 Provider Reimbursement Change
 Ground Ambulance 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	41	354	219	0	212	0	826
Dallas	0	133	1,848	1,256	0	411	0	3,647
El Paso	0	57	115	159	0	78	0	409
Harris	0	329	912	411	0	1,019	13	2,683
Jefferson	0	0	171	382	0	115	0	667
Lubbock	0	0	1,056	15	0	344	0	1,415
Nueces	0	70	486	196	0	86	0	837
RSA	0	298	2,324	726	0	3,191	0	6,540
Tarrant	0	224	755	336	22	158	0	1,496
Travis	0	27	248	121	0	427	0	823
Total	0	1,179	8,268	3,821	22	6,040	13	19,343
FY2023 Total Claims Paid (2)								
Bexar	821	564,198	2,634,555	1,206,347	19,596	6,589,422	45,433	11,060,372
Dallas	3,393	1,337,247	7,362,196	2,689,387	22,093	23,325,452	214,119	34,953,886
El Paso	0	332,461	1,094,897	894,535	2,096	1,666,440	17,220	4,007,649
Harris	11,422	3,092,986	11,724,246	6,797,384	70,568	53,212,435	390,282	75,299,323
Jefferson	0	150,343	742,184	330,680	3,488	3,269,662	32,243	4,528,601
Lubbock	3,531	153,267	581,439	202,417	1,116	1,415,358	6,666	2,363,794
Nueces	0	383,745	889,572	435,994	1,430	809,191	15,366	2,535,298
RSA	2,688	2,339,946	8,324,674	3,229,537	30,657	21,459,339	192,192	35,579,034
Tarrant	2,439	1,354,536	5,249,334	1,911,953	270,943	10,177,618	121,408	19,088,230
Travis	1,738	504,374	2,190,804	2,173,693	16,226	14,986,391	97,424	19,970,651
Total	26,032	10,213,103	40,793,901	19,871,927	438,213	136,911,309	1,132,354	209,386,839
Rate Adjustment (3)								
Bexar	0.00 %	0.01 %	0.01 %	0.02 %	0.00 %	0.00 %	0.00 %	0.01 %
Dallas	0.00 %	0.01 %	0.03 %	0.05 %	0.00 %	0.00 %	0.00 %	0.01 %
El Paso	0.00 %	0.02 %	0.01 %	0.02 %	0.00 %	0.00 %	0.00 %	0.01 %
Harris	0.00 %	0.01 %	0.01 %	0.01 %	0.00 %	0.00 %	0.00 %	0.00 %
Jefferson	0.00 %	0.00 %	0.02 %	0.12 %	0.00 %	0.00 %	0.00 %	0.01 %
Lubbock	0.00 %	0.00 %	0.18 %	0.01 %	0.00 %	0.02 %	0.00 %	0.06 %
Nueces	0.00 %	0.02 %	0.05 %	0.04 %	0.00 %	0.01 %	0.00 %	0.03 %
RSA	0.00 %	0.01 %	0.03 %	0.02 %	0.00 %	0.01 %	0.00 %	0.02 %
Tarrant	0.00 %	0.02 %	0.01 %	0.02 %	0.01 %	0.00 %	0.00 %	0.01 %
Travis	0.00 %	0.01 %	0.01 %	0.01 %	0.00 %	0.00 %	0.00 %	0.00 %
Total	0.00 %	0.01 %	0.02 %	0.02 %	0.01 %	0.00 %	0.00 %	0.01 %

Footnotes:

- (1) Equals the cost impact from reimbursement changes for ground ambulance effective 9/1/2023.
- (2) Equals FY2023 health plan fee-for-service claims for all services (ICHP provided encounter data).
- (3) Cost impact divided by FY23 Total Claims Paid.

FY2025 CHIP Rating
 Provider Reimbursement Change
 Private Duty Nursing Reimbursement 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	0	2,513	0	0	0	0	2,513
Dallas	0	0	3,431	0	0	0	0	3,431
El Paso	0	0	0	0	0	0	0	0
Harris	0	1,437	1,154	0	0	0	0	2,591
Jefferson	0	0	0	0	0	0	0	0
Lubbock	0	43	0	0	0	0	0	43
Nueces	0	0	0	0	0	0	0	0
RSA	0	216	0	418	0	0	0	633
Tarrant	0	0	1,675	0	0	0	0	1,675
Travis	0	0	640	0	0	0	0	640
Total	0	1,695	9,413	418	0	0	0	11,526
FY2023 Total Claims Paid (2)								
Bexar	821	564,198	2,634,555	1,206,347	19,596	6,589,422	45,433	11,060,372
Dallas	3,393	1,337,247	7,362,196	2,689,387	22,093	23,325,452	214,119	34,953,886
El Paso	0	332,461	1,094,897	894,535	2,096	1,666,440	17,220	4,007,649
Harris	11,422	3,092,986	11,724,246	6,797,384	70,568	53,212,435	390,282	75,299,323
Jefferson	0	150,343	742,184	330,680	3,488	3,269,662	32,243	4,528,601
Lubbock	3,531	153,267	581,439	202,417	1,116	1,415,358	6,666	2,363,794
Nueces	0	383,745	889,572	435,994	1,430	809,191	15,366	2,535,298
RSA	2,688	2,339,946	8,324,674	3,229,537	30,657	21,459,339	192,192	35,579,034
Tarrant	2,439	1,354,536	5,249,334	1,911,953	270,943	10,177,618	121,408	19,088,230
Travis	1,738	504,374	2,190,804	2,173,693	16,226	14,986,391	97,424	19,970,651
Total	26,032	10,213,103	40,793,901	19,871,927	438,213	136,911,309	1,132,354	209,386,839
Rate Adjustment (3)								
Bexar	0.00 %	0.00 %	0.10 %	0.00 %	0.00 %	0.00 %	0.00 %	0.02 %
Dallas	0.00 %	0.00 %	0.05 %	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 %	0.05 %	0.01 %	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 %	0.03 %	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 %	0.01 %	0.00 %	0.01 %	0.00 %	0.00 %	0.00 %	0.00 %
Tarrant	0.00 %	0.00 %	0.03 %	0.00 %	0.00 %	0.00 %	0.00 %	0.01 %
Travis	0.00 %	0.00 %	0.03 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Total	0.00 %	0.02 %	0.02 %	0.00 %	0.00 %	0.00 %	0.00 %	0.01 %

Footnotes:

- (1) Equals the cost impact from changes to private duty nursing reimbursement effective 9/1/2023.
- (2) Equals FY2023 health plan fee-for-service claims for all services (ICHP provided encounter data).
- (3) Cost impact divided by FY23 Total Claims Paid.

FY2025 CHIP Rating
 Provider Reimbursement Change
 Outpatient Rural Hospital Reimbursement 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	459	3,330	2,097	0	88	0	5,973
Dallas	0	103	-2	-42	0	204	0	264
El Paso	0	0	0	0	0	0	0	0
Harris	0	910	4,354	5,999	0	9,080	148	20,492
Jefferson	0	305	5,360	2,296	0	309	0	8,270
Lubbock	0	1,301	2,927	2,672	0	17,909	50	24,860
Nueces	0	924	4,369	2,734	0	5,005	0	13,033
RSA	0	10,770	44,704	29,820	59	90,236	979	176,567
Tarrant	0	2,542	1,568	942	0	2,366	0	7,418
Travis	0	-50	9,298	2,422	0	3,547	-46	15,171
Total	0	17,265	75,908	48,939	59	128,743	1,132	272,046
FY2023 Total Claims Paid (2)								
Bexar	821	564,198	2,634,555	1,206,347	19,596	6,589,422	45,433	11,060,372
Dallas	3,393	1,337,247	7,362,196	2,689,387	22,093	23,325,452	214,119	34,953,886
El Paso	0	332,461	1,094,897	894,535	2,096	1,666,440	17,220	4,007,649
Harris	11,422	3,092,986	11,724,246	6,797,384	70,568	53,212,435	390,282	75,299,323
Jefferson	0	150,343	742,184	330,680	3,488	3,269,662	32,243	4,528,601
Lubbock	3,531	153,267	581,439	202,417	1,116	1,415,358	6,666	2,363,794
Nueces	0	383,745	889,572	435,994	1,430	809,191	15,366	2,535,298
RSA	2,688	2,339,946	8,324,674	3,229,537	30,657	21,459,339	192,192	35,579,034
Tarrant	2,439	1,354,536	5,249,334	1,911,953	270,943	10,177,618	121,408	19,088,230
Travis	1,738	504,374	2,190,804	2,173,693	16,226	14,986,391	97,424	19,970,651
Total	26,032	10,213,103	40,793,901	19,871,927	438,213	136,911,309	1,132,354	209,386,839
Rate Adjustment (3)								
Bexar	0.00 %	0.08 %	0.13 %	0.17 %	0.00 %	0.00 %	0.00 %	0.05 %
Dallas	0.00 %	0.01 %	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 %	0.03 %	0.04 %	0.09 %	0.00 %	0.02 %	0.04 %	0.03 %
Jefferson	0.00 %	0.20 %	0.72 %	0.69 %	0.00 %	0.01 %	0.00 %	0.18 %
Lubbock	0.00 %	0.85 %	0.50 %	1.32 %	0.00 %	1.27 %	0.75 %	1.05 %
Nueces	0.00 %	0.24 %	0.49 %	0.63 %	0.00 %	0.62 %	0.00 %	0.51 %
RSA	0.00 %	0.46 %	0.54 %	0.92 %	0.19 %	0.42 %	0.51 %	0.50 %
Tarrant	0.00 %	0.19 %	0.03 %	0.05 %	0.00 %	0.02 %	0.00 %	0.04 %
Travis	0.00 %	-0.01 %	0.42 %	0.11 %	0.00 %	0.02 %	-0.05 %	0.08 %
Total	0.00 %	0.17 %	0.19 %	0.25 %	0.01 %	0.09 %	0.10 %	0.13 %

Footnotes:

- (1) Equals the cost impact from reimbursement changes for outpatient rural hospital services effective 9/1/2023.
 (2) Equals FY2023 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Cost impact divided by FY23 Total Claims Paid.

FY2025 CHIP Rating
 Provider Reimbursement Change
 Birth and Women's Health Related Surgeries 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	0	35	25	0	73,424	278	73,763
Dallas	0	0	4	7	0	226,677	1,528	228,216
El Paso	0	0	0	41	0	22,693	147	22,882
Harris	0	0	93	251	0	530,859	2,586	533,789
Jefferson	0	0	0	89	0	35,203	178	35,469
Lubbock	0	0	0	2	0	15,661	47	15,710
Nueces	0	0	0	0	0	10,973	42	11,015
RSA	0	0	135	143	0	257,167	1,313	258,758
Tarrant	0	0	0	165	0	134,129	1,123	135,416
Travis	0	0	0	0	0	110,120	671	110,790
Total	0	0	267	723	0	1,416,906	7,912	1,425,809
FY2023 Total Claims Paid (2)								
Bexar	821	564,198	2,634,555	1,206,347	19,596	6,589,422	45,433	11,060,372
Dallas	3,393	1,337,247	7,362,196	2,689,387	22,093	23,325,452	214,119	34,953,886
El Paso	0	332,461	1,094,897	894,535	2,096	1,666,440	17,220	4,007,649
Harris	11,422	3,092,986	11,724,246	6,797,384	70,568	53,212,435	390,282	75,299,323
Jefferson	0	150,343	742,184	330,680	3,488	3,269,662	32,243	4,528,601
Lubbock	3,531	153,267	581,439	202,417	1,116	1,415,358	6,666	2,363,794
Nueces	0	383,745	889,572	435,994	1,430	809,191	15,366	2,535,298
RSA	2,688	2,339,946	8,324,674	3,229,537	30,657	21,459,339	192,192	35,579,034
Tarrant	2,439	1,354,536	5,249,334	1,911,953	270,943	10,177,618	121,408	19,088,230
Travis	1,738	504,374	2,190,804	2,173,693	16,226	14,986,391	97,424	19,970,651
Total	26,032	10,213,103	40,793,901	19,871,927	438,213	136,911,309	1,132,354	209,386,839
Rate Adjustment (3)								
Bexar	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	1.11 %	0.61 %	0.67 %
Dallas	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.97 %	0.71 %	0.65 %
El Paso	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	1.36 %	0.86 %	0.57 %
Harris	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	1.00 %	0.66 %	0.71 %
Jefferson	0.00 %	0.00 %	0.00 %	0.03 %	0.00 %	1.08 %	0.55 %	0.78 %
Lubbock	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	1.11 %	0.71 %	0.66 %
Nueces	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	1.36 %	0.27 %	0.43 %
RSA	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	1.20 %	0.68 %	0.73 %
Tarrant	0.00 %	0.00 %	0.00 %	0.01 %	0.00 %	1.32 %	0.92 %	0.71 %
Travis	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.73 %	0.69 %	0.55 %
Total	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	1.03 %	0.70 %	0.68 %

Footnotes:

- (1) Equals the cost impact from changes to birth and women's health related surgery reimbursement effective 9/1/2023.
 (2) Equals FY2023 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Cost impact divided by FY23 Total Claims Paid.

FY2025 CHIP Rating
 Provider Reimbursement Change
 Evaluation & Management 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	29	5,710	9,499	25,770	1,017	3,481	8	45,514
Dallas	49	10,951	16,887	49,732	534	12,718	29	90,899
El Paso	0	3,674	7,948	17,195	89	849	10	29,765
Harris	161	31,740	45,431	121,319	1,018	20,000	32	219,700
Jefferson	0	1,726	3,079	7,624	56	1,264	0	13,750
Lubbock	46	1,274	1,807	5,824	53	363	0	9,367
Nueces	0	1,923	3,649	9,182	27	384	0	15,164
RSA	64	17,480	28,821	74,211	608	9,964	10	131,159
Tarrant	60	9,786	13,909	39,878	1,050	3,683	5	68,371
Travis	2	3,931	5,962	17,311	108	2,042	31	29,387
Total	412	88,196	136,994	368,044	4,561	54,749	124	653,079
FY2023 Total Claims Paid (2)								
Bexar	821	564,198	2,634,555	1,206,347	19,596	6,589,422	45,433	11,060,372
Dallas	3,393	1,337,247	7,362,196	2,689,387	22,093	23,325,452	214,119	34,953,886
El Paso	0	332,461	1,094,897	894,535	2,096	1,666,440	17,220	4,007,649
Harris	11,422	3,092,986	11,724,246	6,797,384	70,568	53,212,435	390,282	75,299,323
Jefferson	0	150,343	742,184	330,680	3,488	3,269,662	32,243	4,528,601
Lubbock	3,531	153,267	581,439	202,417	1,116	1,415,358	6,666	2,363,794
Nueces	0	383,745	889,572	435,994	1,430	809,191	15,366	2,535,298
RSA	2,688	2,339,946	8,324,674	3,229,537	30,657	21,459,339	192,192	35,579,034
Tarrant	2,439	1,354,536	5,249,334	1,911,953	270,943	10,177,618	121,408	19,088,230
Travis	1,738	504,374	2,190,804	2,173,693	16,226	14,986,391	97,424	19,970,651
Total	26,032	10,213,103	40,793,901	19,871,927	438,213	136,911,309	1,132,354	209,386,839
Rate Adjustment (3)								
Bexar	3.54 %	1.01 %	0.36 %	2.14 %	5.19 %	0.05 %	0.02 %	0.41 %
Dallas	1.45 %	0.82 %	0.23 %	1.85 %	2.42 %	0.05 %	0.01 %	0.26 %
El Paso	0.00 %	1.11 %	0.73 %	1.92 %	4.27 %	0.05 %	0.06 %	0.74 %
Harris	1.41 %	1.03 %	0.39 %	1.78 %	1.44 %	0.04 %	0.01 %	0.29 %
Jefferson	0.00 %	1.15 %	0.41 %	2.31 %	1.61 %	0.04 %	0.00 %	0.30 %
Lubbock	1.31 %	0.83 %	0.31 %	2.88 %	4.73 %	0.03 %	0.00 %	0.40 %
Nueces	0.00 %	0.50 %	0.41 %	2.11 %	1.90 %	0.05 %	0.00 %	0.60 %
RSA	2.39 %	0.75 %	0.35 %	2.30 %	1.98 %	0.05 %	0.01 %	0.37 %
Tarrant	2.46 %	0.72 %	0.26 %	2.09 %	0.39 %	0.04 %	0.00 %	0.36 %
Travis	0.12 %	0.78 %	0.27 %	0.80 %	0.67 %	0.01 %	0.03 %	0.15 %
Total	1.58 %	0.86 %	0.34 %	1.85 %	1.04 %	0.04 %	0.01 %	0.31 %

Footnotes:

- (1) Equals the cost impact from reimbursement changes for evaluation & management effective 9/1/2023.
 (2) Equals FY2023 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Cost impact divided by FY23 Total Claims Paid.

FY2025 CHIP Rating
 Provider Reimbursement Change
 Dental Anesthesia 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	3,842	5,908	4,752	0	0	0	14,502
Dallas	0	3,114	7,298	1,584	0	0	0	11,996
El Paso	0	1,584	5,335	792	0	0	0	7,712
Harris	0	5,505	13,288	3,168	0	0	0	21,961
Jefferson	0	1,544	1,584	0	0	0	0	3,129
Lubbock	0	1,505	713	0	0	0	0	2,218
Nueces	0	2,315	3,799	0	0	0	0	6,114
RSA	0	22,325	16,622	19,009	0	0	0	57,955
Tarrant	0	8,267	10,000	0	0	0	0	18,267
Travis	0	5,044	1,881	0	0	0	0	6,925
Total	0	55,045	66,428	29,305	0	0	0	150,779
FY2023 Total Claims Paid (2)								
Bexar	821	564,198	2,634,555	1,206,347	19,596	6,589,422	45,433	11,060,372
Dallas	3,393	1,337,247	7,362,196	2,689,387	22,093	23,325,452	214,119	34,953,886
El Paso	0	332,461	1,094,897	894,535	2,096	1,666,440	17,220	4,007,649
Harris	11,422	3,092,986	11,724,246	6,797,384	70,568	53,212,435	390,282	75,299,323
Jefferson	0	150,343	742,184	330,680	3,488	3,269,662	32,243	4,528,601
Lubbock	3,531	153,267	581,439	202,417	1,116	1,415,358	6,666	2,363,794
Nueces	0	383,745	889,572	435,994	1,430	809,191	15,366	2,535,298
RSA	2,688	2,339,946	8,324,674	3,229,537	30,657	21,459,339	192,192	35,579,034
Tarrant	2,439	1,354,536	5,249,334	1,911,953	270,943	10,177,618	121,408	19,088,230
Travis	1,738	504,374	2,190,804	2,173,693	16,226	14,986,391	97,424	19,970,651
Total	26,032	10,213,103	40,793,901	19,871,927	438,213	136,911,309	1,132,354	209,386,839
Rate Adjustment (3)								
Bexar	0.00 %	0.68 %	0.22 %	0.39 %	0.00 %	0.00 %	0.00 %	0.13 %
Dallas	0.00 %	0.23 %	0.10 %	0.06 %	0.00 %	0.00 %	0.00 %	0.03 %
El Paso	0.00 %	0.48 %	0.49 %	0.09 %	0.00 %	0.00 %	0.00 %	0.19 %
Harris	0.00 %	0.18 %	0.11 %	0.05 %	0.00 %	0.00 %	0.00 %	0.03 %
Jefferson	0.00 %	1.03 %	0.21 %	0.00 %	0.00 %	0.00 %	0.00 %	0.07 %
Lubbock	0.00 %	0.98 %	0.12 %	0.00 %	0.00 %	0.00 %	0.00 %	0.09 %
Nueces	0.00 %	0.60 %	0.43 %	0.00 %	0.00 %	0.00 %	0.00 %	0.24 %
RSA	0.00 %	0.95 %	0.20 %	0.59 %	0.00 %	0.00 %	0.00 %	0.16 %
Tarrant	0.00 %	0.61 %	0.19 %	0.00 %	0.00 %	0.00 %	0.00 %	0.10 %
Travis	0.00 %	1.00 %	0.09 %	0.00 %	0.00 %	0.00 %	0.00 %	0.03 %
Total	0.00 %	0.54 %	0.16 %	0.15 %	0.00 %	0.00 %	0.00 %	0.07 %

Footnotes:

- (1) Equals the cost impact from reimbursement changes for dental anesthesia effective 9/1/2024.
 (2) Equals FY2023 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Cost impact divided by FY23 Total Claims Paid.

FY2025 CHIP Rating
 Provider Reimbursement Change
 ASC 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	5,566	12,090	23,069	0	762	120	41,607
Dallas	0	13,096	51,185	31,883	0	5,001	-3	101,162
El Paso	0	304	8,860	6,528	0	-7	130	15,815
Harris	0	12,176	99,150	20,147	0	9,268	130	140,871
Jefferson	0	1,582	5,322	3,208	0	236	0	10,348
Lubbock	0	5	3,455	1,297	0	160	0	4,918
Nueces	0	2	460	1,746	0	129	0	2,337
RSA	0	9,654	54,923	87,986	0	2,236	0	154,799
Tarrant	0	7,971	19,849	23,183	0	579	0	51,581
Travis	0	1,575	9,046	3,722	0	1,135	0	15,478
Total	0	51,930	264,341	202,769	0	19,498	377	538,915
FY2023 Total Claims Paid (2)								
Bexar	821	564,198	2,634,555	1,206,347	19,596	6,589,422	45,433	11,060,372
Dallas	3,393	1,337,247	7,362,196	2,689,387	22,093	23,325,452	214,119	34,953,886
El Paso	0	332,461	1,094,897	894,535	2,096	1,666,440	17,220	4,007,649
Harris	11,422	3,092,986	11,724,246	6,797,384	70,568	53,212,435	390,282	75,299,323
Jefferson	0	150,343	742,184	330,680	3,488	3,269,662	32,243	4,528,601
Lubbock	3,531	153,267	581,439	202,417	1,116	1,415,358	6,666	2,363,794
Nueces	0	383,745	889,572	435,994	1,430	809,191	15,366	2,535,298
RSA	2,688	2,339,946	8,324,674	3,229,537	30,657	21,459,339	192,192	35,579,034
Tarrant	2,439	1,354,536	5,249,334	1,911,953	270,943	10,177,618	121,408	19,088,230
Travis	1,738	504,374	2,190,804	2,173,693	16,226	14,986,391	97,424	19,970,651
Total	26,032	10,213,103	40,793,901	19,871,927	438,213	136,911,309	1,132,354	209,386,839
Rate Adjustment (3)								
Bexar	0.00 %	0.99 %	0.46 %	1.91 %	0.00 %	0.01 %	0.27 %	0.38 %
Dallas	0.00 %	0.98 %	0.70 %	1.19 %	0.00 %	0.02 %	0.00 %	0.29 %
El Paso	0.00 %	0.09 %	0.81 %	0.73 %	0.00 %	0.00 %	0.75 %	0.39 %
Harris	0.00 %	0.39 %	0.85 %	0.30 %	0.00 %	0.02 %	0.03 %	0.19 %
Jefferson	0.00 %	1.05 %	0.72 %	0.97 %	0.00 %	0.01 %	0.00 %	0.23 %
Lubbock	0.00 %	0.00 %	0.59 %	0.64 %	0.00 %	0.01 %	0.00 %	0.21 %
Nueces	0.00 %	0.00 %	0.05 %	0.40 %	0.00 %	0.02 %	0.00 %	0.09 %
RSA	0.00 %	0.41 %	0.66 %	2.72 %	0.00 %	0.01 %	0.00 %	0.44 %
Tarrant	0.00 %	0.59 %	0.38 %	1.21 %	0.00 %	0.01 %	0.00 %	0.27 %
Travis	0.00 %	0.31 %	0.41 %	0.17 %	0.00 %	0.01 %	0.00 %	0.08 %
Total	0.00 %	0.51 %	0.65 %	1.02 %	0.00 %	0.01 %	0.03 %	0.26 %

Footnotes:

- (1) Equals the cost impact from reimbursement changes for ASC.
 (2) Equals FY2023 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Cost impact divided by FY23 Total Claims Paid.

FY2025 CHIP Rating
 Other Reimbursement Adjustments
 Remove Invalid 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	0	-9	0	0	0	0	-9
Dallas	0	0	0	-3,791	0	0	0	-3,791
El Paso	0	0	0	0	0	0	0	0
Harris	0	0	-24,047	-16	0	-6	0	-24,070
Jefferson	0	0	0	-5	0	0	0	-5
Lubbock	0	0	-8	0	0	0	0	-8
Nueces	0	0	0	0	0	0	0	0
RSA	0	-5	-231	0	0	0	0	-236
Tarrant	0	0	0	0	0	0	0	0
Travis	0	-107	0	-121	0	0	0	-228
Total	0	-112	-24,295	-3,934	0	-6	0	-28,347
FY2023 Total Claims Paid (2)								
Bexar	821	564,198	2,634,555	1,206,347	19,596	6,589,422	45,433	11,060,372
Dallas	3,393	1,337,247	7,362,196	2,689,387	22,093	23,325,452	214,119	34,953,886
El Paso	0	332,461	1,094,897	894,535	2,096	1,666,440	17,220	4,007,649
Harris	11,422	3,092,986	11,724,246	6,797,384	70,568	53,212,435	390,282	75,299,323
Jefferson	0	150,343	742,184	330,680	3,488	3,269,662	32,243	4,528,601
Lubbock	3,531	153,267	581,439	202,417	1,116	1,415,358	6,666	2,363,794
Nueces	0	383,745	889,572	435,994	1,430	809,191	15,366	2,535,298
RSA	2,688	2,339,946	8,324,674	3,229,537	30,657	21,459,339	192,192	35,579,034
Tarrant	2,439	1,354,536	5,249,334	1,911,953	270,943	10,177,618	121,408	19,088,230
Travis	1,738	504,374	2,190,804	2,173,693	16,226	14,986,391	97,424	19,970,651
Total	26,032	10,213,103	40,793,901	19,871,927	438,213	136,911,309	1,132,354	209,386,839
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 %	-0.14 %	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 %	0.00 %	-0.21 %	0.00 %	0.00 %	0.00 %	0.00 %	-0.03 %
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 %	-0.02 %	0.00 %	-0.01 %	0.00 %	0.00 %	0.00 %	0.00 %
Total	0.00 %	0.00 %	-0.06 %	-0.02 %	0.00 %	0.00 %	0.00 %	-0.01 %

Footnotes:

- (1) Equals the cost impact from removing invalid CADs.
- (2) Equals FY2023 health plan fee-for-service claims for all services (ICHP provided encounter data).
- (3) Cost impact divided by FY23 Total Claims Paid.

FY2025 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	0	-40,549	-153,856	-57,768	-312	-743,578	-5,031	-1,001,095
Dallas	-925	-20,230	-78,326	-23,965	-383	-917,594	-9,001	-1,050,424
El Paso	0	-1,275	-17,142	-15,599	0	-3,777	0	-37,793
Harris	-419	-156,290	-967,977	-358,457	-1,772	-7,024,883	-28,568	-8,538,366
Jefferson	0	-7,702	-42,359	-16,041	-107	-235,396	-662	-302,266
Lubbock	0	-852	-27,614	-30,035	0	-92,997	-230	-151,728
Nueces	0	-5,174	-32,050	-12,015	0	-30,557	0	-79,795
RSA	-306	-92,297	-431,663	-196,060	-2,532	-2,703,632	-9,593	-3,436,083
Tarrant	-229	-4,999	-23,166	-9,347	0	-765,542	-6,075	-809,358
Travis	-1,387	-67,265	-288,518	-99,343	-2,274	-5,618,842	-27,098	-6,104,727
Total	-3,265	-396,632	-2,062,670	-818,629	-7,381	-18,136,798	-86,258	-21,511,634
FY2023 Total Claims Paid (2)								
Bexar	821	564,198	2,634,555	1,206,347	19,596	6,589,422	45,433	11,060,372
Dallas	3,393	1,337,247	7,362,196	2,689,387	22,093	23,325,452	214,119	34,953,886
El Paso	0	332,461	1,094,897	894,535	2,096	1,666,440	17,220	4,007,649
Harris	11,422	3,092,986	11,724,246	6,797,384	70,568	53,212,435	390,282	75,299,323
Jefferson	0	150,343	742,184	330,680	3,488	3,269,662	32,243	4,528,601
Lubbock	3,531	153,267	581,439	202,417	1,116	1,415,358	6,666	2,363,794
Nueces	0	383,745	889,572	435,994	1,430	809,191	15,366	2,535,298
RSA	2,688	2,339,946	8,324,674	3,229,537	30,657	21,459,339	192,192	35,579,034
Tarrant	2,439	1,354,536	5,249,334	1,911,953	270,943	10,177,618	121,408	19,088,230
Travis	1,738	504,374	2,190,804	2,173,693	16,226	14,986,391	97,424	19,970,651
Total	26,032	10,213,103	40,793,901	19,871,927	438,213	136,911,309	1,132,354	209,386,839
Rate Adjustment (3)								
Bexar	0.00 %	-7.19 %	-5.84 %	-4.79 %	-1.59 %	-11.28 %	-11.07 %	-9.05 %
Dallas	-27.25 %	-1.51 %	-1.06 %	-0.89 %	-1.73 %	-3.93 %	-4.20 %	-3.01 %
El Paso	0.00 %	-0.38 %	-1.57 %	-1.74 %	0.00 %	-0.23 %	0.00 %	-0.94 %
Harris	-3.67 %	-5.05 %	-8.26 %	-5.27 %	-2.51 %	-13.20 %	-7.32 %	-11.34 %
Jefferson	0.00 %	-5.12 %	-5.71 %	-4.85 %	-3.06 %	-7.20 %	-2.05 %	-6.67 %
Lubbock	0.00 %	-0.56 %	-4.75 %	-14.84 %	0.00 %	-6.57 %	-3.45 %	-6.42 %
Nueces	0.00 %	-1.35 %	-3.60 %	-2.76 %	0.00 %	-3.78 %	0.00 %	-3.15 %
RSA	-11.40 %	-3.94 %	-5.19 %	-6.07 %	-8.26 %	-12.60 %	-4.99 %	-9.66 %
Tarrant	-9.37 %	-0.37 %	-0.44 %	-0.49 %	0.00 %	-7.52 %	-5.00 %	-4.24 %
Travis	-79.76 %	-13.34 %	-13.17 %	-4.57 %	-14.02 %	-37.49 %	-27.81 %	-30.57 %
Total	-12.54 %	-3.88 %	-5.06 %	-4.12 %	-1.68 %	-13.25 %	-7.62 %	-10.27 %

Footnotes:

- (1) Equals the cost impact from removing FQHC wrap payments from the capitation rate.
- (2) Equals FY2023 health plan fee-for-service claims for all services (ICHP provided encounter data).
- (3) Cost impact divided by FY23 Total Claims Paid.

FY2025 CHIP Rating
 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 - Inpatient Reimbursement Change Factor (1)							
Bexar	1.0000	0.9988	0.9978	0.9963	0.9997	1.0000	0.9978
Dallas	1.0000	0.9998	0.9980	1.0008	0.9875	1.0000	0.9978
El Paso	1.0000	0.9997	0.9995	0.9950	1.0000	1.0000	1.0049
Harris	1.0000	0.9280	0.9717	0.9545	0.9943	0.9985	0.9211
Jefferson	1.0000	1.0000	0.9708	0.9968	1.0004	0.9999	1.0059
Lubbock	1.0000	1.0000	1.0020	1.0210	1.0000	0.9997	1.0000
Nueces	1.0000	0.9346	0.9966	1.0001	1.0000	1.0001	0.9980
RSA	1.0000	1.0034	1.0125	1.0371	1.0733	1.0010	1.0453
Tarrant	1.0000	1.0041	1.0005	1.0002	1.0182	1.0010	1.0046
Travis	1.0000	1.0000	0.9978	0.9996	1.0059	1.0007	1.0025
Medical - Provider Reimbursement Change Factor (2)							
Bexar	1.0354	1.0259	1.0110	1.0458	1.0519	1.0116	1.0090
Dallas	1.0125	1.0177	1.0093	1.0305	1.0242	1.0102	1.0071
El Paso	1.0000	1.0126	1.0161	1.0263	1.0427	1.0141	1.0168
Harris	1.0141	1.0148	1.0124	1.0217	1.0142	1.0107	1.0073
Jefferson	1.0000	1.0314	1.0194	1.0403	1.0137	1.0113	1.0055
Lubbock	1.0108	1.0255	1.0147	1.0477	1.0473	1.0246	1.0147
Nueces	1.0000	1.0122	1.0117	1.0302	1.0190	1.0206	1.0027
RSA	1.0157	1.0230	1.0151	1.0647	1.0209	1.0170	1.0120
Tarrant	1.0211	1.0189	1.0070	1.0326	1.0039	1.0138	1.0091
Travis	1.0012	1.0176	1.0096	1.0104	1.0067	1.0077	1.0066
Medical - Other Reimbursement Change Factor (3)							
Bexar	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Dallas	1.0000	1.0000	1.0000	0.9986	1.0000	1.0000	1.0000
El Paso	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Harris	1.0000	1.0000	0.9979	1.0000	1.0000	1.0000	1.0000
Jefferson	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Lubbock	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Nueces	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
RSA	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Tarrant	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Travis	1.0000	0.9998	1.0000	0.9999	1.0000	1.0000	1.0000
Medical - Other Adjustments (4)							
Bexar	1.0000	0.9281	0.9416	0.9521	0.9841	0.8872	0.8893
Dallas	0.7275	0.9849	0.9894	0.9911	0.9827	0.9607	0.9580
El Paso	1.0000	0.9962	0.9843	0.9826	1.0000	0.9977	1.0000
Harris	0.9633	0.9495	0.9174	0.9473	0.9749	0.8680	0.9268
Jefferson	1.0000	0.9488	0.9429	0.9515	0.9694	0.9280	0.9795
Lubbock	1.0000	0.9944	0.9525	0.8516	1.0000	0.9343	0.9655
Nueces	1.0000	0.9865	0.9640	0.9724	1.0000	0.9622	1.0000
RSA	0.8860	0.9606	0.9481	0.9393	0.9174	0.8740	0.9501
Tarrant	0.9063	0.9963	0.9956	0.9951	1.0000	0.9248	0.9500
Travis	0.2024	0.8666	0.8683	0.9543	0.8598	0.6251	0.7219

<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>
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Footnotes:

- (1) The Inpatient Reimbursement Change Factor consolidates the following adjustments
 - Exhibit A - Limit Reimbursement to Related Parties
 - Exhibit B - Hospital Reimbursement Changes - Standard Dollar Amount
 - Exhibit C - Potentially Preventable Readmission (PPR) Quality Improvement Reduction
 - Exhibit D - Potentially Preventable Readmission (PPR) Adjustment
 - Exhibit E - Potentially Preventable Complication (PPC) Adjustment
 - Exhibit F - Driscoll RGV Reimbursement Adjustment

- (2) The Provider Reimbursement Change Factor consolidates the following adjustments
 - Exhibit G - Clinical Lab Reimbursement Changes
 - Exhibit H - Ground Ambulance Reimbursement Changes
 - Exhibit I - Private Duty Nursing Reimbursement Adjustments
 - Exhibit J - Outpatient Rural Hospital Reimbursement Adjustment
 - Exhibit K - Birth and Women's Health Related Surgeries Reimbursement Change
 - Exhibit L - Evaluation & Management Reimbursement Change
 - Exhibit M - Dental Anesthesia Reimbursement Changes
 - Exhibit N - ASC Reimbursement Changes

- (3) The Other Reimbursement Change Factor consolidates the following adjustments
 - Exhibit O - Remove Invalid CAD Encounters

- (4) The FQHC & Other Adjustments Factors consolidates the following adjustments
 - Exhibit P - FQHC Wrap Payment Carve Out

FY2025 CHIP Rating
 Pharmacy Rating Adjustment
 Insulin Reimbursement Change Adjustment

	< 1	1-5	6-14	15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	0	-21,959	-16,771	0	-73,544	0	-112,274
Dallas	0	-902	-18,672	-48,284	0	-153,421	-1,394	-222,672
El Paso	0	0	-10,892	-1,372	0	-13,947	0	-26,211
Harris	0	-666	-59,683	-49,796	0	-299,311	-595	-410,051
Jefferson	0	0	-18,889	-8,392	0	-17,728	0	-45,009
Lubbock	0	0	-3,425	-5,688	0	-8,692	0	-17,806
Nueces	0	0	-1,703	-2,139	0	-8,397	0	-12,240
RSA	0	-1,291	-70,258	-52,406	0	-228,143	-212	-352,310
Tarrant	0	-1,261	-61,769	-44,574	0	-101,360	-775	-209,739
Travis	0	-363	-16,421	-4,025	0	-90,191	0	-111,000
Total	0	-4,483	-283,670	-233,446	0	-994,736	-2,976	-1,519,311
FY2023 Total Incurred Claims (2)								
Bexar	0	204,985	1,585,547	568,564	0	598,424	861	2,958,381
Dallas	272	209,941	1,604,008	928,364	13	1,309,443	11,004	4,063,044
El Paso	0	28,394	444,501	126,421	0	182,082	632	782,031
Harris	124	327,429	3,122,511	2,620,089	133	5,673,225	44,780	11,788,291
Jefferson	0	43,872	308,477	108,609	0	372,632	1,347	834,937
Lubbock	3,205	10,606	164,174	419,149	0	97,954	1,005	696,094
Nueces	0	19,790	326,125	173,836	14	98,410	839	619,014
RSA	24	337,531	2,903,884	1,117,237	88	2,295,788	13,705	6,668,258
Tarrant	4,865	353,690	1,212,167	491,414	17	1,075,304	10,026	3,147,482
Travis	0	32,040	807,143	660,482	2,581	432,340	3,287	1,937,873
Total	8,490	1,568,277	12,478,537	7,214,165	2,847	12,135,603	87,486	33,495,405
Rate Adjustment (3)								
Bexar	0.00 %	0.00 %	-1.38 %	-2.95 %	0.00 %	-12.29 %	0.00 %	-3.80 %
Dallas	0.00 %	-0.43 %	-1.16 %	-5.20 %	0.00 %	-11.72 %	-12.67 %	-5.48 %
El Paso	0.00 %	0.00 %	-2.45 %	-1.09 %	0.00 %	-7.66 %	0.00 %	-3.35 %
Harris	0.00 %	-0.20 %	-1.91 %	-1.90 %	0.00 %	-5.28 %	-1.33 %	-3.48 %
Jefferson	0.00 %	0.00 %	-6.12 %	-7.73 %	0.00 %	-4.76 %	0.00 %	-5.39 %
Lubbock	0.00 %	0.00 %	-2.09 %	-1.36 %	0.00 %	-8.87 %	0.00 %	-2.56 %
Nueces	0.00 %	0.00 %	-0.52 %	-1.23 %	0.00 %	-8.53 %	0.00 %	-1.98 %
RSA	0.00 %	-0.38 %	-2.42 %	-4.69 %	0.00 %	-9.94 %	-1.54 %	-5.28 %
Tarrant	0.00 %	-0.36 %	-5.10 %	-9.07 %	0.00 %	-9.43 %	-7.73 %	-6.66 %
Travis	0.00 %	-1.13 %	-2.03 %	-0.61 %	0.00 %	-20.86 %	0.00 %	-5.73 %
Total	0.00 %	-0.29 %	-2.27 %	-3.24 %	0.00 %	-8.20 %	-3.40 %	-4.54 %

Footnotes:

- (1) Equals the cost impact from price reduction for insulins effective January 1, 2024.
- (2) Equals FY2023 health plan prescription drug claims paid.
- (3) Cost impact divided by FY2023 Total Incurred Claims.

FY2025 CHIP Rating
 Pharmacy Rating Adjustment
 Makena Non-Formulary Adjustment

	< 1	1-5	6-14	15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	0	0	0	0	-77,592	0	-77,592
Dallas	0	0	0	0	0	-136,755	0	-136,755
El Paso	0	0	0	0	0	-37,590	0	-37,590
Harris	0	0	0	0	0	-622,354	0	-622,354
Jefferson	0	0	0	0	0	-69,174	0	-69,174
Lubbock	0	0	0	0	0	-318	0	-318
Nueces	0	0	0	0	0	-16,974	0	-16,974
RSA	0	0	0	0	0	-352,288	0	-352,288
Tarrant	0	0	0	0	0	-212,266	0	-212,266
Travis	0	0	0	0	0	-7,886	0	-7,886
Total	0	0	0	0	0	-1,533,198	0	-1,533,198
FY2023 Total Incurred Claims (2)								
Bexar	0	204,985	1,585,547	568,564	0	598,424	861	2,958,381
Dallas	272	209,941	1,604,008	928,364	13	1,309,443	11,004	4,063,044
El Paso	0	28,394	444,501	126,421	0	182,082	632	782,031
Harris	124	327,429	3,122,511	2,620,089	133	5,673,225	44,780	11,788,291
Jefferson	0	43,872	308,477	108,609	0	372,632	1,347	834,937
Lubbock	3,205	10,606	164,174	419,149	0	97,954	1,005	696,094
Nueces	0	19,790	326,125	173,836	14	98,410	839	619,014
RSA	24	337,531	2,903,884	1,117,237	88	2,295,788	13,705	6,668,258
Tarrant	4,865	353,690	1,212,167	491,414	17	1,075,304	10,026	3,147,482
Travis	0	32,040	807,143	660,482	2,581	432,340	3,287	1,937,873
Total	8,490	1,568,277	12,478,537	7,214,165	2,847	12,135,603	87,486	33,495,405
Rate Adjustment (3)								
Bexar	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-12.97 %	0.00 %	-2.62 %
Dallas	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-10.44 %	0.00 %	-3.37 %
El Paso	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-20.64 %	0.00 %	-4.81 %
Harris	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-10.97 %	0.00 %	-5.28 %
Jefferson	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-18.56 %	0.00 %	-8.28 %
Lubbock	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-0.32 %	0.00 %	-0.05 %
Nueces	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-17.25 %	0.00 %	-2.74 %
RSA	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-15.34 %	0.00 %	-5.28 %
Tarrant	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-19.74 %	0.00 %	-6.74 %
Travis	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-1.82 %	0.00 %	-0.41 %
Total	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-12.63 %	0.00 %	-4.58 %

Footnotes:

- (1) Equals the cost impact from removing Makena from the formulary effective April 7, 2023.
- (2) Equals FY2023 health plan prescription drug claims paid.
- (3) Cost impact divided by FY2023 Total Incurred Claims.

FY2025 CHIP Rating
 Pharmacy Rating Adjustment
 Rx Efficiency Reimbursement Adjustment

	< 1	1-5	6-14	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	-1,097	-6,760	-7,486	0	-24,491	-87	-39,921
Jefferson	0	-147	-2,188	-917	0	-1,549	0	-4,801
Lubbock	0	0	0	0	0	0	0	0
Nueces	0	-9	-52	-128	0	-209	0	-398
RSA	0	0	0	0	0	0	0	0
Tarrant	0	0	0	0	0	0	0	0
Travis	0	0	0	0	0	0	0	0
Total	0	-1,254	-9,000	-8,531	0	-26,248	-87	-45,120
FY2023 Total Incurred Claims (2)								
Bexar	0	204,985	1,585,547	568,564	0	598,424	861	2,958,381
Dallas	272	209,941	1,604,008	928,364	13	1,309,443	11,004	4,063,044
El Paso	0	28,394	444,501	126,421	0	182,082	632	782,031
Harris	124	327,429	3,122,511	2,620,089	133	5,673,225	44,780	11,788,291
Jefferson	0	43,872	308,477	108,609	0	372,632	1,347	834,937
Lubbock	3,205	10,606	164,174	419,149	0	97,954	1,005	696,094
Nueces	0	19,790	326,125	173,836	14	98,410	839	619,014
RSA	24	337,531	2,903,884	1,117,237	88	2,295,788	13,705	6,668,258
Tarrant	4,865	353,690	1,212,167	491,414	17	1,075,304	10,026	3,147,482
Travis	0	32,040	807,143	660,482	2,581	432,340	3,287	1,937,873
Total	8,490	1,568,277	12,478,537	7,214,165	2,847	12,135,603	87,486	33,495,405
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 %	-0.34 %	-0.22 %	-0.29 %	0.00 %	-0.43 %	-0.19 %	-0.34 %
Jefferson	0.00 %	-0.34 %	-0.71 %	-0.84 %	0.00 %	-0.42 %	0.00 %	-0.58 %
Lubbock	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Nueces	0.00 %	-0.05 %	-0.02 %	-0.07 %	0.00 %	-0.21 %	0.00 %	-0.06 %
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 %	-0.08 %	-0.07 %	-0.12 %	0.00 %	-0.22 %	-0.10 %	-0.13 %

Footnotes:

- (1) Equals the cost impact from limiting managed care pharmacy reimbursement to be no more than FFS reimbursement.
 (2) Equals FY2023 health plan prescription drug claims paid.
 (3) Cost impact divided by FY2023 Total Incurred Claims.

FY2025 CHIP Rating
 Pharmacy Rating Adjustment
 Hepatitis C Carve-in Adjustment

	<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>	<u>Total</u>
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	30,364	0	0	0	30,364
Travis	0	0	0	0	0	0	0	0
Total	0	0	0	30,364	0	0	0	30,364
FY2023 Total Incurred Claims (2)								
Bexar	0	204,985	1,585,547	568,564	0	598,424	861	2,958,381
Dallas	272	209,941	1,604,008	928,364	13	1,309,443	11,004	4,063,044
El Paso	0	28,394	444,501	126,421	0	182,082	632	782,031
Harris	124	327,429	3,122,511	2,620,089	133	5,673,225	44,780	11,788,291
Jefferson	0	43,872	308,477	108,609	0	372,632	1,347	834,937
Lubbock	3,205	10,606	164,174	419,149	0	97,954	1,005	696,094
Nueces	0	19,790	326,125	173,836	14	98,410	839	619,014
RSA	24	337,531	2,903,884	1,117,237	88	2,295,788	13,705	6,668,258
Tarrant	4,865	353,690	1,212,167	491,414	17	1,075,304	10,026	3,147,482
Travis	0	32,040	807,143	660,482	2,581	432,340	3,287	1,937,873
Total	8,490	1,568,277	12,478,537	7,214,165	2,847	12,135,603	87,486	33,495,405
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 %	6.18 %	0.00 %	0.00 %	0.00 %	0.96 %
Travis	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Total	0.00 %	0.00 %	0.00 %	0.42 %	0.00 %	0.00 %	0.00 %	0.09 %

Footnotes:

- (1) Equals the cost impact from carving in Hepatitis C effective 9/1/2024.
- (2) Equals FY2023 health plan prescription drug claims paid.
- (3) Cost impact divided by FY2023 Total Incurred Claims.

FY2025 CHIP Rating
 Pharmacy Rating Adjustment
 AMP-Cap Removal Price Adjustment

	< 1	1-5	6-14	15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	-301	-6,523	-3,702	0	-209	0	-10,735
Dallas	0	-741	-8,560	-3,689	0	-427	0	-13,417
El Paso	0	-795	-1,310	-401	0	0	0	-2,505
Harris	0	-416	-5,152	-3,566	0	-1,769	0	-10,903
Jefferson	0	0	-154	-1,583	0	0	0	-1,737
Lubbock	0	0	-1,507	-119	0	0	0	-1,627
Nueces	0	-1,005	-637	-186	0	0	0	-1,828
RSA	0	-1,433	-10,593	-5,650	0	-102	0	-17,777
Tarrant	0	-1,899	-5,731	-1,456	0	-382	0	-9,469
Travis	0	-260	-3,009	-706	0	0	0	-3,974
Total	0	-6,850	-43,175	-21,058	0	-2,889	0	-73,973
FY2023 Total Incurred Claims (2)								
Bexar	0	204,985	1,585,547	568,564	0	598,424	861	2,958,381
Dallas	272	209,941	1,604,008	928,364	13	1,309,443	11,004	4,063,044
El Paso	0	28,394	444,501	126,421	0	182,082	632	782,031
Harris	124	327,429	3,122,511	2,620,089	133	5,673,225	44,780	11,788,291
Jefferson	0	43,872	308,477	108,609	0	372,632	1,347	834,937
Lubbock	3,205	10,606	164,174	419,149	0	97,954	1,005	696,094
Nueces	0	19,790	326,125	173,836	14	98,410	839	619,014
RSA	24	337,531	2,903,884	1,117,237	88	2,295,788	13,705	6,668,258
Tarrant	4,865	353,690	1,212,167	491,414	17	1,075,304	10,026	3,147,482
Travis	0	32,040	807,143	660,482	2,581	432,340	3,287	1,937,873
Total	8,490	1,568,277	12,478,537	7,214,165	2,847	12,135,603	87,486	33,495,405
Rate Adjustment (3)								
Bexar	0.00 %	-0.15 %	-0.41 %	-0.65 %	0.00 %	-0.03 %	0.00 %	-0.36 %
Dallas	0.00 %	-0.35 %	-0.53 %	-0.40 %	0.00 %	-0.03 %	0.00 %	-0.33 %
El Paso	0.00 %	-2.80 %	-0.29 %	-0.32 %	0.00 %	0.00 %	0.00 %	-0.32 %
Harris	0.00 %	-0.13 %	-0.16 %	-0.14 %	0.00 %	-0.03 %	0.00 %	-0.09 %
Jefferson	0.00 %	0.00 %	-0.05 %	-1.46 %	0.00 %	0.00 %	0.00 %	-0.21 %
Lubbock	0.00 %	0.00 %	-0.92 %	-0.03 %	0.00 %	0.00 %	0.00 %	-0.23 %
Nueces	0.00 %	-5.08 %	-0.20 %	-0.11 %	0.00 %	0.00 %	0.00 %	-0.30 %
RSA	0.00 %	-0.42 %	-0.36 %	-0.51 %	0.00 %	0.00 %	0.00 %	-0.27 %
Tarrant	0.00 %	-0.54 %	-0.47 %	-0.30 %	0.00 %	-0.04 %	0.00 %	-0.30 %
Travis	0.00 %	-0.81 %	-0.37 %	-0.11 %	0.00 %	0.00 %	0.00 %	-0.21 %
Total	0.00 %	-0.44 %	-0.35 %	-0.29 %	0.00 %	-0.02 %	0.00 %	-0.22 %

Footnotes:

- (1) Equals the cost impact from price reduction for Advair, Symbicort and Victoza from AMP Cap removal.
 (2) Equals FY2023 health plan prescription drug claims paid.
 (3) Cost impact divided by FY2023 Total Incurred Claims.

Attachment 6

PHE Related Cost Adjustment

The COVID-19 pandemic and the resulting PHE had a significant impact on the CHIP program. Beginning March 2020, enrollment steadily declined while the average cost for all services initially declined and then increased to levels higher than pre-PHE levels for most risk groups. The enrollment decline was due to the Medicaid continuous enrollment provision during the PHE included in the Families First Coronavirus Response Act (FFCRA), while the varying cost patterns are due to many factors including mandatory shutdowns, mask mandates, social distancing, other environmental factors as well as inherent differences in cost between historically eligible members and members that remain in the program after the PHE.

With the expiration of the PHE on May 11, 2023, HHSC has begun the PHE unwind process for the Medicaid programs, which is expected to span a twelve-month period. HHSC began disenrollments on June 1, 2023 and has prioritized members into three cohorts:

- Cohort 1 - Individuals likely to be ineligible
- Cohort 2 - Individuals likely to transfer to another HHSC program
- Cohort 3 - Individuals likely to remain eligible

Current Medicaid members are spread throughout these cohorts based on known eligibility information and type program/type of assistance but are not specific to Medicaid program. Each cohort contains members from any Medicaid program and the disenrollments and renewals are staggered throughout the twelve-month period with the majority occurring in the first six months. Based on the planned PHE unwinding process and detailed information regarding the specific Medicaid members within each cohort and their expected redetermination dates, HHS Forecasting has developed projected caseload forecasts for each Medicaid and CHIP program by month, service delivery area, MCO and risk group through the end of FY2025.

Given that the FY2023 base period was impacted by the PHE and the expected disenrollments that will occur prior to FY2025, it is necessary to calculate an adjustment factor to properly estimate the impact of the PHE unwind process. The PHE impact was not uniform across all Medicaid and CHIP programs and the adjustment factors calculated are specific to the populations being rated based on historical program-specific experience.

Medical and Pharmacy Adjustment

In order to estimate the impact of the PHE unwind on the FY2025 CHIP average costs, we have analyzed the base period claims along with enrollment and disenrollment information through February 2024. The PHE unwinding process resulted in members being disenrolled from Medicaid dental and transferring to CHIP dental for qualified members. Members that transferred from Medicaid to CHIP from the unwinding process were defined as individuals enrolled in the Medicaid program during the FY2023 base period and enrolled in CHIP as of February 2024. The PHE adjustment was determined by comparing (1) the FY2023 base period PMPM average cost to (2) the FY2023 average cost including members who transferred from Medicaid to CHIP. The attached exhibit presents a summary of the derivation of the adjustment factors.

The methodology described above assumes that all impacted members will unwind and be disenrolled prior to the FY2025 rating period. In other words, the calculated adjustment factors represent the full impact of the PHE.

FY2025 CHIP Rating
 Medical Rating Adjustment
 PHE Related Cost Adjustment

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%
FY2023 PMPM - Actual (1)							
Bexar	58.66	100.53	82.32	93.39	445.37	383.78	326.86
Dallas	84.83	122.32	111.74	101.77	143.46	346.66	401.72
El Paso	-	128.96	67.87	129.19	149.71	308.14	246.00
Harris	228.44	167.63	113.07	161.53	325.20	492.98	563.18
Jefferson	-	105.36	80.15	89.79	249.17	476.00	871.44
Lubbock	588.49	106.29	70.20	62.11	58.74	400.50	151.51
Nueces	-	240.89	93.76	108.70	178.73	407.65	320.13
RSA	89.60	150.64	94.61	84.58	200.37	377.33	401.24
Tarrant	76.20	151.75	110.41	107.57	3,044.30	359.42	336.31
Travis	86.92	102.79	83.87	220.77	235.16	611.56	446.90
Total	134.19	143.04	100.38	120.36	561.09	428.00	431.87
Projected FY2023 PMPM - Includes CHIP transferring over from STAR (2)							
Bexar	59.25	156.19	88.56	109.93	445.37	383.78	326.86
Dallas	82.49	232.41	110.37	116.20	143.46	346.66	401.72
El Paso	-	158.97	84.52	146.37	149.71	308.14	246.00
Harris	325.02	213.40	116.92	142.85	325.20	492.98	563.18
Jefferson	-	222.30	97.47	117.75	249.17	476.00	871.44
Lubbock	594.37	223.17	77.34	88.36	58.74	400.50	151.51
Nueces	-	233.97	124.60	165.78	178.73	407.65	320.13
RSA	90.50	188.83	97.59	107.65	200.37	377.33	401.24
Tarrant	76.97	171.09	107.42	113.65	3,044.30	359.42	336.31
Travis	87.79	176.92	96.64	164.96	235.16	611.56	446.90
Total	158.85	197.72	104.43	124.86	561.09	428.00	431.87
PHE Adjustment Factor (3)							
Bexar	1.0100	1.5536	1.0757	1.1771	1.0000	1.0000	1.0000
Dallas	1.0000	1.9000	1.0000	1.1418	1.0000	1.0000	1.0000
El Paso	1.0000	1.2327	1.2454	1.1330	1.0000	1.0000	1.0000
Harris	1.4228	1.2730	1.0340	1.0000	1.0000	1.0000	1.0000
Hidalgo	1.0000	2.1100	1.2161	1.3115	1.0000	1.0000	1.0000
Jefferson	1.0100	2.0997	1.1018	1.4227	1.0000	1.0000	1.0000
Lubbock	1.0000	1.0000	1.3290	1.5251	1.0000	1.0000	1.0000
Nueces	1.0100	1.2535	1.0315	1.2727	1.0000	1.0000	1.0000
Tarrant	1.0100	1.1275	1.0000	1.0565	1.0000	1.0000	1.0000
Travis	1.0100	1.7212	1.1522	1.0000	1.0000	1.0000	1.0000
Statewide	1.1838	1.3823	1.0403	1.0374	1.0000	1.0000	1.0000

Notes:

(1) Equals FY2023 health plan fee-for-service claims PMPM for all services (from Encounter database).

(2) Projected FY2023 PMPM including experience for members transferring from STAR.

Includes 1% margin for pent-up demand, increased utilization and membership churn.

(3) PHE Adjustment = Projected FY2023 PMPM divided by Actual FY2023 PMPM. Minimum value 1.0.

FY2025 CHIP Rating
 Pharmacy Rating Adjustment
 PHE Related Cost Adjustment

	<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>
FY2023 PMPM - Actual (1)							
Bexar	-	36.53	49.55	44.02	-	34.85	6.19
Dallas	6.79	19.20	24.35	35.13	0.09	19.46	20.64
El Paso	-	11.01	27.55	18.26	-	33.67	9.03
Harris	2.48	17.75	30.12	62.26	0.61	52.56	64.62
Jefferson	-	30.74	33.31	29.49	-	54.25	36.42
Lubbock	534.22	7.36	19.82	128.61	-	27.72	22.85
Nueces	-	12.42	34.37	43.34	1.73	49.58	17.48
RSA	0.81	21.73	33.00	29.26	0.58	40.37	28.61
Tarrant	152.02	39.62	25.49	27.65	0.19	37.97	27.77
Travis	-	6.53	30.90	67.08	37.40	17.64	15.08
Total	43.76	21.96	30.71	43.69	3.64	37.94	33.37
Projected FY2023 PMPM - Includes CHIP transferring over from STAR (2)							
Bexar	-	20.59	37.15	49.78	-	34.85	6.19
Dallas	6.58	19.88	31.22	51.03	0.09	19.46	20.64
El Paso	-	15.00	32.91	63.66	-	33.67	9.03
Harris	2.77	18.50	33.56	54.07	0.61	52.56	64.62
Jefferson	-	24.55	64.81	38.17	-	54.25	36.42
Lubbock	539.56	8.52	50.08	86.25	-	27.72	22.85
Nueces	-	16.54	50.13	50.25	1.73	49.58	17.48
RSA	0.82	18.10	40.37	40.71	0.58	40.37	28.61
Tarrant	153.54	29.79	28.16	40.22	0.19	37.97	27.77
Travis	-	13.40	39.13	43.42	37.40	17.64	15.08
Total	43.43	19.48	36.21	48.72	3.64	37.94	33.37
PHE Adjustment Factor (3)							
Bexar	1.0000	1.0000	1.0000	1.1310	1.0000	1.0000	1.0000
Dallas	1.0000	1.0352	1.2825	1.4525	1.0000	1.0000	1.0000
El Paso	1.0000	1.3622	1.1944	3.4865	1.0000	1.0000	1.0000
Harris	1.1135	1.0424	1.1143	1.0000	1.0000	1.0000	1.0000
Jefferson	1.0000	1.0000	1.9456	1.2944	1.0000	1.0000	1.0000
Lubbock	1.0100	1.1578	2.5267	1.0000	1.0000	1.0000	1.0000
Nueces	1.0000	1.3312	1.4585	1.1595	1.0000	1.0000	1.0000
RSA	1.0100	1.0000	1.2232	1.3914	1.0000	1.0000	1.0000
Tarrant	1.0100	1.0000	1.1044	1.4547	1.0000	1.0000	1.0000
Travis	1.0000	2.0525	1.2664	1.0000	1.0000	1.0000	1.0000
Statewide	1.0000	1.0000	1.1793	1.1150	1.0000	1.0000	1.0000

Notes:

(1) Equals FY2023 health plan fee-for-service claims PMPM for all services (from Encounter database).

(2) Projected FY2023 PMPM including experience for members transferring from STAR.

Includes 1% margin for pent-up demand, increased utilization and membership churn.

(3) PHE Adjustment = Projected FY2023 PMPM divided by Actual FY2023 PMPM. Minimum value 1.0.

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 (Exhibits 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 FY2025 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	5,110	100.00	170.84	170.84	1.00	1.00
Bexar	402	100.00	117.87	105.15	1.00	1.12
Aetna - Bexar	92	22.89	91.54	56.92	0.54	1.61
Amerigroup - Bexar	22	5.47	298.07	217.69	2.07	1.37
CFHP - Bexar	169	42.04	103.56	104.14	0.99	0.99
Superior - Bexar	119	29.60	130.35	126.22	1.20	1.03
Dallas	805	100.00	152.81	207.22	1.00	0.74
Amerigroup - Dallas	442	54.91	131.50	126.03	0.61	1.04
Molina - Dallas	81	10.06	100.69	86.59	0.42	1.16
Parkland - Dallas	282	35.03	201.92	371.08	1.79	0.54
El Paso	181	100.00	163.98	115.58	1.00	1.42
El Paso Health - El Paso	126	69.61	189.00	129.09	1.12	1.46
Superior - El Paso	55	30.39	104.71	83.56	0.72	1.25
Harris	1,330	100.00	197.36	149.58	1.00	1.32
Amerigroup - Harris	71	5.34	133.32	75.05	0.50	1.78
CHC - Harris	311	23.38	163.19	124.42	0.83	1.31
Molina - Harris	20	1.50	59.26	40.74	0.27	1.45
TCHP - Harris	791	59.47	221.86	159.02	1.06	1.40
United - Harris	137	10.30	186.12	207.26	1.39	0.90
Jefferson	93	100.00	150.16	71.15	1.00	2.11
Amerigroup - Jefferson	1.00	.
CHC - Jefferson	15	16.13	85.87	43.41	0.61	1.98
Molina - Jefferson	5	5.38	113.07	188.47	2.65	0.60
TCHP - Jefferson	47	50.54	191.94	69.76	0.98	2.75
United - Jefferson	26	27.96	118.19	63.81	0.90	1.85
Lubbock	97	100.00	113.37	83.32	1.00	1.36
Firstcare - Lubbock	56	57.73	132.30	109.84	1.32	1.20
Superior - Lubbock	41	42.27	89.21	49.45	0.59	1.80
Nueces	107	100.00	383.25	197.14	1.00	1.94
Driscoll - Nueces	95	88.79	433.63	214.84	1.09	2.02
Superior - Nueces	7	6.54	77.36	117.53	0.60	0.66
United - Nueces	5	4.67	36.31	31.71	0.16	1.15
RSA	1,067	100.00	166.89	182.62	1.00	0.91
Molina - RSA	285	26.71	78.44	114.73	0.63	0.68
Superior - RSA	782	73.29	199.24	207.45	1.14	0.96
Tarrant	676	100.00	187.22	164.53	1.00	1.14
Aetna - Tarrant	187	27.66	179.03	235.71	1.43	0.76
Amerigroup - Tarrant	193	28.55	154.08	172.68	1.05	0.89
Cook - Tarrant	296	43.79	213.80	115.03	0.70	1.86
Travis	352	100.00	110.81	292.17	1.00	0.38
BCBS - Travis	107	30.40	72.01	74.96	0.26	0.96
DCHP - Travis	139	39.49	118.93	506.45	1.73	0.23
Superior - Travis	106	30.11	133.64	206.79	0.71	0.65

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	37,624	100.00	139.69	139.69	1.00	1.00
Bexar	2,910	100.00	145.19	160.04	1.00	0.91
Aetna - Bexar	500	17.18	76.52	148.31	0.93	0.52
Amerigroup - Bexar	113	3.88	225.56	162.75	1.02	1.39
CFHP - Bexar	1,478	50.79	100.74	122.89	0.77	0.82
Superior - Bexar	819	28.14	256.82	235.68	1.47	1.09
Dallas	6,170	100.00	149.21	144.43	1.00	1.03
Amerigroup - Dallas	3,482	56.43	105.97	126.64	0.88	0.84
Molina - Dallas	612	9.92	83.08	80.44	0.56	1.03
Parkland - Dallas	2,076	33.65	239.00	191.56	1.33	1.25
El Paso	1,442	100.00	97.82	124.93	1.00	0.78
El Paso Health - El Paso	1,011	70.11	94.92	122.61	0.98	0.77
Superior - El Paso	431	29.89	104.63	130.38	1.04	0.80
Harris	9,620	100.00	158.49	139.99	1.00	1.13
Amerigroup - Harris	507	5.27	93.78	103.52	0.74	0.91
CHC - Harris	2,288	23.78	224.75	147.32	1.05	1.53
Molina - Harris	125	1.30	55.02	46.31	0.33	1.19
TCHP - Harris	5,859	60.90	150.94	148.08	1.06	1.02
United - Harris	841	8.74	80.58	96.31	0.69	0.84
Jefferson	872	100.00	105.12	111.11	1.00	0.95
Amerigroup - Jefferson	34	3.90	44.08	63.45	0.57	0.69
CHC - Jefferson	197	22.59	70.01	59.51	0.54	1.18
Molina - Jefferson	39	4.47	101.62	55.91	0.50	1.82
TCHP - Jefferson	438	50.23	129.30	144.31	1.30	0.90
United - Jefferson	164	18.81	94.28	106.23	0.96	0.89
Lubbock	755	100.00	88.20	102.20	1.00	0.86
Firstcare - Lubbock	364	48.21	77.24	80.03	0.78	0.97
Superior - Lubbock	391	51.79	97.99	122.01	1.19	0.80
Nueces	853	100.00	124.48	164.21	1.00	0.76
Driscoll - Nueces	706	82.77	125.89	182.52	1.11	0.69
Superior - Nueces	116	13.60	142.52	92.93	0.57	1.53
United - Nueces	31	3.63	32.17	38.59	0.24	0.83
RSA	8,017	100.00	139.65	140.97	1.00	0.99
Molina - RSA	1,983	24.73	151.13	159.43	1.13	0.95
Superior - RSA	6,034	75.27	135.86	134.87	0.96	1.01
Tarrant	4,507	100.00	124.43	128.54	1.00	0.97
Aetna - Tarrant	987	21.90	102.36	135.90	1.06	0.75
Amerigroup - Tarrant	1,511	33.53	129.63	131.33	1.02	0.99
Cook - Tarrant	2,009	44.58	131.04	122.90	0.96	1.07
Travis	2,478	100.00	122.00	140.10	1.00	0.87
BCBS - Travis	635	25.63	125.13	105.27	0.75	1.19
DCHP - Travis	993	40.07	98.43	120.10	0.86	0.82
Superior - Travis	850	34.30	148.03	189.27	1.35	0.78

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	19,140	100.00	173.72	173.72	1.00	1.00
Bexar	1,497	100.00	142.60	156.56	1.00	0.91
Aetna - Bexar	195	13.03	334.50	134.41	0.86	2.49
Amerigroup - Bexar	53	3.54	129.08	110.03	0.70	1.17
CFHP - Bexar	839	56.05	93.37	134.10	0.86	0.70
Superior - Bexar	410	27.39	157.32	220.67	1.41	0.71
Dallas	3,151	100.00	144.33	162.86	1.00	0.89
Amerigroup - Dallas	1,798	57.06	153.27	179.71	1.10	0.85
Molina - Dallas	284	9.01	94.17	70.67	0.43	1.33
Parkland - Dallas	1,069	33.93	141.84	157.60	0.97	0.90
El Paso	791	100.00	143.86	154.01	1.00	0.93
El Paso Health - El Paso	572	72.31	97.42	147.66	0.96	0.66
Superior - El Paso	219	27.69	267.20	170.87	1.11	1.56
Harris	4,849	100.00	236.66	194.81	1.00	1.21
Amerigroup - Harris	317	6.54	149.72	198.07	1.02	0.76
CHC - Harris	1,109	22.87	343.31	221.40	1.14	1.55
Molina - Harris	81	1.67	77.61	72.95	0.37	1.06
TCHP - Harris	2,888	59.56	220.51	196.51	1.01	1.12
United - Harris	454	9.36	161.99	134.72	0.69	1.20
Jefferson	427	100.00	124.57	133.29	1.00	0.93
Amerigroup - Jefferson	20	4.68	177.66	153.27	1.15	1.16
CHC - Jefferson	93	21.78	192.06	202.67	1.52	0.95
Molina - Jefferson	23	5.39	41.52	54.66	0.41	0.76
TCHP - Jefferson	205	48.01	82.84	108.34	0.81	0.76
United - Jefferson	86	20.14	158.11	130.84	0.98	1.21
Lubbock	387	100.00	208.07	253.59	1.00	0.82
Firstcare - Lubbock	178	45.99	352.08	266.26	1.05	1.32
Superior - Lubbock	209	54.01	74.14	241.81	0.95	0.31
Nueces	452	100.00	145.99	184.30	1.00	0.79
Driscoll - Nueces	375	82.96	159.77	204.19	1.11	0.78
Superior - Nueces	61	13.50	100.01	108.02	0.59	0.93
United - Nueces	16	3.54	16.44	37.78	0.21	0.44
RSA	4,324	100.00	116.84	152.83	1.00	0.76
Molina - RSA	1,184	27.38	121.63	150.95	0.99	0.81
Superior - RSA	3,140	72.62	115.00	153.56	1.00	0.75
Tarrant	2,091	100.00	165.67	175.71	1.00	0.94
Aetna - Tarrant	394	18.84	336.76	198.06	1.13	1.70
Amerigroup - Tarrant	735	35.15	124.23	166.05	0.95	0.75
Cook - Tarrant	962	46.01	128.73	174.09	0.99	0.74
Travis	1,171	100.00	297.44	210.43	1.00	1.41
BCBS - Travis	278	23.74	136.55	93.08	0.44	1.47
DCHP - Travis	451	38.51	215.68	211.55	1.01	1.02
Superior - Travis	442	37.75	478.63	280.10	1.33	1.71

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	42,805	100.00	441.38	441.38	1.00	1.00
Bexar	2,271	100.00	400.43	442.31	1.00	0.91
Aetna - Bexar	297	13.08	346.34	415.15	0.94	0.83
Amerigroup - Bexar	321	14.13	314.37	408.70	0.92	0.77
CFHP - Bexar	780	34.35	444.13	454.39	1.03	0.98
Superior - Bexar	873	38.44	410.89	452.96	1.02	0.91
Dallas	8,877	100.00	333.57	457.52	1.00	0.73
Amerigroup - Dallas	3,353	37.77	317.21	451.54	0.99	0.70
Molina - Dallas	2,184	24.60	344.19	459.77	1.00	0.75
Parkland - Dallas	3,340	37.63	343.02	462.06	1.01	0.74
El Paso	714	100.00	329.04	413.39	1.00	0.80
El Paso Health - El Paso	459	64.29	337.26	414.78	1.00	0.81
Superior - El Paso	255	35.71	314.09	410.86	0.99	0.76
Harris	14,539	100.00	519.20	438.11	1.00	1.19
Amerigroup - Harris	1,686	11.60	449.30	399.88	0.91	1.12
CHC - Harris	4,499	30.94	580.54	447.04	1.02	1.30
Molina - Harris	1,429	9.83	562.47	448.56	1.02	1.25
TCHP - Harris	4,778	32.86	475.44	444.00	1.01	1.07
United - Harris	2,147	14.77	513.62	429.21	0.98	1.20
Jefferson	943	100.00	511.35	428.78	1.00	1.19
Amerigroup - Jefferson	132	14.00	469.22	425.17	0.99	1.10
CHC - Jefferson	255	27.04	515.26	414.43	0.97	1.24
Molina - Jefferson	111	11.77	586.23	443.63	1.03	1.32
TCHP - Jefferson	284	30.12	506.60	435.04	1.01	1.16
United - Jefferson	161	17.07	495.98	432.93	1.01	1.15
Lubbock	469	100.00	411.08	437.12	1.00	0.94
Firstcare - Lubbock	227	48.40	454.01	443.04	1.01	1.02
Superior - Lubbock	242	51.60	370.84	431.56	0.99	0.86
Nueces	269	100.00	431.77	429.53	1.00	1.01
Driscoll - Nueces	182	67.66	464.91	445.08	1.04	1.04
Superior - Nueces	66	24.54	406.65	406.17	0.95	1.00
United - Nueces	21	7.81	227.37	368.37	0.86	0.62
RSA	7,576	100.00	401.79	426.95	1.00	0.94
Molina - RSA	2,531	33.41	425.44	413.23	0.97	1.03
Superior - RSA	5,045	66.59	389.85	433.88	1.02	0.90
Tarrant	3,801	100.00	375.95	453.44	1.00	0.83
Aetna - Tarrant	1,069	28.12	358.22	453.43	1.00	0.79
Amerigroup - Tarrant	1,611	42.38	372.33	439.44	0.97	0.85
Cook - Tarrant	1,121	29.49	397.92	473.43	1.04	0.84
Travis	3,346	100.00	605.19	441.54	1.00	1.37
BCBS - Travis	1,204	35.98	667.39	458.38	1.04	1.46
DCHP - Travis	796	23.79	634.63	422.67	0.96	1.50
Superior - Travis	1,346	40.23	532.30	437.57	0.99	1.22

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.

FY2025 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	0.541	0.927	0.858	1.000	0.939	1.000
Amerigroup - Bexar	1.000	2.070	1.017	0.703	1.000	0.924	1.000
CFHP - Bexar	1.000	0.990	0.768	0.857	1.000	1.027	1.000
Superior - Bexar	1.000	1.200	1.473	1.410	1.000	1.024	1.000
Amerigroup - Dallas	1.000	0.608	0.877	1.103	1.000	0.987	1.000
Molina - Dallas	1.000	0.418	0.557	0.434	1.000	1.005	1.000
Parkland - Dallas	1.000	1.791	1.326	0.968	1.000	1.010	1.000
El Paso Health - El Paso	1.000	1.117	0.981	0.959	1.000	1.003	1.000
Superior - El Paso	1.000	0.723	1.044	1.109	1.000	0.994	1.000
Amerigroup - Harris	1.000	0.502	0.739	1.017	1.000	0.913	1.000
CHC - Harris	1.000	0.832	1.052	1.136	1.000	1.020	1.000
Molina - Harris	1.000	0.272	0.331	0.374	1.000	1.024	1.000
TCHP - Harris	1.000	1.063	1.058	1.009	1.000	1.013	1.000
United - Harris	1.000	1.386	0.688	0.692	1.000	0.980	1.000
Amerigroup - Jefferson	1.000	1.000	0.571	1.150	1.000	0.992	1.000
CHC - Jefferson	1.000	0.610	0.536	1.520	1.000	0.967	1.000
Molina - Jefferson	1.000	2.649	0.503	0.410	1.000	1.035	1.000
TCHP - Jefferson	1.000	0.981	1.299	0.813	1.000	1.015	1.000
United - Jefferson	1.000	0.897	0.956	0.982	1.000	1.010	1.000
Firstcare - Lubbock	1.000	1.318	0.783	1.050	1.000	1.014	1.000
Superior - Lubbock	1.000	0.593	1.194	0.954	1.000	0.987	1.000
United - Nueces	1.000	0.161	0.235	0.205	1.000	0.858	1.000
Driscoll - Nueces	1.000	1.090	1.111	1.108	1.000	1.036	1.000
Superior - Nueces	1.000	0.596	0.566	0.586	1.000	0.946	1.000
Aetna - Tarrant	1.000	1.433	1.057	1.127	1.000	1.000	1.000
Amerigroup - Tarrant	1.000	1.050	1.022	0.945	1.000	0.969	1.000
Cook - Tarrant	1.000	0.699	0.956	0.991	1.000	1.044	1.000
BCBS - Travis	1.000	0.257	0.751	0.442	1.000	1.038	1.000
DCHP - Travis	1.000	1.733	0.857	1.005	1.000	0.957	1.000
Superior - Travis	1.000	0.708	1.351	1.331	1.000	0.991	1.000
Molina - RSA	1.000	0.628	1.131	0.988	1.000	0.968	1.000
Superior - RSA	1.000	1.136	0.957	1.005	1.000	1.016	1.000

FY2025 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	0.982	0.993	0.993	1.000	1.006	1.000
Amerigroup - Bexar	1.000	0.982	0.993	0.993	1.000	1.006	1.000
CFHP - Bexar	1.000	0.982	0.993	0.993	1.000	1.006	1.000
Superior - Bexar	1.000	0.982	0.993	0.993	1.000	1.006	1.000
Amerigroup - Dallas	1.000	0.997	0.995	1.001	1.000	1.000	1.000
Molina - Dallas	1.000	0.997	0.995	1.001	1.000	1.000	1.000
Parkland - Dallas	1.000	0.997	0.995	1.001	1.000	1.000	1.000
El Paso Health - El Paso	1.000	1.004	1.000	0.998	1.000	1.000	1.000
Superior - El Paso	1.000	1.004	1.000	0.998	1.000	1.000	1.000
Amerigroup - Harris	1.000	1.002	1.002	1.001	1.000	1.003	1.000
CHC - Harris	1.000	1.002	1.002	1.001	1.000	1.003	1.000
Molina - Harris	1.000	1.002	1.002	1.001	1.000	1.003	1.000
TCHP - Harris	1.000	1.002	1.002	1.001	1.000	1.003	1.000
United - Harris	1.000	1.002	1.002	1.001	1.000	1.003	1.000
Amerigroup - Jefferson	1.000	1.013	1.004	0.996	1.000	0.999	1.000
CHC - Jefferson	1.000	1.013	1.004	0.996	1.000	0.999	1.000
Molina - Jefferson	1.000	1.013	1.004	0.996	1.000	0.999	1.000
TCHP - Jefferson	1.000	1.013	1.004	0.996	1.000	0.999	1.000
United - Jefferson	1.000	1.013	1.004	0.996	1.000	0.999	1.000
Firstcare - Lubbock	1.000	1.030	1.003	1.000	1.000	1.000	1.000
Superior - Lubbock	1.000	1.030	1.003	1.000	1.000	1.000	1.000
United - Nueces	1.000	1.012	1.003	1.003	1.000	1.008	1.000
Driscoll - Nueces	1.000	1.012	1.003	1.003	1.000	1.008	1.000
Superior - Nueces	1.000	1.012	1.003	1.003	1.000	1.008	1.000
Aetna - Tarrant	1.000	1.009	1.000	1.001	1.000	0.999	1.000
Amerigroup - Tarrant	1.000	1.009	1.000	1.001	1.000	0.999	1.000
Cook - Tarrant	1.000	1.009	1.000	1.001	1.000	0.999	1.000
BCBS - Travis	1.000	1.042	0.990	0.994	1.000	1.002	1.000
DCHP - Travis	1.000	1.042	0.990	0.994	1.000	1.002	1.000
Superior - Travis	1.000	1.042	0.990	0.994	1.000	1.002	1.000
Molina - RSA	1.000	0.989	1.001	1.000	1.000	1.002	1.000
Superior - RSA	1.000	0.989	1.001	1.000	1.000	1.002	1.000

FY2025 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	0.532	0.920	0.853	1.000	0.944	1.000
Amerigroup - Bexar	1.000	2.034	1.009	0.698	1.000	0.929	1.000
CFHP - Bexar	1.000	0.973	0.762	0.851	1.000	1.033	1.000
Superior - Bexar	1.000	1.179	1.462	1.400	1.000	1.030	1.000
Amerigroup - Dallas	1.000	0.606	0.872	1.104	1.000	0.987	1.000
Molina - Dallas	1.000	0.417	0.554	0.434	1.000	1.005	1.000
Parkland - Dallas	1.000	1.786	1.320	0.969	1.000	1.010	1.000
El Paso Health - El Paso	1.000	1.121	0.982	0.957	1.000	1.004	1.000
Superior - El Paso	1.000	0.726	1.044	1.107	1.000	0.994	1.000
Amerigroup - Harris	1.000	0.503	0.741	1.018	1.000	0.915	1.000
CHC - Harris	1.000	0.833	1.055	1.138	1.000	1.023	1.000
Molina - Harris	1.000	0.273	0.332	0.375	1.000	1.026	1.000
TCHP - Harris	1.000	1.065	1.060	1.010	1.000	1.016	1.000
United - Harris	1.000	1.388	0.689	0.692	1.000	0.982	1.000
Amerigroup - Jefferson	1.000	1.013	0.573	1.145	1.000	0.991	1.000
CHC - Jefferson	1.000	0.618	0.537	1.514	1.000	0.966	1.000
Molina - Jefferson	1.000	2.684	0.505	0.408	1.000	1.034	1.000
TCHP - Jefferson	1.000	0.993	1.303	0.810	1.000	1.014	1.000
United - Jefferson	1.000	0.909	0.959	0.978	1.000	1.009	1.000
Firstcare - Lubbock	1.000	1.357	0.786	1.050	1.000	1.013	1.000
Superior - Lubbock	1.000	0.611	1.198	0.954	1.000	0.987	1.000
United - Nueces	1.000	0.163	0.236	0.206	1.000	0.865	1.000
Driscoll - Nueces	1.000	1.103	1.115	1.111	1.000	1.045	1.000
Superior - Nueces	1.000	0.603	0.568	0.588	1.000	0.953	1.000
Aetna - Tarrant	1.000	1.446	1.057	1.128	1.000	0.999	1.000
Amerigroup - Tarrant	1.000	1.059	1.021	0.946	1.000	0.968	1.000
Cook - Tarrant	1.000	0.706	0.956	0.991	1.000	1.043	1.000
BCBS - Travis	1.000	0.267	0.744	0.440	1.000	1.040	1.000
DCHP - Travis	1.000	1.806	0.849	1.000	1.000	0.959	1.000
Superior - Travis	1.000	0.738	1.338	1.324	1.000	0.993	1.000
Molina - RSA	1.000	0.622	1.132	0.988	1.000	0.970	1.000
Superior - RSA	1.000	1.124	0.958	1.005	1.000	1.018	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 FY2023 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 were not be subject to any recoupments or distributions based on calendar year 2020 or 2021 performance. The medical P4Q program remained suspended for CHIP through 2022 due to low enrollment continuing from the PHE and will be reassessed in 2025.

At-Risk Measures

Measure	STAR+PLUS	STAR	STAR Kids	CHIP
Potentially Preventable Emergency Room Visits (PPVs)	2018 2019 2022 2023 2024 2025	2018 2019 2022 2023 2024 2025	2022 2023 2024 2025	2018 2019 2022 2023
Potentially Preventable Admissions (PPAs)		2022 2023 2024 2025	2024 2025	
Potentially Preventable Readmissions (PPRs)	2022 2023 2024 2025			
Prenatal and Postpartum Care (PPC)		2018 2022 2023 2024 2025		

Measure	STAR+PLUS	STAR	STAR Kids	CHIP
Well Child Visits in the First 30 months of Life (W30), First 15 Months of Life ⁱ		2018 2019		
Comprehensive Diabetes Care, HbA1c < 8%	2018 2019 2022 2023 2024 2025			
Cervical Cancer Screening (CCS)	2018 2019 2022 2023 2024 2025			
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 2024 2025		2022 2023	
Childhood Immunization Status (CIS) Combination 10		2022 2023 2024 2025		2022 2023
Follow-up Care for Children Prescribed ADHD Medication (ADD) ^{iv}		2022 2023 2024 2025	2024 2025	
Getting Specialized Services Composite			2022 2023 2024 2025	
Assistance with Care Coordination			2022 2023 2024 2025	

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 2024 2025			
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 2024 2025		
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 2024 2025		
Chlamydia Screening in Women (CHL)		2022 2023 2024 2025		
Cesarean Sections, uncomplicated deliveries		2022 2023 2024 2025		
Risk of Continued Opioid Use, Total Members have ≥ 15 Days coverage	2022 2023			

	2024 2025			
Adherence to Antipsychotic Medications for Individuals with Schizophrenia, 80% Coverage	2022 2023 2024 2025			
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics			2022 2023 2024 2025	

Breast Cancer Screening, Non-Medicare Total	2022 2023 2024 2025			
Appropriate Treatment for Children with Upper Respiratory Infection (URI) – All Ages			2022 2023 2024 2025	
Pregnancy-Associated Outcomes - severe maternal morbidity among all deliveries excluding cases identified only by transfusion		2022 2023 2024 2025		
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 2024 2025	
Access to Routine Care, adult survey		2022 2023 2024 2025		
How well doctors communicate composite				2022 2023 2024 2025
Family-Centered Care: Personal Doctor Who Knows Child Composite			2024 2025	

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.

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.

Beginning in calendar year 2024, HHSC PPR results will change to an unweighted calculation. This will allow for a more accurate risk assessment.

Three percent of the MCOs' capitation is at-risk. The MCO's at-risk capitation is distributed equally across the at-risk measures. Some Healthcare Effectiveness Data and Information Set (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%. The medical P4Q program was suspended for 2020 and 2021. 2022 results are anticipated to be publicly available in August of 2024. 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 9

FY2025 CHIP Rate Certification Index

The index below includes the pages of this report that correspond to the applicable sections of the 2024-2025 Medicaid Managed Care Rate Development Guide, dated January 2024.

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, 2024 through August 31, 2025 (FY2025).
- iii.
 - (a) The certification letter is on page 19 of the report.
 - (b) The final capitation rates are shown on pages 16-17 of the report.
 - (c)
 - (i) See pages 1 through 7 of the report.
 - (ii) See pages 1 through 7 of the report.
 - (iii) See pages 1 through 7 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 11 through 12 and Attachment 6 pages 117 through 120 of the report.
- xiii. Acknowledged.

B. Appropriate Documentation

- i. The actuary is certifying capitation rates. See page 19 of the report.
- ii. Acknowledged.
- iii. Acknowledged. See page 18 of the report.
- iv. Acknowledged.
- v. Not applicable.
- vi. Acknowledged.
- vii. Acknowledged. See page 19 of the report.
- viii. Not applicable.
- ix.
 - a) See Attachment 1 pages 21 through 31 of the report.
 - b) Not applicable. All rating adjustment factors have been included in the report.
 - c) FY2024 rates were not adjusted by a *de minimis* amount using the authority in 42 C.F.R 438.7(c)(3).
- x. Not applicable. There are no known amendments at this time.
- xi.
 - (a) Texas Medicaid Managed Care data has been studied for all programs, risk groups and service delivery areas through February 2024 to study the impact of COVID and the PHE.
 - (b) See pages 10 through 12 of the report.
 - (c) Effective September 1, 2023, all COVID-19 expenses for testing, treatment and vaccines were covered in the capitation rates.
 - (d) See pages 11 through 12 and Attachment 6 pages 117 through 120 of the report. Similar to the prior rating period, we are making a prospective adjustment to the FY2025 capitation rates. In addition, the experience rebate

provision has been returned to their pre-PHE provisions for FY2024 and beyond.

2. Data

A. Rate Development Standards

- i. (a) Acknowledged.
- (b) Acknowledged.
- (c) Acknowledged.
- (d) Not applicable. Data from the three most recent, completed years has been utilized.

B. Appropriate Documentation

- i. (a) See pages 1 through 4 of the report.
- ii. (a) See pages 1 through 4 of the report.
- (b) See pages 1 through 4 of the report.
- (c) See pages 1 through 4 of the report.
- (d) Not applicable.
- iii. (a) Base period data is fully credible.
- (b) See page 3 of the report.
- (c) No errors found in the data.
- (d) See pages 8 through 12 of the report.
- (e) See page 6 of the report.

3. Projected Benefit Costs and Trends

A. Rate Development Standards

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

- iv. Acknowledged.
- v. Not applicable. IMD regulation does not impact the CHIP program.

B. Appropriate Documentation

i. See pages 16 through 18 and Attachment 1 pages 21 through 31 of the report.

ii. (a) See Attachment 3 pages 40 through 85 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 86 through 89 of the report.

(b) See Attachment 4 pages 86 through 89 of the report.

(c) See Attachment 4 pages 86 through 89 of the report.

(d) See Attachment 4 pages 86 through 89 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 FY2025 premium rate.

(c) All enrollment data during retroactive enrollment periods are included in the base period data used to develop the FY2025 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 90 through 116 of the report.

viii. See Attachment 5 pages 90 through 116 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 aggregated net income is shared as follows:

Pre-tax Income as a % of Revenues	MCO Share	HHSC Share
≤ 3%	100%	0%
> 3% and ≤ 5%	80%	20%
> 5% and ≤ 7%	60%	40%
> 7% and ≤ 9%	40%	60%
> 9% and ≤ 12%	20%	80%
> 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 13 through 14 of the report.

- ii. See pages 13 through 14 of the report.
- iii. See pages 13 through 14 of the report.

6. Risk Adjustment

A. Rate Development Standards

- i. Acknowledged.
- ii. 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. Risk adjustment has been applied in a budget neutral manner in accordance with 42 CFR 438.5(g).

7. Acuity Adjustments

A. Rate Development Standards

- i. Acknowledged.

B. Appropriate Documentation

- i. Not applicable.