STATE OF TEXAS MEDICAID MANAGED CARE STAR+PLUS PROGRAM RATE SETTING STATE FISCAL YEAR 2015

Prepared for:

Texas Health and Human Services Commission UMCC V2.11, STAR+PLUS EXP V1.16 and STAR+PLUS MRSA V1.2

Prepared by: Evan L. Dial, F.S.A., M.A.A.A Rudd and Wisdom, Inc.

TABLE OF CONTENTS

I.	Introduction	1
	Overview of Rate Setting Methodology	
III.	Adjustment Factors	6
IV.	Administrative Fees and Risk Margin	10
V.	Summary	11
VI.	Actuarial Certification	13
VII.	Attachments	14

I. Introduction

Rudd and Wisdom, Inc. has been retained by the Texas Health and Human Services Commission (HHSC) to develop the state fiscal year 2015 (FY2015, September 1, 2014 through August 31, 2015) premium rates for HMOs participating in the Texas Medicaid STAR+PLUS program. This report presents the rating methodology and assumptions used in developing the premium rates.

Rudd and Wisdom has provided actuarial services to the Texas Medicaid program for over 25 years. We have participated in the state's managed care rating process since its inception in 1993. This year, as in previous years, we have worked closely with HHSC in developing the FY2015 HMO premium rates.

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

- Monthly enrollment by risk group for each health plan. This includes historical enrollment since September 2010 and a projection of future enrollment through August 2015. These projections were prepared by HHS System Forecasting staff.
- Monthly enrollment by risk group for the fee-for-service program, primary care case management program and SSI members currently enrolled in the STAR MRSA managed care plans. This includes historical enrollment since September 2010 and a projection of future enrollment through August 2015. These projections were prepared by HHSC System Forecasting staff.
- Claim lag reports by risk group for each health plan for the period September 2010 through February 2014. These reports include monthly paid claims by month of service.
- Inpatient claims data by health plan and risk group for the period March 2012 through February 2014. Prior to March 1, 2012 these services were carved out of the STAR+PLUS program and paid on a fee-for-service basis.
- Financial Statistical Reports (FSR) for each participating HMO for FY2012, FY2013 and the first six months of FY2014. The FSR contains detailed information regarding monthly enrollment, revenue, incurred claims and administrative expenses, as reported by the HMO.
- Reports from the EQRO summarizing their analysis of the HMO's encounter claims data.
- Reports from the health plans providing information on high volume claimants during the experience period.
- Current (FY2014) premium rates by risk group for each HMO.
- Information from both HHSC and the HMOs regarding recent changes in covered services and provider reimbursement under the Medicaid program.
- Information from the HMOs regarding current and projected payment rates for certain capitated services, such as mental health and vision.
- Information from the HMOs regarding attendant care enhanced payments and service coordination expenses

- FY2013 acuity risk adjustment analysis provided by the EQRO for each participating health plan.
- Information from the HMOs regarding current and projected reinsurance premium rates.
- Historical enrollment and claims experience data for the Medicaid Fee-For-Service (FFS) and Primary Care Case Management (PCCM) plans.
- Information provided by HHSC regarding FY2013 health plan claims cost by type of service for certain services. This information was obtained from the encounter database.
- Information provided by HHSC regarding proposed FY2014 and FY2015 Medicaid provider reimbursement rates.
- Information provided by HHSC regarding newly capitated services previously paid by HHSC.
- Long term care and nursing facility claims data paid by the Department of Aging and Disability Services (DADS) for the period September 2011 through February 2014. Long term care claims were provided separately for individuals over and under age 21.
- A listing of individuals enrolled during FY2013 in the various populations that make up the Intellectual and Developmentally Disabled (IDD) expansion.
- Monthly acute care claims data for each IDD member.

Although the above data was reviewed for reasonableness, Rudd and Wisdom did not audit the data.

II. Overview of the Rate Setting Methodology

The actuarial model used to derive the FY2015 STAR+PLUS HMO premium rates relies primarily on health plan financial experience. The historical claims experience for each HMO (by area) was analyzed and estimates for the base period (FY2013) were developed. These estimates were then projected forward to FY2015 using assumed trend rates. Other plan expenditures such as capitated amounts, service coordination, reinsurance costs and administrative expenses were added to the claims component in order to project the total FY2015 cost under the 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 HMOs in a service area in order to develop a set of community rates for each service area.

The managed care service areas used in the analysis were as follows:

- Bexar County Service Area (San Antonio)
- Dallas County Service Area (Dallas)
- El Paso County Service Area (El Paso)
- Harris County Service Area (Houston)
- Hidalgo County Service Area (Hidalgo)
- Jefferson County Service Area (Beaumont)
- Lubbock County Service Area (Lubbock)
- Nueces County Service Area (Corpus Christi)
- Tarrant County Service Area (Fort Worth)
- Travis County Service Area (Austin)
- Central Medicaid Rural Service Area (MRSA Central)
- Northeast Medicaid Rural Service Area (MRSA Northeast)
- West Medicaid Rural Service Area (MRSA West)

The risk groups (or rating populations) used in the analysis are as follows:

- Medicaid Only Other Community Care (OCC)
- Medicaid Only Home and Community Based Services (HCBS)
- Dual Eligible OCC
- Dual Eligible HCBS
- Intellectual and Developmentally Disabled under age 21 IDD <21
- Intellectual and Developmentally Disabled over age 21 IDD >21

The services used in the analysis include the following:

Acute Care Services

- Ambulance Services
- Audiology Services
- Behavioral Health Services
- Birthing Center Services
- Chiropractic Services
- Dialysis
- Durable Medical Equipment and Supplies
- Emergency Services

- Family Planning Services
- · Home Health Services
- Hospital Services outpatient
- Lab, X-ray and Radiology Services
- Medical Check-ups and CCP Services for children under age 21
- Optometry
- Podiatry
- · Prenatal Care
- Primary Care Services
- Specialty Physician Services
- Therapies physical, occupational and speech
- Transplantation of Organs and Tissues
- Vision
- Inpatient Facility Services
- Prescription Drugs

Long Term Care Services

- Adult Foster Care
- Adaptive Aids and Medical Equipment
- Assisted Living
- Emergency Response Services
- Home Delivered Meals
- Medical Supplies
- Minor Home Modifications
- Nursing Services (in home)
- Personal Attendant Services
- Therapies physical, occupational and speech
- Transition Services

Services specifically excluded from the analysis include:

- Nursing Facilities
- Dental and Orthodontia Services

Further information regarding the carve-in of prescription drugs into the STAR+PLUS program can be found in the report titled State of Texas Medicaid Managed Care Rate Setting Pharmacy Carve-in State Fiscal Year 2015.

After accumulating all of the information to be used in the rate setting process, a comparison of the various sources of claims data was performed to check for consistency. We compared (i) the claim lag reports provided by the HMOs, (ii) the claim amounts reported in the FSRs and (iii) the claim amounts in the encounter data files as provided by the EQRO. There was satisfactory consistency between the three claims data sources for each of the health plans.

We projected the FY2015 cost for each individual HMO by estimating their base period (FY2013) average claims cost and then applying trend and other adjustment factors. (These adjustment factors are described in Section III.) We added capitation expenses for services

capitated by the HMO (such as vision and behavioral health), service coordinator expenses for care coordination services, a reasonable provision for administrative expenses and a risk margin. Attachment 2 presents a description and an example of the experience analysis for a sample HMO. This type of analysis was conducted for each health plan.

The analysis of base period claims experience for each health plan attempted to identify and adjust for any distortions in the data. Significant variations in experience, including the impact from unusually large individual claims, were investigated and adjustments were made if deemed appropriate.

HHSC utilizes a community rating methodology in setting the STAR+PLUS base premium rates. The base rates vary by service area and risk group but are the same for each HMO in a service area. The community rates are developed by a weighted average of the projected FY2015 cost for each health plan in the service area. The weights used in this formula are the projected FY2015 number of clients enrolled in each health plan by risk group. Attachment 3 presents the summary community rating exhibit for non-inpatient services for each service area along with a description of the analysis. Attachment 4 presents the summary community rating exhibit for inpatient services only for each service area along with a description of the analysis.

The acute care portion of the base community rate in each service area was adjusted to reflect the health status, or acuity, of the population enrolled in each health plan. The purpose of acuity risk adjustment is to recognize the anticipated cost differential between multiple health plans in a service area by analyzing the health status of their respective memberships. Additional information regarding risk adjustment is included in Section III below under Risk Adjustment and in Attachment 10. The final FY2015 premium rates were defined as the community rates with acuity risk adjustment for acute care services and community rates for long term care services.

III. Adjustment Factors

This section contains a description of the adjustment factors used in the FY2015 STAR+PLUS rate setting process.

Trend Factors

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. Separate trend factors were developed by type of service – acute care and long term care services. The projected trend rate assumptions were developed by the actuary based on an analysis of recent experience under the various HMO plans. A single trend assumption applied to all service areas but varies by risk group, type of service and projection year (FY2014 and FY2015).

The trend analysis included a review of HMO claims experience data through February 28, 2014. Based on this information, estimates of monthly incurred claims were made through December 2013. The claims cost and trend experience were reviewed separately by service area, risk group and type of service. The service area trends were then combined into a statewide average using a weighted average formula with estimated incurred claims as the weights.

The FY2014 non-inpatient acute care trend assumptions were developed from two components: (i) the actual estimated trend for the period September 2013 through December 2013 and (ii) the projected trend for the period January 2014 through August 2014. 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 program. The trends for the final eight months of FY2014 were projected using experience from FY2011 (1/3 weight), FY2012 (1/3 weight) and FY2013 (1/3 weight). The FY2015 non-inpatient acute care trend assumptions were developed based on an average of the HMO trends for the most recent three full fiscal years (FY2011, FY2012 and FY2013). All historical trends for FY2011 through FY2013 used in the methodology described above were limited to be no less than 0.0%.

The inpatient facility trend assumptions were developed from an analysis of inpatient claims previously paid on a fee-for-service basis for clients enrolled in the STAR+PLUS program as well as those clients enrolled in the Primary Care Case Management (PCCM) program outside of STAR+PLUS service areas. Based on this analysis the FY2014 and FY2015 trend assumptions were developed based on an average of the trends for the periods (FY2010, FY2011 and FY2012). Only claims prior to the carve-in of inpatient services on March 1, 2012 were considered during the FY2012 time period. Inpatient claims after March 1, 2012 were not considered in the trend analysis due to the significant programmatic changes that impacted inpatient claims once carved into the STAR+PLUS program.

The FY2014 long term care trend assumptions by risk group were developed from two components: (i) the actual estimated trend for the period September 2013 through December 2013 and (ii) the projected trend for the period January 2014 through August 2014. 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 program. The trends for the final eight months of FY2014 were projected using experience from FY2011 (1/3 weight), FY2012 (1/3 weight) and FY2013 (1/3 weight). The FY2015 long term care trend assumptions were developed based on an average of the HMO trends for the most recent three full fiscal years (FY2011, FY2012 and FY2013). All historical trends for FY2011 through FY2013 used in the methodology described above were limited to be no less than 0.0%.

Attachment 5 is a summary of the cost trend analysis. The chart below presents the assumed annual trend rates for FY2014 and FY2015.

	FY2014	FY2015
Acute Care (non-inpatient)		
Medicaid Only - OCC	2.9%	2.6%
Medicaid Only - HCBS	1.6%	0.9%
Acute Care (inpatient)		
Medicaid Only - OCC	2.9%	2.9%
Medicaid Only - HCBS	2.9%	2.9%
Long Term Care		
Medicaid Only - OCC	9.8%	11.3%
Medicaid Only - HCBS	1.2 %	3.3%
Dual Eligible - OCC	5.1 %	6.3 %
Dual Eligible - HCBS	0.0 %	1.2 %

Provider Reimbursement Adjustments

Medicaid provider reimbursement changes were provided for the following services: APR DRG implementation, Potentially Preventable Readmission reimbursement reductions, Potentially Preventable Complication reimbursement reductions, 10% reimbursement reduction for inpatient outlier reimbursement, revisions to the therapy fee schedule, outpatient facility reimbursement reductions, outpatient imaging reimbursement reductions, ambulance reimbursement reductions, revisions to emergency room reimbursement provisions for non emergent services, reduction of Medicaid reimbursement in excess of Medicare.

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 6 presents a summary of the derivation of these adjustment factors.

Impact of Newly Capitated Services

Effective September 1, 2014 mental health rehabilitation and targeted case management services will become capitated services under the STAR+PLUS Program. Previously these services were carved out of STAR+PLUS and paid on a fee-for-service basis. Exhibit H of Attachment 6 presents a summary of the derivation of this adjustment factor.

APR DRG Adjustments

Effective September 1, 2012, HHSC implemented the APR DRG reimbursement system for most hospitals. Effective September 1, 2013 rural hospital and children's hospitals transitioned to the APR DRG reimbursement system. HHSC staff has utilized the FY2013 encounter data to determine the cost impact from the APR DRG implementation on each service area and risk group. Exhibit I of Attachment 6 presents a summary of the resulting adjustment factors.

Attendant Care Rate Changes

Effective September 1, 2013 and again on September 1, 2014 the minimum wage paid to attendant care providers will be increasing for various Personal Assistance Services (PAS) and Day Activity Health Services (DAHS). In addition, effective September 1, 2013 attendant care enhanced payments increased to allow attendant care providers to qualify for increased enhanced payment levels. Exhibits A and B of Attachment 7 present a summary of these adjustment factors.

Electronic Visit Verification (EVV)

Effective September 1, 2014 HHSC will require all managed care organizations to incorporate EVV into their management duties for Personal Assistance Services (PAS), Personal Care Services (PCS) and Private Duty Nursing (PDN). Based on an analysis of the impact of EVV on these services in the fee-for-service program the following savings assumptions have been developed:

PAS: 4.0%PCS: 4.0%PDN: 3.5%

The impact of additional administrative expenses from the implementation of EVV has been considered and it has been determined that the administrative allowance included in the rates should be increased by \$1.75 per member per month to account for the increased cost associated with implementation of this EVV requirement. Exhibit C of Attachment 7 presents a summary of these adjustment factors.

End Stage Renal Disease and Ventilator Dependent Members

Effective September 1, 2013 STAR+PLUS HMOs were no longer permitted to disenroll members with end stage renal disease or members who are ventilator dependent. Transitioning these previously disenrolled members back to the STAR+PLUS program and preventing future disenrollment will increase the average cost as these tend to be high cost members. Attachment 8 presents a summary of the resulting adjustment factors for acute care and long term care separately.

Spell of Illness

Effective September 1, 2013 STAR+PLUS HMOs were permitted to include the spell of illness policy provisions in their inpatient reimbursement contracts. Due to this policy,

provider reimbursement for adults in the STAR+PLUS program will be limited to the first 30 days of inpatient care for a spell of illness. Attachment 9 presents a summary of the policy change and the resulting adjustment factors.

Risk Adjustment

Several risk adjustment techniques are employed in the rate setting methodology. Premium rates are established separately by area of the state and risk group in order to recognize the inherent geographical and demographical variation in the cost of delivering care. In addition, the rating methodology includes a health status adjustment.

The acute care portion of 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. 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 acuity risk adjustment is included in Attachment 10.

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.

IV. Administrative Fees and Risk Margin

The rating methodology includes an explicit provision for administrative services. The amount allocated for administrative expenses is \$14.25 pmpm plus 5.75% of gross premium. This amount is intended to provide for all administrative-related services performed by the HMO.

The administrative fee amounts were determined based on a review of (i) the administrative fee provision included in Medicaid HMO premium rates in other states, (ii) the reported administrative expenses of the STAR+PLUS HMOs and (iii) the fees paid for similar services for other large Texas health plans.

The premium rates also include an amount for premium tax (1.75% of premium), maintenance tax (\$0.065 pmpm) and a risk margin (2.0% of premium).

V. Summary

The chart below presents the results of the FY2015 STAR+PLUS rating analysis and includes all components of the premium – acute care non-inpatient, acute care inpatient, long term care and prescription drugs. This report details the development of the acute care (non-inpatient and inpatient) and long term care components of the premium. Further information regarding the prescription drug component of the premium rate can be found in the report titled State of Texas Medicaid Managed Care Rate Setting Pharmacy Carve-in State Fiscal Year 2015.

	Medicaid Only	Medicaid Only	Dual Eligible	Dual Eligible
Health Plan	OCC	HCBS	OCC	HCBS
Monthly Premium Rates				
Amerigroup - Bexar	\$1,177.51	\$3,981.72	\$336.56	\$1,690.86
Molina - Bexar	\$1,079.51	\$3,725.38	\$336.56	\$1,690.86
Superior - Bexar	\$1,232.26	\$4,044.81	\$336.56	\$1,690.86
Molina - Dallas	\$1,065.90	\$4,088.60	\$274.04	\$1,453.19
Superior - Dallas	\$1,067.62	\$4,082.62	\$274.04	\$1,453.19
Amerigroup - El Paso	\$1,296.53	\$4,873.87	\$405.58	\$1,866.41
Molina - El Paso	\$1,303.53	\$4,561.40	\$405.58	\$1,866.41
Amerigroup - Harris	\$1,273.77	\$4,908.10	\$302.86	\$1,580.59
Molina - Harris	\$1,216.56	\$4,687.51	\$302.86	\$1,580.59
United - Harris	\$1,454.07	\$4,499.46	\$302.86	\$1,580.59
Health Spring - Hidalgo	\$1,492.71	\$3,810.73	\$925.85	\$1,896.11
Molina - Hidalgo	\$1,434.12	\$4,334.04	\$925.85	\$1,896.11
Superior - Hidalgo	\$1,465.38	\$3,890.75	\$925.85	\$1,896.11
Amerigroup - Jefferson	\$1,066.55	\$4,127.80	\$213.67	\$1,404.62
Molina - Jefferson	\$1,144.22	\$3,743.03	\$213.67	\$1,404.62
United - Jefferson	\$1,321.44	\$4,212.13	\$213.67	\$1,404.62
Amerigroup - Lubbock	\$1,144.73	\$3,248.24	\$142.92	\$1,251.09
Superior - Lubbock	\$1,073.68	\$3,364.66	\$142.92	\$1,251.09
Superior - Nueces	\$1,294.79	\$3,958.51	\$420.12	\$1,572.55
United - Nueces	\$1,224.56	\$3,714.83	\$420.12	\$1,572.55
Amerigroup - Tarrant	\$1,257.76	\$4,083.37	\$197.10	\$1,504.85
Health Spring - Tarrant	\$1,091.67	\$3,582.22	\$197.10	\$1,504.85
Amerigroup - Travis	\$1,251.53	\$4,861.40	\$213.44	\$1,599.59
United - Travis	\$1,212.15	\$4,609.58	\$213.44	\$1,599.59
Superior - MRSA Central	\$975.48	\$3,135.84	\$192.30	\$1,171.09
United - MRSA Central	\$904.18	\$2,945.72	\$192.30	\$1,171.09
Health Spring - MRSA Northeast	\$1,020.00	\$3,432.51	\$260.89	\$1,588.82
United - MRSA Northeast	\$1,020.00	\$3,432.51	\$260.89	\$1,588.82
Amerigroup - MRSA West	\$982.82	\$3,254.32	\$234.01	\$1,425.13
Superior - MRSA West	\$1,028.76	\$3,376.15	\$234.01	\$1,425.13

	IDD	IDD
Health Plan	Under 21	Over 21
Monthly Premium Rates		
Amerigroup - Bexar	\$2,066.26	\$872.39
Molina - Bexar	\$2,066.26	\$872.39
Superior - Bexar	\$2,066.26	\$872.39
Molina - Dallas	\$1,977.91	\$709.39
Superior - Dallas	\$1,977.91	\$709.39
Amerigroup - El Paso	\$1,826.29	\$1,017.34
Molina - El Paso	\$1,826.29	\$1,017.34
Amerigroup - Harris	\$2,191.65	\$923.76
Molina - Harris	\$2,191.65	\$923.76
United - Harris	\$2,191.65	\$923.76
Health Spring - Hidalgo	\$3,167.03	\$964.64
Molina - Hidalgo	\$3,167.03	\$964.64
Superior - Hidalgo	\$3,167.03	\$964.64
Amerigroup - Jefferson	\$1,888.61	\$702.54
Molina - Jefferson	\$1,888.61	\$702.54
United - Jefferson	\$1,888.61	\$702.54
Amerigroup - Lubbock	\$2,111.99	\$834.83
Superior - Lubbock	\$2,111.99	\$834.83
Superior - Nueces	\$1,372.76	\$1,042.07
United - Nueces	\$1,372.76	\$1,042.07
Amerigroup - Tarrant	\$1,408.78	\$805.25
Health Spring - Tarrant	\$1,408.78	\$805.25
Amerigroup - Travis	\$1,913.35	\$894.24
United - Travis	\$1,913.35	\$894.24
Superior - MRSA Central	\$1,268.08	\$850.60
United - MRSA Central	\$1,268.08	\$850.60
Health Spring - MRSA Northeast	\$1,034.20	\$826.33
United - MRSA Northeast	\$1,034.20	\$826.33
Amerigroup - MRSA West	\$1,092.54	\$865.75
Superior - MRSA West	\$1,092.54	\$865.75

Attachment 1 presents additional information regarding the FY2015 rates including a comparison to current (FY2014) rates. Attachments 11 and 12 contain additional information regarding the FY2015 STAR+PLUS MRSA and IDD rates, respectively.

VI. Actuarial Certification of FY2015 STAR+PLUS HMO Premium Rates

I, Evan L. Dial, am a principal with the firm of Rudd and Wisdom, Inc., Consulting Actuaries (Rudd and Wisdom). I am a Fellow of the Society of Actuaries and a member of the American Academy of Actuaries. I 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 their state fiscal year 2015 (FY2015) managed care rate-setting methodology, assumptions and resulting premium rates and to provide the actuarial certification required under Centers for Medicare and Medicaid Services (CMS) requirements 42 CFR 438.6(c).

I certify that the FY2015 HMO premium rates developed by HHSC and Rudd and Wisdom satisfy the following:

- (a) The premium rates have been developed in accordance with generally accepted actuarial principals and practices;
- (b) The premium rates are appropriate for the populations and services covered under the managed care contract; and
- (c) The premium rates are 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.

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 438.6(c). 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.

VII. Attachments

Attachment 1

Summary of FY2015 STAR+PLUS Rating Analysis

The attached exhibit presents summary information regarding the FY2015 rates for the existing STAR+PLUS areas and risk groups (non MRSA and non IDD). Included on the exhibit are current premium rates by component, FY2015 premium rates by component and the percentage rate change by component. Information regarding the MRSA and IDD rate development can be found in Attachments 11 and 12.

	Medicaid Only		Dual Eligible	
•	OCC	HCBS	OCC	HCBS
C / / / / / / / A . O / (21 / / 1 A) . A				
Current (4/1/14-8/31/14) Ac	_			0.00
Amerigroup - Bexar	373.54	1,028.44	0.00	0.00
Molina - Bexar	342.48	1,040.62	0.00	0.00
Superior - Bexar	400.84	1,036.47	0.00	0.00
Molina - Dallas	353.55	985.41	0.00	0.00
Superior - Dallas	364.08	1,022.51	0.00	0.00
Amerigroup - El Paso	344.92	921.67	0.00	0.00
Molina - El Paso	380.91	802.49	0.00	0.00
Amerigroup - Harris	423.60	1,371.23	0.00	0.00
Molina - Harris	397.45	1,356.27	0.00	0.00
United - Harris	484.26	1,240.67	0.00	0.00
Health Spring - Hidalgo	414.84	733.60	0.00	0.00
Molina - Hidalgo	410.46	837.97	0.00	0.00
Superior - Hidalgo	442.64	768.00	0.00	0.00
Amerigroup - Jefferson	356.11	769.04	0.00	0.00
Molina - Jefferson	395.67	743.09	0.00	0.00
United - Jefferson	409.53	1,004.93	0.00	0.00
Amerigroup - Lubbock	360.50	699.26	0.00	0.00
Superior - Lubbock	371.15	800.85	0.00	0.00
Superior - Nueces	450.42	1,036.44	0.00	0.00
United - Nueces	415.80	945.50	0.00	0.00
Amerigroup - Tarrant	414.97	892.13	0.00	0.00
Health Spring - Tarrant	362.78	986.66	0.00	0.00
Amerigroup - Travis	483.26	1,167.13	0.00	0.00
United - Travis	443.71	1,050.45	0.00	0.00
C	. A. Cara (Innerican	() D		
Current (4/1/14-8/31/14) Ac	_			0.00
Amerigroup - Bexar	178.78	545.25	0.00	0.00
Molina - Bexar	163.90	551.72	0.00	0.00
Superior - Bexar	191.84	549.51	0.00	0.00
Molina - Dallas	203.83	582.97	0.00	0.00
Superior - Dallas	209.90	604.93	0.00	0.00
Amerigroup - El Paso	177.49	608.09	0.00	0.00
Molina - El Paso	196.00	529.47	0.00	0.00
Amerigroup - Harris	278.23	1,046.19	0.00	0.00
Molina - Harris	261.08	1,034.78	0.00	0.00
United - Harris	318.10	946.57	0.00	0.00
Health Spring - Hidalgo	146.19	373.15	0.00	0.00
Molina - Hidalgo	144.68	426.23	0.00	0.00
Superior - Hidalgo	156.01	390.62	0.00	0.00
Amerigroup - Jefferson	250.06	548.76	0.00	0.00
Molina - Jefferson	277.84	530.24	0.00	0.00
United - Jefferson	287.56	717.07	0.00	0.00
Amerigroup - Lubbock	243.52	417.95	0.00	0.00
Superior - Lubbock	250.71	478.66	0.00	0.00
Superior - Nueces	229.82	700.15	0.00	0.00
United - Nueces	212.15	638.72	0.00	0.00
Amerigroup - Tarrant	203.17	569.65	0.00	0.00
Health Spring - Tarrant	177.65	630.01	0.00	0.00
Amerigroup - Travis	256.26	722.60	0.00	0.00
United - Travis	235.28	650.35	0.00	0.00

	Medicaid Only		Dual Eligible	
- -	OCC	HCBS	OCC	HCBS
C	T C D	·		
Current (4/1/14-8/31/14) Lo	-			1 710 41
Amerigroup - Bexar	216.01	1,634.36	332.76	1,712.41
Molina - Bexar	216.01	1,634.36	332.76	1,712.41
Superior - Bexar	216.01	1,634.36	332.76	1,712.41
Molina - Dallas	152.27	1,613.96	254.49	1,521.19
Superior - Dallas	152.27	1,613.96	254.49	1,521.19
Amerigroup - El Paso	192.54	2,112.79	374.53	2,056.83
Molina - El Paso	192.54	2,112.79	374.53	2,056.83
Amerigroup - Harris	230.69	1,577.53	313.27	1,517.27
Molina - Harris	230.69	1,577.53	313.27	1,517.27
United - Harris	230.69	1,577.53	313.27	1,517.27
Health Spring - Hidalgo	530.37	1,980.03	891.17	1,988.60
Molina - Hidalgo	530.37	1,980.03	891.17	1,988.60
Superior - Hidalgo	530.37	1,980.03	891.17	1,988.60
Amerigroup - Jefferson	95.61	1,417.38	194.91	1,398.86
Molina - Jefferson	95.61	1,417.38	194.91	1,398.86
United - Jefferson	95.61	1,417.38	194.91	1,398.86
Amerigroup - Lubbock	83.15	1,439.81	142.15	1,208.99
Superior - Lubbock	83.15	1,439.81	142.15	1,208.99
Superior - Nueces	299.99	1,553.83	430.45	1,588.63
United - Nueces	299.99	1,553.83	430.45	1,588.63
Amerigroup - Tarrant	114.26	1,871.52	192.66	1,469.76
Health Spring - Tarrant	114.26	1,871.52	192.66	1,469.76
Amerigroup - Travis	146.73	1,716.09	229.87	1,661.52
United - Travis	146.73	1,716.09	229.87	1,661.52
Current (4/1/14-8/31/14) Pro	escription Drug Pre	mium Rates pmp	m	
Amerigroup - Bexar	381.98	743.50	0.00	0.00
Molina - Bexar	350.23	752.34	0.00	0.00
Superior - Bexar	409.88	749.35	0.00	0.00
Molina - Dallas	320.73	719.41	0.00	0.00
Superior - Dallas	330.26	746.48	0.00	0.00
Amerigroup - El Paso	391.65	677.44	0.00	0.00
Molina - El Paso	432.52	589.84	0.00	0.00
Amerigroup - Harris	371.43	828.54	0.00	0.00
Molina - Harris	348.51	819.49	0.00	0.00
United - Harris	424.62	749.64	0.00	0.00
Health Spring - Hidalgo	309.13	610.86	0.00	0.00
Molina - Hidalgo	305.88	697.77	0.00	0.00
Superior - Hidalgo	329.85	639.48	0.00	0.00
Amerigroup - Jefferson	333.76	681.15	0.00	0.00
Molina - Jefferson	370.82	658.16	0.00	0.00
United - Jefferson	383.80	890.08	0.00	0.00
Amerigroup - Lubbock	361.71	504.31	0.00	0.00
Superior - Lubbock	372.38	577.58	0.00	0.00
Superior - Nueces	382.53	690.54	0.00	0.00
United - Nueces	353.10	629.96	0.00	0.00
Amerigroup - Tarrant	412.03	797.77	0.00	0.00
Health Spring - Tarrant	360.22	882.30	0.00	0.00
Amerigroup - Travis	403.72	905.39	0.00	0.00
United - Travis	370.68	814.87	0.00	0.00
Cinica Travis	370.00	017.07	0.00	0.00

	Medicaid Only		Dual Eligible		
<u>-</u>	OCC	HCBS	OCC	HCBS	
_					
Current Total Premium Rate					
Amerigroup - Bexar	1,150.31	3,951.55	332.76	1,712.41	
Molina - Bexar	1,072.62	3,979.04	332.76	1,712.41	
Superior - Bexar	1,218.57	3,969.69	332.76	1,712.41	
Molina - Dallas	1,030.38	3,901.75	254.49	1,521.19	
Superior - Dallas	1,056.51	3,987.88	254.49	1,521.19	
Amerigroup - El Paso	1,106.60	4,319.99	374.53	2,056.83	
Molina - El Paso	1,201.97	4,034.59	374.53	2,056.83	
Amerigroup - Harris	1,303.95	4,823.49	313.27	1,517.27	
Molina - Harris	1,237.73	4,788.07	313.27	1,517.27	
United - Harris	1,457.67	4,514.41	313.27	1,517.27	
Health Spring - Hidalgo	1,400.53	3,697.64	891.17	1,988.60	
Molina - Hidalgo	1,391.39	3,942.00	891.17	1,988.60	
Superior - Hidalgo	1,458.87	3,778.13	891.17	1,988.60	
Amerigroup - Jefferson	1,035.54	3,416.33	194.91	1,398.86	
Molina - Jefferson	1,139.94	3,348.87	194.91	1,398.86	
United - Jefferson	1,176.50	4,029.46	194.91	1,398.86	
Amerigroup - Lubbock	1,048.88	3,061.33	142.15	1,208.99	
Superior - Lubbock	1,077.39	3,296.90	142.15	1,208.99	
Superior - Nueces	1,362.76	3,980.96	430.45	1,588.63	
United - Nueces	1,281.04	3,768.01	430.45	1,588.63	
Amerigroup - Tarrant	1,144.43	4,131.07	192.66	1,469.76	
Health Spring - Tarrant	1,014.91	4,370.49	192.66	1,469.76	
Amerigroup - Travis	1,289.97	4,511.21	229.87	1,661.52	
United - Travis	1,196.40	4,231.76	229.87	1,661.52	
FY2015 Acute Care (Non-In	-		-	-	
Amerigroup - Bexar	391.29	1,021.29	0.00	0.00	
Molina - Bexar	351.13	907.75	0.00	0.00	
Superior - Bexar	413.73	1,049.23	0.00	0.00	
Molina - Dallas	332.94	1,059.93	0.00	0.00	
Superior - Dallas	333.57	1,057.44	0.00	0.00	
Amerigroup - El Paso	404.88	1,321.16	0.00	0.00	
Molina - El Paso	407.51	1,185.82	0.00	0.00	
Amerigroup - Harris	418.00	1,334.67	0.00	0.00	
Molina - Harris	395.29	1,241.73	0.00	0.00	
United - Harris	489.58	1,162.50	0.00	0.00	
Health Spring - Hidalgo	397.26	797.56	0.00	0.00	
Molina - Hidalgo	371.96	1,023.83	0.00	0.00	
Superior - Hidalgo	385.46	832.16	0.00	0.00	
Amerigroup - Jefferson	364.71	1,126.46	0.00	0.00	
Molina - Jefferson	394.18	961.10	0.00	0.00	
United - Jefferson	461.42	1,162.70	0.00	0.00	
Amerigroup - Lubbock	417.32	768.32	0.00	0.00	
Superior - Lubbock	389.42	818.24	0.00	0.00	
Superior - Nueces	408.55	954.34	0.00	0.00	
United - Nueces	380.08	856.31	0.00	0.00	
Amerigroup - Tarrant	441.15	970.69	0.00	0.00	
Health Spring - Tarrant	376.66	765.24	0.00	0.00	
Amerigroup - Travis	449.96	1,220.22	0.00	0.00	
United - Travis	433.97	1,117.93	0.00	0.00	

FY2015 Acute Care (Inpatient) Premium Rates pmpm (Community Rates with Risk Adjustment) Amerigroup - Bexar		Medicaid Only		Dual Eligible	
Amerigroup - Bexar 176.24 573.61 0.00 0.00 Molina - Bexar 186.35 589.31 0.00 0.00 Superior - Bexar 186.35 589.31 0.00 0.00 Molina - Dallas 221.47 756.44 0.00 0.00 Superior - Dallas 221.90 754.66 0.00 0.00 Amerigroup - El Paso 213.28 871.61 0.00 0.00 Molina - Harris 246.58 931.46 0.00 0.00 Molina - Harris 233.18 866.60 0.00 0.00 United - Harris 288.80 811.31 0.00 0.00 Health Spring - Hidalgo 147.76 388.48 0.00 0.00 Molina - Jefferson 231.27 613.79 0.00 0.00 Superior - Hidalgo 143.37 405.33 0.00 0.00 Molina - Jefferson 292.60 633.54 0.00 0.00 Molina - Jefferson 292.60 633.54 0.00 0.00 <th>- -</th> <th></th> <th></th> <th></th> <th></th>	- -				
Amerigroup - Bexar 176.24 573.61 0.00 0.00 Molina - Bexar 186.35 589.31 0.00 0.00 Superior - Bexar 186.35 589.31 0.00 0.00 Molina - Dallas 221.47 756.44 0.00 0.00 Superior - Dallas 221.90 754.66 0.00 0.00 Amerigroup - El Paso 213.28 871.61 0.00 0.00 Molina - Harris 246.58 931.46 0.00 0.00 Molina - Harris 233.18 866.60 0.00 0.00 United - Harris 288.80 811.31 0.00 0.00 Health Spring - Hidalgo 147.76 388.48 0.00 0.00 Molina - Jefferson 231.27 613.79 0.00 0.00 Superior - Hidalgo 143.37 405.33 0.00 0.00 Molina - Jefferson 292.60 633.54 0.00 0.00 Molina - Jefferson 292.60 633.54 0.00 0.00 <td>EV2015 A Com (Lond)</td> <td>() D</td> <td>(C)</td> <td>de Darre da Dir</td> <td>1 A 1' - (</td>	EV2015 A Com (Lond)	() D	(C)	de Darre da Dir	1 A 1' - (
Molina - Bexar 158.15 509.84 0.00 0.00 Superior - Bexar 186.35 589.31 0.00 0.00 0.00 Molina - Dallas 221.47 756.44 0.00 0.00 0.00 Superior - Dallas 221.90 754.66 0.00 0.00 0.00 Amerigroup - El Paso 213.28 871.61 0.00 0.00 0.00 Amerigroup - Harris 246.58 931.46 0.00 0.00 0.00 Molina - Harris 233.18 866.60 0.00 0.00 0.00 Molina - Harris 288.80 811.31 0.00 0.00 0.00 Health Spring - Hidalgo 147.76 388.48 0.00 0.00 0.00 Molina - Hidalgo 138.34 498.70 0.00 0.00 0.00 Molina - Hidalgo 143.37 405.33 0.00 0.0	_			-	-
Superior - Bexar 186.35 589.31 0.00 0.00 Molina - Dallas 221.47 756.44 0.00 0.00 0.00 Superior - Dallas 221.90 754.66 0.00 0.00 0.00 Amerigroup - El Paso 213.28 871.61 0.00 0.00 0.00 Molina - El Paso 214.67 782.32 0.00 0.00 0.00 Molina - El Paso 214.67 782.32 0.00 0.00 0.00 Molina - Harris 246.58 931.46 0.00 0.00 0.00 Molina - Harris 233.18 866.60 0.00 0.00 0.00 Molina - Harris 288.80 811.31 0.00 0.00 0.00 Molina - Hidalgo 147.76 388.48 0.00 0.00 0.00 Molina - Hidalgo 143.37 405.33 0.00 0.00 0.00 Molina - Hidalgo 143.37 405.33 0.00 0.0	U I				
Molina - Dallas 221.47 756.44 0.00 0.00 Superior - Dallas 221.90 754.66 0.00 0.00 0.00 Molina - El Paso 213.28 871.61 0.00 0.00 Molina - El Paso 214.67 782.32 0.00 0.00 0.00 Molina - El Paso 214.67 782.32 0.00 0.00 0.00 Molina - Harris 246.58 931.46 0.00 0.0					
Superior - Dallas 221.90 754.66 0.00 0.00 Amerigroup - El Paso 213.28 871.61 0.00 0.00 0.00 Amerigroup - Harris 246.58 931.46 0.00 0.00 0.00 Amerigroup - Harris 246.58 931.46 0.00 0.00 0.00 Molina - Harris 233.18 866.60 0.00 0	•				
Amerigroup - El Paso 213.28 871.61 0.00 0.00 Molina - El Paso 214.67 782.32 0.00 0.00 Amerigroup - Harris 246.58 931.46 0.00 0.00 Molina - Harris 233.18 866.60 0.00 0.00 United - Harris 288.80 811.31 0.00 0.00 Health Spring - Hidalgo 143.37 405.33 0.00 0.00 Superior - Hidalgo 143.37 405.33 0.00 0.00 Amerigroup - Jefferson 231.27 613.79 0.00 0.00 Molina - Jefferson 292.60 633.54 0.00 0.00 United - Jefferson 292.60 633.54 0.00 0.00 Superior - Lubbock 227.56 449.23 0.00 0.00 Superior - Lubbock 227.56 449.23 0.00 0.00 Superior - Nueces 194.92 658.89 0.00 0.00 United - Nueces 181.34 591.21 0.00 0.00 </td <td></td> <td></td> <td></td> <td></td> <td></td>					
Molina - El Paso	-				
Amerigroup - Harris 246.58 931.46 0.00 0.00 Molina - Harris 233.18 866.60 0.00 0.00 United - Harris 288.80 811.31 0.00 0.00 Health Spring - Hidalgo 143.37 405.33 0.00 0.00 Superior - Hidalgo 143.37 405.33 0.00 0.00 Molina - Jefferson 231.27 613.79 0.00 0.00 Molina - Jefferson 249.96 523.69 0.00 0.00 Junited - Jefferson 292.60 633.54 0.00 0.00 Amerigroup - Lubbock 243.86 421.82 0.00 0.00 Superior - Nueces 194.92 658.89 0.00 0.00 Superior - Nueces 194.92 658.89 0.00 0.00 Junited - Nueces 181.34 591.21 0.00 0.00 Amerigroup - Tarant 248.20 499.62 0.00 0.00 Health Spring - Tarrant 211.92 393.87 0.00 0	U 1				
Molina - Harris					
United - Harris 288.80 811.31 0.00 0.00 Health Spring - Hidalgo 147.76 388.48 0.00 0.00 Molina - Hidalgo 138.34 498.70 0.00 0.00 Superior - Hidalgo 143.37 405.33 0.00 0.00 Amerigroup - Jefferson 231.27 613.79 0.00 0.00 Molina - Jefferson 249.96 523.69 0.00 0.00 Molina - Jefferson 292.60 633.54 0.00 0.00 Amerigroup - Lubbock 243.86 421.82 0.00 0.00 Superior - Lubbock 227.56 449.23 0.00 0.00 Superior - Nueces 194.92 658.89 0.00 0.00 Amerigroup - Tarrant 248.20 499.62 0.00 0.00 Amerigroup - Tarrant 211.92 393.87 0.00 0.00 Health Spring - Tarrant 211.92 393.87 0.00 0.00 Health Spring - Tarvis 222.132 639.74 0.00					
Health Spring - Hidalgo					
Molina - Hidalgo 138.34 498.70 0.00 0.00 Superior - Hidalgo 143.37 405.33 0.00 0.00 Amerigroup - Jefferson 231.27 613.79 0.00 0.00 Molina - Jefferson 249.96 523.69 0.00 0.00 Lunited - Jefferson 292.60 633.54 0.00 0.00 Amerigroup - Lubbock 243.86 421.82 0.00 0.00 Superior - Nueces 194.92 658.89 0.00 0.00 Superior - Nueces 181.34 591.21 0.00 0.00 Lunited - Nueces 181.34 591.21 0.00 0.00 Amerigroup - Tarrant 211.92 393.87 0.00 0.00 Amerigroup - Travis 229.47 698.27 0.00 0.00 United - Travis 221.32 639.74 0.00 0.00 FY2015 Long Term Care Premium Rates pmpm (Community Rates) Community Rates Community Rates Community Rates Amerigroup - Bexar 222.75 1,67					
Superior - Hidalgo 143.37 405.33 0.00 0.00 Amerigroup - Jefferson 231.27 613.79 0.00 0.00 Molina - Jefferson 249.96 523.69 0.00 0.00 United - Jefferson 292.60 633.54 0.00 0.00 Amerigroup - Lubbock 243.86 421.82 0.00 0.00 Superior - Lubbock 227.56 449.23 0.00 0.00 Superior - Nueces 194.92 658.89 0.00 0.00 United - Nueces 181.34 591.21 0.00 0.00 Amerigroup - Tarrant 248.20 499.62 0.00 0.00 Health Spring - Tarrant 211.92 393.87 0.00 0.00 Amerigroup - Travis 229.47 698.27 0.00 0.00 United - Travis 221.32 639.74 0.00 0.00 FY2015 Long Term Care Premium Rates pmpm (Community Rates) Amerigroup - Bexar 222.75 1,675.96 336.56 1,690.86					
Amerigroup - Jefferson 231.27 613.79 0.00 0.00 Molina - Jefferson 249.96 523.69 0.00 0.00 United - Jefferson 292.60 633.54 0.00 0.00 Amerigroup - Lubbock 243.86 421.82 0.00 0.00 Superior - Lubbock 227.56 449.23 0.00 0.00 Superior - Nueces 194.92 658.89 0.00 0.00 United - Nueces 181.34 591.21 0.00 0.00 Health Spring - Tarrant 211.92 393.87 0.00 0.00 Health Spring - Tarrant 211.92 393.87 0.00 0.00 Amerigroup - Travis 229.47 698.27 0.00 0.00 Molina - Travis 2221.32 639.74 0.00 0.00 FY2015 Long Term Care Premium Rates pmpm (Community Rates) Amerigroup - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86	_				
Molina - Jefferson 249.96 523.69 0.00 0.00 United - Jefferson 292.60 633.54 0.00 0.00 Amerigroup - Lubbock 243.86 421.82 0.00 0.00 Superior - Lubbock 227.56 449.23 0.00 0.00 Superior - Nueces 194.92 658.89 0.00 0.00 United - Nueces 181.34 591.21 0.00 0.00 Amerigroup - Tarrant 248.20 499.62 0.00 0.00 Health Spring - Tarrant 211.92 393.87 0.00 0.00 Junited - Travis 229.47 698.27 0.00 0.00 Wolina - Travis 221.32 639.74 0.00 0.00 FY2015 Long Term Care Premium Rates pmpm (Community Rates) Amerigroup - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86 Superior - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Dallas <td></td> <td></td> <td></td> <td></td> <td></td>					
United - Jefferson 292.60 633.54 0.00 0.00 Amerigroup - Lubbock 243.86 421.82 0.00 0.00 Superior - Lubbock 227.56 449.23 0.00 0.00 Superior - Nueces 194.92 658.89 0.00 0.00 United - Nueces 181.34 591.21 0.00 0.00 Amerigroup - Tarrant 248.20 499.62 0.00 0.00 Health Spring - Tarrant 211.92 393.87 0.00 0.00 Amerigroup - Tarvis 229.47 698.27 0.00 0.00 United - Travis 221.32 639.74 0.00 0.00 FY2015 Long Term Care Premium Rates pmpm (Community Rates) Amerigroup - Bexar 222.75 1,675.96 336.56 1,690.86 Superior - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86	- 1				
Amerigroup - Lubbock 243.86 421.82 0.00 0.00 Superior - Lubbock 227.56 449.23 0.00 0.00 Superior - Nueces 194.92 658.89 0.00 0.00 United - Nueces 181.34 591.21 0.00 0.00 Amerigroup - Tarrant 248.20 499.62 0.00 0.00 Health Spring - Tarrant 211.92 393.87 0.00 0.00 Amerigroup - Tarvis 229.47 698.27 0.00 0.00 United - Travis 221.32 639.74 0.00 0.00 FY2015 Long Term Care Premium Rates pmpm (Community Rates) Amerigroup - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86 Superior - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Dallas 165.70 1,544.86 274.04 1,453.19 Amerigroup - El Paso 220.60 1,823.59 405.58 1,866.41					
Superior - Lubbock 227.56 449.23 0.00 0.00 Superior - Nueces 194.92 658.89 0.00 0.00 United - Nueces 181.34 591.21 0.00 0.00 Amerigroup - Tarrant 248.20 499.62 0.00 0.00 Health Spring - Tarrant 211.92 393.87 0.00 0.00 Amerigroup - Travis 229.47 698.27 0.00 0.00 United - Travis 221.32 639.74 0.00 0.00 FY2015 Long Term Care Premium Rates pmpm (Community Rates) Amerigroup - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86 Superior - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86 Superior - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86		292.60		0.00	0.00
Superior - Nueces 194.92 658.89 0.00 0.00 United - Nueces 181.34 591.21 0.00 0.00 Amerigroup - Tarrant 248.20 499.62 0.00 0.00 Health Spring - Tarrant 211.92 393.87 0.00 0.00 Amerigroup - Travis 229.47 698.27 0.00 0.00 United - Travis 221.32 639.74 0.00 0.00 FY2015 Long Term Care Premium Rates pmpm (Community Rates) Amerigroup - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Dallas 165.70 1,544.86 274.04 1,453.19 Superior - Dallas 165.70 1,544.86 274.04 1,453.19 Amerigroup - El Paso 220.60 1,823.59 405.58 1,866.41 Molina - Harris 220.83 1,740.23 302.86 1,580.		243.86	421.82	0.00	0.00
United - Nueces 181.34 591.21 0.00 0.00 Amerigroup - Tarrant 248.20 499.62 0.00 0.00 Health Spring - Tarrant 211.92 393.87 0.00 0.00 Amerigroup - Travis 229.47 698.27 0.00 0.00 United - Travis 221.32 639.74 0.00 0.00 FY2015 Long Term Care Premium Rates pmpm (Community Rates) Amerigroup - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86 Superior - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Dallas 165.70 1,544.86 274.04 1,453.19 Superior - Dallas 165.70 1,544.86 274.04 1,453.19 Superior - El Paso 220.60 1,823.59 405.58 1,866.41 Molina - El Paso 220.60 1,823.59 405.58 1,866.41 Amerigroup - Harris 220.83 1,740.23 302.86	*	227.56	449.23	0.00	0.00
Amerigroup - Tarrant 248.20 499.62 0.00 0.00 Health Spring - Tarrant 211.92 393.87 0.00 0.00 Amerigroup - Travis 229.47 698.27 0.00 0.00 United - Travis 221.32 639.74 0.00 0.00 FY2015 Long Term Care Premium Rates pmpm (Community Rates) Amerigroup - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86 Superior - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Dallas 165.70 1,544.86 274.04 1,453.19 Superior - Dallas 165.70 1,544.86 274.04 1,453.19 Amerigroup - El Paso 220.60 1,823.59 405.58 1,866.41 Molina - El Paso 220.60 1,823.59 405.58 1,866.41 Amerigroup - Harris 220.83 1,740.23 302.86 1,580.59 United - Harris 220.83 1,740.23 302.86 <td>Superior - Nueces</td> <td>194.92</td> <td>658.89</td> <td>0.00</td> <td>0.00</td>	Superior - Nueces	194.92	658.89	0.00	0.00
Health Spring - Tarrant 211.92 393.87 0.00 0.00 Amerigroup - Travis 229.47 698.27 0.00 0.00 United - Travis 221.32 639.74 0.00 0.00 FY2015 Long Term Care Premium Rates pmpm (Community Rates) Amerigroup - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86 Superior - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Dallas 165.70 1,544.86 274.04 1,453.19 Superior - Dallas 165.70 1,544.86 274.04 1,453.19 Amerigroup - El Paso 220.60 1,823.59 405.58 1,866.41 Molina - El Paso 220.60 1,823.59 405.58 1,866.41 Amerigroup - Harris 220.83 1,740.23 302.86 1,580.59 Molina - Harris 220.83 1,740.23 302.86 1,580.59 United - Harris 220.83 1,740.23 302.86	United - Nueces	181.34	591.21	0.00	0.00
Amerigroup - Travis 229.47 698.27 0.00 0.00 United - Travis 221.32 639.74 0.00 0.00 FY2015 Long Term Care Premium Rates pmpm (Community Rates) Amerigroup - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Dallas 165.70 1,544.86 274.04 1,453.19 Superior - Dallas 165.70 1,544.86 274.04 1,453.19 Amerigroup - El Paso 220.60 1,823.59 405.58 1,866.41 Molina - El Paso 220.60 1,823.59 405.58 1,580.59 Molina - Harris 220.83 1,740.23 302.86 1,580.59 United - Hidalgo 572.93 1,966.21 925.85 <td>Amerigroup - Tarrant</td> <td>248.20</td> <td>499.62</td> <td>0.00</td> <td>0.00</td>	Amerigroup - Tarrant	248.20	499.62	0.00	0.00
United - Travis 221.32 639.74 0.00 0.00 FY2015 Long Term Care Premium Rates pmpm (Community Rates) Amerigroup - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86 Superior - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Dallas 165.70 1,544.86 274.04 1,453.19 Superior - Dallas 165.70 1,544.86 274.04 1,453.19 Amerigroup - El Paso 220.60 1,823.59 405.58 1,866.41 Molina - El Paso 220.60 1,823.59 405.58 1,866.41 Amerigroup - Harris 220.83 1,740.23 302.86 1,580.59 United - Harris 220.83 1,740.23 302.86 1,580.59 Health Spring - Hidalgo 572.93 1,966.21 925.85 1,896.11 Molina - Hidalgo 572.93 1,966.21 925.85 1,896.11 Superior - Hidal	Health Spring - Tarrant	211.92	393.87	0.00	0.00
FY2015 Long Term Care Premium Rates pmpm (Community Rates) Amerigroup - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86 Superior - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Dallas 165.70 1,544.86 274.04 1,453.19 Superior - Dallas 165.70 1,544.86 274.04 1,453.19 Amerigroup - El Paso 220.60 1,823.59 405.58 1,866.41 Molina - El Paso 220.60 1,823.59 405.58 1,866.41 Amerigroup - Harris 220.83 1,740.23 302.86 1,580.59 Molina - Harris 220.83 1,740.23 302.86 1,580.59 United - Harris 220.83 1,740.23 302.86 1,580.59 Health Spring - Hidalgo 572.93 1,966.21 925.85 1,896.11 Molina - Hidalgo 572.93 1,966.21 925.85 1,896.11 Superior - Hidalgo 572.93 1,966.21 925.85 1,896.11 Amerigroup - Jefferson 105.30 1,506.70 213.67 1,404.62 Molina - Jefferson 105.30 1,506.70 213.67 1,404.62 United - Jefferson 105.30 1,506.70 213.67 1,404.62 Amerigroup - Lubbock 81.98 1,456.53 142.92 1,251.09 Superior - Nueces 286.96 1,586.32 420.12 1,572.55 United - Nueces 286.96 1,586.32 420.12 1,572.55 Amerigroup - Tarrant 121.60 1,715.62 197.10 1,504.85 Health Spring - Tarrant 121.60 1,715.62 197.10 1,504.85 Amerigroup - Tarrant 121.60 1,715.62 197.10 1,504.85 Amerigroup - Tarrant 121.60 1,715.62 197.10 1,504.85 Amerigroup - Tarrant 121.60 1,715.62 197.10 1,504.85	Amerigroup - Travis	229.47	698.27	0.00	0.00
Amerigroup - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86 Superior - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Dallas 165.70 1,544.86 274.04 1,453.19 Superior - Dallas 165.70 1,544.86 274.04 1,453.19 Amerigroup - El Paso 220.60 1,823.59 405.58 1,866.41 Molina - El Paso 220.60 1,823.59 405.58 1,866.41 Amerigroup - Harris 220.83 1,740.23 302.86 1,580.59 Molina - Harris 220.83 1,740.23 302.86 1,580.59 United - Harris 220.83 1,740.23 302.86 1,580.59 Health Spring - Hidalgo 572.93 1,966.21 925.85 1,896.11 Molina - Hidalgo 572.93 1,966.21 925.85 1,896.11 Superior - Hidalgo 572.93 1,966.21 925.85 1,896.11 Amerigroup - Jeffers	United - Travis	221.32	639.74	0.00	0.00
Amerigroup - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Bexar 222.75 1,675.96 336.56 1,690.86 Superior - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Dallas 165.70 1,544.86 274.04 1,453.19 Superior - Dallas 165.70 1,544.86 274.04 1,453.19 Amerigroup - El Paso 220.60 1,823.59 405.58 1,866.41 Molina - El Paso 220.60 1,823.59 405.58 1,866.41 Amerigroup - Harris 220.83 1,740.23 302.86 1,580.59 Molina - Harris 220.83 1,740.23 302.86 1,580.59 United - Harris 220.83 1,740.23 302.86 1,580.59 Health Spring - Hidalgo 572.93 1,966.21 925.85 1,896.11 Molina - Hidalgo 572.93 1,966.21 925.85 1,896.11 Superior - Hidalgo 572.93 1,966.21 925.85 1,896.11 Amerigroup - Jeffers	EV2015 Long Town Com Dr	omium Datas mmm	m (Community D	otas)	
Molina - Bexar 222.75 1,675.96 336.56 1,690.86 Superior - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Dallas 165.70 1,544.86 274.04 1,453.19 Superior - Dallas 165.70 1,544.86 274.04 1,453.19 Amerigroup - El Paso 220.60 1,823.59 405.58 1,866.41 Molina - El Paso 220.60 1,823.59 405.58 1,866.41 Amerigroup - Harris 220.83 1,740.23 302.86 1,580.59 Molina - Harris 220.83 1,740.23 302.86 1,580.59 United - Harris 220.83 1,740.23 302.86 1,580.59 Health Spring - Hidalgo 572.93 1,966.21 925.85 1,896.11 Molina - Hidalgo 572.93 1,966.21 925.85 1,896.11 Superior - Hidalgo 572.93 1,966.21 925.85 1,896.11 Amerigroup - Jefferson 105.30 1,506.70 213.67 1,404.62 Molina - Jeffers	_		-		1 (00 9)
Superior - Bexar 222.75 1,675.96 336.56 1,690.86 Molina - Dallas 165.70 1,544.86 274.04 1,453.19 Superior - Dallas 165.70 1,544.86 274.04 1,453.19 Amerigroup - El Paso 220.60 1,823.59 405.58 1,866.41 Molina - El Paso 220.60 1,823.59 405.58 1,866.41 Amerigroup - Harris 220.83 1,740.23 302.86 1,580.59 Molina - Harris 220.83 1,740.23 302.86 1,580.59 United - Harris 220.83 1,740.23 302.86 1,580.59 United - Harris 220.83 1,740.23 302.86 1,580.59 Health Spring - Hidalgo 572.93 1,966.21 925.85 1,896.11 Molina - Hidalgo 572.93 1,966.21 925.85 1,896.11 Amerigroup - Jefferson 105.30 1,506.70 213.67 1,404.62 Molina - Jefferson 105.30 1,506.70 213.67 1,404.62 United - Jeffer					
Molina - Dallas165.701,544.86274.041,453.19Superior - Dallas165.701,544.86274.041,453.19Amerigroup - El Paso220.601,823.59405.581,866.41Molina - El Paso220.601,823.59405.581,866.41Amerigroup - Harris220.831,740.23302.861,580.59Molina - Harris220.831,740.23302.861,580.59United - Harris220.831,740.23302.861,580.59Health Spring - Hidalgo572.931,966.21925.851,896.11Molina - Hidalgo572.931,966.21925.851,896.11Superior - Hidalgo572.931,966.21925.851,896.11Amerigroup - Jefferson105.301,506.70213.671,404.62Molina - Jefferson105.301,506.70213.671,404.62United - Jefferson105.301,506.70213.671,404.62Amerigroup - Lubbock81.981,456.53142.921,251.09Superior - Nueces286.961,586.32420.121,572.55United - Nueces286.961,586.32420.121,572.55United - Nueces286.961,586.32420.121,572.55Amerigroup - Tarrant121.601,715.62197.101,504.85Health Spring - Tarrant121.601,715.62197.101,504.85Amerigroup - Travis143.091,857.36213.441,599.59					
Superior - Dallas 165.70 1,544.86 274.04 1,453.19 Amerigroup - El Paso 220.60 1,823.59 405.58 1,866.41 Molina - El Paso 220.60 1,823.59 405.58 1,866.41 Amerigroup - Harris 220.83 1,740.23 302.86 1,580.59 Molina - Harris 220.83 1,740.23 302.86 1,580.59 United - Harris 220.83 1,740.23 302.86 1,580.59 Health Spring - Hidalgo 572.93 1,966.21 925.85 1,896.11 Molina - Hidalgo 572.93 1,966.21 925.85 1,896.11 Superior - Hidalgo 572.93 1,966.21 925.85 1,896.11 Amerigroup - Jefferson 105.30 1,506.70 213.67 1,404.62 Molina - Jefferson 105.30 1,506.70 213.67 1,404.62 United - Jefferson 105.30 1,506.70 213.67 1,404.62 United - Jefferson 105.30 1,506.70 213.67 1,404.62 Superio					
Amerigroup - El Paso220.601,823.59405.581,866.41Molina - El Paso220.601,823.59405.581,866.41Amerigroup - Harris220.831,740.23302.861,580.59Molina - Harris220.831,740.23302.861,580.59United - Harris220.831,740.23302.861,580.59Health Spring - Hidalgo572.931,966.21925.851,896.11Molina - Hidalgo572.931,966.21925.851,896.11Superior - Hidalgo572.931,966.21925.851,896.11Amerigroup - Jefferson105.301,506.70213.671,404.62Molina - Jefferson105.301,506.70213.671,404.62United - Jefferson105.301,506.70213.671,404.62Amerigroup - Lubbock81.981,456.53142.921,251.09Superior - Nueces286.961,586.32420.121,572.55United - Nueces286.961,586.32420.121,572.55United - Nueces286.961,586.32420.121,572.55Amerigroup - Tarrant121.601,715.62197.101,504.85Health Spring - Tarrant121.601,715.62197.101,504.85Amerigroup - Travis143.091,857.36213.441,599.59					
Molina - El Paso220.601,823.59405.581,866.41Amerigroup - Harris220.831,740.23302.861,580.59Molina - Harris220.831,740.23302.861,580.59United - Harris220.831,740.23302.861,580.59Health Spring - Hidalgo572.931,966.21925.851,896.11Molina - Hidalgo572.931,966.21925.851,896.11Superior - Hidalgo572.931,966.21925.851,896.11Amerigroup - Jefferson105.301,506.70213.671,404.62Molina - Jefferson105.301,506.70213.671,404.62United - Jefferson105.301,506.70213.671,404.62Amerigroup - Lubbock81.981,456.53142.921,251.09Superior - Lubbock81.981,456.53142.921,251.09Superior - Nueces286.961,586.32420.121,572.55United - Nueces286.961,586.32420.121,572.55Amerigroup - Tarrant121.601,715.62197.101,504.85Health Spring - Tarrant121.601,715.62197.101,504.85Amerigroup - Travis143.091,857.36213.441,599.59	_				
Amerigroup - Harris220.831,740.23302.861,580.59Molina - Harris220.831,740.23302.861,580.59United - Harris220.831,740.23302.861,580.59Health Spring - Hidalgo572.931,966.21925.851,896.11Molina - Hidalgo572.931,966.21925.851,896.11Superior - Hidalgo572.931,966.21925.851,896.11Amerigroup - Jefferson105.301,506.70213.671,404.62Molina - Jefferson105.301,506.70213.671,404.62United - Jefferson105.301,506.70213.671,404.62Amerigroup - Lubbock81.981,456.53142.921,251.09Superior - Lubbock81.981,456.53142.921,251.09Superior - Nueces286.961,586.32420.121,572.55United - Nueces286.961,586.32420.121,572.55Amerigroup - Tarrant121.601,715.62197.101,504.85Health Spring - Tarrant121.601,715.62197.101,504.85Amerigroup - Travis143.091,857.36213.441,599.59	- 1				
Molina - Harris220.831,740.23302.861,580.59United - Harris220.831,740.23302.861,580.59Health Spring - Hidalgo572.931,966.21925.851,896.11Molina - Hidalgo572.931,966.21925.851,896.11Superior - Hidalgo572.931,966.21925.851,896.11Amerigroup - Jefferson105.301,506.70213.671,404.62Molina - Jefferson105.301,506.70213.671,404.62United - Jefferson105.301,506.70213.671,404.62Amerigroup - Lubbock81.981,456.53142.921,251.09Superior - Lubbock81.981,456.53142.921,251.09Superior - Nueces286.961,586.32420.121,572.55United - Nueces286.961,586.32420.121,572.55United - Nueces286.961,586.32420.121,572.55Amerigroup - Tarrant121.601,715.62197.101,504.85Health Spring - Tarrant121.601,715.62197.101,504.85Amerigroup - Travis143.091,857.36213.441,599.59					
United - Harris220.831,740.23302.861,580.59Health Spring - Hidalgo572.931,966.21925.851,896.11Molina - Hidalgo572.931,966.21925.851,896.11Superior - Hidalgo572.931,966.21925.851,896.11Amerigroup - Jefferson105.301,506.70213.671,404.62Molina - Jefferson105.301,506.70213.671,404.62United - Jefferson105.301,506.70213.671,404.62Amerigroup - Lubbock81.981,456.53142.921,251.09Superior - Lubbock81.981,456.53142.921,251.09Superior - Nueces286.961,586.32420.121,572.55United - Nueces286.961,586.32420.121,572.55Amerigroup - Tarrant121.601,715.62197.101,504.85Health Spring - Tarrant121.601,715.62197.101,504.85Amerigroup - Travis143.091,857.36213.441,599.59					
Health Spring - Hidalgo572.931,966.21925.851,896.11Molina - Hidalgo572.931,966.21925.851,896.11Superior - Hidalgo572.931,966.21925.851,896.11Amerigroup - Jefferson105.301,506.70213.671,404.62Molina - Jefferson105.301,506.70213.671,404.62United - Jefferson105.301,506.70213.671,404.62Amerigroup - Lubbock81.981,456.53142.921,251.09Superior - Lubbock81.981,456.53142.921,251.09Superior - Nueces286.961,586.32420.121,572.55United - Nueces286.961,586.32420.121,572.55Amerigroup - Tarrant121.601,715.62197.101,504.85Health Spring - Tarrant121.601,715.62197.101,504.85Amerigroup - Travis143.091,857.36213.441,599.59					
Molina - Hidalgo572.931,966.21925.851,896.11Superior - Hidalgo572.931,966.21925.851,896.11Amerigroup - Jefferson105.301,506.70213.671,404.62Molina - Jefferson105.301,506.70213.671,404.62United - Jefferson105.301,506.70213.671,404.62Amerigroup - Lubbock81.981,456.53142.921,251.09Superior - Lubbock81.981,456.53142.921,251.09Superior - Nueces286.961,586.32420.121,572.55United - Nueces286.961,586.32420.121,572.55Amerigroup - Tarrant121.601,715.62197.101,504.85Health Spring - Tarrant121.601,715.62197.101,504.85Amerigroup - Travis143.091,857.36213.441,599.59					
Superior - Hidalgo572.931,966.21925.851,896.11Amerigroup - Jefferson105.301,506.70213.671,404.62Molina - Jefferson105.301,506.70213.671,404.62United - Jefferson105.301,506.70213.671,404.62Amerigroup - Lubbock81.981,456.53142.921,251.09Superior - Lubbock81.981,456.53142.921,251.09Superior - Nueces286.961,586.32420.121,572.55United - Nueces286.961,586.32420.121,572.55Amerigroup - Tarrant121.601,715.62197.101,504.85Health Spring - Tarrant121.601,715.62197.101,504.85Amerigroup - Travis143.091,857.36213.441,599.59					
Amerigroup - Jefferson105.301,506.70213.671,404.62Molina - Jefferson105.301,506.70213.671,404.62United - Jefferson105.301,506.70213.671,404.62Amerigroup - Lubbock81.981,456.53142.921,251.09Superior - Lubbock81.981,456.53142.921,251.09Superior - Nueces286.961,586.32420.121,572.55United - Nueces286.961,586.32420.121,572.55Amerigroup - Tarrant121.601,715.62197.101,504.85Health Spring - Tarrant121.601,715.62197.101,504.85Amerigroup - Travis143.091,857.36213.441,599.59	_				
Molina - Jefferson105.301,506.70213.671,404.62United - Jefferson105.301,506.70213.671,404.62Amerigroup - Lubbock81.981,456.53142.921,251.09Superior - Lubbock81.981,456.53142.921,251.09Superior - Nueces286.961,586.32420.121,572.55United - Nueces286.961,586.32420.121,572.55Amerigroup - Tarrant121.601,715.62197.101,504.85Health Spring - Tarrant121.601,715.62197.101,504.85Amerigroup - Travis143.091,857.36213.441,599.59	· ·				
United - Jefferson 105.30 1,506.70 213.67 1,404.62 Amerigroup - Lubbock 81.98 1,456.53 142.92 1,251.09 Superior - Lubbock 81.98 1,456.53 142.92 1,251.09 Superior - Nueces 286.96 1,586.32 420.12 1,572.55 United - Nueces 286.96 1,586.32 420.12 1,572.55 Amerigroup - Tarrant 121.60 1,715.62 197.10 1,504.85 Health Spring - Tarrant 121.60 1,715.62 197.10 1,504.85 Amerigroup - Travis 143.09 1,857.36 213.44 1,599.59					
Amerigroup - Lubbock81.981,456.53142.921,251.09Superior - Lubbock81.981,456.53142.921,251.09Superior - Nueces286.961,586.32420.121,572.55United - Nueces286.961,586.32420.121,572.55Amerigroup - Tarrant121.601,715.62197.101,504.85Health Spring - Tarrant121.601,715.62197.101,504.85Amerigroup - Travis143.091,857.36213.441,599.59					
Superior - Lubbock 81.98 1,456.53 142.92 1,251.09 Superior - Nueces 286.96 1,586.32 420.12 1,572.55 United - Nueces 286.96 1,586.32 420.12 1,572.55 Amerigroup - Tarrant 121.60 1,715.62 197.10 1,504.85 Health Spring - Tarrant 121.60 1,715.62 197.10 1,504.85 Amerigroup - Travis 143.09 1,857.36 213.44 1,599.59					
Superior - Nueces 286.96 1,586.32 420.12 1,572.55 United - Nueces 286.96 1,586.32 420.12 1,572.55 Amerigroup - Tarrant 121.60 1,715.62 197.10 1,504.85 Health Spring - Tarrant 121.60 1,715.62 197.10 1,504.85 Amerigroup - Travis 143.09 1,857.36 213.44 1,599.59					
United - Nueces 286.96 1,586.32 420.12 1,572.55 Amerigroup - Tarrant 121.60 1,715.62 197.10 1,504.85 Health Spring - Tarrant 121.60 1,715.62 197.10 1,504.85 Amerigroup - Travis 143.09 1,857.36 213.44 1,599.59	-				
Amerigroup - Tarrant 121.60 1,715.62 197.10 1,504.85 Health Spring - Tarrant 121.60 1,715.62 197.10 1,504.85 Amerigroup - Travis 143.09 1,857.36 213.44 1,599.59	-				
Health Spring - Tarrant 121.60 1,715.62 197.10 1,504.85 Amerigroup - Travis 143.09 1,857.36 213.44 1,599.59					
Amerigroup - Travis 143.09 1,857.36 213.44 1,599.59					
				197.10	1,504.85
United - Travis 143.09 1,857.36 213.44 1,599.59					
	United - Travis	143.09	1,857.36	213.44	1,599.59

	Medicaid Only		Dual Eligible	
•	OCC	HCBS	OCC	HCBS
•				_
FY2015 Prescription Drug			Rates with Risk Ad	
Amerigroup - Bexar	387.23	710.86	0.00	0.00
Molina - Bexar	347.48	631.83	0.00	0.00
Superior - Bexar	409.43	730.31	0.00	0.00
Molina - Dallas	345.79	727.37	0.00	0.00
Superior - Dallas	346.45	725.66	0.00	0.00
Amerigroup - El Paso	457.77	857.51	0.00	0.00
Molina - El Paso	460.75	769.67	0.00	0.00
Amerigroup - Harris	388.36	901.74	0.00	0.00
Molina - Harris	367.26	838.95	0.00	0.00
United - Harris	454.86	785.42	0.00	0.00
Health Spring - Hidalgo	374.76	658.48	0.00	0.00
Molina - Hidalgo	350.89	845.30	0.00	0.00
Superior - Hidalgo	363.62	687.05	0.00	0.00
Amerigroup - Jefferson	365.27	880.85	0.00	0.00
Molina - Jefferson	394.78	751.54	0.00	0.00
United - Jefferson	462.12	909.19	0.00	0.00
Amerigroup - Lubbock	401.57	601.57	0.00	0.00
Superior - Lubbock	374.72	640.66	0.00	0.00
Superior - Nueces	404.36	758.96	0.00	0.00
United - Nueces	376.18	680.99	0.00	0.00
Amerigroup - Tarrant	446.81	897.44	0.00	0.00
Health Spring - Tarrant	381.49	707.49	0.00	0.00
Amerigroup - Travis	429.01	1,085.55	0.00	0.00
United - Travis	413.77	994.55	0.00	0.00
FY2015 Total Premium Rat				
Amerigroup - Bexar	1,177.51	3,981.72	336.56	1,690.86
Molina - Bexar	1,079.51	3,725.38	336.56	1,690.86
Superior - Bexar	1,232.26	4,044.81	336.56	1,690.86
Molina - Dallas	1,065.90	4,088.60	274.04	1,453.19
Superior - Dallas	1,067.62	4,082.62	274.04	1,453.19
Amerigroup - El Paso	1,296.53	4,873.87	405.58	1,866.41
Molina - El Paso	1,303.53	4,561.40	405.58	1,866.41
Amerigroup - Harris	1,273.77	4,908.10	302.86	1,580.59
Molina - Harris	1,216.56	4,687.51	302.86	1,580.59
United - Harris	1,454.07	4,499.46	302.86	1,580.59
Health Spring - Hidalgo	1,492.71	3,810.73	925.85	1,896.11
Molina - Hidalgo	1,434.12	4,334.04	925.85	1,896.11
Superior - Hidalgo	1,465.38	3,890.75	925.85	1,896.11
Amerigroup - Jefferson	1,066.55	4,127.80	213.67	1,404.62
Molina - Jefferson	1,144.22	3,743.03	213.67	1,404.62
United - Jefferson	1,321.44	4,212.13	213.67	1,404.62
Amerigroup - Lubbock	1,144.73	3,248.24	142.92	1,251.09
Superior - Lubbock	1,073.68	3,364.66	142.92	1,251.09
Superior - Nueces	1,294.79	3,958.51	420.12	1,572.55
United - Nueces	1,224.56	3,714.83	420.12	1,572.55
Amerigroup - Tarrant	1,257.76	4,083.37	197.10	1,504.85
Health Spring - Tarrant	1,091.67	3,582.22	197.10	1,504.85
Amerigroup - Travis	1,251.53	4,861.40	213.44	1,599.59
United - Travis	1,212.15	4,609.58	213.44	1,599.59

	Medicaid Only		Dual Eligible	
- -	OCC	HCBS	OCC	HCBS
EV2015 A seets Come (Non-L) eta Chanas		
FY2015 Acute Care (Non-In Amerigroup - Bexar	4.8%	-0.7%	0.0%	0.0%
Molina - Bexar	2.5%	-12.8%	0.0%	0.0%
Superior - Bexar	3.2%	1.2%	0.0%	0.0%
Molina - Dallas	-5.8%	7.6%	0.0%	0.0%
Superior - Dallas	-8.4%	3.4%	0.0%	0.0%
Amerigroup - El Paso	-8.4% 17.4%	43.3%	0.0%	0.0%
Molina - El Paso	7.0%	47.8%	0.0%	0.0%
Amerigroup - Harris	-1.3%	-2.7%	0.0%	0.0%
Molina - Harris	-0.5%	-8.4%	0.0%	0.0%
United - Harris	1.1%	-6.3%	0.0%	0.0%
Health Spring - Hidalgo	-4.2%	8.7%	0.0%	0.0%
Molina - Hidalgo	- 9 .2%	22.2%	0.0%	0.0%
Superior - Hidalgo	-12.9%	8.4%	0.0%	0.0%
Amerigroup - Jefferson	2.4%	46.5%	0.0%	0.0%
Molina - Jefferson	-0.4%	29.3%	0.0%	0.0%
United - Jefferson	12.7%	15.7%	0.0%	0.0%
Amerigroup - Lubbock	15.8%	9.9%	0.0%	0.0%
Superior - Lubbock	4.9%	2.2%	0.0%	0.0%
Superior - Nueces	-9.3%	-7.9%	0.0%	0.0%
United - Nueces	-8.6%	-9.4%	0.0%	0.0%
Amerigroup - Tarrant	6.3%	8.8%	0.0%	0.0%
Health Spring - Tarrant	3.8%	-22.4%	0.0%	0.0%
Amerigroup - Travis	-6.9%	4.5%	0.0%	0.0%
United - Travis	-2.2%	6.4%	0.0%	0.0%
FY2015 Acute Care (Inpatie	ent) Premium Rate (Change		
Amerigroup - Bexar	-1.4%	5.2%	0.0%	0.0%
Molina - Bexar	-3.5%	-7.6%	0.0%	0.0%
Superior - Bexar	-2.9%	7.2%	0.0%	0.0%
Molina - Dallas	8.7%	29.8%	0.0%	0.0%
Superior - Dallas	5.7%	24.8%	0.0%	0.0%
Amerigroup - El Paso	20.2%	43.3%	0.0%	0.0%
Molina - El Paso	9.5%	47.8%	0.0%	0.0%
Amerigroup - Harris	-11.4%	-11.0%	0.0%	0.0%
Molina - Harris	-10.7%	-16.3%	0.0%	0.0%
United - Harris	-9.2%	-14.3%	0.0%	0.0%
Health Spring - Hidalgo	1.1%	4.1%	0.0%	0.0%
Molina - Hidalgo	-4.4%	17.0%	0.0%	0.0%
Superior - Hidalgo	-8.1%	3.8%	0.0%	0.0%
Amerigroup - Jefferson	-7.5%	11.9%	0.0%	0.0%
Molina - Jefferson	-10.0%	-1.2%	0.0%	0.0%
United - Jefferson	1.8%	-11.6%	0.0%	0.0%
Amerigroup - Lubbock	0.1%	0.9%	0.0%	0.0%
Superior - Lubbock	-9.2%	-6.1%	0.0%	0.0%
Superior - Nueces	-15.2%	-5.9%	0.0%	0.0%
United - Nueces	-14.5%	-7.4%	0.0%	0.0%
Amerigroup - Tarrant	22.2%	-12.3%	0.0%	0.0%
Health Spring - Tarrant	19.3%	-37.5%	0.0%	0.0%
Amerigroup - Travis	-10.5%	-3.4%	0.0%	0.0%
United - Travis	-5.9%	-1.6%	0.0%	0.0%

	Medicaid Only		Dual Eli	gible
_	OCC	HCBS	OCC	HCBS
FY2015 Long Term Care Pro	emium Rate Chan	ge		
Amerigroup - Bexar	3.1%	2.5%	1.1%	-1.3%
Molina - Bexar	3.1%	2.5%	1.1%	-1.3%
Superior - Bexar	3.1%	2.5%	1.1%	-1.3%
Molina - Dallas	8.8%	-4.3%	7.7%	-4.5%
Superior - Dallas	8.8%	-4.3%	7.7%	-4.5%
Amerigroup - El Paso	14.6%	-13.7%	8.3%	-9.3%
Molina - El Paso	14.6%	-13.7%	8.3%	-9.3%
Amerigroup - Harris	-4.3%	10.3%	-3.3%	4.2%
Molina - Harris	-4.3%	10.3%	-3.3%	4.2%
United - Harris	-4.3%	10.3%	-3.3%	4.2%
Health Spring - Hidalgo	8.0%	-0.7%	3.9%	-4.7%
Molina - Hidalgo	8.0%	-0.7%	3.9%	-4.7%
Superior - Hidalgo	8.0%	-0.7%	3.9%	-4.7%
Amerigroup - Jefferson	10.1%	6.3%	9.6%	0.4%
Molina - Jefferson	10.1%	6.3%	9.6%	0.4%
United - Jefferson	10.1%	6.3%	9.6%	0.4%
Amerigroup - Lubbock	-1.4%	1.2%	0.5%	3.5%
Superior - Lubbock	-1.4%	1.2%	0.5%	3.5%
Superior - Nueces	-4.3%	2.1%	-2.4%	-1.0%
United - Nueces	-4.3%	2.1%	-2.4%	-1.0%
Amerigroup - Tarrant	6.4%	-8.3%	2.3%	2.4%
Health Spring - Tarrant	6.4%	-8.3%	2.3%	2.4%
Amerigroup - Travis	-2.5%	8.2%	-7.1%	-3.7%
United - Travis	-2.5%	8.2%	-7.1%	-3.7%
FY2015 Prescription Drug P	remium Rate Cha	inge		
Amerigroup - Bexar	1.4%	-4.4%	0.0%	0.0%
Molina - Bexar	-0.8%	-16.0%	0.0%	0.0%
Superior - Bexar	-0.1%	-2.5%	0.0%	0.0%
Molina - Dallas	7.8%	1.1%	0.0%	0.0%
Superior - Dallas	4.9%	-2.8%	0.0%	0.0%
Amerigroup - El Paso	16.9%	26.6%	0.0%	0.0%
Molina - El Paso	6.5%	30.5%	0.0%	0.0%
Amerigroup - Harris	4.6%	8.8%	0.0%	0.0%
Molina - Harris	5.4%	2.4%	0.0%	0.0%
United - Harris	7.1%	4.8%	0.0%	0.0%
Health Spring - Hidalgo	21.2%	7.8%	0.0%	0.0%
Molina - Hidalgo	14.7%	21.1%	0.0%	0.0%
Superior - Hidalgo	10.2%	7.4%	0.0%	0.0%
Amerigroup - Jefferson	9.4%	29.3%	0.0%	0.0%
Molina - Jefferson	6.5%	14.2%	0.0%	0.0%
United - Jefferson	20.4%	2.1%	0.0%	0.0%
Amerigroup - Lubbock	11.0%	19.3%	0.0%	0.0%
Superior - Lubbock	0.6%	10.9%	0.0%	0.0%
Superior - Nueces	5.7%	9.9%	0.0%	0.0%
United - Nueces	6.5% 8.4%	8.1% 12.5%	0.0%	0.0%
Amerigroup - Tarrant			0.0%	0.0%
Health Spring - Tarrant	5.9%	-19.8%	0.0%	0.0%
Amerigroup - Travis	6.3%	19.9%	0.0%	0.0%
United - Travis	11.6%	22.1%	0.0%	0.0%

	Medicaid Only		Dual Eligible	
_	OCC	HCBS	OCC	HCBS
TWOOLET LID IN DIE	C1			
FY2015 Total Premium Rate	Ü			
Amerigroup - Bexar	2.4%	0.8%	1.1%	-1.3%
Molina - Bexar	0.6%	-6.4%	1.1%	-1.3%
Superior - Bexar	1.1%	1.9%	1.1%	-1.3%
Molina - Dallas	3.4%	4.8%	7.7%	-4.5%
Superior - Dallas	1.1%	2.4%	7.7%	-4.5%
Amerigroup - El Paso	17.2%	12.8%	8.3%	-9.3%
Molina - El Paso	8.4%	13.1%	8.3%	-9.3%
Amerigroup - Harris	-2.3%	1.8%	-3.3%	4.2%
Molina - Harris	-1.7%	-2.1%	-3.3%	4.2%
United - Harris	-0.2%	-0.3%	-3.3%	4.2%
Health Spring - Hidalgo	6.6%	3.1%	3.9%	-4.7%
Molina - Hidalgo	3.1%	9.9%	3.9%	-4.7%
Superior - Hidalgo	0.4%	3.0%	3.9%	-4.7%
Amerigroup - Jefferson	3.0%	20.8%	9.6%	0.4%
Molina - Jefferson	0.4%	11.8%	9.6%	0.4%
United - Jefferson	12.3%	4.5%	9.6%	0.4%
Amerigroup - Lubbock	9.1%	6.1%	0.5%	3.5%
Superior - Lubbock	-0.3%	2.1%	0.5%	3.5%
Superior - Nueces	-5.0%	-0.6%	-2.4%	-1.0%
United - Nueces	-4.4%	-1.4%	-2.4%	-1.0%
Amerigroup - Tarrant	9.9%	-1.2%	2.3%	2.4%
Health Spring - Tarrant	7.6%	-18.0%	2.3%	2.4%
Amerigroup - Travis	-3.0%	7.8%	-7.1%	-3.7%
United - Travis	1.3%	8.9%	-7.1%	-3.7%

Attachment 2

Individual HMO Experience Analysis

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

Exhibit A. This exhibit shows a sample of the monthly enrollment and earned premium by risk group for the period September 2010 through February 2014. All of this information was provided by HHSC.

Exhibit B. This exhibit shows a sample of a claim lag report for one risk group. This report includes claim amounts by payment month and month of service. We analyzed claims experience for the period September 2010 through February 2014.

Exhibit C. This exhibit shows the calculation of estimated monthly incurred claims for one risk group. The report includes the following information: (i) monthly enrollment, (ii) claim amounts incurred in that month and paid through February 28, 2014, (iii) estimated proportion of that month's incurred claims paid through February 28, 2014 (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 HMO.

Exhibit D. This exhibit is a summary of the sample HMO's projected FY2015 cost based on the HMO's actual experience. The top of the exhibit shows summary base period (FY2013) enrollment, premium and claims experience. Next are projected FY2013 enrollment and premium based on current (FY2014) rates. Trend assumptions for FY2014 and FY2015 are used to project the average base period claims cost to FY2015. Adjustment factors are used to recognize the cost impact of benefit and provider reimbursement changes. Combining these factors results in projected FY2015 incurred claims.

In addition to incurred claims, provision is also made for services that are capitated by the HMO, such as vision and behavioral health services. Other expenses such as those related to the coordination of care are included.

A provision for administrative expenses is included in the amount of \$14.25 pmpm and 5.75% of gross premium. Additional provisions are also included for premium tax (1.75% of premium), maintenance tax (\$0.065 pmpm) and risk margin (2.0% of premium).

At the bottom of Exhibit D is a summary of the projected FY2015 cost based on the above assumptions. Cost projections are presented separately for acute care and long term care services.

Similar analyses are done separately for inpatient hospital services.

Sample HMO Enrollment and Premium Experience Number of Members

	Medicaio	Medicaid Only		Dual Eligible			
Month	OCC	HCBS	OCC	HCBS	Members		
Sep-10	3,267	118	5,131	589	9,105		
Oct-10	3,267	123	5,090	657	9,137		
Nov-10	3,242	119	5,085	670	9,116		
Dec-10	3,234	109	5,018	657	9,018		
Jan-11	3,256	117	5,080	652	9,105		
Feb-11	3,286	123	5,093	637	9,139		
Mar-11	3,278	119	5,051	640	9,088		
Apr-11	3,248	120	5,045	630	9,043		
May-11	3,228	122	5,010	632	8,992		
Jun-11	3,233	117	5,010	634	8,994		
Jul-11	3,213	129	5,009	630	8,981		
Aug-11	3,229	125	5,004	613	8,971		
Sep-11	3,301	123	4,982	607	9,013		
Oct-11	3,312	120	5,012	601	9,045		
Nov-11	3,361	122	5,006	608	9,097		
Dec-11	3,380	118	4,946	605	9,049		
Jan-12	3,389	121	4,931	589	9,030		
Feb-12	3,351	126	4,946	572	8,995		
Mar-12	3,413	126	4,969	562	9,070		
Apr-12	3,463	124	4,945	551	9,083		
May-12	3,440	129	4,934	547	9,050		
Jun-12	3,481	126	4,932	554	9,093		
Jul-12	3,519	123	4,922	579	9,143		
Aug-12	3,508	124	4,897	571	9,100		
Sep-12	3,620	130	4,912	572	9,234		
Oct-12	3,716	131	4,920	571	9,338		
Nov-12	3,754	140	4,973	577	9,444		
Dec-12	3,764	139	4,950	571	9,424		
Jan-13	3,741	142	5,043	563	9,489		
Feb-13	3,753	154	5,065	555	9,527		
Mar-13	3,760	155	5,112	550	9,577		
Apr-13	3,791	159	5,135	550	9,635		
May-13	3,828	161	5,138	548	9,675		
Jun-13	3,844	159	5,146	551	9,700		
Jul-13	3,867	159	5,196	546	9,768		
Aug-13	3,862	167	5,165	559	9,753		
FY2011	38,981	1,441	60,626	7,641	108,689		
FY2012	40,918	1,482	59,422	6,946	108,768		
FY2013	45,300	1,796	60,755	6,713	114,564		

Sample HMO Enrollment and Premium Experience Premium Amount

	Medicai	d Only	Dual E		
Month	OCC	HCBS	OCC	HCBS	Total
Sep-10	1,732,163	350,218	1,385,986	985,297	4,453,664
Oct-10	1,732,163	365,058	1,374,911	1,099,049	4,571,181
Nov-10	1,718,908	353,186	1,373,560	1,120,796	4,566,451
Dec-10	1,714,667	323,507	1,355,462	1,099,049	4,492,685
Jan-11	1,726,331	347,250	1,372,210	1,090,685	4,536,476
Feb-11	1,735,304	364,173	1,375,721	1,065,593	4,540,791
Mar-11	1,731,079	352,330	1,364,376	1,070,611	4,518,397
Apr-11	1,715,236	355,291	1,362,755	1,053,883	4,487,166
May-11	1,704,675	361,213	1,353,301	1,057,229	4,476,417
Jun-11	1,707,315	346,409	1,353,301	1,060,574	4,467,599
Jul-11	1,696,753	381,938	1,353,031	1,053,883	4,485,605
Aug-11	1,705,203	370,095	1,351,680	1,025,445	4,452,423
Sep-11	1,734,147	357,623	1,324,216	1,015,778	4,431,764
Oct-11	1,739,926	348,900	1,332,190	1,005,737	4,426,753
Nov-11	1,765,668	354,715	1,330,595	1,017,452	4,468,429
Dec-11	1,775,649	343,085	1,314,647	1,012,431	4,445,812
Jan-12	1,800,474	361,080	1,310,660	992,524	4,464,737
Feb-12	1,780,286	376,000	1,314,647	963,877	4,434,810
Mar-12	1,798,822	370,221	1,320,760	942,659	4,432,462
Apr-12	1,825,174	364,344	1,314,381	924,209	4,428,108
May-12	1,813,052	379,036	1,311,457	917,500	4,421,044
Jun-12	1,834,661	370,221	1,310,926	929,241	4,445,048
Jul-12	1,854,689	361,406	1,308,268	971,174	4,495,537
Aug-12	1,848,891	364,344	1,301,623	957,755	4,472,614
Sep-12	2,112,560	344,054	1,478,070	992,609	4,927,292
Oct-12	2,168,583	346,701	1,480,477	990,873	4,986,635
Nov-12	2,190,759	370,520	1,496,425	1,001,285	5,058,990
Dec-12	2,196,595	367,873	1,489,505	990,873	5,044,846
Jan-13	2,183,173	375,813	1,517,489	976,991	5,053,466
Feb-13	2,190,176	407,572	1,524,109	963,108	5,084,965
Mar-13	2,194,261	410,218	1,538,252	954,432	5,097,163
Apr-13	2,212,352	420,805	1,545,173	954,432	5,132,761
May-13	2,233,944	426,098	1,546,076	950,961	5,157,078
Jun-13	2,243,282	420,805	1,548,483	956,167	5,168,736
Jul-13	2,256,704	420,805	1,563,528	947,490	5,188,527
Aug-13	2,253,786	441,977	1,554,200	970,049	5,220,013
FY2011	20,619,798	4,270,669	16,376,295	12,782,094	54,048,855
FY2012	21,571,439	4,350,974	15,794,368	11,650,337	53,367,119
FY2013	26,436,174	4,753,240	18,281,787	11,649,270	61,120,471

Sample HMO Claims Lag Report

Month															
Incurred	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11
Acute Care	e - Medicaio	d Only OC	C												
Sep-10	306,287	427,182	73,824	37,975	10,965	(4,832)	6,619	4,535	2,042	1,386	498	(4,221)	(22,476)	(23)	(2,972)
Oct-10		328,781	304,071	111,595	33,696	17,133	3,384	6,020	(730)	674	132	(17,217)	(17,068)	468	1,457
Nov-10			237,257	460,472	46,941	(8,355)	50,235	1,964	4,583	2,284	3,671	(46,127)	(9,438)	1,311	885
Dec-10				312,595	293,540	58,637	43,311	8,720	5,341	(34)	(2,233)	1,943	(4,019)	(299)	749
Jan-11					290,908	352,379	73,268	37,188	10,189	5,106	2,547	2,305	1,640	620	(1,416)
Feb-11						234,608	386,828	77,110	21,469	6,662	(633)	7,032	1,927	82	434
Mar-11							333,783	391,221	65,007	30,046	7,923	7,180	(5,071)	4,522	1,592
Apr-11								383,130	343,554	70,348	31,742	7,597	(3,845)	4,514	2,199
May-11									354,268	369,739	88,965	21,451	8,685	12,334	6,150
Jun-11										349,175	377,173	74,826	24,195	9,400	5,595
Jul-11											385,921	355,307	45,425	37,707	7,251
Aug-11												437,317	340,859	75,821	35,970
Sep-11													299,035	415,640	75,885
Oct-11														323,994	363,651
Nov-11															324,506
Dec-11															
Jan-12															
Feb-12															
Mar-12															
Apr-12															

Acute Care - Medicaid Only OCC

Acute Care - Medicaid Only OCC									
		Inc & Pd	Compl	Est Inc	Est Inc				
Month	Members	Claims	Factor	Claims	pmpm	Trend			
Sep-10	3,267	836,364	1.000	836,364	256.00				
Oct-10	3,267	763,715	1.000	763,715	233.77				
Nov-10	3,242	746,822	1.000	746,822	230.36				
Dec-10	3,234	717,847	1.000	717,847	221.97				
Jan-11	3,256	772,627	1.000	772,627	237.29				
Feb-11	3,286	732,959	1.000	732,959	223.06				
Mar-11	3,278	832,262	1.000	832,262	253.89				
Apr-11	3,248	838,256	1.000	838,256	258.08				
May-11	3,228	856,811	1.000	856,811	265.43				
Jun-11	3,233	838,399	1.000	838,399	259.33				
Jul-11	3,213	831,014	1.000	831,014	258.64				
Aug-11	3,229	891,704	1.000	891,704	276.15				
Sep-11	3,301	828,058	1.000	828,058	250.85	0.980			
Oct-11	3,312	817,385	1.000	817,385	246.80	1.056			
Nov-11	3,361	863,123	1.000	863,123	256.81	1.115			
Dec-11	3,380	799,169	1.000	799,169	236.44	1.065			
Jan-12	3,389	892,866	1.000	892,866	263.46	1.110			
Feb-12	3,351	857,317	1.000	857,317	255.84	1.147			
Mar-12	3,413	933,143	1.000	933,143	273.41	1.077			
Apr-12	3,463	933,912	1.000	933,912	269.68	1.045			
May-12	3,440	968,876	1.000	968,876	281.65	1.061			
Jun-12	3,481	1,021,131	1.000	1,021,131	293.34	1.131			
Jul-12	3,519	991,046	1.000	991,046	281.63	1.089			
Aug-12	3,508	990,996	1.000	990,996	282.50	1.023			
Sep-12	3,620	944,241	1.000	944,241	260.84	1.040			
Oct-12	3,716	1,071,279	1.000	1,071,279	288.29	1.168			
Nov-12	3,754	954,436	1.000	954,436	254.24	0.990			
Dec-12	3,764	958,474	1.000	958,474	254.64	1.077			
Jan-13	3,741	1,009,311	1.000	1,009,770	269.92	1.025			
Feb-13	3,753	976,156	0.999	976,910	260.30	1.017			
Mar-13	3,760	1,040,114	0.999	1,040,952	276.85	1.013			
Apr-13	3,791	1,039,400	0.999	1,040,722	274.52	1.018			
May-13	3,828	1,089,283	0.998	1,091,270	285.08	1.012			
Jun-13	3,844	991,763	0.997	994,875	258.81	0.882			
Jul-13	3,867	1,106,995	0.997	1,110,561	287.19	1.020			
Aug-13	3,862	1,026,317	0.997	1,029,598	266.60	0.944			
FY2011	38,981	9,658,781		9,658,781	247.78				
FY2012	40,918	10,897,024		10,897,024	266.31	1.075			
FY2013	45,300	12,207,769		12,223,087	269.83	1.013			

Sample HMO Experienced Based Renewal Rating

	Medicaid O	nly - OCC	Medicaid Only - HCB		
	Amount	pmpm	Amount	pmpm	
FY2013 Experience Period					
Member Months	45,300		1,796		
Premium Revenue	26,436,174	583.58	4,753,240	2,646.57	
Adjusted Premium (at current rates)	26,706,615	589.55	4,782,389	2,662.80	
Estimated FY2013 Incurred Claims					
Acute Care	12,223,087	269.83	1,375,199	765.70	
Long Term Care	5,708,277	126.01	2,742,807	1,527.18	
Total	17,931,364	395.84	4,118,006	2,292.88	
Projected FY2015 Member Months	49,134		2,031		
Projected FY2015 Premium					
At Current Rates	28,967,235	589.55	5,407,078	2,662.80	
Annual Cost Trend Assumptions					
Acute Care					
FY2014	2.9 %		1.6 %		
FY2015	2.6 %		0.9 %		
Long Term Care					
FY2014	9.8 %		1.2 %		
FY2015	11.3 %		3.3 %		
Provider Reimbursement Adjustment		1.0002		0.0045	
Acute Care		1.0092		0.9947	
Long Term Care		1.0257		0.9822	
Other Reimbursement Adjustment		1.0000		1.0000	
Out of Network Adjustment		1.0000		1.0000	
Projected Incurred Claims					
Acute Care	14,125,671	287.49	1,585,478	780.79	
LTC	7,760,882	157.95	3,184,151	1,568.09	
Total	21,886,553	445.44	4,769,629	2,348.88	
Capitation Expenses					
Vision	110,553	2.25	4,569	2.25	
Behavioral Health	36,851	0.75	1,523	0.75	
Radiology	0	0.00	0	0.00	
Other - Settlements	0	0.00	0	0.00	
Total	147,403	3.00	6,092	3.00	

Sample HMO Experienced Based Renewal Rating

	Medicaid On	nly - OCC	Medicaid Only - HCBS			
	Amount	pmpm	Amount	pmpm		
Other Expenses						
Service Coordination	503,628	10.25	20,814	10.25		
Service Coordination - Enhancement	0	0.00	0	0.00		
Other	36,851	0.75	37,058	18.25		
Total	540,479	11.00	57,872	28.50		
Reinsurance Expenses						
Gross Premium	11,301	0.23	467	0.23		
Projected Reinsurance Recoveries	11,301	0.23	467	0.23		
Net Reinsurance Cost	0	0.00	0	0.00		
Administrative Expenses						
Fixed Amount	700,166	14.25	28,936	14.25		
Percentage of Premium	1,478,976	5.75%	308,954	5.75%		
Total	2,179,142		337,890			
Risk Margin	514,426	2.0%	107,462	2.0%		
Premium Tax	450,123	1.75%	94,029	1.75%		
Maintenance Tax	3,194	0.07	132	0.07		
Projected Total Cost						
Acute Care	16,272,957	331.19	1,769,318	871.33		
LTC	9,448,365	192.30	3,603,789	1,774.74		
Total	25,721,322	523.49	5,373,106	2,646.07		

Attachment 3

Community Experience Analysis – Non-inpatient Acute Care and Long Term Care

The following exhibits present a summary of the non-inpatient acute care and long term care experience analysis performed for each managed care service area. HHSC utilizes an adjusted community rating methodology in setting the STAR+PLUS premium rates. The base community rates by risk group vary by service area but are the same for each HMO in a service area. The community rates are developed by a weighted average of the projected FY2015 cost for each health plan in the service area. The weights used in this formula are the projected number of FY2015 clients enrolled in each health plan.

Below is a brief description of the exhibits contained in this attachment. The exhibits present the derivation of the FY2015 STAR+PLUS HMO community rates for the following service areas:

Exhibit A – Bexar Service Area

Exhibit B – Dallas Services Area

Exhibit C – El Paso Services Area

Exhibit D – Harris Service Area

Exhibit E – Hidalgo Service Area

Exhibit F – Jefferson Service Area

Exhibit G – Lubbock Service Area

Exhibit H – Nueces Service Area

Exhibit I – Tarrant Service Area

Exhibit J – Travis Service Area

A description of the rating methodology used for the MRSA Central, MRSA Northeast, MRSA West and IDD populations can be found in Attachments 11 and 12.

These exhibits show projected FY2015 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 portion of the exhibit shows summary base period (FY2013) experience and projected FY2015 enrollment, premium and incurred claims experience.

In addition to incurred claims, provision is also made for services that are capitated by the HMOs, such as vision and behavioral health services. Other expenses such as those related to the coordination of care are included.

A provision for administrative expenses is included in the amount of \$14.25 pmpm and 5.75% of gross premium. Additional provisions are also included for premium tax (1.75% of premium), maintenance tax (\$0.065 pmpm) and risk margin (2.0% of premium).

The bottom of the exhibit shows a summary of the projected FY2015 cost based on these assumptions. Cost projections are presented separately for acute care and long term care services.

FY2015 STAR+Plus Rating Summary Bexar SDA Total

Acute Care (Non-Inpatient) and Long Term Care Medicaid Only - HCBS Medicaid Only - OCC Dual Eligible - OCC Dual Eligible - HCBS Total Amount Amount pmpm pmpm Amount pmpm Amount pmpm Amount pmpm FY2013 Experience Period Member Months 262,853 15,362 262,879 38,706 579,800 Premium Revenue 159,152,764 605.48 41.920.887 2,728.87 79,102,920 300.91 67.167.683 1.735.33 347,344,254 599.08 Adjusted Premium (at current rates) 158,966,106 604.77 41,022,127 2,670.36 87,475,616 332.76 66,280,541 1,712.41 353,744,390 610.11 Estimated FY2013 Incurred Claims 900.89 0 0.00 0 0.00 Acute Care 85,755,891 326.25 13,839,506 99,595,396 171.78 63,869,134 58,586,062 Long Term Care 38,664,980 147.10 22,327,136 1,453.40 242.96 1,513.62 183,447,313 316.40 473.35 Total 124,420,871 36,166,642 2,354.29 63,869,134 242.96 58,586,062 1,513.62 283,042,709 488.17 Projected FY2015 Member Months 280,011 16,405 273,567 40,013 609,997 Projected FY2015 Premium At Current Rates 605.17 91.032.152 332.76 611.17 169,453,308 43,807,161 2,670.30 68,519,386 1,712,41 372,812,007 **Annual Cost Trend Assumptions** Acute Care FY2014 2.9 % 1.6 % 2.9 % 1.6 % FY2015 2.6 % 0.9 % 2.6 % 0.9 % Long Term Care FY2014 9.8 % 1.2 % 5.1 % 0.0 % FY2015 11.3 % 3.3 % 1.2 % 6.3 % Provider Reimbursement Adjustment Acute Care 1.0092 0.9947 1.0000 1.0000 Long Term Care 1.0257 0.9822 1.0238 0.9800 Other Reimbursement Adjustment 1.0000 1.0000 1.0000 1.0000 **Projected Incurred Claims** Acute Care 97.334.430 347.61 15,070,747 918.65 0 0.00 0 0.00 112,405,178 184.27 LTC 51,629,534 184.38 24,482,232 1,492.33 76,023,862 277.90 60,065,945 1,501.14 212,201,574 347.87 Total 148,963,964 531.99 39,552,980 2,410.98 76,023,862 277.90 60,065,945 1,501.14 324,606,751 532.14 Capitation Expenses & Refunds 2,017,959 7.21 131,186 8.00 21,645 0.08 18,298 0.46 2,189,088 3.59 Service Coordination and Other Expenses 3,428,858 12.25 255,081 15.55 3,362,688 12.29 572,500 14.31 7,619,127 12.49

FY2015 STAR+Plus Rating Summary Bexar SDA Total

Acute Care (Non-Inpatient) and Long Term Care

	Medicaid Only - OCC		Medicaid Only - HCBS		Dual Eligible - OCC		Dual Eligible - HCBS		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Net Reinsurance Cost	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Administrative Expenses										
Fixed Amount	3,990,160	14.25	233,776	14.25	3,898,330	14.25	570,191	14.25	8,692,457	14.25
Percentage of Premium	10,065,305	5.75%	2,552,497	5.75%	5,294,086	5.75%	3,890,274	5.75%	21,802,162	5.75%
Total	14,055,465	50.20	2,786,273	169.84	9,192,415	33.60	4,460,466	111.47	30,494,619	49.99
Risk Margin	3,500,976	2.00%	887,825	2.00%	1,841,421	2.00%	1,353,139	2.00%	7,583,361	2.00%
Premium Tax	3,063,354	1.75%	776,847	1.75%	1,611,244	1.75%	1,183,997	1.75%	6,635,441	1.75%
Maintenance Tax	18,201	0.07	1,066	0.07	17,782	0.07	2,601	0.07	39,650	0.07
Projected Total Cost										
Acute Care	112,675,679	402.40	16,896,590	1,029.95	23,917	0.09	20,219	0.51	129,616,406	212.49
LTC	62,373,097	222.75	27,494,668	1,675.96	92,047,140	336.47	67,636,726	1,690.35	249,551,631	409.10
Total	175,048,777	625.15	44,391,258	2,705.90	92,071,058	336.56	67,656,944	1,690.86	379,168,037	621.59
Experience Rate Increase		3.3 %		1.3 %		1.1 %		-1.3 %		1.7 %

FY2015 STAR+Plus Rating Summary Dallas SDA Total

	Acute Care (Non-Inpatient) and Long Term Care									
	Medicaid Or	ıly - OCC	Medicaid Or		Dual Eligible - OCC		Dual Eligible - HCBS		Tota	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
FY2013 Experience Period										
Member Months	330,985		13,037		297,924		41,203		683,149	
Premium Revenue	167,504,889	506.08	37,130,940	2,848.12	67,327,845	225.99	66,547,789	1,615.12	338,511,463	495.52
Adjusted Premium (at current rates)	169,008,936	510.62	34,056,050	2,612.26	75,818,679	254.49	62,677,592	1,521.19	341,561,256	499.98
Estimated FY2013 Incurred Claims										
Acute Care	92,415,795	279.21	12,192,068	935.19	0	0.00	0	0.00	104,607,863	153.13
Long Term Care	35,231,793	106.45	17,411,044	1,335.51	57,714,249	193.72	53,345,602	1,294.70	163,702,687	239.63
Total	127,647,588	385.66	29,603,111	2,270.70	57,714,249	193.72	53,345,602	1,294.70	268,310,550	392.76
Projected FY2015 Member Months	357,155		13,654		309,989		44,458		725,255	
Projected FY2015 Premium										
At Current Rates	182,474,450	510.91	35,657,714	2,611.59	78,889,159	254.49	67,628,858	1,521.19	364,650,181	502.79
Annual Cost Trend Assumptions										
Acute Care										
FY2014	2.9 %		1.6 %		2.9 %		1.6 %			
FY2015	2.6 %		0.9 %		2.6 %		0.9 %			
Long Term Care										
FY2014	9.8 %		1.2 %		5.1 %		0.0 %			
FY2015	11.3 %		3.3 %		6.3 %		1.2 %			
Provider Reimbursement Adjustment										
Acute Care	0.9718		0.9862		1.0000		1.0000			
Long Term Care	1.0233		0.9813		1.0235		0.9791			
Other Reimbursement Adjustment	1.0000		1.0000		1.0000		1.0000			
Projected Incurred Claims										
Acute Care	102,313,704	286.47	12,909,165	945.47	0	0.00	0	0.00	115,222,869	158.87
LTC	47,542,629	133.11	18,705,889	1,370.03	68,666,986	221.51	57,032,963	1,282.85	191,948,468	264.66
Total	149,856,334	419.58	31,615,053	2,315.50	68,666,986	221.51	57,032,963	1,282.85	307,171,337	423.54
Capitation Expenses & Refunds	1,910,205	5.35	98,050	7.18	75,314	0.24	90,044	2.03	2,173,612	3.00
Service Coordination and Other Expenses	4,392,169	12.30	267,556	19.60	3,699,517	11.93	708,737	15.94	9,067,979	12.50

FY2015 STAR+Plus Rating Summary Dallas SDA Total

				Tionte C	are (rion impaner	it, and bong it	iiii Cuic			
	Medicaid Or	nly - OCC	Medicaid Or	nly - HCBS	Dual Eligib	le - OCC	Dual Eligib	le - HCBS	Tot	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Net Reinsurance Cost	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Administrative Expenses										
Fixed Amount	5,089,453	14.25	194,564	14.25	4,417,346	14.25	633,525	14.25	10,334,889	14.25
Percentage of Premium	10,246,524	5.75%	2,044,339	5.75%	4,884,597	5.75%	3,714,828	5.75%	20,890,287	5.75%
Total	15,335,977	42.94	2,238,903	163.98	9,301,944	30.01	4,348,352	97.81	31,225,176	43.05
Risk Margin	3,564,008	2.00%	711,074	2.00%	1,698,990	2.00%	1,292,114	2.00%	7,266,187	2.00%
Premium Tax	3,118,507	1.75%	622,190	1.75%	1,486,617	1.75%	1,130,600	1.75%	6,357,914	1.75%
Maintenance Tax	23,215	0.07	887	0.07	20,149	0.07	2,890	0.07	47,142	0.07
Projected Total Cost										
Acute Care	119,021,612	333.25	14,460,798	1,059.12	83,220	0.27	99,496	2.24	133,665,126	184.30
LTC	59,178,803	165.70	21,092,916	1,544.86	84,866,298	273.77	64,506,204	1,450.95	229,644,220	316.64
Total	178,200,415	498.94	35,553,714	2,603.97	84,949,517	274.04	64,605,699	1,453.19	363,309,346	500.94
Experience Rate Increase		-2.3 %		-0.3 %		7.7 %		-4.5 %		-0.4 %

FY2015 STAR+Plus Rating Summary El Paso SDA Total

				Acute C	are (Non-Inpatien	it) and Long T	erm Care			
	Medicaid Or	ıly - OCC	Medicaid On		Dual Eligib		Dual Eligib	le - HCBS	Tota	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
FY2013 Experience Period										
Member Months	83,227		2,330		195,729		9,174		290,460	
Premium Revenue	41,976,370	504.36	6,890,486	2,957.29	39,028,363	199.40	11,853,725	1,292.10	99,748,943	343.42
Adjusted Premium (at current rates)	45,841,835	550.80	6,935,023	2,976.40	73,306,382	374.53	18,869,358	2,056.83	144,952,598	499.04
Estimated FY2013 Incurred Claims										
Acute Care	26,646,235	320.16	2,546,213	1,092.80	0	0.00	0	0.00	29,192,448	100.50
Long Term Care	12,287,919	147.64	3,707,794	1,591.33	58,463,252	298.69	15,355,849	1,673.84	89,814,814	309.22
Total	38,934,155	467.81	6,254,007	2,684.12	58,463,252	298.69	15,355,849	1,673.84	119,007,262	409.72
Projected FY2015 Member Months	88,969		3,636		201,856		11,680		306,142	
Projected FY2015 Premium										
At Current Rates	48,938,737	550.06	10,835,317	2,979.72	75,601,266	374.53	24,023,305	2,056.83	159,398,624	520.67
Annual Cost Trend Assumptions										
Acute Care										
FY2014	2.9 %		1.6 %		2.9 %		1.6 %			
FY2015	2.6 %		0.9 %		2.6 %		0.9 %			
Long Term Care										
FY2014	9.8 %		1.2 %		5.1 %		0.0 %			
FY2015	11.3 %		3.3 %		6.3 %		1.2 %			
Provider Reimbursement Adjustment										
Acute Care	1.0529		1.0040		1.0000		1.0000			
Long Term Care	1.0233		0.9767		1.0235		0.9781			
Other Reimbursement Adjustment	1.0000		1.0000		1.0000		1.0000			
Projected Incurred Claims										
Acute Care	31,663,762	355.89	4,090,002	1,124.75	0	0.00	0	0.00	35,753,764	116.79
LTC	16,426,900	184.64	5,908,373	1,624.81	68,943,618	341.55	19,351,437	1,656.83	110,630,327	361.37
Total	48,090,662	540.53	9,998,375	2,749.56	68,943,618	341.55	19,351,437	1,656.83	146,384,092	478.16
Capitation Expenses & Refunds	171,840	1.93	31,939	8.78	93,674	0.46	32,354	2.77	329,808	1.08
Service Coordination and Other Expenses	899,809	10.11	62,128	17.09	2,165,173	10.73	177,354	15.18	3,304,464	10.79

FY2015 STAR+Plus Rating Summary El Paso SDA Total

	Medicaid Or	ıly - OCC	Medicaid Or	ıly - HCBS	Dual Eligib	le - OCC	Dual Eligib	le - HCBS	Tot	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Net Reinsurance Cost	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Administrative Expenses										
Fixed Amount	1,267,815	14.25	51,818	14.25	2,876,453	14.25	166,437	14.25	4,362,523	14.25
Percentage of Premium	3,204,491	5.75%	644,540	5.75%	4,707,505	5.75%	1,253,458	5.75%	9,809,995	5.75%
Total	4,472,306	50.27	696,358	191.50	7,583,959	37.57	1,419,895	121.57	14,172,518	46.29
Risk Margin	1,114,606	2.00%	224,188	2.00%	1,637,393	2.00%	435,985	2.00%	3,412,172	2.00%
Premium Tax	975,280	1.75%	196,164	1.75%	1,432,719	1.75%	381,487	1.75%	2,985,651	1.75%
Maintenance Tax	5,783	0.07	236	0.07	13,121	0.07	759	0.07	19,899	0.07
Projected Total Cost										
Acute Care	36,104,046	405.80	4,578,161	1,259.00	103,507	0.51	35,751	3.06	40,821,465	133.34
LTC	19,626,240	220.60	6,631,228	1,823.59	81,766,149	405.07	21,763,521	1,863.35	129,787,138	423.94
Total	55,730,286	626.40	11,209,388	3,082.59	81,869,657	405.58	21,799,271	1,866.41	170,608,603	557.29
Experience Rate Increase		13.9 %		3.5 %		8.3 %		-9.3 %		7.0 %

FY2015 STAR+Plus Rating Summary Harris SDA Total

				Acute (Care (Non-Inpatien	nt) and Long To	erm Care			
	Medicaid Or	nly - OCC	Medicaid On		Dual Eligib		Dual Eligibl	e - HCBS	Tota	<u>.l</u>
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
FY2013 Experience Period										
Member Months	560,421		26,144		561,665		56,057		1,204,287	
Premium Revenue	376,676,229	672.13	77,052,865	2,947.25	151,256,385	269.30	83,989,643	1,498.29	688,975,121	572.10
Adjusted Premium (at current rates)	377,029,497	672.76	74,894,118	2,864.68	175,952,795	313.27	85,053,604	1,517.27	712,930,015	591.99
Estimated FY2013 Incurred Claims										
Acute Care	205,165,701	366.09	27,953,368	1,069.21	0	0.00	0	0.00	233,119,069	193.57
Long Term Care	80,129,070	142.98	38,709,581	1,480.63	119,250,188	212.32	77,535,165	1,383.15	315,624,005	262.08
Total	285,294,771	509.07	66,662,949	2,549.84	119,250,188	212.32	77,535,165	1,383.15	548,743,073	455.66
Projected FY2015 Member Months	593,431		29,037		586,308		59,438		1,268,214	
Projected FY2015 Premium										
At Current Rates	400 022 270	674.10	92 250 540	2,867.34	183,672,698	313.27	00 192 075	1 517 27	757 147 504	597.02
At Current Rates	400,032,370	0/4.10	83,259,540	2,807.34	183,072,098	313.27	90,182,975	1,517.27	757,147,584	397.02
Annual Cost Trend Assumptions										
Acute Care										
FY2014	2.9 %		1.6 %		2.9 %		1.6 %			
FY2015	2.6 %		0.9 %		2.6 %		0.9 %			
Long Term Care										
FY2014	9.8 %		1.2 %		5.1 %		0.0 %			
FY2015	11.3 %		3.3 %		6.3 %		1.2 %			
112013	11.5 /0		3.5 /0		0.5 /0		1.2 /0			
Provider Reimbursement Adjustment										
Acute Care	1.0053		0.9975		1.0000		1.0000			
Long Term Care	1.0228		0.9825		1.0236		0.9789			
Other Reimbursement Adjustment	1.0000		1.0000		1.0000		1.0000			
Projected Incurred Claims										
Acute Care	230,578,516	388.55	31,747,874	1,093.35	0	0.00	0	0.00	262,326,390	206.85
LTC	106,055,694	178.72	44,158,529	1,520.76	142,355,342	242.80	81,442,180	1,370.21	374,011,745	294.91
Total	336,634,210	567.27	75,906,404	2,614.11	142,355,342	242.80	81,442,180	1,370.21	636,338,135	501.76
Capitation Expenses & Refunds	1,275,144	2.15	92,611	3.19	-345,481	-0.59	-49,568	-0.83	972,706	0.77
Service Coordination and Other Expenses	9,866,158	16.63	1,330,689	45.83	10,297,814	17.56	2,778,421	46.75	24,273,083	19.14
	- , ,		,,		-, -, , •		, ,		, , -,	

FY2015 STAR+Plus Rating Summary Harris SDA Total

	Medicaid Or	ıly - OCC	Medicaid Or	ıly - HCBS	Dual Eligib	le - OCC	Dual Eligib	le - HCBS	Tota	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Net Reinsurance Cost	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Administrative Expenses										
Fixed Amount	8,456,389	14.25	413,780	14.25	8,354,889	14.25	846,987	14.25	18,072,044	14.25
Percentage of Premium	22,635,969	5.75%	4,939,623	5.75%	10,210,264	5.75%	5,401,943	5.75%	43,187,799	5.75%
Total	31,092,358	52.39	5,353,403	184.36	18,565,152	31.66	6,248,929	105.13	61,259,843	48.30
Risk Margin	7,873,381	2.00%	1,718,130	2.00%	3,551,396	2.00%	1,878,937	2.00%	15,021,843	2.00%
Premium Tax	6,889,208	1.75%	1,503,364	1.75%	3,107,472	1.75%	1,644,070	1.75%	13,144,113	1.75%
Maintenance Tax	38,573	0.07	1,887	0.07	38,110	0.07	3,863	0.07	82,434	0.07
Projected Total Cost										
Acute Care	262,621,333	442.55	35,374,960	1,218.26	-381,747	-0.65	-54,771	-0.92	297,559,775	234.63
LTC	131,047,698	220.83	50,531,528	1,740.23	177,951,552	303.51	94,001,603	1,581.52	453,532,382	357.62
Total	393,669,031	663.38	85,906,488	2,958.50	177,569,805	302.86	93,946,832	1,580.59	751,092,157	592.24
Experience Rate Increase		-1.6 %		3.2 %		-3.3 %		4.2 %		-0.8 %

FY2015 STAR+Plus Rating Summary Hidalgo SDA Total

Acute Care (Non-Inpatient) and Long Term Care Medicaid Only - OCC Medicaid Only - HCBS Dual Eligible - OCC Dual Eligible - HCBS Total Amount Amount pmpm pmpm Amount pmpm Amount pmpm Amount pmpm FY2013 Experience Period Member Months 264,834 13,176 517,374 92,450 887,834 Premium Revenue 185,105,724 698.95 62.503.782 4.743.76 312,250,730 603.53 361.559.932 3,910.87 921,420,168 1.037.83 Adjusted Premium (at current rates) 254,442,860 960.76 36,236,393 2,750.18 461,068,188 891.17 183,846,070 1,988.60 935,593,510 1,053.79 Estimated FY2013 Incurred Claims 741.48 0 0.00 0 0.00 103.83 Acute Care 82,415,971 311.20 9,769,733 92,185,703 364,603,912 704.72 Long Term Care 104,444,941 394.38 22,506,505 1,708.14 156,968,561 1,697.88 648,523,918 730.46 364,603,912 740,709,622 834.29 Total 186,860,912 705.58 32,276,237 2,449.62 704.72 156,968,561 1,697.88 Projected FY2015 Member Months 276,411 15,460 533,526 100,317 925,714 Projected FY2015 Premium At Current Rates 960.88 891.17 265,596,403 42,495,886 2,748.74 475,462,476 199,489,961 1.988.60 983,044,726 1.061.93 **Annual Cost Trend Assumptions** Acute Care FY2014 2.9 % 1.6 % 2.9 % 1.6 % FY2015 2.6 % 0.9 % 2.6 % 0.9 % Long Term Care FY2014 9.8 % 1.2 % 5.1 % 0.0 % FY2015 3.3 % 1.2 % 11.3 % 6.3 % Provider Reimbursement Adjustment Acute Care 1.0277 0.9975 1.0000 1.0000 Long Term Care 1.0243 0.9800 1.0235 0.9784 Other Reimbursement Adjustment 1.0000 1.0000 1.0000 1.0000 **Projected Incurred Claims** Acute Care 93.330.062 337.65 11,722,226 758.22 0 0.00 0 0.00 105.052.287 113.48 LTC 136,456,167 493.67 27,054,816 1,749.97 429,928,506 805.82 168,646,110 1,681.14 762,085,599 823.24 Total 229,786,229 831.32 38,777,042 2,508.20 429,928,506 805.82 168,646,110 1,681.14 867,137,886 936.72 Capitation Expenses & Refunds 1,459,406 5.28 94,244 6.10 112,526 0.21 0.85 1,751,332 1.89 85,156 Service Coordination and Other Expenses 4,514,474 16.33 300,839 19.46 9,358,099 17.54 1,974,207 19.68 16,147,619 17.44

FY2015 STAR+Plus Rating Summary Hidalgo SDA Total

	Medicaid Or	nlv - OCC	Medicaid Or		Dual Eligib		Dual Eligib	le - HCBS	Tot	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Net Reinsurance Cost	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Administrative Expenses										
Fixed Amount	3,938,852	14.25	220,307	14.25	7,602,747	14.25	1,429,514	14.25	13,191,421	14.25
Percentage of Premium	15,230,633	5.75%	2,502,898	5.75%	28,402,875	5.75%	10,937,168	5.75%	57,073,574	5.75%
Total	19,169,486	69.35	2,723,205	176.14	36,005,622	67.49	12,366,682	123.28	70,264,995	75.90
Risk Margin	5,297,612	2.00%	870,573	2.00%	9,879,261	2.00%	3,804,232	2.00%	19,851,678	2.00%
Premium Tax	4,635,410	1.75%	761,752	1.75%	8,644,353	1.75%	3,328,703	1.75%	17,370,218	1.75%
Maintenance Tax	17,967	0.07	1,005	0.07	34,679	0.07	6,521	0.07	60,171	0.07
Projected Total Cost										
Acute Care	106,515,547	385.35	13,130,798	849.33	124,338	0.23	94,095	0.94	119,864,779	129.48
LTC	158,365,035	572.93	30,397,862	1,966.21	493,838,709	925.61	190,117,515	1,895.17	872,719,121	942.75
Total	264,880,582	958.29	43,528,660	2,815.54	493,963,047	925.85	190,211,611	1,896.11	992,583,899	1,072.24
Experience Rate Increase		-0.3 %		2.4 %		3.9 %		-4.7 %		1.0 %

FY2015 STAR+Plus Rating Summary Jefferson SDA Total

Acute Care (Non-Inpatient) and Long Term Care Medicaid Only - HCBS Medicaid Only - OCC Dual Eligible - OCC Dual Eligible - HCBS Total Amount Amount pmpm pmpm Amount pmpm Amount pmpm Amount pmpm FY2013 Experience Period Member Months 109,119 3,420 84,305 13,848 210,692 Premium Revenue 44.812.991 410.68 6,618,863 1.935.34 18,973,683 225.06 20.195,646 1.458.38 90.601.183 430.02 Adjusted Premium (at current rates) 51,678,020 473.59 7,527,507 2,201.03 16,431,888 194.91 19,371,413 1,398.86 95,008,828 450.94 Estimated FY2013 Incurred Claims 921.69 0 0.00 0 0.00 37,678,160 Acute Care 34,525,989 316.41 3,152,170 178.83 12,370,190 17,329,077 41,294,963 Long Term Care 7,128,440 65.33 4,467,255 1,306.21 146.73 1,251.38 196.00 381.73 2,227.90 12,370,190 17,329,077 Total 41,654,430 7,619,426 146.73 1,251.38 78,973,123 374.83 Projected FY2015 Member Months 114,947 4,147 86,274 15,043 220,412 Projected FY2015 Premium At Current Rates 474.57 9.148.346 2.205.85 194.91 460.76 54,550,367 16,815,731 21.042.660 1,398.86 101,557,104 **Annual Cost Trend Assumptions** Acute Care FY2014 2.9 % 1.6 % 2.9 % 1.6 % FY2015 2.6 % 0.9 % 2.6 % 0.9 % Long Term Care FY2014 9.8 % 1.2 % 5.1 % 0.0 % FY2015 11.3 % 3.3 % 1.2 % 6.3 % Provider Reimbursement Adjustment Acute Care 1.0173 0.9907 1.0000 1.0000 Long Term Care 1.0220 0.9789 1.0232 0.9777 Other Reimbursement Adjustment 1.0000 1.0000 1.0000 1.0000 **Projected Incurred Claims** Acute Care 39,062,162 339.83 3.882.189 936.07 0 0.00 0 0.00 42.944.351 194.84 LTC 9,378,671 81.59 5,543,702 1,336.70 14,471,088 167.73 18,625,198 1,238.15 48,018,659 217.86 Total 48,440,833 421.42 9,425,891 2,272.77 14,471,088 167.73 18,625,198 1,238.15 90,963,010 412.70 Capitation Expenses & Refunds 225,784 1.96 22,346 5.39 30,092 0.35 33,919 2.25 312,142 1.42 Service Coordination and Other Expenses 10.93 76,498 18.45 946,826 10.97 247,599 16.46 2,527,487 11.47 1,256,564

FY2015 STAR+Plus Rating Summary Jefferson SDA Total

	Medicaid Or	nly - OCC	Medicaid Or	ıly - HCBS	Dual Eligib	le - OCC	Dual Eligib	le - HCBS	Tota	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Net Reinsurance Cost	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Administrative Expenses										
Fixed Amount	1,637,999	14.25	59,099	14.25	1,229,409	14.25	214,359	14.25	3,140,866	14.25
Percentage of Premium	3,276,461	5.75%	608,935	5.75%	1,059,971	5.75%	1,214,937	5.75%	6,160,304	5.75%
Total	4,914,460	42.75	668,034	161.08	2,289,380	26.54	1,429,296	95.02	9,301,170	42.20
Risk Margin	1,139,639	2.00%	211,803	2.00%	368,686	2.00%	422,587	2.00%	2,142,715	2.00%
Premium Tax	997,184	1.75%	185,328	1.75%	322,600	1.75%	369,763	1.75%	1,874,875	1.75%
Maintenance Tax	7,472	0.07	270	0.07	5,608	0.07	978	0.07	14,327	0.07
Projected Total Cost										
Acute Care	44,878,272	390.42	4,341,422	1,046.81	33,251	0.39	37,479	2.49	49,290,425	223.63
LTC	12,103,664	105.30	6,248,748	1,506.70	18,401,028	213.29	21,091,860	1,402.13	57,845,300	262.44
Total	56,981,936	495.72	10,590,170	2,553.51	18,434,279	213.67	21,129,339	1,404.62	107,135,725	486.07
Experience Rate Increase		4.5 %		15.8 %		9.6 %		0.4 %		5.5 %

FY2015 STAR+Plus Rating Summary Lubbock SDA Total

Acute Care (Non-Inpatient) and Long Term Care Medicaid Only - HCBS Medicaid Only - OCC Dual Eligible - OCC Dual Eligible - HCBS Total Amount Amount pmpm pmpm Amount pmpm Amount pmpm Amount pmpm FY2013 Experience Period Member Months 61,652 1,954 63,469 8,605 135,680 Premium Revenue 29,409,237 477.02 3.909.759 2,000.90 9.991.925 157.43 8,778,649 1.020.18 52,089,569 383.91 Adjusted Premium (at current rates) 27,798,230 450.89 4,311,708 2,206.61 9,022,118 142.15 10,403,359 1,208.99 51,535,415 379.83 Estimated FY2013 Incurred Claims 692.44 0.00 0 0.00 20,902,979 154.06 Acute Care 19,549,951 317.10 1,353,027 9,574,433 Long Term Care 3,073,157 49.85 2,471,751 1,264.97 5,797,192 91.34 1,112.66 20,916,533 154.16 366.95 Total 22,623,108 3,824,778 1,957.41 5,797,192 91.34 9,574,433 1,112.66 41,819,512 308.22 Projected FY2015 Member Months 65,746 1,984 65,541 9,035 142,306 Projected FY2015 Premium At Current Rates 29,643,897 450.88 2,206.11 142.15 381.30 4,376,889 9.316,622 10,923,224 1.208.99 54,260,632 **Annual Cost Trend Assumptions** Acute Care FY2014 2.9 % 1.6 % 2.9 % 1.6 % FY2015 2.6 % 0.9 % 2.6 % 0.9 % Long Term Care FY2014 9.8 % 1.2 % 5.1 % 0.0 % FY2015 11.3 % 3.3 % 1.2 % 6.3 % Provider Reimbursement Adjustment Acute Care 1.0223 1.0059 1.0000 1.0000 Long Term Care 1.0176 0.9810 1.0229 0.9779 Other Reimbursement Adjustment 1.0000 1.0000 1.0000 1.0000 **Projected Incurred Claims** Acute Care 22,501,426 342.25 1,416,643 714.04 0 0.00 0 0.00 23.918.069 168.07 LTC 4,075,516 61.99 2,573,765 1,297.27 6,841,271 104.38 9,948,676 1,101.13 23,439,228 164.71 Total 2,011.31 6,841,271 26,576,942 404.24 3,990,408 104.38 9,948,676 1,101.13 47,357,297 332.79 Capitation Expenses & Refunds 404,975 11,937 6.02 0 0.00 0 0.00 416,912 2.93 6.16 Service Coordination and Other Expenses 657,870 10.01 23,137 11.66 697,883 10.65 151,730 16.79 1,530,620 10.76

FY2015 STAR+Plus Rating Summary Lubbock SDA Total

	Medicaid Or	nly - OCC	Medicaid Or	ıly - HCBS	Dual Eligib	le - OCC	Dual Eligib	le - HCBS	Tot	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Net Reinsurance Cost	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Administrative Expenses										
Fixed Amount	936,883	14.25	28,272	14.25	933,956	14.25	128,749	14.25	2,027,860	14.25
Percentage of Premium	1,815,916	5.75%	257,567	5.75%	538,617	5.75%	649,956	5.75%	3,262,057	5.75%
Total	2,752,799	41.87	285,839	144.07	1,472,574	22.47	778,705	86.19	5,289,916	37.17
Risk Margin	631,623	2.00%	89,589	2.00%	187,345	2.00%	226,072	2.00%	1,134,628	2.00%
Premium Tax	552,670	1.75%	78,390	1.75%	163,927	1.75%	197,813	1.75%	992,800	1.75%
Maintenance Tax	4,274	0.07	129	0.07	4,260	0.07	587	0.07	9,250	0.07
Projected Total Cost										
Acute Care	26,191,418	398.37	1,589,682	801.26	0	0.00	0	0.00	27,781,100	195.22
LTC	5,389,735	81.98	2,889,746	1,456.53	9,367,261	142.92	11,303,583	1,251.09	28,950,324	203.44
Total	31,581,152	480.35	4,479,428	2,257.79	9,367,261	142.92	11,303,583	1,251.09	56,731,424	398.66
Experience Rate Increase		6.5 %		2.3 %		0.5 %		3.5 %		4.6 %

FY2015 STAR+Plus Rating Summary Nucces SDA Total

				Acute C	are (Non-Inpatien	nt) and Long To	erm Care			
	Medicaid On	nly - OCC	Medicaid On		Dual Eligib		Dual Eligibl	le - HCBS	Tota	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
FY2013 Experience Period										
Member Months	99,610		7,897		103,423		31,885		242,815	
Premium Revenue	75,712,679	760.09	21,291,480	2,696.15	44,222,641	427.59	52,655,527	1,651.42	193,882,326	798.48
Adjusted Premium (at current rates)	73,545,676	738.34	20,205,550	2,558.64	44,518,430	430.45	50,653,468	1,588.63	188,923,124	778.05
Estimated FY2013 Incurred Claims										
Acute Care	31,898,279	320.23	6,319,720	800.27	0	0.00	0	0.00	38,217,999	157.40
Long Term Care	19,090,615	191.65	10,898,860	1,380.13	31,843,350	307.89	44,922,716	1,408.90	106,755,541	439.66
Total	50,988,894	511.89	17,218,580	2,180.40	31,843,350	307.89	44,922,716	1,408.90	144,973,540	597.05
Projected FY2015 Member Months	106,235		8,334		107,252		32,083		253,904	
Projected FY2015 Premium										
At Current Rates	78,437,428	738.34	21,322,622	2,558.52	46,166,614	430.45	50,968,432	1,588.63	196,895,097	775.47
Annual Cost Trend Assumptions										
Acute Care										
FY2014	2.9 %		1.6 %		2.9 %		1.6 %			
FY2015	2.6 %		0.9 %		2.6 %		0.9 %			
Long Term Care										
FY2014	9.8 %		1.2 %		5.1 %		0.0 %			
FY2015	11.3 %		3.3 %		6.3 %		1.2 %			
Provider Reimbursement Adjustment										
Acute Care	1.0188		0.9990		1.0000		1.0000			
Long Term Care	1.0242		0.9791		1.0239		0.9785			
Other Reimbursement Adjustment	1.0000		1.0000		1.0000		1.0000			
Projected Incurred Claims										
Acute Care	36,591,766	344.44	6,830,263	819.57	0	0.00	0	0.00	43,422,028	171.02
LTC	25,483,943	239.88	11,772,757	1,412.62	37,774,650	352.20	44,760,966	1,395.15	119,792,316	471.80
Total	62,075,709	584.32	18,603,019	2,232.19	37,774,650	352.20	44,760,966	1,395.15	163,214,345	642.82
Capitation Expenses & Refunds	836,689	7.88	65,617	7.87	-37,506	-0.35	-11,985	-0.37	852,815	3.36
Service Coordination and Other Expenses	1,480,773	13.94	116,168	13.94	1,505,639	14.04	451,376	14.07	3,553,956	14.00

FY2015 STAR+Plus Rating Summary Nucces SDA Total

	Medicaid Or	nly - OCC	Medicaid Or	ıly - HCBS	Dual Eligib	le - OCC	Dual Eligib	le - HCBS	Tota	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Net Reinsurance Cost	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Administrative Expenses										
Fixed Amount	1,513,848	14.25	118,759	14.25	1,528,341	14.25	457,186	14.25	3,618,134	14.25
Percentage of Premium	4,187,901	5.75%	1,201,090	5.75%	2,590,873	5.75%	2,901,026	5.75%	10,880,890	5.75%
Total	5,701,749	53.67	1,319,848	158.37	4,119,214	38.41	3,358,213	104.67	14,499,024	57.10
Risk Margin	1,456,661	2.00%	417,770	2.00%	901,173	2.00%	1,009,053	2.00%	3,784,658	2.00%
Premium Tax	1,274,579	1.75%	365,549	1.75%	788,527	1.75%	882,921	1.75%	3,311,575	1.75%
Maintenance Tax	6,905	0.07	542	0.07	6,971	0.07	2,085	0.07	16,504	0.07
Projected Total Cost										
Acute Care	42,347,948	398.63	7,668,157	920.11	-41,443	-0.39	-13,243	-0.41	49,961,419	196.77
LTC	30,485,117	286.96	13,220,357	1,586.32	45,100,112	420.51	50,465,872	1,572.97	139,271,458	548.52
Total	72,833,065	685.58	20,888,514	2,506.43	45,058,669	420.12	50,452,629	1,572.55	189,232,877	745.29
Experience Rate Increase		-7.1 %		-2.0 %		-2.4 %		-1.0 %		-3.9 %

FY2015 STAR+Plus Rating Summary Tarrant SDA Total

Acute Care (Non-Inpatient) and Long Term Care Medicaid Only - HCBS Medicaid Only - OCC Dual Eligible - OCC Dual Eligible - HCBS Total Amount Amount pmpm pmpm Amount pmpm Amount pmpm Amount pmpm FY2013 Experience Period Member Months 191,377 7,521 169,280 23,870 392,048 Premium Revenue 99.326.577 519.01 19.856,418 2,640.13 24,477,888 144.60 36,072,105 1.511.19 179,732,988 458.45 Adjusted Premium (at current rates) 99,209,672 518.40 20,870,678 2,774.99 32,613,485 192.66 35,083,171 1,469.76 187,777,005 478.96 Estimated FY2013 Incurred Claims 837.04 0 0.00 0 0.00 74,878,804 190.99 Acute Care 68,583,452 358.37 6,295,352 23,300,031 137.64 31,546,851 207.21 Long Term Care 15,423,029 80.59 10,964,818 1,457.89 1,321.61 81,234,728 23,300,031 Total 84,006,481 438.96 17,260,170 2,294.93 137.64 31,546,851 1,321.61 156,113,532 398.20 Projected FY2015 Member Months 206,393 9,531 177,424 26,132 419,480 Projected FY2015 Premium At Current Rates 518.15 192.66 1,469.76 491.03 106,943,423 26,446,092 2,774.71 34,182,578 38.407.111 205,979,203 **Annual Cost Trend Assumptions** Acute Care FY2014 2.9 % 1.6 % 2.9 % 1.6 % FY2015 2.6 % 0.9 % 2.6 % 0.9 % Long Term Care FY2014 9.8 % 1.2 % 5.1 % 0.0 % FY2015 3.3 % 1.2 % 11.3 % 6.3 % Provider Reimbursement Adjustment Acute Care 0.9903 0.9912 1.0000 1.0000 Long Term Care 1.0224 0.9832 1.0233 0.9812 Other Reimbursement Adjustment 1.0000 1.0000 1.0000 1.0000 **Projected Incurred Claims** Acute Care 77,331,069 374.68 8.106.514 850.53 0 0.00 0 0.00 85,437,583 203.67 LTC 20,782,280 100.69 14,282,099 1,498.47 27,919,205 157.36 34,293,109 1,312.33 97,276,694 231.90 Total 98,113,349 475.37 22,388,613 2,349.00 27,919,205 157.36 34,293,109 1,312.33 182,714,276 435.57 Capitation Expenses & Refunds 185,356 0.90 9,594 1.01 0 0.00 0 0.00 194,950 0.46 Service Coordination and Other Expenses 1,304,478 6.32 429,174 45.03 1,188,440 6.70 920,986 35.24 3,843,078 9.16

FY2015 STAR+Plus Rating Summary Tarrant SDA Total

	Medicaid Or	ıly - OCC	Medicaid On	ly - HCBS	Dual Eligib	le - OCC	Dual Eligib	le - HCBS	Tota	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Net Reinsurance Cost	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Administrative Expenses										
Fixed Amount	2,941,100	14.25	135,818	14.25	2,528,297	14.25	372,375	14.25	5,977,590	14.25
Percentage of Premium	6,516,097	5.75%	1,459,027	5.75%	2,010,751	5.75%	2,261,127	5.75%	12,247,002	5.75%
Total	9,457,197	45.82	1,594,846	167.33	4,539,048	25.58	2,633,501	100.78	18,224,592	43.45
Risk Margin	2,266,468	2.00%	507,488	2.00%	699,392	2.00%	786,479	2.00%	4,259,827	2.00%
Premium Tax	1,983,160	1.75%	444,052	1.75%	611,968	1.75%	688,169	1.75%	3,727,348	1.75%
Maintenance Tax	13,416	0.07	620	0.07	11,533	0.07	1,699	0.07	27,266	0.07
Projected Total Cost										
Acute Care	88,226,649	427.47	9,022,662	946.65	0	0.00	0	0.00	97,249,311	231.83
LTC	25,096,774	121.60	16,351,724	1,715.62	34,969,585	197.10	39,323,943	1,504.85	115,742,026	275.92
Total	113,323,424	549.07	25,374,386	2,662.27	34,969,585	197.10	39,323,943	1,504.85	212,991,338	507.75
Experience Rate Increase		6.0 %		-4.1 %		2.3 %		2.4 %		3.4 %

FY2015 STAR+Plus Rating Summary Travis SDA Total

Acute Care (Non-Inpatient) and Long Term Care Medicaid Only - HCBS Medicaid Only - OCC Dual Eligible - OCC Dual Eligible - HCBS Total Amount Amount pmpm pmpm Amount pmpm Amount pmpm Amount pmpm FY2013 Experience Period Member Months 116,169 4,701 107,934 15,795 244,599 Premium Revenue 74.275.919 639.38 13,490,916 2,869.80 21.641.846 200.51 27.096,796 1.715.53 136,505,478 558.08 Adjusted Premium (at current rates) 71,448,628 615.04 13,277,836 2,824.47 24,810,789 229.87 26,243,708 1,661.52 135,780,961 555.12 Estimated FY2013 Incurred Claims 0 0.00 0 0.00 Acute Care 41,587,270 357.99 4,776,236 1,016.00 46,363,506 189.55 15,904,374 22,506,153 Long Term Care 10,734,774 92.41 7,558,320 1,607.81 147.35 1,424.89 56,703,621 231.82 Total 52,322,044 450.40 12,334,556 2,623.82 15,904,374 147.35 22,506,153 1,424.89 103,067,127 421.37 Projected FY2015 Member Months 121,805 5,276 112,228 17,056 256,365 Projected FY2015 Premium At Current Rates 614.59 2.822.91 229.87 561.28 74,860,248 14,894,818 25,797,766 28,339,435 1,661.52 143,892,268 **Annual Cost Trend Assumptions** Acute Care FY2014 2.9 % 1.6 % 2.9 % 1.6 % FY2015 2.6 % 0.9 % 2.6 % 0.9 % Long Term Care FY2014 9.8 % 1.2 % 5.1 % 0.0 % FY2015 3.3 % 1.2 % 11.3 % 6.3 % Provider Reimbursement Adjustment Acute Care 1.0258 1.0061 1.0000 1.0000 Long Term Care 1.0211 0.9781 1.0233 0.9784 Other Reimbursement Adjustment 1.0000 1.0000 1.0000 1.0000 **Projected Incurred Claims** Acute Care 47,223,603 387.70 5.529.158 1.047.90 0 0.00 0 0.00 52,752,761 205.77 LTC 14,045,331 115.31 8,674,342 1,643.99 18,905,888 168.46 24,063,800 1,410.84 65,689,360 256.23 Total 61,268,934 503.01 14,203,500 2,691.89 18,905,888 168.46 24,063,800 1,410.84 118,442,121 462.01 Capitation Expenses & Refunds 346,788 2.85 15,709 2.98 -75,499 -0.67-0.85 272,543 1.06 -14,454 Service Coordination and Other Expenses 1,328,421 10.91 148,662 28.17 1,240,853 11.06 397,730 23.32 3,115,667 12.15

FY2015 STAR+Plus Rating Summary Travis SDA Total

	Medicaid Or	nly - OCC	Medicaid On		Dual Eligib		Dual Eligibl	le - HCBS	Tot	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Net Reinsurance Cost	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Administrative Expenses										
Fixed Amount	1,735,715	14.25	75,189	14.25	1,599,244	14.25	243,053	14.25	3,653,200	14.25
Percentage of Premium	4,109,997	5.75%	917,675	5.75%	1,377,318	5.75%	1,568,780	5.75%	7,973,769	5.75%
Total	5,845,712	47.99	992,863	188.17	2,976,561	26.52	1,811,833	106.23	11,626,969	45.35
Risk Margin	1,429,564	2.00%	319,191	2.00%	479,067	2.00%	545,663	2.00%	2,773,485	2.00%
Premium Tax	1,250,869	1.75%	279,292	1.75%	419,184	1.75%	477,455	1.75%	2,426,799	1.75%
Maintenance Tax	7,917	0.07	343	0.07	7,295	0.07	1,109	0.07	16,664	0.07
Projected Total Cost										
Acute Care	54,048,963	443.74	6,159,414	1,167.35	-83,425	-0.74	-15,972	-0.94	60,108,981	234.47
LTC	17,429,242	143.09	9,800,147	1,857.36	24,036,773	214.18	27,299,107	1,600.53	78,565,268	306.46
Total	71,478,205	586.83	15,959,560	3,024.71	23,953,348	213.44	27,283,135	1,599.59	138,674,249	540.93
Experience Rate Increase		-4.5 %		7.1 %		-7.1 %		-3.7 %		-3.6 %

Attachment 4

Community Experience Analysis – Inpatient

The following exhibits present a summary of the inpatient experience analysis performed for each managed care service area. HHSC utilizes an adjusted community rating methodology in setting the STAR+PLUS premium rates. The base community rates by risk group vary by service area but are the same for each HMO in a service area. The community rates are developed by a weighted average of the projected FY2015 cost for each health plan in the service area. The weights used in this formula are the projected number of FY2015 clients enrolled in each health plan.

Below is a brief description of the exhibits contained in this attachment. The exhibits present the derivation of the FY2015 STAR+PLUS HMO community rates for the following service areas:

Exhibit A – Bexar Service Area

Exhibit B – Dallas Services Area

Exhibit C – El Paso Services Area

Exhibit D – Harris Service Area

Exhibit E – Hidalgo Service Area

Exhibit F – Jefferson Service Area

Exhibit G – Lubbock Service Area

Exhibit H – Nueces Service Area

Exhibit I – Tarrant Service Area

Exhibit J – Travis Service Area

A description of the rating methodology used for the MRSA Central, MRSA Northeast, MRSA West and IDD populations can be found in Attachments 11 and 12.

These exhibits show projected FY2015 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 portion of the exhibit shows summary base period (FY2013) experience and projected FY2015 enrollment, premium and incurred claims experience.

The cost of reinsurance is also considered. 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) \$0.75 pmpm.

A provision for administrative expenses is included in the amount of 5.75% of gross premium. Additional provisions are also included for premium tax (1.75% of premium) risk margin (2.0% of premium).

The bottom of the exhibit shows a summary of the projected FY2015 cost based on these assumptions.

FY2015 STAR+Plus Rating Summary Bexar SDA Total

	Inpatient									
	Medicaid Or	ıly - OCC	Medicaid On	ly - HCBS	Dual Eligib	le - OCC	Dual Eligible	e - HCBS	Tota	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
FY2013 Experience Period										
Member Months	262,853		15,362		262,879		38,706		579,800	
Premium Revenue	38,137,284	145.09	6,534,090	425.34	0	0.00	0	0.00	44,671,374	77.05
Adjusted Premium (at current rates)	48,906,242	186.06	8,437,787	549.26	0	0.00	0	0.00	57,344,029	98.90
Estimated FY2013 Incurred Claims	45,030,823	171.32	8,332,680	542.42	0	0.00	0	0.00	53,363,504	92.04
Projected FY2015 Member Months	280,011		16,405		273,567		40,013		609,997	
Projected FY2015 Premium										
At Current Rates	52,151,544	186.25	9,010,299	549.23	0	0.00	0	0.00	61,161,844	100.27
Annual Cost Trend Assumptions Acute Care										
FY2014	2.9 %		2.9 %		2.9 %		2.9 %			
FY2015	2.9 %		2.9 %		2.9 %		2.9 %			
Provider Reimbursement Adjustment	0.9035		0.9113		1.0000		1.0000			
Projected Incurred Claims	45,891,404	163.89	8,586,458	523.39	0	0.00	0	0.00	54,477,862	89.31
Capitation & Other Expenses	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Net Reinsurance Cost	37,141	0.13	2,061	0.13	0	0.00	0	0.00	39,202	0.06
Administrative Expenses										
Fixed Amount	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Percentage of Premium	2,918,112	5.75%	545,679	5.75%	0	5.75%	0	5.75%	3,463,791	5.75%
Total	2,918,112	10.42	545,679	33.26	0	0.00	0	0.00	3,463,791	5.68
Risk Margin	1,014,995	2.00%	189,802	2.00%	0	2.00%	0	2.00%	1,204,797	2.00%
Premium Tax	888,121	1.75%	166,076	1.75%	0	1.75%	0	1.75%	1,054,197	1.75%
Maintenance Tax	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Projected Total Cost	50,749,773	181.24	9,490,077	578.48	0	0.00	0	0.00	60,239,850	98.75
Experience Rate Increase		-2.7 %		5.3 %		0.0 %		0.0 %		-1.5 %

FY2015 STAR+Plus Rating Summary Dallas SDA Total

	Inpatient									
	Medicaid Or	ıly - OCC	Medicaid On	ly - HCBS	Dual Eligib		Dual Eligible	e - HCBS	Tota	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
FY2013 Experience Period										
Member Months	330,985		13,037		297,924		41,203		683,149	
Premium Revenue	55,919,916	168.95	6,083,195	466.61	0	0.00	0	0.00	62,003,110	90.76
Adjusted Premium (at current rates)	68,381,285	206.60	7,699,659	590.60	0	0.00	0	0.00	76,080,944	111.37
Estimated FY2013 Incurred Claims	68,918,164	208.22	9,270,789	711.11	0	0.00	0	0.00	78,188,953	114.45
Projected FY2015 Member Months	357,155		13,654		309,989		44,458		725,255	
Projected FY2015 Premium										
At Current Rates	73,847,097	206.77	8,058,420	590.20	0	0.00	0	0.00	81,905,517	112.93
Annual Cost Trend Assumptions Acute Care										
FY2014	2.9 %		2.9 %		2.9 %		2.9 %			
FY2015	2.9 %		2.9 %		2.9 %		2.9 %			
Provider Reimbursement Adjustment	0.9081		0.9078		1.0000		1.0000			
Projected Incurred Claims	71,506,595	200.21	9,332,726	683.53	0	0.00	0	0.00	80,839,321	111.46
Capitation & Other Expenses	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Net Reinsurance Cost	145,251	0.41	7,047	0.52	0	0.00	0	0.00	152,299	0.21
Administrative Expenses										
Fixed Amount	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Percentage of Premium	4,552,465	5.75%	593,411	5.75%	0	5.75%	0	5.75%	5,145,876	5.75%
Total	4,552,465	12.75	593,411	43.46	0	0.00	0	0.00	5,145,876	7.10
Risk Margin	1,583,466	2.00%	206,404	2.00%	0	2.00%	0	2.00%	1,789,870	2.00%
Premium Tax	1,385,533	1.75%	180,603	1.75%	0	1.75%	0	1.75%	1,566,136	1.75%
Maintenance Tax	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Projected Total Cost	79,173,311	221.68	10,320,191	755.86	0	0.00	0	0.00	89,493,502	123.40
Experience Rate Increase		7.2 %		28.1 %		0.0 %		0.0 %		9.3 %

FY2015 STAR+Plus Rating Summary El Paso SDA Total

	Inpatient									
	Medicaid Or	nly - OCC	Medicaid On	ly - HCBS	Dual Eligib		Dual Eligibl	e - HCBS	Tota	ıl
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
FY2013 Experience Period										
Member Months	83,227		2,330		195,729		9,174		290,460	
Premium Revenue	14,101,983	169.44	1,168,612	501.55	0	0.00	0	0.00	15,270,594	52.57
Adjusted Premium (at current rates)	15,343,179	184.35	1,327,616	569.79	0	0.00	0	0.00	16,670,795	57.39
Estimated FY2013 Incurred Claims	16,091,757	193.35	1,748,366	750.37	0	0.00	0	0.00	17,840,124	61.42
Projected FY2015 Member Months	88,969		3,636		201,856		11,680		306,142	
Projected FY2015 Premium										
At Current Rates	16,367,837	183.97	2,079,920	571.98	0	0.00	0	0.00	18,447,757	60.26
Annual Cost Trend Assumptions Acute Care										
FY2014	2.9 %		2.9 %		2.9 %		2.9 %			
FY2015	2.9 %		2.9 %		2.9 %		2.9 %			
Provider Reimbursement Adjustment	0.9434		0.9456		1.0000		1.0000			
Projected Incurred Claims	17,183,313	193.14	2,732,001	751.30	0	0.00	0	0.00	19,915,314	65.05
Capitation & Other Expenses	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Net Reinsurance Cost	28,568	0.32	1,430	0.39	0	0.00	0	0.00	29,998	0.10
Administrative Expenses										
Fixed Amount	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Percentage of Premium	1,093,573	5.75%	173,671	5.75%	0	5.75%	0	5.75%	1,267,244	5.75%
Total	1,093,573	12.29	173,671	47.76	0	0.00	0	0.00	1,267,244	4.14
Risk Margin	380,373	2.00%	60,407	2.00%	0	2.00%	0	2.00%	440,780	2.00%
Premium Tax	332,826	1.75%	52,856	1.75%	0	1.75%	0	1.75%	385,683	1.75%
Maintenance Tax	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Projected Total Cost	19,018,653	213.77	3,020,366	830.60	0	0.00	0	0.00	22,039,018	71.99
Experience Rate Increase		16.2 %		45.2 %		0.0 %		0.0 %		19.5 %

FY2015 STAR+Plus Rating Summary Harris SDA Total

	Inpatient									
	Medicaid Or	nly - OCC	Medicaid On	ly - HCBS	Dual Eligib		Dual Eligibl	e - HCBS	Tot	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
FY2013 Experience Period										
Member Months	560,421		26,144		561,665		56,057		1,204,287	
Premium Revenue	118,373,770	211.22	17,421,970	666.39	0	0.00	0	0.00	135,795,740	112.76
Adjusted Premium (at current rates)	162,732,956	290.38	25,674,286	982.03	0	0.00	0	0.00	188,407,242	156.45
Estimated FY2013 Incurred Claims	151,438,464	270.22	23,072,874	882.53	0	0.00	0	0.00	174,511,338	144.91
Projected FY2015 Member Months	593,431		29,037		586,308		59,438		1,268,214	
Projected FY2015 Premium										
At Current Rates	172,840,678	291.26	28,574,514	984.07	0	0.00	0	0.00	201,415,192	158.82
Annual Cost Trend Assumptions Acute Care										
FY2014	2.9 %		2.9 %		2.9 %		2.9 %			
FY2015	2.9 %		2.9 %		2.9 %		2.9 %			
Provider Reimbursement Adjustment	0.8252		0.8233		1.0000		1.0000			
Projected Incurred Claims	140,114,096	236.11	22,339,492	769.34	0	0.00	0	0.00	162,453,588	128.10
Capitation & Other Expenses	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Net Reinsurance Cost	88,927	0.15	3,385	0.12	0	0.00	0	0.00	92,312	0.07
Administrative Expenses										
Fixed Amount	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Percentage of Premium	8,907,927	5.75%	1,419,575	5.75%	0	5.75%	0	5.75%	10,327,502	5.75%
Total	8,907,927	15.01	1,419,575	48.89	0	0.00	0	0.00	10,327,502	8.14
Risk Margin	3,098,409	2.00%	493,765	2.00%	0	2.00%	0	2.00%	3,592,175	2.00%
Premium Tax	2,711,108	1.75%	432,045	1.75%	0	1.75%	0	1.75%	3,143,153	1.75%
Maintenance Tax	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Projected Total Cost	154,920,467	261.06	24,688,262	850.23	0	0.00	0	0.00	179,608,730	141.62
Experience Rate Increase		-10.4 %		-13.6 %		0.0 %		0.0 %		-10.8 %

FY2015 STAR+Plus Rating Summary Hidalgo SDA Total

	Inpatient									
	Medicaid Or	ıly - OCC	Medicaid On	ly - HCBS	Dual Eligib	le - OCC	Dual Eligibl	e - HCBS	Tota	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
FY2013 Experience Period										
Member Months	264,834		13,176		517,374		92,450		887,834	
Premium Revenue	30,169,889	113.92	4,443,079	337.21	0	0.00	0	0.00	34,612,968	38.99
Adjusted Premium (at current rates)	40,173,148	151.69	5,161,343	391.72	0	0.00	0	0.00	45,334,491	51.06
Estimated FY2013 Incurred Claims	35,940,833	135.71	5,060,686	384.08	0	0.00	0	0.00	41,001,519	46.18
Projected FY2015 Member Months	276,411		15,460		533,526		100,317		925,714	
Projected FY2015 Premium										
At Current Rates	41,940,077	151.73	6,044,771	390.99	0	0.00	0	0.00	47,984,848	51.84
Annual Cost Trend Assumptions Acute Care										
FY2014	2.9 %		2.9 %		2.9 %		2.9 %			
FY2015	2.9 %		2.9 %		2.9 %		2.9 %			
Provider Reimbursement Adjustment	0.9015		0.9203		1.0000		1.0000			
Projected Incurred Claims	35,806,816	129.54	5,786,276	374.27	0	0.00	0	0.00	41,593,092	44.93
Capitation & Other Expenses	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Net Reinsurance Cost	46,675	0.17	1,950	0.13	0	0.00	0	0.00	48,625	0.05
Administrative Expenses										
Fixed Amount	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Percentage of Premium	2,277,984	5.75%	367,760	5.75%	0	5.75%	0	5.75%	2,645,744	5.75%
Total	2,277,984	8.24	367,760	23.79	0	0.00	0	0.00	2,645,744	2.86
Risk Margin	792,342	2.00%	127,917	2.00%	0	2.00%	0	2.00%	920,259	2.00%
Premium Tax	693,300	1.75%	111,927	1.75%	0	1.75%	0	1.75%	805,227	1.75%
Maintenance Tax	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Projected Total Cost	39,617,117	143.33	6,395,830	413.70	0	0.00	0	0.00	46,012,947	49.71
Experience Rate Increase		-5.5 %		5.8 %		0.0 %		0.0 %		-4.1 %

FY2015 STAR+Plus Rating Summary Jefferson SDA Total

	Inpatient									
	Medicaid Or	nly - OCC	Medicaid On	ly - HCBS	Dual Eligib	le - OCC	Dual Eligibl	e - HCBS	Tota	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
FY2013 Experience Period										
Member Months	109,119		3,420		84,305		13,848		210,692	
Premium Revenue	18,138,851	166.23	1,682,811	492.05	0	0.00	0	0.00	19,821,662	94.08
Adjusted Premium (at current rates)	28,962,193	265.42	1,912,392	559.18	0	0.00	0	0.00	30,874,585	146.54
Estimated FY2013 Incurred Claims	24,534,439	224.84	1,777,604	519.77	0	0.00	0	0.00	26,312,044	124.88
Projected FY2015 Member Months	114,947		4,147		86,274		15,043		220,412	
Projected FY2015 Premium										
At Current Rates	30,587,800	266.10	2,333,370	562.62	0	0.00	0	0.00	32,921,171	149.36
Annual Cost Trend Assumptions Acute Care										
FY2014	2.9 %		2.9 %		2.9 %		2.9 %			
FY2015	2.9 %		2.9 %		2.9 %		2.9 %			
Provider Reimbursement Adjustment	0.9398		0.9372		1.0000		1.0000			
Projected Incurred Claims	25,718,207	223.74	2,139,135	515.79	0	0.00	0	0.00	27,857,342	126.39
Capitation & Other Expenses	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Net Reinsurance Cost	36,936	0.32	1,723	0.42	0	0.00	0	0.00	38,659	0.18
Administrative Expenses										
Fixed Amount	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Percentage of Premium	1,636,377	5.75%	136,021	5.75%	0	5.75%	0	5.75%	1,772,398	5.75%
Total	1,636,377	14.24	136,021	32.80	0	0.00	0	0.00	1,772,398	8.04
Risk Margin	569,174	2.00%	47,312	2.00%	0	2.00%	0	2.00%	616,486	2.00%
Premium Tax	498,028	1.75%	41,398	1.75%	0	1.75%	0	1.75%	539,425	1.75%
Maintenance Tax	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Projected Total Cost	28,458,722	247.58	2,365,589	570.39	0	0.00	0	0.00	30,824,311	139.85
Experience Rate Increase		-7.0 %		1.4 %		0.0 %		0.0 %		-6.4 %

FY2015 STAR+Plus Rating Summary Lubbock SDA Total

	Inpatient									
	Medicaid Or	nly - OCC	Medicaid On	ly - HCBS	Dual Eligib		Dual Eligible	e - HCBS	Tota	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
FY2013 Experience Period										
Member Months	61,652		1,954		63,469		8,605		135,680	
Premium Revenue	15,294,012	248.07	1,434,803	734.29	0	0.00	0	0.00	16,728,814	123.30
Adjusted Premium (at current rates)	15,314,814	248.41	895,537	458.31	0	0.00	0	0.00	16,210,350	119.47
Estimated FY2013 Incurred Claims	13,054,325	211.74	786,744	402.63	0	0.00	0	0.00	13,841,069	102.01
Projected FY2015 Member Months	65,746		1,984		65,541		9,035		142,306	
Projected FY2015 Premium										
At Current Rates	16,331,599	248.40	908,689	458.01	0	0.00	0	0.00	17,240,288	121.15
Annual Cost Trend Assumptions Acute Care										
FY2014	2.9 %		2.9 %		2.9 %		2.9 %			
FY2015	2.9 %		2.9 %		2.9 %		2.9 %			
Provider Reimbursement Adjustment	0.9394		0.9337		1.0000		1.0000			
Projected Incurred Claims	13,847,105	210.61	789,743	398.06	0	0.00	0	0.00	14,636,848	102.85
Capitation & Other Expenses	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Net Reinsurance Cost	3,684	0.06	113	0.06	0	0.00	0	0.00	3,797	0.03
Administrative Expenses										
Fixed Amount	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Percentage of Premium	880,023	5.75%	50,184	5.75%	0	5.75%	0	5.75%	930,207	5.75%
Total	880,023	13.39	50,184	25.29	0	0.00	0	0.00	930,207	6.54
Risk Margin	306,095	2.00%	17,455	2.00%	0	2.00%	0	2.00%	323,550	2.00%
Premium Tax	267,833	1.75%	15,273	1.75%	0	1.75%	0	1.75%	283,106	1.75%
Maintenance Tax	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Projected Total Cost	15,304,740	232.79	872,769	439.91	0	0.00	0	0.00	16,177,509	113.68
Experience Rate Increase		-6.3 %		-4.0 %		0.0 %		0.0 %		-6.2 %

FY2015 STAR+Plus Rating Summary Nucces SDA Total

	Inpatient									
	Medicaid Or	nly - OCC	Medicaid On	ly - HCBS	Dual Eligib		Dual Eligible	e - HCBS	Tota	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
FY2013 Experience Period										
Member Months	99,610		7,897		103,423		31,885		242,815	
Premium Revenue	15,255,385	153.15	3,487,102	441.57	0	0.00	0	0.00	18,742,487	77.19
Adjusted Premium (at current rates)	22,278,532	223.66	5,360,336	678.78	0	0.00	0	0.00	27,638,868	113.83
Estimated FY2013 Incurred Claims	17,305,846	173.74	4,595,497	581.93	0	0.00	0	0.00	21,901,343	90.20
Projected FY2015 Member Months	106,235		8,334		107,252		32,083		253,904	
Projected FY2015 Premium										
At Current Rates	23,760,412	223.66	5,656,297	678.70	0	0.00	0	0.00	29,416,709	115.86
Annual Cost Trend Assumptions Acute Care										
FY2014	2.9 %		2.9 %		2.9 %		2.9 %			
FY2015	2.9 %		2.9 %		2.9 %		2.9 %			
Provider Reimbursement Adjustment	0.9355		0.9330		1.0000		1.0000			
Projected Incurred Claims	18,282,342	172.09	4,791,087	574.89	0	0.00	0	0.00	23,073,429	90.87
Capitation & Other Expenses	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Net Reinsurance Cost	2,768	0.03	217	0.03	0	0.00	0	0.00	2,985	0.01
Administrative Expenses										
Fixed Amount	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Percentage of Premium	1,161,761	5.75%	304,420	5.75%	0	5.75%	0	5.75%	1,466,181	5.75%
Total	1,161,761	10.94	304,420	36.53	0	0.00	0	0.00	1,466,181	5.77
Risk Margin	404,091	2.00%	105,885	2.00%	0	2.00%	0	2.00%	509,976	2.00%
Premium Tax	353,579	1.75%	92,650	1.75%	0	1.75%	0	1.75%	446,229	1.75%
Maintenance Tax	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Projected Total Cost	20,204,541	190.19	5,294,259	635.26	0	0.00	0	0.00	25,498,800	100.43
Experience Rate Increase		-15.0 %		-6.4 %		0.0 %		0.0 %		-13.3 %

FY2015 STAR+Plus Rating Summary Tarrant SDA Total

	Inpatient									
	Medicaid Or	ıly - OCC	Medicaid On	ly - HCBS	Dual Eligib		Dual Eligibl	e - HCBS	Tota	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
FY2013 Experience Period										
Member Months	191,377		7,521		169,280		23,870		392,048	
Premium Revenue	37,862,026	197.84	3,361,436	446.94	0	0.00	0	0.00	41,223,461	105.15
Adjusted Premium (at current rates)	37,868,513	197.87	4,338,782	576.89	0	0.00	0	0.00	42,207,295	107.66
Estimated FY2013 Incurred Claims	46,900,291	245.07	4,169,302	554.35	0	0.00	0	0.00	51,069,593	130.26
Projected FY2015 Member Months	206,393		9,531		177,424		26,132		419,480	
Projected FY2015 Premium										
At Current Rates	40,815,080	197.75	5,496,722	576.71	0	0.00	0	0.00	46,311,802	110.40
Annual Cost Trend Assumptions Acute Care										
FY2014	2.9 %		2.9 %		2.9 %		2.9 %			
FY2015	2.9 %		2.9 %		2.9 %		2.9 %			
Provider Reimbursement Adjustment	0.8385		0.7511		1.0000		1.0000			
Projected Incurred Claims	44,907,049	217.58	4,202,036	440.88	0	0.00	0	0.00	49,109,086	117.07
Capitation & Other Expenses	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Net Reinsurance Cost	14,633	0.07	757	0.08	0	0.00	0	0.00	15,391	0.04
Administrative Expenses										
Fixed Amount	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Percentage of Premium	2,854,140	5.75%	267,028	5.75%	0	5.75%	0	5.75%	3,121,168	5.75%
Total	2,854,140	13.83	267,028	28.02	0	0.00	0	0.00	3,121,168	7.44
Risk Margin	992,744	2.00%	92,879	2.00%	0	2.00%	0	2.00%	1,085,624	2.00%
Premium Tax	868,651	1.75%	81,269	1.75%	0	1.75%	0	1.75%	949,921	1.75%
Maintenance Tax	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Projected Total Cost	49,637,218	240.50	4,643,971	487.24	0	0.00	0	0.00	54,281,189	129.40
Experience Rate Increase		21.6 %		-15.5 %		0.0 %		0.0 %		17.2 %

FY2015 STAR+Plus Rating Summary Travis SDA Total

	Inpatient									
	Medicaid Or	nly - OCC	Medicaid On	ly - HCBS	Dual Eligib	le - OCC	Dual Eligibl	e - HCBS	Tota	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
FY2013 Experience Period										
Member Months	116,169		4,701		107,934		15,795		244,599	
Premium Revenue	22,742,730	195.77	2,203,319	468.69	0	0.00	0	0.00	24,946,049	101.99
Adjusted Premium (at current rates)	28,848,215	248.33	3,225,927	686.22	0	0.00	0	0.00	32,074,142	131.13
Estimated FY2013 Incurred Claims	24,862,273	214.02	2,920,763	621.31	0	0.00	0	0.00	27,783,036	113.59
Projected FY2015 Member Months	121,805		5,276		112,228		17,056		256,365	
Projected FY2015 Premium										
At Current Rates	30,218,794	248.09	3,615,694	685.26	0	0.00	0	0.00	33,834,488	131.98
Annual Cost Trend Assumptions Acute Care										
FY2014	2.9 %		2.9 %		2.9 %		2.9 %			
FY2015	2.9 %		2.9 %		2.9 %		2.9 %			
Provider Reimbursement Adjustment	0.9035		0.9189		1.0000		1.0000			
Projected Incurred Claims	24,938,655	204.74	3,189,646	604.51	0	0.00	0	0.00	28,128,301	109.72
Capitation & Other Expenses	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Net Reinsurance Cost	6,695	0.05	229	0.04	0	0.00	0	0.00	6,924	0.03
Administrative Expenses										
Fixed Amount	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Percentage of Premium	1,584,926	5.75%	202,672	5.75%	0	5.75%	0	5.75%	1,787,597	5.75%
Total	1,584,926	13.01	202,672	38.41	0	0.00	0	0.00	1,787,597	6.97
Risk Margin	551,278	2.00%	70,494	2.00%	0	2.00%	0	2.00%	621,773	2.00%
Premium Tax	482,369	1.75%	61,683	1.75%	0	1.75%	0	1.75%	544,051	1.75%
Maintenance Tax	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Projected Total Cost	27,563,922	226.30	3,524,724	668.02	0	0.00	0	0.00	31,088,646	121.27
Experience Rate Increase		-8.8 %		-2.5 %		0.0 %		0.0 %		-8.1 %

Attachment 5

Trend Analysis

The FY2015 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. Separate trend factors were developed by type of service – non-inpatient acute care, inpatient care and long term care services. The projected trend rate assumptions were developed by the actuary based on an analysis of recent experience under the various HMO plans. A single trend assumption applied to all service areas but varies by type of service, risk group and year.

The trend analysis included a review of HMO claims experience data through February 28, 2014. Based on this information, estimates of monthly incurred claims were made through December 2014. The claims cost and trend experience was reviewed separately by service area, type of service 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 FY2014 non-inpatient acute care trend assumptions were developed from two components: (i) the actual estimated trend for the period September 2013 through December 2013 and (ii) the projected trend for the period January 2014 through August 2014. 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 program. The trends for the final eight months of FY2014 were projected using experience from FY2011 (1/3 weight), FY2012 (1/3 weight) and FY2013 (1/3 weight). The FY2015 non-inpatient acute care trend assumptions were developed based on an average of the HMO trends for the most recent three full fiscal years (FY2011, FY2012 and FY2013). All historical trends for FY2011 through FY2013 used in the methodology described above were limited to be no less than 0.0%.

The inpatient acute care trend assumptions were developed from an analysis of inpatient claims previously paid on a fee-for-service basis for clients enrolled in the STAR+PLUS program as well as those clients enrolled in the Primary Care Case Management (PCCM) program outside of STAR+PLUS service areas. Based on this analysis the FY2014 and FY2015 trend assumptions were developed based on an average of the trends for the periods (FY2010, FY2011 and FY2012). Only claims prior to the carve-in of inpatient services on March 1, 2012 were considered during the FY2012 time period. Inpatient claims after March 1, 2012 were not considered in the trend analysis due to the significant programmatic changes that impacted inpatient claims once carved into the STAR+PLUS program.

The FY2014 long term care trend assumptions by risk group were developed from two components: (i) the actual estimated trend for the period September 2013 through December 2013 and (ii) the projected trend for the period January 2014 through August 2014. 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 program. The trends for the final eight months of FY2014 were projected using experience from FY2011 (1/3 weight), FY2012 (1/3 weight) and FY2013 (1/3 weight). The FY2015 long term care trend assumptions were developed based on an average of the HMO trends for the most recent three full fiscal years (FY2011, FY2012 and FY2013). All historical trends for FY2011 through FY2013 used in the methodology described above were limited to be no less than 0.0%.

The attached Exhibit A presents a summary of the recent non-inpatient acute care and long term care trend experience under the HMO plans. Exhibit B presents a summary of the historical inpatient trend experience across the entire state. Exhibit C presents the trend assumptions used in the rating analysis.

The chart below presents the assumed annual trend rates for FY2014 and FY2015.

	FY2014	FY2015
Acute Care (non-inpatient)		
Medicaid Only - OCC	2.9%	2.6%
Medicaid Only - HCBS	1.6%	0.9%
Acute Care (inpatient)		
Medicaid Only - OCC	2.9%	2.9%
Medicaid Only - HCBS	2.9%	2.9%
Long Term Care		
Medicaid Only - OCC	9.8%	11.3%
Medicaid Only - HCBS	1.2 %	3.3%
Dual Eligible - OCC	5.1%	6.3 %
Dual Eligible - HCBS	0.0 %	1.2 %

	Bexar	Dallas El Paso Harris		Hidalgo	Lubbock		
Acute Care (Non	-inpatient)						
Medicaid Only O	CC						
FY2011	1.010			1.042			
FY2012	1.053	1.020		1.063			
FY2013	0.993	0.921	1.064	0.989	0.863	1.004	1.061
FY2014*	1.043	1.120	1.061	1.040	0.996	1.070	0.994
Medicaid Only Ho	CBS						
FY2011	0.931			0.976			
FY2012	1.056	1.135		0.965			
FY2013	0.934	1.014	1.418	0.918	1.083	1.222	1.113
FY2014*	0.882	1.006	0.897	1.072	1.107	1.084	1.337
Long Term Care							
Medicaid Only O	CC						
FY2011	1.211			1.092			
FY2012	1.124	1.250		1.167			
FY2013	1.033	1.139	1.188	0.964	1.096	1.158	0.994
FY2014*	1.071	1.186	1.176	0.913	1.138	1.106	1.047
Medicaid Only Ho	CBS						
FY2011	1.128			1.001			
FY2012	1.011	0.908		1.129			
FY2013	1.000	0.951	0.814	1.085	0.976	1.007	0.963
FY2014*	0.969	1.047	0.715	1.036	0.966	0.994	0.828
Dual Eligible OCO	C						
FY2011	1.050			1.048			
FY2012	1.070	1.103		1.152			
FY2013	1.005	1.072	1.090	0.973	1.019	1.088	0.993
FY2014*	1.041	1.116	1.096	0.907	1.046	1.000	0.916
Dual Eligible HCl	BS						
FY2011	0.988			0.966			
FY2012	1.010	0.987		1.080			
FY2013	0.980	0.959	0.901	1.024	0.947	0.994	1.012
FY2014*	0.962	1.048	0.915	0.995	0.965	0.990	0.909

^{*}Trend experience during the first four month of FY2014, 9/1/2013-12/31/2013

<u>-</u>	Nueces	Tarrant	Travis	HMO Average	Weighted Average			
Acute Care (Non-inpatient)								
Medicaid Only OCC								
FY2011	0.963		1.068	1.030	1.030			
FY2012	0.961	1.079	1.041	1.016	1.047			
FY2013	0.883	1.022	0.906	0.957	0.968			
FY2014*	0.968	1.026	0.923	1.034	1.037			
Medicaid Only HCBS								
FY2011	0.867		0.970	0.951	0.951			
FY2012	0.962	1.262	1.111	0.956	1.026			
FY2013	0.882	0.978	0.996	0.941	0.975			
FY2014*	1.037	1.001	0.975	1.021	1.029			
. m. c								
Long Term Ca	re							
Medicaid Only	OCC							
FY2011	1.108		1.041	1.121	1.121			
FY2012	1.085	1.597	1.130	1.230	1.176			
FY2013	0.971	1.063	1.005	1.121	1.042			
FY2014*	1.010	0.996	1.055	1.045	1.068			
Medicaid Only	HCBS							
FY2011	1.043		0.897	1.038	1.038			
FY2012	1.048	1.029	0.998	1.071	1.050			
FY2013	1.000	0.891	1.088	1.022	1.010			
FY2014*	0.981	0.747	0.993	0.967	0.969			
Dual Eligible OCC								
FY2011	1.014		1.060	1.045	1.045			
FY2012	1.089	1.442	1.115	1.435	1.133			
FY2013	0.994	0.976	0.946	1.162	1.013			
FY2014*	0.988	0.927	1.015	1.017	1.027			
Dual Eligible HCBS								
FY2011	0.998		0.950	0.979	0.979			
FY2012	1.052	1.001	1.011	1.058	1.035			
FY2013	0.982	1.018	0.959	1.005	0.981			
FY2014*	0.978	0.954	0.921	0.976	0.975			

^{*}Trend experience during the first four month of FY2014, 9/1/2013-12/31/2013

FY2015 STAR+Plus Rating Analysis of Inpatient Trend Factors

		SSI - Inpatient	
	FY2010	FY2011	FY2012*
Bexar	0.993	1.035	0.816
Dallas	1.181	0.866	0.819
El Paso	1.206	0.868	0.849
Harris	1.104	1.125	1.130
Hidalgo	0.824	0.997	1.092
Jefferson	1.046	1.173	0.880
Lubbock	1.049	1.192	1.292
Nueces	1.025	1.022	1.249
Tarrant	1.125	0.942	0.784
Travis	0.981	1.156	0.915
MRSA Central	0.957	0.964	1.033
MRSA Northeast	0.974	0.995	1.279
MRSA West	1.005	1.071	1.064
Total	1.037	1.028	1.011

^{*}Trend experience during the first four months of FY2012, 9/1/2011-12/31/2011

FY2015 STAR+Plus Rating Trend Assumptions

	FY2014	FY2015
Acute Care - Non Inpatient		
Medicaid Only OCC	2.9 %	2.6 %
Medicaid Only HCBS	1.6 %	0.9 %
Acute Care - Inpatient		
Medicaid Only OCC	2.9 %	2.9 %
Medicaid Only HCBS	2.9 %	2.9 %
Long Term Care		
Medicaid Only OCC	9.8 %	11.3 %
Medicaid Only HCBS	1.2 %	3.3 %
Dual Eligible OCC	5.1 %	6.3 %
Dual Eligible HCBS	0.0 %	1.2 %

Attachment 6

Provider Reimbursement and Benefit Revisions Effective During FY2013, FY2014 and FY2015

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 (FY2013) and before the end of FY2015.

Effective September 1, 2013, HHSC implemented revisions to the therapy fee schedules. Reimbursement was reduced by 2.5% for Comprehensive Outpatient Rehabilitation Facilities/Outpatient Rehabilitation Facilities (CORFs/ORFs), 4% for independent therapist operating in an office setting, and 1.5% for therapy services provided inside the home. Exhibit A presents a summary of the derivation of the rating adjustment factors.

Effective September 1, 2013 HHSC implemented an outpatient hospital reduction of 5.3 percent, which excludes clinical lab and outpatient imaging services. This reduction does not apply to children's hospitals, rural hospitals, or state-owned teaching hospitals. Exhibit B presents a summary of the derivation of the rating adjustment factors.

Effective September 1, 2013 HHSC revised the reimbursement for non emergent services provided in an emergency room. These changes will include the following:

- Reimbursement will be restricted when an individual returns to the emergency department within a 36 hour period.
- Reimbursement will be restricted for non-urgent visits in excess of 24 per year.
- Non-urgent visits will be reimbursed using a flat fee.

Exhibits C and D presents a summary of the derivation of the rating adjustment factors for non emergent services delivered in an emergency room.

Effective September 1, 2013 HHSC reduced hospital imaging reimbursement to 125% of the amount reimbursed for imaging performed in a physician's office. Exhibit E presents a summary of the derivation of the rating adjustment factors.

Effective September 1, 2013 HHSC reduced ambulance reimbursement by 5%. Exhibit F presents a summary of the derivation of the rating adjustment factors.

Effective September 1, 2013 HHSC reduced all Medicaid rates that are in excess of Medicare. Exhibit G presents a summary of the derivation of the rating adjustment factors.

Effective September 1, 2014 mental health rehab and targeted case management services will be capitated under the program. Prior to this time these services were paid on a fee-for-service basis. Exhibit H presents a summary of the derivation of the rating adjustment factors.

Effective September 1, 2012 HHSC implemented the APR-DRG reimbursement system for all hospitals excluding rural, children's and state owned teaching facilities. Effective September 1, 2013 HHSC transitioned all rural and children's facilities to the APR-DRG reimbursement system. Exhibit I presents a summary of the derivation of the rating adjustment factors.

Effective 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 time period. Exhibit J presents a summary of the derivation of the rating adjustment factors.

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 time period. Exhibit K presents a summary of the derivation of the rating adjustment factors.

Effective September 1, 2103 HHSC reduced the outlier portion of facility reimbursement by 10%. Children's hospitals are excluding from this reduction. Exhibit L presents a summary of the derivation of the rating adjustment factors.

FY2015 STAR+PLUS Rating Provider Reimbursement Adjustments

Therapy Rate Reductions

	Medicaid Only		Dual Eligible			
- -	OCC	HCBS	OCC	HCBS	Other	Grand Total
_	_		_		_	
Impact of Therapy Rate R	Reductions (1)					
Bexar	-65,676	-4,038	0	0	-2	-69,716
Dallas	-11,880	-1,351	0	0	0	-13,230
El Paso	-11,438	-594	0	0	-15	-12,048
Harris	-98,631	-7,201	0	0	-167	-105,998
Hidalgo	-231,661	-9,210	0	0	-45	-240,915
Jefferson	-19,678	-1,065	0	0	-18	-20,762
Lubbock	-6,871	-64	0	0	0	-6,935
Nueces	-30,943	-4,850	0	0	0	-35,793
Tarrant	-13,808	-861	0	0	0	-14,669
Travis	-9,513	-530	0	0	-145	-10,187
Total	-500,099	-29,764	0	0	-391	-530,254
FY2013 Total Acute Care	e Claims Paid (2)					
Bexar	80,432,757	13,446,224	0	0	192,224	94,071,204
Dallas	91,526,451	11,974,497	0	0	414,258	103,915,205
El Paso	26,086,941	2,520,874	0	0	113,641	28,721,456
Harris	196,801,154	26,924,700	0	0	376,116	224,101,969
Hidalgo	80,160,729	9,652,936	0	0	429,158	90,242,823
Jefferson	33,159,651	3,121,631	0	0	63,002	36,344,284
Lubbock	18,592,352	1,318,751	0	0	64,582	19,975,685
Nueces	30,344,199	6,240,234	0	0	53,669	36,638,102
Tarrant	67,073,363	6,155,573	0	0	238,479	73,467,414
Travis	40,471,873	4,664,933	0	0	146,455	45,283,260
Total	664,649,468	86,020,352	0	0	2,091,582	752,761,402
Rate Adjustment Factor (3	3)					
Bexar	-0.08%	-0.03%	0.00%	0.00%	0.00%	-0.07%
Dallas	-0.01%	-0.01%	0.00%	0.00%	0.00%	-0.01%
El Paso	-0.04%	-0.02%	0.00%	0.00%	-0.01%	-0.04%
Harris	-0.05%	-0.03%	0.00%	0.00%	-0.04%	-0.05%
Hidalgo	-0.29%	-0.10%	0.00%	0.00%	-0.01%	-0.27%
Jefferson	-0.06%	-0.03%	0.00%	0.00%	-0.03%	-0.06%
Lubbock	-0.04%	0.00%	0.00%	0.00%	0.00%	-0.03%
Nueces	-0.10%	-0.08%	0.00%	0.00%	0.00%	-0.10%
Tarrant	-0.02%	-0.01%	0.00%	0.00%	0.00%	-0.02%
Travis	-0.02%	-0.01%	0.00%	0.00%	-0.10%	-0.02%
Total	-0.08%	-0.03%	0.00%	0.00%	-0.02%	-0.07%

⁽¹⁾ Equals the reduction in cost from application of the reimbursement reduction to therapy services effective 9/1/2013.

⁽²⁾ Equals FY2013 health plan fee-for-service claims for all acute care services (from Encounter database). Does not Include Inpatient services.

⁽³⁾ Equals Cost Impact divided by FY2013 Total Acute Care Claims Paid.

5.3% Outpatient Facility Reimbursement Reduction

	Medicaid Only		Dual Eligible			
	OCC	HCBS	OCC	HCBS	Other	Grand Total
_						
Estimated Cost Impact of 5	5.3% Outpatient Re	eduction (1)				
Bexar	-1,075,594	-124,415	0	0	-209	-1,200,218
Dallas	-1,696,250	-118,483	0	0	-1,527	-1,816,260
El Paso	-338,733	-14,888	0	0	-1,120	-354,740
Harris	-1,931,745	-159,695	0	0	-3,848	-2,095,288
Hidalgo	-441,792	-32,129	0	0	-103	-474,024
Jefferson	-312,515	-19,883	0	0	-101	-332,498
Lubbock	-200,380	-4,865	0	0	55	-205,190
Nueces	-238,174	-25,374	0	0	-241	-263,789
Tarrant	-1,209,834	-60,951	0	0	-1,254	-1,272,039
Travis	-369,255	-16,736	0	0	-2,274	-388,265
Total	-7,814,273	-577,419	0	0	-10,621	-8,402,312
FY2013 Total Acute Care	Claims Paid (2)					
Bexar	80,432,757	13,446,224	0	0	192,224	94,071,204
Dallas	91,526,451	11,974,497	0	0	414,258	103,915,205
El Paso	26,086,941	2,520,874	0	0	113,641	28,721,456
Harris	196,801,154	26,924,700	0	0	376,116	224,101,969
Hidalgo	80,160,729	9,652,936	0	0	429,158	90,242,823
Jefferson	33,159,651	3,121,631	0	0	63,002	36,344,284
Lubbock	18,592,352	1,318,751	0	0	64,582	19,975,685
Nueces	30,344,199	6,240,234	0	0	53,669	36,638,102
Tarrant	67,073,363	6,155,573	0	0	238,479	73,467,414
Travis	40,471,873	4,664,933	0	0	146,455	45,283,260
Total	664,649,468	86,020,352	0	0	2,091,582	752,761,402
Rate Adjustment Factor (3						
Bexar	-1.34%	-0.93%	0.00%	0.00%	-0.11%	-1.28%
Dallas	-1.85%	-0.99%	0.00%	0.00%	-0.37%	-1.75%
El Paso	-1.30%	-0.59%	0.00%	0.00%	-0.99%	-1.24%
Harris	-0.98%	-0.59%	0.00%	0.00%	-1.02%	-0.93%
Hidalgo	-0.55%	-0.33%	0.00%	0.00%	-0.02%	-0.53%
Jefferson	-0.94%	-0.64%	0.00%	0.00%	-0.16%	-0.91%
Lubbock	-1.08%	-0.37%	0.00%	0.00%	0.09%	-1.03%
Nueces	-0.78%	-0.41%	0.00%	0.00%	-0.45%	-0.72%
Tarrant	-1.80%	-0.99%	0.00%	0.00%	-0.53%	-1.73%
Travis	-0.91%	-0.36%	0.00%	0.00%	-1.55%	-0.86%
Total	-1.18%	-0.67%	0.00%	0.00%	-0.51%	-1.12%

⁽¹⁾ Equals the cost impact from application of the 5.3% reduction in outpatient facility reimbursement. The reimbursement reduction was effective 9/1/2013 and excludes rural hospitals, children's hospitals and state owned teaching hospitals.

⁽²⁾ Equals FY2013 health plan fee-for-service claims for all acute care services (from Encounter database). Does not Include Inpatient services.

⁽³⁾ Equals Cost Impact divided by FY2013 Total Acute Care Claims Paid.

FY2015 STAR+PLUS Rating

Provider Reimbursement Adjustments

Non Emergent Emergency Room Reductions - 36 Hour Limitation

	Medicaid Only		Dual Eligible			
	OCC	HCBS	OCC	HCBS	Other	Grand Total
				_		
Impact of Non Emergent						
Bexar	-33,456	-1,677	0	0	-33	-35,165
Dallas	-65,124	-2,141	0	0	0	-67,264
El Paso	-9,964	-393	0	0	0	-10,356
Harris	-50,064	-2,637	0	0	0	-52,700
Hidalgo	-6,302	-183	0	0	0	-6,485
Jefferson	-4,842	-135	0	0	0	-4,977
Lubbock	-3,506	0	0	0	0	-3,506
Nueces	-8,191	-460	0	0	0	-8,651
Tarrant	-24,716	-384	0	0	0	-25,101
Travis	-16,175	-263	0	0	0	-16,438
Total	-222,339	-8,272	0	0	-33	-230,644
FY2013 Total Acute Car	re Claims Paid (2)					
Bexar	80,432,757	13,446,224	0	0	192,224	94,071,204
Dallas	91,526,451	11,974,497	0	0	414,258	103,915,205
El Paso	26,086,941	2,520,874	0	0	113,641	28,721,456
Harris	196,801,154	26,924,700	0	0	376,116	224,101,969
Hidalgo	80,160,729	9,652,936	0	0	429,158	90,242,823
Jefferson	33,159,651	3,121,631	0	0	63,002	36,344,284
Lubbock	18,592,352	1,318,751	0	0	64,582	19,975,685
Nueces	30,344,199	6,240,234	0	0	53,669	36,638,102
Tarrant	67,073,363	6,155,573	0	0	238,479	73,467,414
Travis	40,471,873	4,664,933	0	0	146,455	45,283,260
Total	664,649,468	86,020,352	0	0	2,091,582	752,761,402
Rate Adjustment Factor	(3)					
Bexar	-0.04%	-0.01%	0.00%	0.00%	-0.02%	-0.04%
Dallas	-0.07%	-0.02%	0.00%	0.00%	0.00%	-0.06%
El Paso	-0.04%	-0.02%	0.00%	0.00%	0.00%	-0.04%
Harris	-0.03%	-0.01%	0.00%	0.00%	0.00%	-0.02%
Hidalgo	-0.01%	0.00%	0.00%	0.00%	0.00%	-0.01%
Jefferson	-0.01%	0.00%	0.00%	0.00%	0.00%	-0.01%
Lubbock	-0.02%	0.00%	0.00%	0.00%	0.00%	-0.02%
Nueces	-0.03%	-0.01%	0.00%	0.00%	0.00%	-0.02%
Tarrant	-0.04%	-0.01%	0.00%	0.00%	0.00%	-0.03%
Travis	-0.04%	-0.01%	0.00%	0.00%	0.00%	-0.04%
Total	-0.03%	-0.01%	0.00%	0.00%	0.00%	-0.03%

⁽¹⁾ Equals the cost impact from application of the reimbursement limitation for non emergent service within 36 hours.

⁽²⁾ Equals FY2013 health plan fee-for-service claims for all acute care services (from Encounter database). Does not Include Inpatient services.

⁽³⁾ Equals Cost Impact divided by FY2013 Total Acute Care Claims Paid.

FY2015 STAR+PLUS Rating Provider Reimbursement Adjustments Non Emergent Emergency Room Reductions - Flat Fee

	Medicaid Only		Dual Eligible			
<u>-</u>	OCC	HCBS	OCC	HCBS	Other	Grand Total
_			_		<u> </u>	
Impact of Non Emergent I	Reductions (1)					
Bexar	-327,396	-22,741	0	0	0	-350,137
Dallas	-201,148	-6,960	0	0	-30	-208,138
El Paso	-73,766	-2,474	0	0	0	-76,239
Harris	-286,042	-12,503	0	0	0	-298,544
Hidalgo	-47,802	-2,292	0	0	0	-50,094
Jefferson	-36,905	-1,345	0	0	0	-38,251
Lubbock	-25,338	-1,157	0	0	0	-26,495
Nueces	-55,788	-6,605	0	0	-28	-62,421
Tarrant	-140,967	-5,990	0	0	-65	-147,022
Travis	-116,826	-2,705	0	0	0	-119,531
Total	-1,311,977	-64,771	0	0	-123	-1,376,872
FY2013 Total Acute Care	` ′					
Bexar	80,432,757	13,446,224	0	0	192,224	94,071,204
Dallas	91,526,451	11,974,497	0	0	414,258	103,915,205
El Paso	26,086,941	2,520,874	0	0	113,641	28,721,456
Harris	196,801,154	26,924,700	0	0	376,116	224,101,969
Hidalgo	80,160,729	9,652,936	0	0	429,158	90,242,823
Jefferson	33,159,651	3,121,631	0	0	63,002	36,344,284
Lubbock	18,592,352	1,318,751	0	0	64,582	19,975,685
Nueces	30,344,199	6,240,234	0	0	53,669	36,638,102
Tarrant	67,073,363	6,155,573	0	0	238,479	73,467,414
Travis	40,471,873	4,664,933	0	0	146,455	45,283,260
Total	664,649,468	86,020,352	0	0	2,091,582	752,761,402
Rate Adjustment Factor (3	2)					
Bexar	-0.41%	-0.17%	0.00%	0.00%	0.00%	-0.37%
Dallas	-0.22%	-0.17%	0.00%	0.00%	-0.01%	-0.20%
El Paso	-0.28%	-0.10%	0.00%	0.00%	0.00%	-0.27%
Harris	-0.15%	-0.05%	0.00%	0.00%	0.00%	-0.13%
Hidalgo	-0.15%	-0.02%	0.00%	0.00%	0.00%	-0.15%
Jefferson	-0.11%	-0.04%	0.00%	0.00%	0.00%	-0.11%
	-0.14%	-0.04%	0.00%	0.00%	0.00%	
Lubbock						-0.13%
Nueces	-0.18%	-0.11%	0.00%	0.00%	-0.05%	-0.17%
Tarrant	-0.21%	-0.10%	0.00%	0.00%	-0.03%	-0.20%
Travis	-0.29%	-0.06%	0.00%	0.00%	0.00%	-0.26%
Total	-0.20%	-0.08%	0.00%	0.00%	-0.01%	-0.18%

⁽¹⁾ Equals the cost impact from application of the flat fee reimbursement for non emergent services.

⁽²⁾ Equals FY2013 health plan fee-for-service claims for all acute care services (from Encounter database). Does not Include Inpatient services.

⁽³⁾ Equals Cost Impact divided by FY2013 Total Acute Care Claims Paid.

FY2015 STAR+PLUS Rating Provider Reimbursement Adjustments Outpatient Imaging Services

	Medicaid Only		Dual Eligible			
-	OCC	HCBS	OCC	HCBS	Other	Grand Total
_			_		_	
Impact of Limiting Outpar	tient Imaging Reim	bursement (1)				
Bexar	-831,078	-95,452	0	0	-223	-926,753
Dallas	-1,025,419	-77,280	0	0	-1,603	-1,104,302
El Paso	-180,348	-7,687	0	0	-32	-188,067
Harris	-1,708,679	-129,946	0	0	-757	-1,839,381
Hidalgo	-555,050	-58,963	0	0	-435	-614,447
Jefferson	-376,160	-16,670	0	0	-308	-393,137
Lubbock	-218,042	-15,558	0	0	-230	-233,831
Nueces	-317,810	-65,313	0	0	-31	-383,155
Tarrant	-760,595	-44,358	0	0	-394	-805,348
Travis	-430,927	-25,862	0	0	-191	-456,980
Total	-6,404,108	-537,088	0	0	-4,206	-6,945,401
FY2013 Total Acute Care	Claims Paid (2)					
Bexar	80,432,757	13,446,224	0	0	192,224	94,071,204
Dallas	91,526,451	11,974,497	0	0	414,258	103,915,205
El Paso	26,086,941	2,520,874	0	0	113,641	28,721,456
Harris	196,801,154	26,924,700	0	0	376,116	224,101,969
Hidalgo	80,160,729	9,652,936	0	0	429,158	90,242,823
Jefferson	33,159,651	3,121,631	0	0	63,002	36,344,284
Lubbock	18,592,352	1,318,751	0	0	64,582	19,975,685
Nueces	30,344,199	6,240,234	0	0	53,669	36,638,102
Tarrant	67,073,363	6,155,573	0	0	238,479	73,467,414
Travis	40,471,873	4,664,933	0	0	146,455	45,283,260
Total	664,649,468	86,020,352	0	0	2,091,582	752,761,402
Rate Adjustment Factor (3	3)					
Bexar	-1.03%	-0.71%	0.00%	0.00%	-0.12%	-0.99%
Dallas	-1.12%	-0.65%	0.00%	0.00%	-0.39%	-1.06%
El Paso	-0.69%	-0.30%	0.00%	0.00%	-0.03%	-0.65%
Harris	-0.87%	-0.48%	0.00%	0.00%	-0.20%	-0.82%
Hidalgo	-0.69%	-0.61%	0.00%	0.00%	-0.10%	-0.68%
Jefferson	-1.13%	-0.53%	0.00%	0.00%	-0.49%	-1.08%
Lubbock	-1.17%	-1.18%	0.00%	0.00%	-0.36%	-1.17%
Nueces	-1.05%	-1.05%	0.00%	0.00%	-0.06%	-1.05%
Tarrant	-1.13%	-0.72%	0.00%	0.00%	-0.17%	-1.10%
Travis	-1.06%	-0.55%	0.00%	0.00%	-0.13%	-1.01%
Total	-0.96%	-0.62%	0.00%	0.00%	-0.20%	-0.92%

⁽¹⁾ Equals the cost impact from application of the outpatient imaging limitation to 125% of the reimbursement for the same service provided in a doctor's office.

⁽²⁾ Equals FY2013 health plan fee-for-service claims for all acute care services (from Encounter database). Does not Include Inpatient services.

⁽³⁾ Equals Cost Impact divided by FY2013 Total Acute Care Claims Paid.

	Medicaid Only		Dual Eligible			
	OCC	HCBS	OCC	HCBS	Other	Grand Total
		_			_	
Estimated Cost Impact of	of 5% Ambulance Red	duction (1)				
Bexar	-138,925	-37,723	0	0	-60	-176,707
Dallas	-206,372	-32,031	0	0	-613	-239,017
El Paso	-49,011	-8,223	0	0	0	-57,233
Harris	-833,960	-128,601	0	0	-470	-963,031
Hidalgo	-161,124	-50,280	0	0	-565	-211,969
Jefferson	-102,577	-20,233	0	0	-99	-122,910
Lubbock	-46,708	-3,744	0	0	-18	-50,470
Nueces	-70,619	-22,431	0	0	-140	-93,190
Tarrant	-148,699	-14,884	0	0	-152	-163,735
Travis	-102,434	-13,016	0	0	-55	-115,506
Total	-1,860,429	-331,167	0	0	-2,171	-2,193,767
FY2013 Total Acute Car	re Claims Paid (2)					
Bexar	80,432,757	13,446,224	0	0	192,224	94,071,204
Dallas	91,526,451	11,974,497	0	0	414,258	103,915,205
El Paso	26,086,941	2,520,874	0	0	113,641	28,721,456
Harris	196,801,154	26,924,700	0	0	376,116	224,101,969
Hidalgo	80,160,729	9,652,936	0	0	429,158	90,242,823
Jefferson	33,159,651	3,121,631	0	0	63,002	36,344,284
Lubbock	18,592,352	1,318,751	0	0	64,582	19,975,685
Nueces	30,344,199	6,240,234	0	0	53,669	36,638,102
Tarrant	67,073,363	6,155,573	0	0	238,479	73,467,414
Travis	40,471,873	4,664,933	0	0	146,455	45,283,260
Total	664,649,468	86,020,352	0	0	2,091,582	752,761,402
Rate Adjustment Factor						
Bexar	-0.17%	-0.28%	0.00%	0.00%	-0.03%	-0.19%
Dallas	-0.23%	-0.27%	0.00%	0.00%	-0.15%	-0.23%
El Paso	-0.19%	-0.33%	0.00%	0.00%	0.00%	-0.20%
Harris	-0.42%	-0.48%	0.00%	0.00%	-0.12%	-0.43%
Hidalgo	-0.20%	-0.52%	0.00%	0.00%	-0.13%	-0.23%
Jefferson	-0.31%	-0.65%	0.00%	0.00%	-0.16%	-0.34%
Lubbock	-0.25%	-0.28%	0.00%	0.00%	-0.03%	-0.25%
Nueces	-0.23%	-0.36%	0.00%	0.00%	-0.26%	-0.25%
Tarrant	-0.22%	-0.24%	0.00%	0.00%	-0.06%	-0.22%
Travis	-0.25%	-0.28%	0.00%	0.00%	-0.04%	-0.26%
Total	-0.28%	-0.38%	0.00%	0.00%	-0.10%	-0.29%

⁽¹⁾ Equals the cost impact from application of the 5% reduction in ambulance reimbursement.

⁽²⁾ Equals FY2013 health plan fee-for-service claims for all acute care services (from Encounter database). Does not Include Inpatient services.

⁽³⁾ Equals Cost Impact divided by FY2013 Total Acute Care Claims Paid.

FY2015 STAR+PLUS Rating Provider Reimbursement Adjustments Reduction of Medicaid Rates in Excess of Medicare

	Medicaid Only		Dual Eligible			
	OCC	HCBS	OCC	HCBS	Other	Grand Total
Estimated Cost Impact of						
Bexar	-1,481	-71	0	0	-4	-1,556
Dallas	-1,117	-7	0	0	0	-1,124
El Paso	-440	-24	0	0	0	-464
Harris	-3,255	-9	0	0	0	-3,265
Hidalgo	-4,038	-30	0	0	0	-4,068
Jefferson	-492	0	0	0	0	-492
Lubbock	-309	-4	0	0	0	-314
Nueces	-547	-5	0	0	0	-552
Tarrant	-1,123	-5	0	0	0	-1,129
Travis	-789	-9	0	0	-5	-803
Total	-13,592	-165	0	0	-9	-13,766
FY2013 Total Acute Care	e Claims Paid (2)					
Bexar	80,432,757	13,446,224	0	0	192,224	94,071,204
Dallas	91,526,451	11,974,497	0	0	414,258	103,915,205
El Paso	26,086,941	2,520,874	0	0	113,641	28,721,456
Harris	196,801,154	26,924,700	0	0	376,116	224,101,969
Hidalgo	80,160,729	9,652,936	0	0	429,158	90,242,823
Jefferson	33,159,651	3,121,631	0	0	63,002	36,344,284
Lubbock	18,592,352	1,318,751	0	0	64,582	19,975,685
Nueces	30,344,199	6,240,234	0	0	53,669	36,638,102
Tarrant	67,073,363	6,155,573	0	0	238,479	73,467,414
Travis	40,471,873	4,664,933	0	0	146,455	45,283,260
Total	664,649,468	86,020,352	0	0	2,091,582	752,761,402
Rate Adjustment Factor ((3)					
Bexar	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%
El Paso	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%
Hidalgo	-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%
Lubbock	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%
Tarrant	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%
Total	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

⁽¹⁾ Equals the cost impact from application of the various reimbursement reductions.

⁽²⁾ Equals FY2013 health plan fee-for-service claims for all acute care services (from Encounter database). Does not Include Inpatient services.

⁽³⁾ Equals Cost Impact divided by FY2013 Total Acute Care Claims Paid.

FY2015 STAR+PLUS Rating

Provider Reimbursement Adjustments

Capitate Mental Health Rehab

	Medicaid Only		Dual Eligible			
<u>-</u>	OCC	HCBS	OCC	HCBS	Other	Grand Total
_	_		_		_	
Impact of Capitating MH	Rehab Services (1)					
Bexar	2,521,754	94,281	0	0	0	2,616,035
Dallas	41,706	32	0	0	0	41,738
El Paso	2,052,323	41,666	0	0	0	2,093,989
Harris	4,916,949	224,625	0	0	0	5,141,574
Hidalgo	3,373,160	88,420	0	0	0	3,461,580
Jefferson	1,321,826	18,397	0	0	0	1,340,223
Lubbock	825,833	25,825	0	0	0	851,658
Nueces	1,007,481	59,927	0	0	0	1,067,408
Tarrant	1,676,078	73,997	0	0	0	1,750,075
Travis	2,054,066	80,761	0	0	0	2,134,828
Total	19,791,177	707,931	0	0	0	20,499,108
FY2013 Total Acute Care	Claims Paid (2)					
Bexar	80,432,757	13,446,224	0	0	192,224	94,071,204
Dallas	91,526,451	11,974,497	0	0	414,258	103,915,205
El Paso	26,086,941	2,520,874	0	0	113,641	28,721,456
Harris	196,801,154	26,924,700	0	0	376,116	224,101,969
Hidalgo	80,160,729	9,652,936	0	0	429,158	90,242,823
Jefferson	33,159,651	3,121,631	0	0	63,002	36,344,284
Lubbock	18,592,352	1,318,751	0	0	64,582	19,975,685
Nueces	30,344,199	6,240,234	0	0	53,669	36,638,102
Tarrant	67,073,363	6,155,573	0	0	238,479	73,467,414
Travis	40,471,873	4,664,933	0	0	146,455	45,283,260
Total	664,649,468	86,020,352	0	0	2,091,582	752,761,402
Rate Adjustment Factor (3	8)					
Bexar	3.14%	0.70%	0.00%	0.00%	0.00%	2.78%
Dallas	0.05%	0.00%	0.00%	0.00%	0.00%	0.04%
El Paso	7.87%	1.65%	0.00%	0.00%	0.00%	7.29%
Harris	2.50%	0.83%	0.00%	0.00%	0.00%	2.29%
Hidalgo	4.21%	0.92%	0.00%	0.00%	0.00%	3.84%
Jefferson	3.99%	0.59%	0.00%	0.00%	0.00%	3.69%
Lubbock	4.44%	1.96%	0.00%	0.00%	0.00%	4.26%
Nueces	3.32%	0.96%	0.00%	0.00%	0.00%	2.91%
Tarrant	2.50%	1.20%	0.00%	0.00%	0.00%	2.38%
Travis	5.08%	1.73%	0.00%	0.00%	0.00%	4.71%
Total	2.98%	0.82%	0.00%	0.00%	0.00%	2.72%
_ 0 000	2.7070	0.0270	3.0070	0.0070	0.0070	2.,2,0

⁽¹⁾ Equals the cost resulting from capitating these services into the STAR+PLUS program.

⁽²⁾ Equals FY2013 health plan fee-for-service claims for all acute care services (from Encounter database). Does not Include Inpatient services.

⁽³⁾ Equals Cost Impact divided by FY2013 Total Acute Care Claims Paid.

FY2015 STAR+PLUS Rating Provider Reimbursement Adjustments APR DRG Implementation

	Medicaid Only		Dual Eligible			
	OCC	HCBS	OCC	HCBS	Other	Grand Total
	_				_	
Estimated Cost Impact of A	APR DRG Implem	entation (1)				
Bexar	-163,626	6,479	0	0	0	-157,147
Dallas	0	12,794	0	0	0	12,794
El Paso	10,890	0	0	0	0	10,890
Harris	-371,306	-87,033	0	0	-8,108	-466,447
Hidalgo	-632,054	14,150	0	0	0	-617,904
Jefferson	475,653	29,376	0	0	0	505,029
Lubbock	5,091	1,568	0	0	0	6,659
Nueces	288,073	57,105	0	0	0	345,178
Tarrant	31,459	-406,473	0	0	0	-375,014
Travis	-124,448	33,879	0	0	0	-90,569
Total	-480,266	-338,155	0	0	-8,108	-826,530
FY2013 Total Inpatient Cl	aims Paid (2)					
Bexar	44,223,323	8,099,342	227,168	168,594	61,993	52,780,421
Dallas	65,158,498	8,529,588	88,405	4,984	130,946	73,912,422
El Paso	15,557,720	1,555,507	47,728	2,040	0	17,162,995
Harris	148,522,359	21,758,294	521,651	226,977	333,204	171,362,486
Hidalgo	35,709,243	5,053,423	150,088	101,447	57,056	41,071,257
Jefferson	23,431,192	1,769,642	259,845	3,015	20,310	25,484,005
Lubbock	12,727,143	784,132	36,567	4,147	0	13,551,990
Nueces	17,458,998	4,568,370	80,410	28,135	45,556	22,181,471
Tarrant	44,941,684	3,965,591	152,228	17,372	50,374	49,127,249
Travis	25,397,478	2,920,580	104,291	20,814	28,011	28,471,174
Total	433,127,639	59,004,469	1,668,382	577,526	727,451	495,105,468
Rate Adjustment Factor (3)					
Bexar	-0.37%	0.08%	0.00%	0.00%	0.00%	-0.30%
Dallas	0.00%	0.15%	0.00%	0.00%	0.00%	0.02%
El Paso	0.07%	0.00%	0.00%	0.00%	0.00%	0.06%
Harris	-0.25%	-0.40%	0.00%	0.00%	-2.43%	-0.27%
Hidalgo	-1.77%	0.28%	0.00%	0.00%	0.00%	-1.50%
Jefferson	2.03%	1.66%	0.00%	0.00%	0.00%	1.98%
Lubbock	0.04%	0.20%	0.00%	0.00%	0.00%	0.05%
Nueces	1.65%	1.25%	0.00%	0.00%	0.00%	1.56%
Tarrant	0.07%	-10.25%	0.00%	0.00%	0.00%	-0.76%
Travis	-0.49%	1.16%	0.00%	0.00%	0.00%	-0.32%
Total	-0.11%	-0.57%	0.00%	0.00%	-1.11%	-0.17%

⁽¹⁾ Equals the cost impact from implementation of the APR DRG system. Includes application to rural and children's hospitals.

⁽²⁾ Equals FY2013 health plan fee-for-service claims for all acute care inpatient services (from Encounter database).

⁽³⁾ Equals Cost Impact divided by FY2013 Total Inpatient Claims Paid.

FY2015 STAR+PLUS Rating

Provider Reimbursement Adjustments

Potentially Preventable Readmission (PPR) Reimbursement Reductions

	Medicaid Only		Dual Eligible			
•	OCC	HCBS	OCC	HCBS	Other	Grand Total
•						
Estimated Cost Impact of	PPR Reductions (1)				
Bexar	-17,355	-981	0	0	0	-18,336
Dallas	-201,453	-27,794	0	0	-434	-229,680
El Paso	-83,847	-5,212	0	0	0	-89,059
Harris	-933,870	-132,483	0	0	-3,158	-1,069,511
Hidalgo	-20,595	-3,529	0	0	0	-24,124
Jefferson	-154,315	-12,928	0	0	-47	-167,290
Lubbock	-42,729	-5,068	0	0	0	-47,797
Nueces	-28,806	-4,194	0	0	-137	-33,136
Tarrant	-195,775	-19,259	0	0	-266	-215,300
Travis	-132,125	-14,493	0	0	-110	-146,728
Total	-1,810,870	-225,939	0	0	-4,152	-2,040,962
FY2013 Total Inpatient C	laims Paid (2)					
Bexar	44,223,323	8,099,342	227,168	168,594	61,993	52,780,421
Dallas	65,158,498	8,529,588	88,405	4,984	130,946	73,912,422
El Paso	15,557,720	1,555,507	47,728	2,040	0	17,162,995
Harris	148,522,359	21,758,294	521,651	226,977	333,204	171,362,486
Hidalgo	35,709,243	5,053,423	150,088	101,447	57,056	41,071,257
Jefferson	23,431,192	1,769,642	259,845	3,015	20,310	25,484,005
Lubbock	12,727,143	784,132	36,567	4,147	0	13,551,990
Nueces	17,458,998	4,568,370	80,410	28,135	45,556	22,181,471
Tarrant	44,941,684	3,965,591	152,228	17,372	50,374	49,127,249
Travis	25,397,478	2,920,580	104,291	20,814	28,011	28,471,174
Total	433,127,639	59,004,469	1,668,382	577,526	727,451	495,105,468
Rate Adjustment Factor (3)					
Bexar	-0.04%	-0.01%	0.00%	0.00%	0.00%	-0.03%
Dallas	-0.31%	-0.33%	0.00%	0.00%	-0.33%	-0.31%
El Paso	-0.54%	-0.34%	0.00%	0.00%	0.00%	-0.52%
Harris	-0.63%	-0.61%	0.00%	0.00%	-0.95%	-0.62%
Hidalgo	-0.06%	-0.07%	0.00%	0.00%	0.00%	-0.06%
Jefferson	-0.66%	-0.73%	0.00%	0.00%	-0.23%	-0.66%
Lubbock	-0.34%	-0.65%	0.00%	0.00%	0.00%	-0.35%
Nueces	-0.16%	-0.09%	0.00%	0.00%	-0.30%	-0.15%
Tarrant	-0.44%	-0.49%	0.00%	0.00%	-0.53%	-0.44%
Travis	-0.52%	-0.50%	0.00%	0.00%	-0.39%	-0.52%
Total	-0.42%	-0.38%	0.00%	0.00%	-0.57%	-0.41%

⁽¹⁾ Equals the cost impact from application of the PPR reimbursement reductions.

⁽²⁾ Equals FY2013 health plan fee-for-service claims for all acute care inpatient services (from Encounter database).

⁽³⁾ Equals Cost Impact divided by FY2013 Total Inpatient Claims Paid.

FY2015 STAR+PLUS Rating

Provider Reimbursement Adjustments

Potentially Preventable Complications (PPC) Reimbursement Reductions

	Medicaid Only		Dual Eligible			
	OCC	HCBS	OCC	HCBS	Other	Grand Total
	_		_		_	
Estimated Cost Impact of	PPC Reductions (1))				
Bexar	-260,628	-20,511	0	0	0	-281,139
Dallas	-1,117,393	-159,272	0	0	-1,841	-1,278,507
El Paso	-72,934	-5,952	0	0	0	-78,887
Harris	-1,691,633	-279,118	0	0	-3,019	-1,973,770
Hidalgo	-137,955	-21,426	0	0	0	-159,380
Jefferson	-189,766	-11,510	0	0	0	-201,276
Lubbock	-142,071	-13,015	0	0	0	-155,086
Nueces	-23,043	-3,261	0	0	-172	-26,476
Tarrant	-669,404	-61,776	0	0	-538	-731,718
Travis	-311,688	-35,453	0	0	-431	-347,572
Total	-4,616,515	-611,295	0	0	-6,001	-5,233,811
FY2013 Total Inpatient C	Tlaims Paid (2)					
Bexar	44,223,323	8,099,342	227,168	168,594	61,993	52,780,421
Dallas	65,158,498	8,529,588	88,405	4,984	130,946	73,912,422
El Paso	15,557,720	1,555,507	47,728	2,040	0	17,162,995
Harris	148,522,359	21,758,294	521,651	226,977	333,204	171,362,486
Hidalgo	35,709,243	5,053,423	150,088	101,447	57,056	41,071,257
Jefferson	23,431,192	1,769,642	259,845	3,015	20,310	25,484,005
Lubbock	12,727,143	784,132	36,567	4,147	0	13,551,990
Nueces	17,458,998	4,568,370	80,410	28,135	45,556	22,181,471
Tarrant	44,941,684	3,965,591	152,228	17,372	50,374	49,127,249
Travis	25,397,478	2,920,580	104,291	20,814	28,011	28,471,174
Total	433,127,639	59,004,469	1,668,382	577,526	727,451	495,105,468
Rate Adjustment Factor (3)					
Bexar	-0.59%	-0.25%	0.00%	0.00%	0.00%	-0.53%
Dallas	-1.71%	-1.87%	0.00%	0.00%	-1.41%	-1.73%
El Paso	-0.47%	-0.38%	0.00%	0.00%	0.00%	-0.46%
Harris	-1.14%	-1.28%	0.00%	0.00%	-0.91%	-1.15%
Hidalgo	-0.39%	-0.42%	0.00%	0.00%	0.00%	-0.39%
Jefferson	-0.81%	-0.65%	0.00%	0.00%	0.00%	-0.79%
Lubbock	-1.12%	-1.66%	0.00%	0.00%	0.00%	-1.14%
Nueces	-0.13%	-0.07%	0.00%	0.00%	-0.38%	-0.12%
Tarrant	-1.49%	-1.56%	0.00%	0.00%	-1.07%	-1.49%
Travis	-1.23%	-1.21%	0.00%	0.00%	-1.54%	-1.22%
Total	-1.07%	-1.21%	0.00%	0.00%	-0.82%	-1.06%
1 otal	-1.07/0	-1.U 1 /0	0.0070	0.0070	-0.02/0	-1.00/0

⁽¹⁾ Equals the cost impact from application of the PPC reimbursement reductions effective 3/1/2014.

⁽²⁾ Equals FY2013 health plan fee-for-service claims for all acute care inpatient services (from Encounter database).

⁽³⁾ Equals Cost Impact divided by FY2013 Total Inpatient Claims Paid.

FY2015 STAR+PLUS Rating Provider Reimbursement Adjustments 10% Outlier Reimbursement Reductions

	Medicaid Only		Dual Eligible			
	OCC	HCBS	OCC	HCBS	Other	Grand Total
Estimated Cost Impact of	of 10% Outlier Reduc	ction (1)				
Bexar	-13,607	0	0	0	0	-13,607
Dallas	-2,555	0	0	0	0	-2,555
El Paso	-2,263	0	0	0	0	-2,263
Harris	-73,577	0	0	0	0	-73,577
Hidalgo	-9,959	0	0	0	0	-9,959
Jefferson	0	0	0	0	0	0
Lubbock	-11,865	0	0	0	0	-11,865
Nueces	-86	0	0	0	0	-86
Tarrant	0	0	0	0	0	0
Travis	-99	0	0	0	0	-99
Total	-114,012	0	0	0	0	-114,012
FY2013 Total Inpatient	Claims Paid (2)					
Bexar	44,223,323	8,099,342	227,168	168,594	61,993	52,780,421
Dallas	65,158,498	8,529,588	88,405	4,984	130,946	73,912,422
El Paso	15,557,720	1,555,507	47,728	2,040	0	17,162,995
Harris	148,522,359	21,758,294	521,651	226,977	333,204	171,362,486
Hidalgo	35,709,243	5,053,423	150,088	101,447	57,056	41,071,257
Jefferson	23,431,192	1,769,642	259,845	3,015	20,310	25,484,005
Lubbock	12,727,143	784,132	36,567	4,147	0	13,551,990
Nueces	17,458,998	4,568,370	80,410	28,135	45,556	22,181,471
Tarrant	44,941,684	3,965,591	152,228	17,372	50,374	49,127,249
Travis	25,397,478	2,920,580	104,291	20,814	28,011	28,471,174
Total	433,127,639	59,004,469	1,668,382	577,526	727,451	495,105,468
Rate Adjustment Factor	(3)					
Bexar	-0.03%	0.00%	0.00%	0.00%	0.00%	-0.03%
Dallas	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
El Paso	-0.01%	0.00%	0.00%	0.00%	0.00%	-0.01%
Harris	-0.05%	0.00%	0.00%	0.00%	0.00%	-0.04%
Hidalgo	-0.03%	0.00%	0.00%	0.00%	0.00%	-0.02%
Jefferson	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Lubbock	-0.09%	0.00%	0.00%	0.00%	0.00%	-0.09%
Nueces	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%
Travis	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Total	-0.03%	0.00%	0.00%	0.00%	0.00%	-0.02%

⁽¹⁾ Equals the cost impact from application of the 10% reduction on outlier reimbursement paid on hospital claims.

⁽²⁾ Equals FY2013 health plan fee-for-service claims for all acute care inpatient services (from Encounter database).

⁽³⁾ Equals Cost Impact divided by FY2013 Total Inpatient Claims Paid.

Attachment 7

Long Term Care Reimbursement Adjustments

Effective September 1, 2013 and again on September 1, 2014 the minimum wage paid to attendant care providers will be increasing for various Personal Assistance Services (PAS) and Day Activity Health Services (DAHS). Exhibit A presents a summary of the derivation of the adjustment factors.

Effective September 1, 2013 attendant care enhanced payments increased to allow certain attendant care providers to qualify for increased enhanced payment levels. Exhibit B presents a summary of the derivation of the adjustment factors.

Effective September 1, 2014 HHSC will require all managed care organizations to incorporate EVV into their management duties for Personal Assistance Services (PAS), Personal Care Services (PCS) and Private Duty Nursing (PDN). Based on an analysis of the impact of EVV on these services in the fee-for-service program the following savings assumptions have been developed:

PAS: 4.0%PCS: 4.0%PDN: 3.5%

The impact of additional administrative expenses has been considered and it has been determined that the administrative allowance included in the rates should be increased by \$1.75 per member per month to account for the increased cost associated with implementation of this EVV requirement.

FY2015 STAR+PLUS Rating Provider Reimbursement Adjustments Attendant Care Reimbursement Increase

	Medicaid	d Only	Dual Eligible			
	OCC	HCBS	OCC	HCBS	Other	Grand Total
Cost Impact of Attendant C	Care Reimburseme	ent Increases (1)				
Bexar	2,284,933	215,874	3,859,025	591,710	0	6,951,543
Dallas	2,097,843	157,705	3,425,668	531,551	0	6,212,767
El Paso	692,022	40,836	3,229,224	170,094	0	4,132,176
Harris	4,380,001	324,997	7,253,184	780,513	0	12,738,695
Hidalgo	5,730,828	260,061	20,137,222	1,872,419	0	28,000,530
Jefferson	392,786	43,618	759,573	182,444	0	1,378,420
Lubbock	172,324	22,094	349,983	98,846	0	643,247
Nueces	1,055,546	121,585	1,830,070	503,442	0	3,510,643
Tarrant	881,913	85,127	1,413,325	273,155	0	2,653,520
Travis	585,376	70,722	996,610	227,877	0	1,880,585
Total	18,273,572	1,342,618	43,253,885	5,232,050	0	68,102,126
FY2013 Total Long Term	Care Claims Paid	(2)				
Bexar	36,232,819	21,659,710	63,498,670	58,358,788	0	179,749,988
Dallas	34,778,063	17,257,965	56,686,061	52,977,472	0	161,699,560
El Paso	12,007,687	3,646,892	57,686,881	15,432,208	0	88,773,667
Harris	76,575,277	37,534,802	119,605,033	76,660,632	0	310,375,744
Hidalgo	100,984,164	22,183,114	358,683,896	156,346,845	0	638,198,019
Jefferson	6,924,472	4,413,790	12,541,686	17,275,963	0	41,155,910
Lubbock	2,930,350	2,408,683	5,973,768	9,374,298	0	20,687,099
Nueces	18,142,811	10,759,989	31,800,689	44,913,848	0	105,617,337
Tarrant	15,113,371	10,723,516	23,570,884	31,050,547	0	80,458,318
Travis	10,650,833	7,398,270	16,201,476	22,447,799	0	56,698,377
Total	314,339,845	137,986,731	746,249,045	484,838,398	0	1,683,414,019
Rate Adjustment Factor (3))					
Bexar	6.31%	1.00%	6.08%	1.01%	0.00%	3.87%
Dallas	6.03%	0.91%	6.04%	1.00%	0.00%	3.84%
El Paso	5.76%	1.12%	5.60%	1.10%	0.00%	4.65%
Harris	5.72%	0.87%	6.06%	1.02%	0.00%	4.10%
Hidalgo	5.67%	1.17%	5.61%	1.20%	0.00%	4.39%
Jefferson	5.67%	0.99%	6.06%	1.06%	0.00%	3.35%
Lubbock	5.88%	0.92%	5.86%	1.05%	0.00%	3.11%
Nueces	5.82%	1.13%	5.75%	1.12%	0.00%	3.32%
Tarrant	5.84%	0.79%	6.00%	0.88%	0.00%	3.30%
Travis	5.50%	0.96%	6.15%	1.02%	0.00%	3.32%
Total	5.81%	0.97%	5.80%	1.08%	0.00%	4.05%

- (1) Equals the cost impact resulting from increases to the reimbursement for attendant services.
- (2) Equals FY2013 health plan fee-for-service claims for all long term care services (from MCO reported data).
- (3) Equals Cost Impact divided by FY2013 Total Long Term Care Claims Paid.

FY2015 STAR+PLUS Rating Provider Reimbursement Adjustments Attendant Care Enhanced Payment

	Medicaid	l Only	Dual Eli	Dual Eligible		
_	OCC	HCBS	OCC	HCBS	Other	Grand Total
		_			_	
Cost Impact of Attendant of	Care Enhanced Pay	yment Increase (1)				
Bexar	97,520	45,481	162,234	126,038	0	431,274
Dallas	88,021	34,004	144,418	114,940	0	381,383
El Paso	30,346	8,795	145,073	36,251	0	220,465
Harris	185,475	68,832	304,665	168,182	0	727,155
Hidalgo	260,929	53,375	907,239	388,694	0	1,610,237
Jefferson	16,469	9,474	31,391	39,646	0	96,980
Lubbock	7,359	4,777	14,722	21,388	0	48,246
Nueces	46,896	25,502	80,340	106,739	0	259,477
Tarrant	36,801	18,495	59,176	59,490	0	173,962
Travis	24,002	15,411	40,884	49,619	0	129,916
Total	793,820	284,148	1,890,142	1,110,986	0	4,079,095
FY2013 Total Long Term	Care Claims Paid	(2)				
Bexar	36,232,819	21,659,710	63,498,670	58,358,788	0	179,749,988
Dallas	34,778,063	17,257,965	56,686,061	52,977,472	0	161,699,560
El Paso	12,007,687	3,646,892	57,686,881	15,432,208	0	88,773,667
Harris	76,575,277	37,534,802	119,605,033	76,660,632	0	310,375,744
Hidalgo	100,984,164	22,183,114	358,683,896	156,346,845	0	638,198,019
Jefferson	6,924,472	4,413,790	12,541,686	17,275,963	0	41,155,910
Lubbock	2,930,350	2,408,683	5,973,768	9,374,298	0	20,687,099
Nueces	18,142,811	10,759,989	31,800,689	44,913,848	0	105,617,337
Tarrant	15,113,371	10,723,516	23,570,884	31,050,547	0	80,458,318
Travis	10,650,833	7,398,270	16,201,476	22,447,799	0	56,698,377
Total	314,339,845	137,986,731	746,249,045	484,838,398	0	1,683,414,019
Rate Adjustment Factor (3)					
Bexar	0.27%	0.21%	0.26%	0.22%	0.00%	0.24%
Dallas	0.25%	0.20%	0.25%	0.22%	0.00%	0.24%
El Paso	0.25%	0.24%	0.25%	0.23%	0.00%	0.25%
Harris	0.24%	0.18%	0.25%	0.22%	0.00%	0.23%
Hidalgo	0.26%	0.24%	0.25%	0.25%	0.00%	0.25%
Jefferson	0.24%	0.21%	0.25%	0.23%	0.00%	0.24%
Lubbock	0.25%	0.20%	0.25%	0.23%	0.00%	0.23%
Nueces	0.26%	0.24%	0.25%	0.24%	0.00%	0.25%
Tarrant	0.24%	0.17%	0.25%	0.19%	0.00%	0.22%
Travis	0.23%	0.21%	0.25%	0.22%	0.00%	0.23%
Total	0.25%	0.21%	0.25%	0.23%	0.00%	0.24%

⁽¹⁾ Equals the cost impact resulting from enhancements to the attendant care reimbursement levels.

⁽²⁾ Equals FY2013 health plan fee-for-service claims for all long term care services (from MCO reported data).

⁽³⁾ Equals Cost Impact divided by FY2013 Total Long Term Care Claims Paid.

FY2015 STAR+PLUS Rating Provider Reimbursement Adjustments Electronic Visit Verification

	Medicaid	l Only	Dual Eligible			
	OCC	HCBS	OCC	HCBS	Other	Grand Total
	_			_	_	
Cost Impact of EVV (1)						
Bexar	-1,404,826	-663,864	-2,378,049	-1,866,129	-4,186	-6,317,055
Dallas	-1,299,780	-511,310	-2,107,812	-1,734,449	-6,620	-5,659,970
El Paso	-417,653	-132,678	-1,916,113	-537,116	-2,622	-3,006,182
Harris	-2,715,458	-1,066,968	-4,471,692	-2,547,386	-4,940	-10,806,444
Hidalgo	-3,378,221	-751,852	-11,928,331	-5,562,045	-11,497	-21,631,945
Jefferson	-243,862	-144,306	-472,365	-601,917	-1,372	-1,463,822
Lubbock	-121,151	-72,076	-215,603	-323,009	-1,520	-733,359
Nueces	-631,692	-370,029	-1,100,766	-1,571,162	-667	-3,674,316
Tarrant	-547,923	-280,748	-872,839	-905,652	-2,332	-2,609,494
Travis	-366,150	-245,453	-622,177	-755,198	-946	-1,989,923
Total	-11,126,715	-4,239,285	-26,085,746	-16,404,063	-36,702	-57,892,511
FY2013 Total Long Tern	n Care Claims Paid	(2)				
Bexar	36,232,819	21,659,710	63,498,670	58,358,788	0	179,749,988
Dallas	34,778,063	17,257,965	56,686,061	52,977,472	0	161,699,560
El Paso	12,007,687	3,646,892	57,686,881	15,432,208	0	88,773,667
Harris	76,575,277	37,534,802	119,605,033	76,660,632	0	310,375,744
Hidalgo	100,984,164	22,183,114	358,683,896	156,346,845	0	638,198,019
Jefferson	6,924,472	4,413,790	12,541,686	17,275,963	0	41,155,910
Lubbock	2,930,350	2,408,683	5,973,768	9,374,298	0	20,687,099
Nueces	18,142,811	10,759,989	31,800,689	44,913,848	0	105,617,337
Tarrant	15,113,371	10,723,516	23,570,884	31,050,547	0	80,458,318
Travis	10,650,833	7,398,270	16,201,476	22,447,799	0	56,698,377
Total	314,339,845	137,986,731	746,249,045	484,838,398	0	1,683,414,019
Rate Adjustment Factor (3)					
Bexar	-3.88%	-3.06%	-3.75%	-3.20%	0.00%	-3.51%
Dallas	-3.74%	-2.96%	-3.72%	-3.27%	0.00%	-3.50%
El Paso	-3.48%	-3.64%	-3.32%	-3.48%	0.00%	-3.39%
Harris	-3.55%	-2.84%	-3.74%	-3.32%	0.00%	-3.48%
Hidalgo	-3.35%	-3.39%	-3.33%	-3.56%	0.00%	-3.39%
Jefferson	-3.52%	-3.27%	-3.77%	-3.48%	0.00%	-3.56%
Lubbock	-4.13%	-2.99%	-3.61%	-3.45%	0.00%	-3.55%
Nueces	-3.48%	-3.44%	-3.46%	-3.50%	0.00%	-3.48%
Tarrant	-3.63%	-2.62%	-3.70%	-2.92%	0.00%	-3.24%
Travis	-3.44%	-3.32%	-3.84%	-3.36%	0.00%	-3.51%
Total	-3.54%	-3.07%	-3.50%	-3.38%	0.00%	-3.44%

⁽¹⁾ Equals the cost impact from application of 4% savings on PAS and PCS and 3.5% savings on PDN.

⁽²⁾ Equals FY2013 health plan fee-for-service claims for all long term care services (from MCO reported data).

⁽³⁾ Equals Cost Impact divided by FY2013 Total Long Term Care Claims Paid.

Attachment 8

End Stage Renal Disease and Ventilator Dependent Members

Effective September 1, 2013 STAR+PLUS HMOs were no longer permitted to disenroll members with end stage renal disease (ESRD) or members who are ventilator dependent. Transitioning these previously disenrolled members back to the STAR+PLUS program and preventing future disenrollment will increase the average cost as these tend to be high cost members. The adjustment factors were determined by collecting the fee-for-service claims incurred during the base period for all ESRD and ventilator dependent members who had been disenrolled from the STAR+PLUS program and determining the net increase on the base period. The attached exhibits present a summary of the adjustment factors for both acute care and long term care separately.

FY2015 STAR+PLUS Rating End Stage Renal Disease and Ventilator Dependent Re-enrollment Acute Care Adjustment

	Medicaid Only	Dual Eligible	Other	Grand Total
		Lingione	<u> </u>	Grand Total
Cost Impact of ESRD/v	ent member enrollme	nt (1)		
Bexar	852,091	2,500	0	854,590
Dallas	642,444	7,154	0	649,598
El Paso	38,496	0	0	38,496
Harris	1,266,384	249	0	1,266,633
Hidalgo	373,105	379	0	373,484
Jefferson	135,134	0	0	135,134
Lubbock	115,186	0	0	115,186
Nueces	357,701	1,238	0	358,939
Tarrant	0	0	0	0
Travis	78,157	0	0	78,157
Total	3,858,698	11,519	0	3,870,217
FY2013 Total Acute Ca	are Claims Paid (2)			
Bexar	93,878,981	0	192,224	94,071,204
Dallas	103,500,947	0	414,258	103,915,205
El Paso	28,607,815	0	113,641	28,721,456
Harris	223,725,853	0	376,116	224,101,969
Hidalgo	89,813,665	0	429,158	90,242,823
Jefferson	36,281,282	0	63,002	36,344,284
Lubbock	19,911,102	0	64,582	19,975,685
Nueces	36,584,433	0	53,669	36,638,102
Tarrant	73,228,935	0	238,479	73,467,414
Travis	45,136,806	0	146,455	45,283,260
Total	750,669,820	0	2,091,582	752,761,402
Rate Adjustment Factor	: (3)			
Bexar	0.91%	0.00%	0.00%	0.91%
Dallas	0.62%	0.00%	0.00%	0.63%
El Paso	0.13%	0.00%	0.00%	0.13%
Harris	0.57%	0.00%	0.00%	0.57%
Hidalgo	0.42%	0.00%	0.00%	0.41%
Jefferson	0.37%	0.00%	0.00%	0.37%
Lubbock	0.58%	0.00%	0.00%	0.58%
Nueces	0.98%	0.00%	0.00%	0.98%
Tarrant	0.00%	0.00%	0.00%	0.00%
Travis	0.17%	0.00%	0.00%	0.17%
Total	0.51%	0.00%	0.00%	0.51%

- (1) Equals the cost impact resulting from disallowing the disenrollment of ESRD/vent dependent members.
- (2) Equals FY2013 health plan fee-for-service claims for all acute care services (from Encounter database). Does not Include Inpatient services.
- (3) Equals Cost Impact of ESRD/Vent reenrollment divided by FY2013 Total Acute Care Claims Paid.

FY2015 STAR+PLUS Rating End Stage Renal Disease and Ventilator Dependent Re-enrollment Long Term Care Adjustment

	Medicaid	Dual	Other	Com 1 Total
	Only	Eligible	Other	Grand Total
Cost Impact of ESRD/ve	ent member enrollm	ent (1)		
Bexar	63,854	14,664	0	78,518
Dallas	5,173	0	0	5,173
El Paso	0	0	0	0
Harris	82,197	11,090	0	93,287
Hidalgo	31,132	10,647	0	41,779
Jefferson	0	0	0	0
Lubbock	0	0	0	0
Nueces	5,670	33,790	0	39,460
Tarrant	0	0	0	0
Travis	0	0	0	0
Total	188,027	70,191	0	258,218
FY2013 Total Long Terr	m Care Claims Paid	1(2)		
Bexar	57,892,529	121,857,458	0	179,749,988
Dallas	52,036,027	109,663,533	0	161,699,560
El Paso	15,654,578	73,119,089	0	88,773,667
Harris	114,110,079	196,265,665	0	310,375,744
Hidalgo	123,167,278	515,030,741	0	638,198,019
Jefferson	11,338,262	29,817,648	0	41,155,910
Lubbock	5,339,033	15,348,066	0	20,687,099
Nueces	28,902,800	76,714,536	0	105,617,337
Tarrant	25,836,887	54,621,431	0	80,458,318
Travis	18,049,103	38,649,274	0	56,698,377
Total	452,326,576	1,231,087,442	0	1,683,414,019
Rate Adjustment Factor	(3)			
Bexar	0.11%	0.01%	0.00%	0.04%
Dallas	0.01%	0.00%	0.00%	0.00%
El Paso	0.00%	0.00%	0.00%	0.00%
Harris	0.07%	0.01%	0.00%	0.03%
Hidalgo	0.03%	0.00%	0.00%	0.01%
Jefferson	0.00%	0.00%	0.00%	0.00%
Lubbock	0.00%	0.00%	0.00%	0.00%
Nueces	0.02%	0.04%	0.00%	0.04%
Tarrant	0.00%	0.00%	0.00%	0.00%
Travis	0.00%	0.00%	0.00%	0.00%
Total	0.04%	0.01%	0.00%	0.02%

- (1) Equals the cost impact resulting from disallowing the disenrollment of ESRD/vent dependent members.
- (2) Equals FY2013 health plan fee-for-service claims for all long term care services (from MCO reported data).
- (3) Equals Cost Impact of ESRD/Vent reenrollment divided by FY2013 Total Long Term Care Claims Paid.

Attachment 9

Spell of Illness Adjustment

Effective September 1, 2013 STAR+PLUS health plans were permitted to impose the fee-for-service 30-day spell of illness limit on inpatient services provided to adults. Under the spell of illness limit, Medicaid payment is not made for inpatient services after a Medicaid client has had 30-days of aggregate inpatient care, whether consecutive or not. Payment resumes when a client has been out of the hospital for 60 consecutive days. There are two exceptions to the policy: (1) where there has been a prior approval for solid organ transplant; and (2) THSteps clients 20-years-of-age and younger for medically necessary treatment.

The attached exhibit presents a summary of the adjustment factors. The adjustment factors are based on FY2011 data due to limitations of the FY2012 data which was covered under fee-for-service during the first six months and managed care during the last six months.

FY2015 STAR+PLUS Rating Inpatient Reimbursement Policy Change Spell of Illness Implementation

	Medicaid	Dual	Other	C 1 T 1
	Only	Eligible	Other	Grand Total
Estimated Cost Impact	of Spell of Illness (1)		
Bexar	-3,402,241	0	0	-3,402,241
Dallas	-1,659,004	0	0	-1,659,004
El Paso	-1,303,557	0	0	-1,303,557
Harris	-16,184,589	0	0	-16,184,589
Hidalgo	-5,790,321	0	0	-5,790,321
Jefferson	-2,411,734	0	0	-2,411,734
Lubbock	-1,213,948	0	0	-1,213,948
Nueces	-1,037,543	0	0	-1,037,543
Tarrant	-2,148,469	0	0	-2,148,469
Travis	-1,261,994	0	0	-1,261,994
Total	-36,413,399	0	0	-36,413,399
FY2011 Total Inpatient	Claims Paid (2)			
Bexar	39,051,975	0	0	39,051,975
Dallas	22,650,878	0	0	22,650,878
El Paso	27,395,303	0	0	27,395,303
Harris	102,730,858	0	0	102,730,858
Hidalgo	74,411,587	0	0	74,411,587
Jefferson	37,016,484	0	0	37,016,484
Lubbock	26,263,026	0	0	26,263,026
Nueces	13,465,968	0	0	13,465,968
Tarrant	14,745,434	0	0	14,745,434
Travis	16,616,594	0	0	16,616,594
Total	374,348,109	0	0	374,348,109
Rate Adjustment Factor	: (3)			
Bexar	-8.71%	0.00%	0.00%	-8.71%
Dallas	-7.32%	0.00%	0.00%	-7.32%
El Paso	-4.76%	0.00%	0.00%	-4.76%
Harris	-15.75%	0.00%	0.00%	-15.75%
Hidalgo	-7.78%	0.00%	0.00%	-7.78%
Jefferson	-6.52%	0.00%	0.00%	-6.52%
Lubbock	-4.62%	0.00%	0.00%	-4.62%
Nueces	-7.70%	0.00%	0.00%	-7.70%
Tarrant	-14.57%	0.00%	0.00%	-14.57%
Travis	-7.59%	0.00%	0.00%	-7.59%
Total	-9.73%	0.00%	0.00%	-9.73%

- (1) Equals FY2011 claims denied under the spell of illness provisions.
- (2) Equals FY2011 fee-for-service claims for all inpatient services (from TMHP).(3) Equals Cost Impact of Policy Revision divided by FY2011 Total Inpatient Claims Paid.

Attachment 10

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 memberships. 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 risk group.

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. The risk adjustment factor is applied to the acute care portion of the community rate for each health plan and risk group. If necessary, an additional adjustment was made to the risk adjusted community rates to ensure that, in total, they produce the same premium as the community rates.

TEXAS STAR+PLUS CDPS SA/Health Plan Risk

Reporting Period: Sep 1, 2012 to Aug 31, 2013

			STAR+	PLUS		
SDA/Health Plan	Number of Enrollees	Percent Affected	Actual PMPM Expenditures Based on Paid Amounts	Predicted PMPM Payment	Case Mix	Spend Ratio
CDPS						
STAR+PLUSMedicaid-Only OCC	174,277	100.00	1,018.87	1,018.87	1.00	1.00
Bexar	22,051	100.00	973.87	992.33	1.00	0.98
Amerigroup	3,836	17.40	904.29	965.63	0.97	0.94
Molina Healthcare of Texas, Inc.	2,694	12.22	781.55	866.51	0.87	0.90
Superior HealthPlan	15,521	70.39	1,024.84	1,021.00	1.03	1.00
Dallas	27,750	100.00	862.53	1,010.93	1.00	0.85
Molina Healthcare of Texas, Inc.	15,024	54.14	875.08	1,010.05	1.00	0.87
Superior HealthPlan	12,726	45.86	847.50	1,011.98	1.00	0.84
El Paso	6,933	100.00	1,042.43	1,033.29	1.00	1.01
Amerigroup	4,401	63.48	995.07	1,030.83	1.00	0.97
Molina Healthcare of Texas, Inc.	2,532	36.52	1,124.37	1,037.54	1.00	1.08
Harris	46,924	100.00	1,104.03	1,023.16	1.00	1.08
Amerigroup	22,095	47.09	1,059.80	968.55	0.95	1.09
Molina Healthcare of Texas, Inc.	7,072	15.07	1,063.21	915.93	0.90	1.16
UnitedHealthCare Community Plan	17,757	37.84	1,175.71	1,134.39	1.11	1.04
Hidalgo	22,167	100.00	1,127.29	1,007.44	1.00	1.12
HealthSpring	4,590	20.71	1,202.68	1,038.97	1.03	1.16
Molina Healthcare of Texas, Inc.	4,389	19.80	1,031.80	972.79	0.97	1.06
Superior HealthPlan	13,188	59.49	1,133.07	1,008.10	1.00	1.12
Jefferson	9,170	100.00	908.37	1,044.76	1.00	0.87
Amerigroup	4,364	47.59	812.29	979.42	0.94	0.83
Molina Healthcare of Texas, Inc.	3,534	38.54	976.65	1,058.57	1.01	0.92
UnitedHealthCare Community Plan	1,272	13.87	1,053.29	1,239.14	1.19	0.85
Lubbock	5,142	100.00	898.76	1,057.68	1.00	0.85
Amerigroup	1,659	32.26	984.28	1,107.83	1.05	0.89
Superior HealthPlan	3,483	67.74	857.97	1,033.76	0.98	0.83
Nueces	8,361	100.00	1,025.92	1,048.72	1.00	0.98
Superior HealthPlan	5,464	65.35	1,029.26	1,074.83	1.02	0.96
UnitedHealthCare Community Plan	2,897	34.65	1,019.69	999.94	0.95	1.02
Tarrant	16,066	100.00	1,027.75	1,060.08	1.00	0.97
Amerigroup	12,701	79.06	1,054.86	1,092.80	1.03	0.97
HealthSpring	3,365	20.94	922.49	933.05	0.88	0.99
Travis	9,713	100.00	1,036.42	958.24	1.00	1.08
Amerigroup	5,962	61.38	1,053.70	971.43	1.01	1.08
UnitedHealthCare Community Plan	3,751	38.62	1,008.50	936.92	0.98	1.08

Note: CDPS results are based on information in enrollment and encounter datasets. CDPS results were obtained for Medicaid-only 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 6 months (age≥1) (permitting one month lapse in enrollment within the 6 months period).

TEXAS STAR+PLUS CDPS SA/Health Plan Risk

Reporting Period: Sep 1, 2012 to Aug 31, 2013

			DIAN	PLUS		
SDA/Health Plan	Number of Enrollees	Percent Affected	Actual PMPM Expenditures Based on Paid Amounts	Predicted PMPM Payment	Case Mix	Spend Ratio
				J		•
CDPS						
STAR+PLUSMedicaid-Only HCBS	8,187	100.00	3,687.16	3,687.16	1.00	1.00
Bexar	1,330	100.00	3,516.91	3,538.34	1.00	0.99
Amerigroup	162	12.18	3,493.83	3,508.40	0.99	1.00
Molina Healthcare of Texas, Inc.	150	11.28	2,841.38	3,118.35	0.88	0.91
Superior HealthPlan	1,018	76.54	3,619.16	3,604.40	1.02	1.00
Dallas	1,119	100.00	3,525.05	3,634.35	1.00	0.97
Molina Healthcare of Texas, Inc.	719	64.25	3,393.42	3,637.42	1.00	0.93
Superior HealthPlan	400	35.75	3,760.59	3,628.86	1.00	1.04
El Paso	187	100.00	4,059.34	3,908.74	1.00	1.04
Amerigroup	98	52.41	3,934.71	4,107.14	1.05	0.96
Molina Healthcare of Texas, Inc.	89	47.59	4,199.01	3,686.39	0.94	1.14
Harris	2,238	100.00	4,072.90	3,994.30	1.00	1.02
Amerigroup	551	24.62	4,199.68	4,390.12	1.10	0.96
Molina Healthcare of Texas, Inc.	266	11.89	4,808.26	4,084.43	1.02	1.18
UnitedHealthCare Community Plan	1,421	63.49	3,887.44	3,823.81	0.96	1.02
Hidalgo	1,135	100.00	3,456.62	3,186.04	1.00	1.08
HealthSpring	260	22.91	3,212.79	2,996.16	0.94	1.07
Molina Healthcare of Texas, Inc.	143	12.60	3,691.03	3,846.22	1.21	0.96
Superior HealthPlan	732	64.49	3,497.99	3,126.15	0.98	1.12
lefferson	291	100.00	3,551.22	3,805.25	1.00	0.93
Amerigroup	108	37.11	3,737.99	4,073.63	1.07	0.92
Molina Healthcare of Texas, Inc.	139	47.77	3,292.47	3,475.64	0.91	0.95
UnitedHealthCare Community Plan	44	15.12	3,923.83	4,204.69	1.10	0.93
Lubbock	175	100.00	2,930.43	3,420.55	1.00	0.86
Amerigroup	58	33.14	2,834.35	3,278.47	0.96	0.86
Superior HealthPlan	117	66.86	2,978.40	3,491.48	1.02	0.85
Nueces	685	100.00	3,418.89	3,554.44	1.00	0.96
Superior HealthPlan	447	65.26	3,419.12	3,685.88	1.04	0.93
UnitedHealthCare Community Plan	238	34.74	3,418.46	3,307.25	0.93	1.03
Tarrant	615	100.00	3,532.31	3,800.75	1.00	0.93
Amerigroup	536	87.15	3,656.75	3,904.51	1.03	0.94
HealthSpring	79	12.85	2,665.61	3,078.09	0.81	0.87
Travis	412	100.00	4,136.34	4,012.68	1.00	1.03
Amerigroup	200	48.54	4,012.40	4,191.95	1.04	0.96
UnitedHealthCare Community Plan	212	51.46	4,255.35	3,840.54	0.96	1.11

Note: CDPS results are based on information in enrollment and encounter datasets. CDPS results were obtained for Medicaid-only 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 6 months (age≥1) (permitting one month lapse in enrollment within the 6 months period).

Attachment 11

Medicaid Rural Service Area Expansion

Effective September 1, 2014 the STAR+PLUS program will be expanded into the Medicaid Rural Service Area (MRSA) which includes 164 counties. The MRSA will be split into three separate areas: Central, Northeast and West. Since March 1, 2012 the acute care services for the MRSA have been covered under the Medicaid STAR program. During this time, long term care services and supports have continued to be covered under the fee-for-service (FFS) program.

The actuarial model used to derive the FY2015 (September 1, 2014 through August 31, 2015) MRSA SDA premium rates relies primarily on managed care (STAR) data for acute care services and FFS data for long term care services. The historical claims experience by risk group was analyzed and estimates for the base period (FY2013) were developed. These estimates were then projected forward to FY2015 using assumed trend rates. Adjustments to the claim costs were made to reflect benefit and provider reimbursement changes as well as anticipated differences in cost between the FFS and HMO models resulting from care management (managed care efficiency).

Base Period Data

Claims data for FY2013 was used as the base period for developing the FY2015 premium rates. During this time period the acute care services for the Medicaid Only population were provided under the STAR program. This data was collected from the existing STAR HMOs and the analysis described in Attachment 2 was performed. Long term care services and supports continued to be provided by the Department of Aging and Disability Services (DADS) through the FFS program during the FY2013 base period. The long term care data was collected and estimates of the base period were developed.

Trend Factors

The cost trend factors used in this analysis are a combination of utilization and inflation components. Separate trend factors were developed by type of service – acute care (inpatient and non inpatient combined) and long term care. The projected trend rate assumptions were developed by the actuary based on an analysis of recent experience under the various HMO plans in the current STAR+PLUS areas as described in Attachment 5. The trend assumptions are the average of the OCC and HCBS trends described in Attachment 5 to develop single trend assumptions by type of service for the Medicaid Only and Dual Eligible populations. The chart below presents the assumed annual trend rates for FY2014 and FY2015 by type of service.

	FY2014	FY2015
Acute Care		
Medicaid Only <21	2.8%	2.6%
Medicaid Only >21	2.8%	2.6%
Long Term Care		
Medicaid Only <21	7.2%	8.9%
Medicaid Only >21	7.2%	8.9%
Dual Eligible	3.1%	4.3%

Provider Reimbursement Adjustments

The types of adjustments for benefit and provider reimbursement changes are the same as those detailed in Attachments 6 and 7. 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. The acute care adjustments are based on the MRSA data for the existing STAR program. The long term care adjustments are based on the average adjustment for the existing STAR+PLUS areas with the exception of EVV. No EVV adjustment is necessary for the MRSA because EVV was implemented in the MRSA counties prior to the FY2013 base period used in developing the FY2015 rates and is therefore reflected in the existing claims data. Exhibit D presents a summary of the acute care adjustment factors. The long term care adjustment factors can be found in Attachment 7, Exhibits A and B.

Removal of Intellectual and Developmentally Disabled (IDD) Members

Currently IDD members are managed under the STAR program in the MRSA only. Because these clients will have a separate risk group their acute care claims data must be removed from the base period data included in developing the FY2015 MRSA premium rates. Exhibit E presents a summary of the rate adjustment factors.

Managed Care Discount Factor

Our rating analysis includes an assumption regarding the anticipated reduction in claims cost resulting from the implementation of managed care. In deriving the managed care efficiency factor, we relied upon experience from previous STAR+PLUS expansions. Additional managed care savings will not be achieved on the acute care portion of the claims since this portion of the cost is already managed under the STAR program. The estimated managed care savings for the long term care portion of the rate is 5%.

OCC/HCBS Adjustment

The base period experience data is categorized by dual eligible (eligible for both Medicare and Medicaid) and Medicaid-only status but does not further stratify the data between the OCC and HCBS risk groups. In order to develop capitation rates for the appropriate risk groups, an estimated HCBS to OCC ratio has been calculated. This ratio is based on the current relationship between the OCC and HCBS capitation rates in the current STAR+PLUS areas and varies by type of service – acute care and long term care. Exhibit F presents the derivation of this

adjustment and Exhibit G presents its application. It is estimated that 40% of the acute care rate is applicable to inpatient services.

Administrative Fees and Risk Margin

The rating methodology includes the same provision for health plan administrative services, risk margin, and taxes as the existing STAR+PLUS program as described in Section IV. In addition to administrative fees the FY2015 MRSA rates include a provision for service coordination in the amount of \$13.60. This was determined based on the average service coordination expense reported for the existing STAR+PLUS population.

Risk Adjustment

The acute care community rates have been adjusted for acuity differences based on the acuity analysis performed on the SSI population currently managed under the STAR program in the MRSA. Because the participating plans will be changing with the transition from STAR to STAR+PLUS the application of the risk adjustment factors in these areas requires assumptions regarding FY2015 enrollment distribution. We have assumed an enrollment distribution and applied acuity factors as described below:

- 1. Plans that currently serve and remain a participating MCO in an area are assumed to enroll 100% of their current membership and acuity scores.
- 2. If there are no new plans in a service area, membership (and its associated acuity) in departing plans is assumed to move to remaining plans in proportion to the remaining plan's current membership.
- 3. If there are new plans in a service area, membership (and its associated acuity) in departing plans is assumed to be evenly distributed among the remaining and new plans in the service area.

The acuity risk adjustment factors for STAR+PLUS MRSA expansion members are defined as those for the current STAR MRSA SSI population. Exhibit H provides the summary results for the acuity analysis performed for the existing SSI population managed under the STAR program.

Summary

Exhibit A presents a summary of the FY2015 MRSA premiums split between non-inpatient, inpatient, long term care and prescription drugs. Exhibit B presents a summary of the acute care community rating exhibit for each service. Exhibit C presents a summary of the long term care community rating exhibit for each service.

	Medicaid Only		Dual Eli	gible
	OCC	HCBS	OCC	HCBS
FY2015 Total Premium Rates pmpm	075.40	2 125 04	102.20	1 171 00
Superior - MRSA Central	975.48	3,135.84	192.30	1,171.09
United - MRSA Central	904.18	2,945.72	192.30	1,171.09
Health Spring - MRSA Northeast	1,020.00	3,432.51	260.89	1,588.82
United - MRSA Northeast	1,020.00	3,432.51	260.89	1,588.82
Amerigroup - MRSA West	982.82	3,254.32	234.01	1,425.13
Superior - MRSA West	1,028.76	3,376.15	234.01	1,425.13
FY2015 Acute Care (Non-Inpatient) l	Premium Rates p	mpm (Communit	y Rates with Ris	k Adjustment)
Superior - MRSA Central	344.53	1,054.27	0.00	0.00
United - MRSA Central	317.25	970.77	0.00	0.00
Health Spring - MRSA Northeast	337.94	1,034.10	0.00	0.00
United - MRSA Northeast	337.94	1,034.10	0.00	0.00
Amerigroup - MRSA West	334.35	1,023.11	0.00	0.00
Superior - MRSA West	351.56	1,075.79	0.00	0.00
EV2015 Aguta Cara (Innationt) Promi	um Dotos nmnm	(Community Par	eas with Disk Ad	instment)
FY2015 Acute Care (Inpatient) Premi Superior - MRSA Central	230.11	694.92	es willi Kisk Au 0.00	0.00
United - MRSA Central	211.88	639.89	0.00	0.00
	211.88	681.62	0.00	0.00
Health Spring - MRSA Northeast United - MRSA Northeast	225.70	681.62	0.00	0.00
		674.39		0.00
Amerigroup - MRSA West	223.30		0.00	
Superior - MRSA West	234.81	709.11	0.00	0.00
FY2015 Long Term Care Premium R	ates pmpm (Con	nmunity Rates)		
Superior - MRSA Central	75.19	735.34	192.30	1,171.09
United - MRSA Central	75.19	735.34	192.30	1,171.09
Health Spring - MRSA Northeast	103.35	1,010.77	260.89	1,588.82
United - MRSA Northeast	103.35	1,010.77	260.89	1,588.82
Amerigroup - MRSA West	90.81	888.09	234.01	1,425.13
Superior - MRSA West	90.81	888.09	234.01	1,425.13
FY2015 Prescription Drug Premium l	Rates pmpm (Co.	mmunity Rates w	ith Risk Adiustn	nent)
Superior - MRSA Central	325.65	651.31	0.00	0.00
United - MRSA Central	299.86	599.72	0.00	0.00
Health Spring - MRSA Northeast	353.01	706.02	0.00	0.00
United - MRSA Northeast	353.01	706.02	0.00	0.00
Amerigroup - MRSA West	334.36	668.73	0.00	0.00
Superior - MRSA West	351.58	703.16	0.00	0.00
Supplied Tillian Tillian	331.30	,03.10	0.00	0.00

	MRSA Cen	tral SDA	MRSA North	neast SDA	MRSA We	est SDA
	Amount	pmpm	Amount	pmpm	Amount	pmpm
EV2012 Ermanianas Pania d						
FY2013 Experience Period Member Months	165,940		257,423		186,702	
Estimated Incurred Claims	83,275,669	501.84	129,733,832	503.97	95,987,792	514.12
	,,		- , ,		, ,	
Projected FY2015 Member Months	180,741		278,261		200,473	
Projected EV2015 Premium						
Projected FY2015 Premium at current rates including DSP	106,697,476	590.33	164,115,481	589.79	114,271,372	570.01
at current rates including DSI	100,097,470	370.33	104,113,401	309.19	114,271,372	370.01
Annual Cost Trend Assumptions						
FY2014	2.8 %		2.8 %		2.8 %	
FY2015	2.6 %		2.6 %		2.6 %	
Provider Reimbursement Adjustment		0.9939		0.9953		0.9972
Other Reimbursement Changes		1.0296		1.0270		1.0362
Inpatient Reimbursement Changes		1.0073		1.0059		0.9975
Out-of-Network Adjustment		1.0000		1.0000		1.0000
•						
Projected Incurred Claims	98,613,159	545.60	152,082,098	546.54	112,047,238	558.92
Capitation Expenses & Refunds	246,328	1.36	426,168	1.53	328,940	1.64
Net Reinsurance Cost	48,180	0.27	16,790	0.06	68,561	0.34
Administrative Expenses						
Fixed Amount	2,575,563	14.25	3,965,220	14.25	2,856,734	14.25
Percentage of Premium	6,448,576	5.75%	9,943,902	5.75%	7,326,612	5.75%
Total	9,024,139	49.93	13,909,122	49.99	10,183,346	50.80
Risk Margin	2,242,983	2.00%	3,458,748	2.00%	2,548,387	2.00%
Premium Tax	1,962,610	1.75%	3,026,405	1.75%	2,229,838	1.75%
Maintenance Tax	11,748	0.07	18,087	0.07	13,031	0.07
	11,7.10	· · · · ·	10,007	····	10,001	,
Projected Total Cost	112,149,147	620.50	172,937,418	621.49	127,419,342	635.59
Experience Rate Increase		5.1%		5.4%		11.5%

FY2015 STAR+PLUS MRSA Rating Summary - Long Term Care MRSA Central

	Dual Eligible		Medicaid Only		Total
		<21	>21	Total	
Experience Period 9/2012-8/2013	_				
Member Months					
Fee-For-Service	227,219	76,942	22,636	99,578	326,797
Managed Care	0	30,265	135,675	165,940	165,940
Total	227,219	107,207	158,311	265,518	492,737
Estimated Incurred Claims - Long Term Care	38,415,912	4,910,137	11,526,859	16,436,995	54,852,907
% Enrolled in Nursing Facility	36.6%	7.1%	7.1%	7.1%	
pmpm	266.59	49.28	78.35	66.61	158.83
Projected FY20015 Member Months in STAR+PLUS	180,188	34,510	146,231	180,741	360,929
Long Term Care Trend					
FY2014	3.1%	7.2%	7.2%	7.2%	
FY2015	4.3%	8.9%	8.9%	8.9%	
Provider Reimbursement Adjustment	1.0419	1.0459	1.0459	1.0459	
Projected FY2015 Incurred Claims pmpm - Long Term Care	298.68	60.18	95.66	88.89	193.63
Managed Care Efficiency Factor - Long Term Care	5.0%	5.0%	5.0%	5.0%	
Projected STAR+PLUS Incurred Claims					
Long Term Care	283.75	57.17	90.88	84.44	183.94
Care Coordination	13.60	13.60	13.60	13.60	
Administrative Expense					
Fixed Amount (pmpm)	14.25	0.00	0.00		
Percentage of Premium	5.75%	5.75%	5.75%		
Risk Margin	2.00%	2.00%	2.00%		
Premium Tax	1.75%	1.75%	1.75%		
Maintenance Tax	0.00	0.00	0.00		
Projected Total Cost - Long Term Care	344.31	78.20	115.45	108.34	226.14

FY2015 STAR+PLUS MRSA Rating Summary - Long Term Care MRSA Northeast

	Dual Eligible	Medicaid Only		Total	
		<21	>21	Total	
Experience Period 9/2012-8/2013	•				
Member Months					
Fee-For-Service	353,698	105,270	34,361	139,631	493,329
Managed Care	0	37,827	219,596	257,423	257,423
Total	353,698	143,097	253,957	397,054	750,752
Estimated Incurred Claims - Long Term Care	90,012,941	11,764,818	24,369,572	36,134,391	126,147,332
% Enrolled in Nursing Facility	31.4%	10.2%	10.2%	10.2%	
pmpm	371.02	91.55	106.86	101.34	228.39
Projected FY20015 Member Months in STAR+PLUS	277,850	43,575	234,686	278,261	556,111
Long Term Care Trend					
FY2014	3.1%	7.2%	7.2%	7.2%	
FY2015	4.3%	8.9%	8.9%	8.9%	
Provider Reimbursement Adjustment	1.0419	1.0459	1.0459	1.0459	
Projected FY2015 Incurred Claims pmpm - Long Term Care	415.68	111.78	130.47	127.55	271.51
Managed Care Efficiency Factor - Long Term Care	5.0%	5.0%	5.0%	5.0%	
Projected STAR+PLUS Incurred Claims					
Long Term Care	394.90	106.20	123.95	121.17	257.93
Care Coordination	13.60	13.60	13.60	13.60	
Administrative Expense					
Fixed Amount (pmpm)	14.25	0.00	0.00		
Percentage of Premium	5.75%	5.75%	5.75%		
Risk Margin	2.00%	2.00%	2.00%		
Premium Tax	1.75%	1.75%	1.75%		
Maintenance Tax	0.00	0.00	0.00		
Projected Total Cost - Long Term Care	467.13	132.37	151.99	148.92	307.90

FY2015 STAR+PLUS MRSA Rating Summary - Long Term Care MRSA West

	Dual Eligible	ual Eligible Medicaid Only		Total	
		<21	>21	Total	
Experience Period 9/2012-8/2013	_				
Member Months					
Fee-For-Service	334,167	73,360	28,094	101,454	435,621
Managed Care	0	25,635	161,067	186,702	186,702
Total	334,167	98,995	189,161	288,156	622,323
Estimated Incurred Claims - Long Term Care	77,598,981	4,045,248	16,600,848	20,646,097	98,245,078
% Enrolled in Nursing Facility	29.7%	10.6%	10.6%	10.6%	
pmpm	330.10	45.70	98.14	80.12	214.35
Projected FY20015 Member Months in STAR+PLUS	260,969	29,739	170,734	200,473	461,442
Long Term Care Trend					
FY2014	3.1%	7.2%	7.2%	7.2%	
FY2015	4.3%	8.9%	8.9%	8.9%	
Provider Reimbursement Adjustment	1.0419	1.0459	1.0459	1.0459	
Projected FY2015 Incurred Claims pmpm - Long Term Care	369.84	55.79	119.83	110.33	257.09
Managed Care Efficiency Factor - Long Term Care	5.0%	5.0%	5.0%	5.0%	
Projected STAR+PLUS Incurred Claims					
Long Term Care	351.35	53.00	113.84	104.81	244.24
Care Coordination	13.60	13.60	13.60	13.60	
Administrative Expense					
Fixed Amount (pmpm)	14.25	0.00	0.00		
Percentage of Premium	5.75%	5.75%	5.75%		
Risk Margin	2.00%	2.00%	2.00%		
Premium Tax	1.75%	1.75%	1.75%		
Maintenance Tax	0.00	0.00	0.00		
Projected Total Cost - Long Term Care	419.00	73.60	140.81	130.84	293.81

	MRSA	MRSA	
_	Central	Northeast	MRSA West
Estimated Cost Impact (1)			
Estimated Cost Impact (1)	-38,019	-30,850	10.026
Therapy Outpatient Hospital	-342,644	-506,236	-19,926 -202,954
ER - 36 Hour Visits	-8,450	-12,413	-202,934
ER - Flat Fee	-3,430	-12,413 -45,881	-17,458
Ambulance	-27,280	-200,148	-152,071
Outpatient Imaging	-455,820	-1,030,259	-1,336,707
Medicaid Excess of Medicare	-455,820 -2,911	-1,030,239	-1,330,707
MH Rehab	1,729,890	2,974,276	3,170,531
APR DRG Rebasing	676,343	1,121,386	-9,015
Outlier	-7,208	-1,700	-15,606
PPR	-7,208	-104,728	-55,967
PPC	-104,018	-276,073	-143,945
FFC	-104,016	-270,073	-143,943
FY2013 Total Incurred Claims (2)	68,317,424	125,998,386	90,146,302
Rate Adjustment (3)			
Therapy	-0.06%	-0.02%	-0.02%
Outpatient Hospital	-0.50%	-0.40%	-0.23%
ER - 36 Hour Visits	-0.01%	-0.01%	-0.01%
ER - Flat Fee	-0.04%	-0.04%	-0.02%
Ambulance	-0.20%	-0.16%	-0.17%
Outpatient Imaging	-0.67%	-0.82%	-1.48%
Medicaid Excess of Medicare	0.00%	0.00%	0.00%
MH Rehab	2.53%	2.36%	3.52%
APR DRG Rebasing	0.99%	0.89%	-0.01%
Outlier	-0.01%	0.00%	-0.02%
PPR	-0.10%	-0.08%	-0.06%
PPC	-0.15%	-0.22%	-0.16%
-	0.1070	J.=270	0.1370

- (1) Equals the cost adjustment resulting from each provider reimbursement change.
- (2) Equals FY2013 health plan fee-for-service claims for all services (ICHP provided encounter data).
- (3) Additional cost divided by FY2013 Total Incurred Claims.

FY2015 STAR+PLUS MRSA Rating IDD Adjustment

	MRSA Central	MRSA Northeast	MRSA West
Average Claims PMPM (1)			
Non-IDD Clients	495.15	495.26	490.18
IDD Clients	351.74	303.76	328.87
All Clients	488.80	488.79	481.68
Adjustment Factor (2)	1.0130	1.0132	1.0177

⁽¹⁾ Average claims incurred and paid through November, 2013.(2) Ratio of Non-IDD clients to All clients.

FY2015 STAR+PLUS MRSA Rating OCC/HCBS Ratio

		Medicaid Only			Dual Eligible	
_	OCC	HCBS	Ratio (2)	OCC	HCBS	Ratio (2)
Acute Care - Non Inpatient (1)						
FY2010	454.65	1,412.40	3.11	0.00	0.00	0.00
FY2011	482.00	1,585.96	3.29	0.00	0.00	0.00
FY2012	461.89	1,550.92	3.36	0.00	0.00	0.00
FY2013	468.35	1,335.36	2.85	0.00	0.00	0.00
FY2014	408.90	1,092.12	2.67	0.00	0.00	0.00
Average (3)			3.06			0.00
Long Term Care (1)						
FY2010	131.44	1,748.37	13.30	252.80	1,705.38	6.75
FY2011	150.94	1,501.46	9.95	247.46	1,602.82	6.48
FY2012	164.68	1,531.88	9.30	254.64	1,580.34	6.21
FY2013	191.08	1,499.27	7.85	286.83	1,621.78	5.65
FY2014	192.77	1,636.02	8.49	293.04	1,576.18	5.38
Average (3)			9.78			6.09
Acute Care - Inpatient (4)	213.60	644.55	3.02	0.00	0.00	0.00

- (1) Average Community rate across all existing STAR+PLUS areas.
- (2) Ratio of HCBS premium to OCC premium.
- (3) Five year average ratio of HCBS to OCC premium.
- (4) Average FY2013 estimated incurred claims.

OCC HCBS Total (1) OCC HCBS Total (1) Projected Caseload MRSA Central MRSA Central MRSA Northeast 264,289 13,972 278,261 234,698 43,152 277,85 MRSA West 190,406 10,066 200,473 220,439 40,530 260,96 277,85 MRSA West 200,473 220,439 40,530 260,96 CBA/OCC Ratio (2) Acute Care (Non Inpatient) Acute Care (Inpatient) 302% Long Term Care 978% 609% 306% 609% FY2015 Community Rate (3) MRSA Central Acute Care (Non Inpatient) 337.40 1,032.44 372.30 372.30	
MRSA Central 171,666 9,076 180,741 152,203 27,984 180,18 MRSA Northeast 264,289 13,972 278,261 234,698 43,152 277,85 MRSA West 190,406 10,066 200,473 220,439 40,530 260,96 CBA/OCC Ratio (2) Acute Care (Non Inpatient) 306% Acute Care (Inpatient) 302% Long Term Care 978% 609% FY2015 Community Rate (3) MRSA Central Acute Care (Non Inpatient) 337.40 1,032.44 372.30	_
MRSA Northeast 264,289 13,972 278,261 234,698 43,152 277,85 MRSA West 190,406 10,066 200,473 220,439 40,530 260,96 CBA/OCC Ratio (2) Acute Care (Non Inpatient) 306% 302% 40,530 40,530 60,96 Acute Care (Inpatient) 302% 60,96 60,96 60,96 60,96 FY2015 Community Rate (3) MRSA Central 40,530 40,530 60,96 Acute Care (Non Inpatient) 337.40 1,032.44 372.30	Projected Caseload
MRSA West 190,406 10,066 200,473 220,439 40,530 260,96 CBA/OCC Ratio (2)	MRSA Central
CBA/OCC Ratio (2) Acute Care (Non Inpatient) Acute Care (Inpatient) Long Term Care 978% 609% FY2015 Community Rate (3) MRSA Central Acute Care (Non Inpatient) 337.40 1,032.44 372.30	MRSA Northeast
Acute Care (Non Inpatient) Acute Care (Inpatient) 306% Acute Care (Inpatient) 302% Long Term Care 978% 609% FY2015 Community Rate (3) MRSA Central Acute Care (Non Inpatient) 337.40 1,032.44 372.30	MRSA West
Acute Care (Inpatient) 302% Long Term Care 978% 609% FY2015 Community Rate (3) MRSA Central Acute Care (Non Inpatient) 337.40 1,032.44 372.30	CBA/OCC Ratio (2)
Long Term Care 978% 609% FY2015 Community Rate (3)	Acute Care (Non Inpatient)
FY2015 Community Rate (3) MRSA Central Acute Care (Non Inpatient) 337.40 1,032.44 372.30	Acute Care (Inpatient)
MRSA Central Acute Care (Non Inpatient) 337.40 1,032.44 372.30	Long Term Care
Acute Care (Non Inpatient) 337.40 1,032.44 372.30	FY2015 Community Rate (3)
	•
A + G = G + C + C + C + C + C + C + C + C + C +	Acute Care (Non Inpatient)
Acute Care (Inpatient) 225.34 680.53 248.20	Acute Care (Inpatient)
Long Term Care 75.19 735.34 108.34 192.30 1,171.09 344.3	Long Term Care
Total 637.93 2,448.30 192.30 1,171.09	Total
MRSA Northeast	MRSA Northeast
Acute Care (Non Inpatient) 337.94 1,034.10 372.90	Acute Care (Non Inpatient)
Acute Care (Inpatient) 225.70 681.63 248.60	Acute Care (Inpatient)
Long Term Care 103.35 1,010.77 148.92 260.89 1,588.82 467.1	Long Term Care
Total 666.99 2,726.49 260.89 1,588.82	Total
MRSA West	MRSA West
Acute Care (Non Inpatient) 345.61 1,057.56 381.36	Acute Care (Non Inpatient)
Acute Care (Inpatient) 230.83 697.09 254.24	Acute Care (Inpatient)
Long Term Care 90.81 888.09 130.84 234.01 1,425.13 419.0	Long Term Care
Total 667.24 2,642.75 234.01 1,425.13	Total

⁽¹⁾ From Exhibit B and C.

⁽²⁾ From Exhibit F

⁽³⁾ Community rate distributed between OCC and HCBS risk groups based on projected caseload and HCBS/OCC Ratio

TEXAS STAR MCO CDPS SA/Health Plan Risk

Reporting Period: Sep 1, 2012 to Aug 31, 2013

STAR MCO									
SA/Health Plan	Number of Enrollees	Percent Affected	PMPM Expenditures Based on Paid Amounts	Predicted PMPM Payment	Case Mix	Spend Ratio			
CDPS									
TEXAS STAR MCO (SSI in MRSA)	51,294	100.00	774.43	774.43	1.00	1.00			
MRSA Central	13,937	100.00	696.19	755.68	1.00	0.92			
Amerigroup	3,072	22.04	722.72	644.47	0.85	1.12			
RightCare from Scott & White Health	4,168	29.91	519.47	758.18	1.00	0.69			
Superior HealthPlan	6,697	48.05	793.54	805.11	1.07	0.99			
MRSA Northeast	21,648	100.00	814.05	796.99	1.00	1.02			
Amerigroup	8,832	40.80	840.19	795.70	1.00	1.06			
Superior HealthPlan	12,816	59.20	796.00	797.88	1.00	1.00			
MRSA West	15,709	100.00	789.16	759.97	1.00	1.04			
Amerigroup	3,215	20.47	741.60	700.11	0.92	1.06			
FirstCare	6,565	41.79	817.92	785.11	1.03	1.04			
Superior HealthPlan	5,929	37.74	782.87	764.36	1.01	1.02			

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 6 months (age≥1) (permitting one month lapse in enrollment within the 6 months period).

Attachment 12

Intellectual and Developmentally Disabled (IDD) Expansion

Effective September 1, 2014 IDD individuals who were previously excluded from STAR+PLUS will be carved into the program. Individuals under the age of 21 will be voluntary while members age 21 and older will be mandatory. Prior to September 1, 2014 IDD members were excluded from managed care with the exception of those individuals living in the Medicaid Rural Service Areas (MRSA). These IDD members in the MRSA were covered under the STAR program. The STAR+PLUS benefits provided to the IDD population will be limited to acute care services only. The long term care services and supports will continue to be carved out and paid on a fee-for-service (FFS) basis.

The actuarial model used to develop the IDD premium rates relies on FY2013 FFS data for IDD members residing in the non-MRSA and managed care data for members residing in the MRSA areas. Below is a description of the trend, benefit and provider reimbursement adjustments, managed care discount and administrative provisions included in the IDD rates.

Trend Factors

The trend assumptions are the same as the OCC acute care trend assumptions described in Attachment 5. The chart below presents the assumed annual trend rates for FY2014 and FY2015 by area and type of service.

	<u>FY2014</u>	FY2015
Non-Inpatient	2.9%	2.6%
Inpatient	2.9%	2.9%

Provider Reimbursement Adjustment

The types of adjustments for benefit and provider reimbursement changes are the same as those detailed in Attachment 6 for the non-MRSA and Attachment 11 Exhibit D for the MRSA. The adjustment factors used for the IDD rate development are the SDA average of the factors used in developing the STAR+PLUS rates as previously described. For the non-MRSA no adjustment is necessary for the carve-in of mental health rehabilitation and targeted case management since these claims have been included in the FFS base claims data. Exhibit C presents a summary of the adjustment factors.

Managed Care Discount Factor

It is assumed that moving the IDD population from FFS to managed care will result in a certain level of managed care savings. The first step was to determine the breakeven discount factor such that the gross cost under the STAR+PLUS model (including administrative expenses and risk margin) would be the same as the projected FY2015 gross cost under the FFS model.

To determine the managed care efficiency factor necessary in order to satisfy our breakeven cost requirement, we must solve the following equation for X.

$$$616.55 \text{ pmpm} = $616.55 \text{ pmpm} (1-X) + $14.25 \text{ pmpm} (1-5.75\% - 2.0\%)$$

Therefore, in order for the gross cost under the STAR+PLUS model to be the same as the projected gross cost under the FFS model, the FFS claims cost would need to be discounted by 10.1%.

The discount factor applied for the FY2015 rates was then set at 50% of this breakeven level. The full breakeven savings has not been assumed in the first year for a variety of reasons including: (1) the sensitive nature of the population being managed (2) managed care organizations required to honor existing prior authorizations and (3) significant traditional providers must be included in managed care networks. It is accepted that over time the managed care efficiencies will increase and eventually exceed the breakeven level.

The assumed discount is 5% and only applied to the non-MRSA. Individuals residing in the MRSA were managed under the STAR program during the FY2013 base period and thus the historical data already reflects managed care savings.

Administrative Fees and Risk Margin

The rating methodology includes the same provision for health plan administrative services, risk margin, and taxes as the existing STAR+PLUS program as described in Section IV. In addition to administrative fees the FY2015 IDD rates include a provision for service coordination in the amount of \$13.60. This was determined based on the average service coordination expense reported for the existing STAR+PLUS population.

Summary

Exhibit A presents a summary of the FY2015 premiums split between non-inpatient, inpatient and prescription drugs. Exhibit B presents a summary of the community rating exhibit for each service area. FY2015 premium rates will vary between service delivery areas and age group (under age 21 and age 21 and over) but will be the same for all health plans within a given area.

Health Plan	Under Age 21	Ages 21 and Over
FY2015 Total Premium Rates pmpm		
Amerigroup - Bexar	2,066.26	872.39
Molina - Bexar	2,066.26	872.39
Superior - Bexar	2,066.26	872.39
Molina - Dallas	1,977.91	709.39
Superior - Dallas	1,977.91	709.39
Amerigroup - El Paso	1,826.29	1,017.34
Molina - El Paso	1,826.29	1,017.34
Amerigroup - Harris	2,191.65	923.76
Molina - Harris	2,191.65	923.76
United - Harris	2,191.65	923.76
HealthSpring - Hidalgo	3,167.03	964.64
Molina - Hidalgo	3,167.03	964.64
Superior - Hidalgo	3,167.03	964.64
Amerigroup - Jefferson	1,888.61	702.54
Molina - Jefferson	1,888.61	702.54
United - Jefferson	1,888.61	702.54
Amerigroup - Lubbock	2,111.99	834.83
Superior - Lubbock	2,111.99	834.83
Superior - Nueces	1,372.76	1,042.07
United - Nueces	1,372.76	1,042.07
Amerigroup - Tarrant	1,408.78	805.25
HealthSpring - Tarrant	1,408.78	805.25
Amerigroup - Travis	1,913.35	894.24
United - Travis	1,913.35	894.24
Superior - MRSA Central	1,268.08	850.60
United - MRSA Central	1,268.08	850.60
Health Spring - MRSA Northeast	1,034.20	826.33
United - MRSA Northeast	1,034.20	826.33
Amerigroup - MRSA West	1,092.54	865.75
Superior - MRSA West	1,092.54	865.75

Health Plan	Under Age 21	Ages 21 and Over	
FY2015 Non-inpatient Premium Rates			
Amerigroup - Bexar	1,449.04	257.28	
Molina - Bexar	1,449.04	257.28	
Superior - Bexar	1,449.04	257.28	
Molina - Dallas	1,341.19	200.77	
Superior - Dallas	1,341.19	200.77	
Amerigroup - El Paso	1,455.75	350.75	
Molina - El Paso	1,455.75	350.75	
Amerigroup - Harris	1,494.78	275.31	
Molina - Harris	1,494.78	275.31	
United - Harris	1,494.78	275.31	
HealthSpring - Hidalgo	2,358.07	352.24	
Molina - Hidalgo	2,358.07	352.24	
Superior - Hidalgo	2,358.07	352.24	
Amerigroup - Jefferson	1,288.06	211.85	
Molina - Jefferson	1,288.06	211.85	
United - Jefferson	1,288.06	211.85	
Amerigroup - Lubbock	1,449.28	245.85	
Superior - Lubbock	1,449.28	245.85	
Superior - Nueces	813.93	337.04	
United - Nueces	813.93	337.04	
Amerigroup - Tarrant	832.34	238.71	
HealthSpring - Tarrant	832.34	238.71	
Amerigroup - Travis	1,280.25	254.41	
United - Travis	1,280.25	254.41	
Superior - MRSA Central	436.32	320.18	
United - MRSA Central	436.32	320.18	
Health Spring - MRSA Northeast	362.36	275.42	
United - MRSA Northeast	362.36	275.42	
Amerigroup - MRSA West	401.80	280.78	
Superior - MRSA West	401.80	280.78	

Health Plan	Under Age 21	Ages 21 and Over	
FY2015 Inpatient Premium Rates pmp	m		
Amerigroup - Bexar	202.72	65.93	
Molina - Bexar	202.72	65.93	
Superior - Bexar	202.72	65.93	
Molina - Dallas	247.83	73.92	
Superior - Dallas	247.83	73.92	
Amerigroup - El Paso	118.19	89.92	
Molina - El Paso	118.19	89.92	
Amerigroup - Harris	247.45	82.87	
Molina - Harris	247.45	82.87	
United - Harris	247.45	82.87	
HealthSpring - Hidalgo	311.39	105.41	
Molina - Hidalgo	311.39	105.41	
Superior - Hidalgo	311.39	105.41	
Amerigroup - Jefferson	156.78	73.36	
Molina - Jefferson	156.78	73.36	
United - Jefferson	156.78	73.36	
Amerigroup - Lubbock	159.89	103.89	
Superior - Lubbock	159.89	103.89	
Superior - Nueces	156.67	92.15	
United - Nueces	156.67	92.15	
Amerigroup - Tarrant	188.09	78.52	
HealthSpring - Tarrant	188.09	78.52	
Amerigroup - Travis	222.42	79.41	
United - Travis	222.42	79.41	
Superior - MRSA Central	160.92	118.09	
United - MRSA Central	160.92	118.09	
Health Spring - MRSA Northeast	142.30	108.15	
United - MRSA Northeast	142.30	108.15	
Amerigroup - MRSA West	181.32	126.71	
Superior - MRSA West	181.32	126.71	

Health Plan	Under Age 21	Ages 21 and Over	
FY2015 Total Prescription Drug Rates			
Amerigroup - Bexar	414.50	549.18	
Molina - Bexar	414.50	549.18	
Superior - Bexar	414.50	549.18	
Molina - Dallas	388.89	434.70	
Superior - Dallas	388.89	434.70	
Amerigroup - El Paso	252.35	576.67	
Molina - El Paso	252.35	576.67	
Amerigroup - Harris	449.42	565.58	
Molina - Harris	449.42	565.58	
United - Harris	449.42	565.58	
HealthSpring - Hidalgo	497.57	506.99	
Molina - Hidalgo	497.57	506.99	
Superior - Hidalgo	497.57	506.99	
Amerigroup - Jefferson	443.77	417.33	
Molina - Jefferson	443.77	417.33	
United - Jefferson	443.77	417.33	
Amerigroup - Lubbock	502.82	485.09	
Superior - Lubbock	502.82	485.09	
Superior - Nueces	402.16	612.88	
United - Nueces	402.16	612.88	
Amerigroup - Tarrant	388.35	488.02	
HealthSpring - Tarrant	388.35	488.02	
Amerigroup - Travis	410.68	560.42	
United - Travis	410.68	560.42	
Superior - MRSA Central	670.84	412.33	
United - MRSA Central	670.84	412.33	
Health Spring - MRSA Northeast	529.54	442.76	
United - MRSA Northeast	529.54	442.76	
Amerigroup - MRSA West	509.42	458.26	
Superior - MRSA West	509.42	458.26	

	Under Age 21		Age 21 and Over		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience 9/1/2012 - 8/31/2013						
Estimated Experience 9/1/2012 - 6/31/2013						
Member Months	6,145		16,627		22,772	
Estimated Incurred Claims						
Non-Inpatient	8,120,877	1,321.54	3,596,198	216.29	11,717,075	514.54
Inpatient	1,109,945	180.63	900,337	54.15	2,010,283	88.28
Total	9,230,822	1,502.17	4,496,535	270.44	13,727,357	602.82
Projected FY2015 Member Months	1,277		17,872		19,149	
Annual Trend Assumption - Non Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.6 %		2.6 %			
Annual Trend Assumption - Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.9 %		2.9 %			
Provider Reimbursement Adjustment						
Acute Care - Non Inpatient	0.9709		0.9709			
Acute Care - Inpatient	0.9909		0.9909			
Managed Care Savings	0.9500		0.9500			
Projected Incurred Claims						
Non-Inpatient	1,642,960	1,286.89	3,764,215	210.62	5,407,175	282.37
Inpatient	229,852	180.04	964,627	53.97	1,194,479	62.38
Total	1,872,812	1,466.93	4,728,842	264.59	6,601,655	344.75
Service Coordination Expense	17,363	13.60	243,065	13.60	260,428	13.60
Administrative Expenses						
Fixed Amount	18,193	14.25	254,682	14.25	272,875	14.25
Percetage of Premium	121,255	5.75%	332,150	5.75%	453,405	5.75%
Total	139,448	109.23	586,832	32.83	726,280	37.93
Risk Margin	42,176	2.00%	115,530	2.00%	157,706	2.00%
Premium Tax	36,904	1.75%	101,089	1.75%	137,993	1.75%
Maintenance Tax	83	0.065	1,162	0.065	1,245	0.065
Projected Total Cost						
Non Inpatient	1,849,972	1,449.04	4,598,180	257.28	6,448,152	336.73
Inpatient	258,814	202.72	1,178,341	65.93	1,437,154	75.05
Total	2,108,786	1,651.76	5,776,521	323.21	7,885,307	411.78

	Under Age 21		Age 21 and Over		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience 0/1/2012 9/21/2012						
Estimated Experience 9/1/2012 - 8/31/2013						
Member Months	9,544		20,232		29,776	
Estimated Incurred Claims						
Non-Inpatient	11,711,160	1,227.07	3,364,346	166.29	15,075,506	506.30
Inpatient	2,129,691	223.14	1,218,991	60.25	3,348,682	112.46
Total	13,840,851	1,450.21	4,583,337	226.54	18,424,188	618.76
Projected FY2015 Member Months	1,951		23,881		25,833	
Annual Trend Assumption - Non Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.6 %		2.6 %			
Annual Trend Assumption - Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.9 %		2.9 %			
Provider Reimbursement Adjustment						
Acute Care - Non Inpatient	0.9671		0.9671			
Acute Care - Inpatient	0.9798		0.9798			
Managed Care Savings	0.9500		0.9500			
Projected Incurred Claims						
Non-Inpatient	2,322,449	1,190.22	3,851,918	161.29	6,174,367	239.01
Inpatient	429,138	219.93	1,418,113	59.38	1,847,251	71.51
Total	2,751,587	1,410.15	5,270,031	220.68	8,021,618	310.52
Service Coordination Expense	26,537	13.60	324,785	13.60	351,323	13.60
Administrative Expenses						
Fixed Amount	27,806	14.25	340,308	14.25	368,114	14.25
Percetage of Premium	178,285	5.75%	377,192	5.75%	555,478	5.75%
Total	206,091	105.62	717,500	30.04	923,591	35.75
Risk Margin	62,012	2.00%	131,197	2.00%	193,210	2.00%
Premium Tax	54,261	1.75%	114,798	1.75%	169,058	1.75%
Maintenance Tax	127	0.065	1,552	0.065	1,679	0.065
Projected Total Cost						
Non Inpatient	2,617,043	1,341.19	4,794,670	200.77	7,411,713	286.91
Inpatient	483,573	247.82	1,765,194	73.92	2,248,767	87.05
Total	3,100,615	1,589.02	6,559,864	274.69	9,660,480	373.97

	Under Age 21		Age 21 and Over		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience 9/1/2012 - 8/31/2013						
Estimated Experience 9/1/2012 - 6/31/2013						
Member Months	1,303		5,630		6,933	
Estimated Incurred Claims						
Non-Inpatient	1,719,814	1,319.89	1,698,392	301.67	3,418,206	493.03
Inpatient	137,104	105.22	427,523	75.94	564,627	81.44
Total	1,856,918	1,425.11	2,125,915	377.60	3,982,833	574.47
Projected FY2015 Member Months	316		7,330		7,646	
Annual Trend Assumption - Non Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.6 %		2.6 %			
Annual Trend Assumption - Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.9 %		2.9 %			
Provider Reimbursement Adjustment						
Acute Care - Non Inpatient	0.9757		0.9757			
Acute Care - Inpatient	0.9908		0.9908			
Managed Care Savings	0.9500		0.9500			
Projected Incurred Claims						
Non-Inpatient	407,668	1,291.63	2,163,875	295.21	2,571,543	336.34
Inpatient	33,099	104.87	554,743	75.68	587,841	76.89
Total	440,766	1,396.50	2,718,618	370.89	3,159,384	413.23
Service Coordination Expense	4,292	13.60	99,687	13.60	103,980	13.60
Administrative Expenses						
Fixed Amount	4,498	14.25	104,452	14.25	108,949	14.25
Percetage of Premium	28,564	5.75%	185,730	5.75%	214,295	5.75%
[Total	33,062	104.75	290,182	39.59	323,244	42.28
Risk Margin	9,935	2.00%	64,602	2.00%	74,537	2.00%
Premium Tax	8,693	1.75%	56,527	1.75%	65,220	1.75%
Maintenance Tax	21	0.065	476	0.065	497	0.065
Projected Total Cost						
Non Inpatient	459,466	1,455.75	2,570,981	350.75	3,030,447	396.37
Inpatient	37,304	118.19	659,110	89.92	696,415	91.09
Total	496,770	1,573.94	3,230,091	440.67	3,726,862	487.45

FY2015 STAR+PLUS IDD Rate Setting Harris SDA

	Under Age 21		Age 21 and Over		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm
F-4:						
Estimated Experience 9/1/2012 - 8/31/2013						
Member Months	14,381		33,880		48,261	
Estimated Incurred Claims						
Non-Inpatient	19,513,870	1,356.92	7,877,637	232.52	27,391,507	567.57
Inpatient	3,212,384	223.38	2,357,974	69.60	5,570,358	115.42
Total	22,726,254	1,580.30	10,235,611	302.11	32,961,865	682.99
Projected FY2015 Member Months	3,105		42,447		45,551	
Annual Trend Assumption - Non Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.6 %		2.6 %			
Annual Trend Assumption - Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.9 %		2.9 %			
Provider Reimbursement Adjustment						
Acute Care - Non Inpatient	0.9764		0.9764			
Acute Care - Inpatient	0.9790		0.9790			
Managed Care Savings	0.9500		0.9500			
Projected Incurred Claims						
Non-Inpatient	4,125,700	1,328.83	9,665,167	227.70	13,790,868	302.75
Inpatient	682,975	219.98	2,909,212	68.54	3,592,187	78.86
Total	4,808,675	1,548.80	12,574,380	296.24	17,383,055	381.61
Service Coordination Expense	42,225	13.60	577,274	13.60	619,498	13.60
Administrative Expenses						
Fixed Amount	44,243	14.25	604,864	14.25	649,107	14.25
Percetage of Premium	311,030	5.75%	874,208	5.75%	1,185,238	5.75%
Total	355,273	114.43	1,479,072	34.85	1,834,345	40.27
Risk Margin	108,184	2.00%	304,072	2.00%	412,257	2.00%
Premium Tax	94,661	1.75%	266,063	1.75%	360,725	1.75%
Maintenance Tax	202	0.065	2,759	0.065	2,961	0.065
Projected Total Cost						
Non Inpatient	4,640,950	1,494.78	11,686,106	275.31	16,327,056	358.43
Inpatient	768,270	247.45	3,517,514	82.87	4,285,784	94.09
Total	5,409,221	1,742.23	15,203,620	358.18	20,612,840	452.52

	Under Age 21		Age 21 and Over		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm
February 1F 0/1/2012 - 9/21/2012						
Estimated Experience 9/1/2012 - 8/31/2013						
Member Months	3,156		9,155		12,311	
Estimated Incurred Claims						
Non-Inpatient	6,757,840	2,141.27	2,762,825	301.78	9,520,665	773.35
Inpatient	891,538	282.49	825,961	90.22	1,717,499	139.51
Total	7,649,378	2,423.76	3,588,787	392.00	11,238,164	912.86
Projected FY2015 Member Months	654		11,778		12,432	
Annual Trend Assumption - Non Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.6 %		2.6 %			
Annual Trend Assumption - Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.9 %		2.9 %			
Provider Reimbursement Adjustment						
Acute Care - Non Inpatient	0.9822		0.9822			
Acute Care - Inpatient	0.9803		0.9803			
Managed Care Savings	0.9500		0.9500			
Projected Incurred Claims						
Non-Inpatient	1,380,362	2,109.39	3,501,473	297.29	4,881,835	392.67
Inpatient	182,285	278.56	1,047,814	88.96	1,230,099	98.94
Total	1,562,647	2,387.95	4,549,287	386.25	6,111,934	491.62
Service Coordination Expense	8,900	13.60	160,180	13.60	169,080	13.60
Administrative Expenses						
Fixed Amount	9,325	14.25	167,836	14.25	177,161	14.25
Percetage of Premium	100,445	5.75%	309,932	5.75%	410,377	5.75%
^r Total	109,770	167.74	477,768	40.56	587,538	47.26
Risk Margin	34,937	2.00%	107,803	2.00%	142,740	2.00%
Premium Tax	30,570	1.75%	94,327	1.75%	124,897	1.75%
Maintenance Tax	43	0.065	766	0.065	808	0.065
Projected Total Cost						
Non Inpatient	1,543,092	2,358.07	4,148,649	352.24	5,691,741	457.82
Inpatient	203,775	311.40	1,241,481	105.41	1,445,256	116.25
Total	1,746,867	2,669.46	5,390,130	457.65	7,136,997	574.07

	Under Age 21		Age 21 and Over		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience 9/1/2012 - 8/31/2013						
Estimated Experience 9/1/2012 - 8/31/2013						
Member Months	1,529		4,639		6,168	
Estimated Incurred Claims						
Non-Inpatient	1,783,735	1,166.60	811,156	174.86	2,594,891	420.70
Inpatient	209,945	137.31	271,621	58.55	481,566	78.07
Total	1,993,680	1,303.91	1,082,778	233.41	3,076,457	498.78
Projected FY2015 Member Months	307		5,085		5,392	
Annual Trend Assumption - Non Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.6 %		2.6 %			
Annual Trend Assumption - Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.9 %		2.9 %			
Provider Reimbursement Adjustment						
Acute Care - Non Inpatient	0.9750		0.9750			
Acute Care - Inpatient	1.0053		1.0053			
Managed Care Savings	0.9500		0.9500			
Projected Incurred Claims						
Non-Inpatient	350,463	1,140.81	869,530	170.99	1,219,993	226.24
Inpatient	42,656	138.85	301,095	59.21	343,750	63.75
Total	393,118	1,279.66	1,170,625	230.20	1,563,743	289.99
Service Coordination Expense	4,178	13.60	69,160	13.60	73,338	13.60
Administrative Expenses						
Fixed Amount	4,378	14.25	72,465	14.25	76,843	14.25
Percetage of Premium	25,522	5.75%	83,396	5.75%	108,918	5.75%
[Total	29,900	97.33	155,861	30.65	185,761	34.45
Risk Margin	8,877	2.00%	29,007	2.00%	37,885	2.00%
Premium Tax	7,768	1.75%	25,381	1.75%	33,149	1.75%
Maintenance Tax	20	0.065	331	0.065	351	0.065
Projected Total Cost						
Non Inpatient	395,699	1,288.06	1,077,318	211.85	1,473,018	273.16
Inpatient	48,161	156.77	373,046	73.36	421,207	78.11
Total	443,861	1,444.84	1,450,364	285.21	1,894,225	351.27

FY2015 STAR+PLUS IDD Rate Setting Lubbock SDA

	Under A	ge 21	1 Age 21 and		Over Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience 0/1/2012 8/21/2012						
Estimated Experience 9/1/2012 - 8/31/2013						
Member Months	1,835		6,259		8,094	
Estimated Incurred Claims						
Non-Inpatient	2,416,744	1,317.03	1,299,968	207.70	3,716,712	459.19
Inpatient	262,966	143.31	541,768	86.56	804,734	99.42
Total	2,679,710	1,460.33	1,841,736	294.25	4,521,446	558.62
Projected FY2015 Member Months	416		7,290		7,706	
Annual Trend Assumption - Non Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.6 %		2.6 %			
Annual Trend Assumption - Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.9 %		2.9 %			
Provider Reimbursement Adjustment						
Acute Care - Non Inpatient	0.9739		0.9739			
Acute Care - Inpatient	0.9846		0.9846			
Managed Care Savings	0.9500		0.9500			
Projected Incurred Claims						
Non-Inpatient	534,611	1,286.46	1,478,979	202.87	2,013,590	261.31
Inpatient	58,982	141.93	624,966	85.73	683,948	88.76
Total	593,593	1,428.39	2,103,946	288.60	2,697,538	350.07
Service Coordination Expense	5,652	13.60	99,145	13.60	104,797	13.60
Administrative Expenses						
Fixed Amount	5,922	14.25	103,884	14.25	109,806	14.25
Percetage of Premium	38,452	5.75%	146,606	5.75%	185,057	5.75%
[Total	44,373	106.78	250,490	34.36	294,863	38.27
Risk Margin	13,374	2.00%	50,993	2.00%	64,368	2.00%
Premium Tax	11,703	1.75%	44,619	1.75%	56,322	1.75%
Maintenance Tax	27	0.065	474	0.065	501	0.065
Projected Total Cost						
Non Inpatient	602,275	1,449.28	1,792,302	245.85	2,394,576	310.75
Inpatient	66,447	159.89	757,366	103.89	823,813	106.91
Total	668,722	1,609.17	2,549,667	349.74	3,218,389	417.66

	Under A	Under Age 21 Ag		d Over	Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience 9/1/2012 - 8/31/2013						
Estimated Experience 9/1/2012 - 6/31/2013						
Member Months	1,871		5,446		7,317	
Estimated Incurred Claims						
Non-Inpatient	1,361,621	727.75	1,573,217	288.88	2,934,838	401.10
Inpatient	252,105	134.74	413,754	75.97	665,859	91.00
Total	1,613,727	862.49	1,986,970	364.85	3,600,697	492.10
Projected FY2015 Member Months	415		6,766		7,181	
Annual Trend Assumption - Non Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.6 %		2.6 %			
Annual Trend Assumption - Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.9 %		2.9 %			
Provider Reimbursement Adjustment						
Acute Care - Non Inpatient	0.9771		0.9771			
Acute Care - Inpatient	1.0129		1.0129			
Managed Care Savings	0.9500		0.9500			
Projected Incurred Claims						
Non-Inpatient	296,231	713.19	1,915,317	283.10	2,211,548	307.98
Inpatient	57,023	137.29	523,709	77.41	580,732	80.87
Total	353,254	850.48	2,439,026	360.51	2,792,280	388.85
Service Coordination Expense	5,649	13.60	92,012	13.60	97,661	13.60
Administrative Expenses						
Fixed Amount	5,919	14.25	96,409	14.25	102,328	14.25
Percetage of Premium	23,181	5.75%	166,965	5.75%	190,146	5.75%
Total	29,100	70.06	263,375	38.93	292,474	40.73
Risk Margin	8,063	2.00%	58,075	2.00%	66,138	2.00%
Premium Tax	7,055	1.75%	50,815	1.75%	57,871	1.75%
Maintenance Tax	27	0.065	440	0.065	467	0.065
Projected Total Cost						
Non Inpatient	338,071	813.93	2,280,250	337.04	2,618,320	364.62
Inpatient	65,077	156.68	623,493	92.16	688,570	95.89
Total	403,148	970.60	2,903,742	429.19	3,306,890	460.51

	Under A	ge 21	21 Age 21 ar		Over Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience 9/1/2012 - 8/31/2013						
Estimated Experience // 1/2012 0/31/2013						
Member Months	7,618		18,336		25,954	
Estimated Incurred Claims						
Non-Inpatient	5,736,616	753.03	3,686,395	201.05	9,423,012	363.07
Inpatient	1,284,781	168.65	1,201,661	65.54	2,486,442	95.80
Total	7,021,397	921.69	4,888,056	266.58	11,909,453	458.87
Projected FY2015 Member Months	1,588		19,883		21,471	
Annual Trend Assumption - Non Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.6 %		2.6 %			
Annual Trend Assumption - Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.9 %		2.9 %			
Provider Reimbursement Adjustment						
Acute Care - Non Inpatient	0.9672		0.9672			
Acute Care - Inpatient	0.9731		0.9731			
Managed Care Savings	0.9500		0.9500			
Projected Incurred Claims						
Non-Inpatient	1,159,871	730.50	3,877,847	195.03	5,037,717	234.63
Inpatient	262,115	165.08	1,275,498	64.15	1,537,613	71.61
Total	1,421,986	895.58	5,153,345	259.18	6,575,330	306.24
Service Coordination Expense	21,594	13.60	270,414	13.60	292,008	13.60
Administrative Expenses						
Fixed Amount	22,626	14.25	283,338	14.25	305,964	14.25
Percetage of Premium	93,163	5.75%	362,688	5.75%	455,851	5.75%
Total	115,789	72.92	646,026	32.49	761,815	35.48
Risk Margin	32,405	2.00%	126,152	2.00%	158,557	2.00%
Premium Tax	28,354	1.75%	110,383	1.75%	138,737	1.75%
Maintenance Tax	103	0.065	1,292	0.065	1,396	0.065
Projected Total Cost						
Non Inpatient	1,321,573	832.34	4,746,423	238.71	6,067,997	282.61
Inpatient	298,658	188.10	1,561,190	78.52	1,859,847	86.62
Total	1,620,231	1,020.43	6,307,613	317.23	7,927,844	369.23

	Under A	ge 21	Age 21 an	e 21 and Over Total		.1	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	
February 1F 0/1/2012 - 9/21/2012							
Estimated Experience 9/1/2012 - 8/31/2013							
Member Months	5,060		11,512		16,572		
Estimated Incurred Claims							
Non-Inpatient	5,867,906	1,159.67	2,458,233	213.54	8,326,139	502.42	
Inpatient	1,012,656	200.13	762,219	66.21	1,774,875	107.10	
Total	6,880,562	1,359.79	3,220,452	279.75	10,101,014	609.52	
Projected FY2015 Member Months	1,085		12,423		13,508		
Annual Trend Assumption - Non Inpatient							
FY2014	2.9 %		2.9 %				
FY2015	2.6 %		2.6 %				
Annual Trend Assumption - Inpatient							
FY2014	2.9 %		2.9 %				
FY2015	2.9 %		2.9 %				
Provider Reimbursement Adjustment							
Acute Care - Non Inpatient	0.9757		0.9757				
Acute Care - Inpatient	0.9794		0.9794				
Managed Care Savings	0.9500		0.9500				
Projected Incurred Claims							
Non-Inpatient	1,231,544	1,134.84	2,595,920	208.97	3,827,464	283.35	
Inpatient	213,964	197.16	810,326	65.23	1,024,290	75.83	
Total	1,445,508	1,332.00	3,406,247	274.20	4,851,754	359.18	
Service Coordination Expense	14,759	13.60	168,949	13.60	183,708	13.60	
Administrative Expenses							
Fixed Amount	15,464	14.25	177,024	14.25	192,488	14.25	
Percetage of Premium	93,766	5.75%	238,452	5.75%	332,218	5.75%	
Total	109,231	100.65	415,476	33.44	524,706	38.84	
Risk Margin	32,614	2.00%	82,940	2.00%	115,554	2.00%	
Premium Tax	28,538	1.75%	72,572	1.75%	101,110	1.75%	
Maintenance Tax	71	0.065	807	0.065	878	0.065	
Projected Total Cost							
Non Inpatient	1,389,341	1,280.25	3,160,446	254.41	4,549,786	336.82	
Inpatient	241,379	222.43	986,545	79.41	1,227,924	90.90	
Total	1,630,720	1,502.67	4,146,991	333.82	5,777,710	427.73	

FY2015 STAR+PLUS IDD Rate Setting MRSA Central SDA

	Under A	Under Age 21		Age 21 and Over		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	
Estimated Experience 0/1/2012 9/21/2012							
Estimated Experience 9/1/2012 - 8/31/2013							
Member Months	480		6,871		7,351		
Estimated Incurred Claims							
Non-Inpatient	167,921	349.83	1,729,061	251.65	1,896,982	258.06	
Inpatient	60,963	127.01	627,731	91.36	688,694	93.69	
Total	228,884	476.84	2,356,792	343.01	2,585,676	351.74	
Projected FY2015 Member Months	518		10,325		10,843		
Annual Trend Assumption - Non Inpatient							
FY2014	2.9 %		2.9 %				
FY2015	2.6 %		2.6 %				
Annual Trend Assumption - Inpatient							
FY2014	2.9 %		2.9 %				
FY2015	2.9 %		2.9 %				
Provider Reimbursement Adjustment							
Acute Care - Non Inpatient	1.0139		1.0139				
Acute Care - Inpatient	1.0270		1.0270				
Managed Care Savings	1.0000		1.0000				
Projected Incurred Claims							
Non-Inpatient	194,031	374.47	2,781,329	269.37	2,975,360	274.39	
Inpatient	71,561	138.11	1,025,790	99.35	1,097,352	101.20	
Total	265,593	512.58	3,807,119	368.72	4,072,712	375.59	
Service Coordination Expense	7,047	13.60	140,425	13.60	147,471	13.60	
Administrative Expenses							
Fixed Amount	7,384	14.25	147,136	14.25	154,520	14.25	
Percetage of Premium	17,794	5.75%	260,202	5.75%	277,996	5.75%	
Total	25,177	48.59	407,338	39.45	432,515	39.89	
Risk Margin	6,189	2.00%	90,505	2.00%	96,694	2.00%	
Premium Tax	5,415	1.75%	79,192	1.75%	84,607	1.75%	
Maintenance Tax	34	0.065	671	0.065	705	0.065	
Projected Total Cost							
Non Inpatient	226,075	436.32	3,305,966	320.18	3,532,042	325.73	
Inpatient	83,380	160.92	1,219,284	118.09	1,302,663	120.13	
Total	309,455	597.24	4,525,250	438.27	4,834,705	445.86	

FY2015 STAR+PLUS IDD Rate Setting MRSA Northeast SDA

	Under A	ge 21	Age 21 and Over		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience 9/1/2012 - 8/31/2013						
Member Months	509		8,205		8,714	
Estimated Incurred Claims						
Non-Inpatient	146,667	288.15	1,760,049	214.51	1,906,716	218.81
Inpatient	56,943	111.87	683,338	83.28	740,281	84.95
Total	203,611	400.02	2,443,387	297.79	2,646,998	303.76
Projected FY2015 Member Months	668		12,351		13,019	
Annual Trend Assumption - Non Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.6 %		2.6 %			
Annual Trend Assumption - Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.9 %		2.9 %			
Provider Reimbursement Adjustment						
Acute Care - Non Inpatient	1.0121		1.0121			
Acute Care - Inpatient	1.0207		1.0207			
Managed Care Savings	1.0000		1.0000			
Projected Incurred Claims						
Non-Inpatient	205,791	307.89	2,830,866	229.21	3,036,657	233.25
Inpatient	80,813	120.91	1,111,662	90.01	1,192,474	91.60
Total	286,603	428.80	3,942,528	319.22	4,229,132	324.84
Service Coordination Expense	9,090	13.60	167,968	13.60	177,058	13.60
Administrative Expenses						
Fixed Amount	9,524	14.25	175,996	14.25	185,520	14.25
Percetage of Premium	19,395	5.75%	272,397	5.75%	291,792	5.75%
[Total	28,919	43.27	448,393	36.31	477,312	36.66
Risk Margin	6,746	2.00%	94,747	2.00%	101,493	2.00%
Premium Tax	5,903	1.75%	82,903	1.75%	88,806	1.75%
Maintenance Tax	43	0.065	803	0.065	846	0.065
Projected Total Cost						
Non Inpatient	242,196	362.36	3,401,569	275.42	3,643,765	279.88
Inpatient	95,109	142.30	1,335,773	108.15	1,430,882	109.91
Total	337,305	504.66	4,737,342	383.57	5,074,647	389.79

	Under A	ge 21	Age 21 an	d Over	Tota	al
	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience 9/1/2012 - 8/31/2013						
Estimated Experience 9/1/2012 - 8/31/2013						
Member Months	682		9,183		9,865	
Estimated Incurred Claims						
Non-Inpatient	217,703	319.21	1,999,132	217.70	2,216,835	224.72
Inpatient	100,901	147.95	926,557	100.90	1,027,458	104.15
Total	318,604	467.16	2,925,690	318.60	3,244,293	328.87
Projected FY2015 Member Months	696		13,832		14,528	
Annual Trend Assumption - Non Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.6 %		2.6 %			
Annual Trend Assumption - Inpatient						
FY2014	2.9 %		2.9 %			
FY2015	2.9 %		2.9 %			
Provider Reimbursement Adjustment						
Acute Care - Non Inpatient	1.0219		1.0219			
Acute Care - Inpatient	0.9921		0.9921			
Managed Care Savings	1.0000		1.0000			
Projected Incurred Claims						
Non-Inpatient	239,641	344.39	3,248,664	234.87	3,488,304	240.12
Inpatient	108,145	155.42	1,466,056	105.99	1,574,201	108.36
Total	347,786	499.81	4,714,720	340.86	5,062,506	348.48
Service Coordination Expense	9,463	13.60	188,112	13.60	197,575	13.60
Administrative Expenses						
Fixed Amount	9,916	14.25	197,102	14.25	207,018	14.25
Percetage of Premium	23,331	5.75%	324,086	5.75%	347,417	5.75%
Total	33,247	47.78	521,188	37.68	554,435	38.16
Risk Margin	8,115	2.00%	112,726	2.00%	120,841	2.00%
Premium Tax	7,101	1.75%	98,635	1.75%	105,736	1.75%
Maintenance Tax	45	0.065	899	0.065	944	0.065
Projected Total Cost						
Non Inpatient	279,586	401.80	3,883,662	280.78	4,163,247	286.58
Inpatient	126,171	181.32	1,752,618	126.71	1,878,789	129.33
Total	405,757	583.12	5,636,279	407.49	6,042,036	415.90

		Outpatient	ER - 36 Hour			Outpatient
	Therapy	Hospital	Visits	ER - Flat Fee	Ambulance	Imaging
Bexar SDA	0.9993	0.9872	0.9996	0.9963	0.9981	0.9901
Dallas SDA	0.9999	0.9825	0.9994	0.9980	0.9977	0.9893
El Paso SDA	0.9996	0.9876	0.9996	0.9973	0.9980	0.9934
Harris SDA	0.9995	0.9907	0.9998	0.9987	0.9957	0.9918
Hidalgo SDA	0.9973	0.9947	0.9999	0.9994	0.9976	0.9932
Jefferson SDA	0.9994	0.9908	0.9999	0.9989	0.9966	0.9892
Lubbock SDA	0.9997	0.9897	0.9998	0.9987	0.9975	0.9883
Nueces SDA	0.9990	0.9928	0.9998	0.9983	0.9975	0.9895
Tarrant SDA	0.9998	0.9826	0.9997	0.9980	0.9978	0.9890
Travis SDA	0.9998	0.9914	0.9996	0.9974	0.9974	0.9899
MRSA Central SDA	0.9992	0.9932	0.9999	0.9995	0.9973	0.9909
MRSA Northeast SDA	0.9997	0.9944	0.9999	0.9994	0.9978	0.9886
MRSA West SDA	0.9997	0.9966	0.9999	0.9997	0.9975	0.9783
	Medicaid					
	Excess of		APR DRG			
	Medicare	MH Rehab	Rebasing	Outlier	PPR	PPC
Bexar SDA	1.0000	1.0000	0.9970	0.9997	0.9996	0.9946
Dallas SDA	1.0000	1.0000	1.0002	1.0000	0.9969	0.9827
El Paso SDA	1.0000	1.0000	1.0007	0.9999	0.9948	0.9954
Harris SDA	1.0000	1.0000	0.9972	0.9996	0.9937	0.9884
Hidalgo SDA	1.0000	1.0000	0.9849	0.9998	0.9994	0.9961
Jefferson SDA	1.0000	1.0000	1.0201	1.0000	0.9934	0.9920
Lubbock SDA	1.0000	1.0000	1.0005	0.9991	0.9965	0.9885
Nueces SDA	1.0000	1.0000	1.0156	1.0000	0.9985	0.9988
Tarrant SDA	1.0000	1.0000	0.9923	1.0000	0.9956	0.9850
Travis SDA	1.0000	1.0000	0.9968	1.0000	0.9948	0.9877
MRSA Central SDA	1.0000	1.0345	1.0371	0.9996	0.9962	0.9944
MRSA Northeast SDA	1.0000	1.0328	1.0318	1.0000	0.9971	0.9921
MRSA West SDA	1.0000	1.0515	0.9997	0.9994	0.9981	0.9949