

**STATE OF TEXAS
CHILDREN'S HEALTH INSURANCE
PROGRAM
CHIP RATE SETTING
STATE FISCAL YEAR 2020**

Prepared for:
Texas Health and Human Services Commission
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I. Introduction

Rudd and Wisdom, Inc. has been retained by the Texas Health and Human Services Commission (HHSC) to develop the state fiscal year 2020 (FY2020, September 1, 2019 through August 31, 2020) premium rates for health plans participating in the Texas Children's Health Insurance Program (CHIP). This report presents the rating methodology and assumptions used in developing the premium rates.

Rudd and Wisdom has provided actuarial services to the Texas Medicaid program for over 30 years. We have participated in the state's Medicaid managed care rating process since its inception in 1993 and in developing premium rates for CHIP plans since that program's inception in 2000. This year, as in previous years, we have worked closely with HHSC in developing the FY2020 CHIP premium rates.

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

- Monthly enrollment by age group for each health plan. This includes historical enrollment since September 2015 and a projection of future enrollment through August 2020. These projections were prepared by HHS System Forecasting staff.
- Detailed MCO medical and pharmacy encounter data. Medical encounter data includes detail medical claim information for every claim incurred during FY2018 and paid through November 30, 2018. Pharmacy encounter data includes detail pharmacy claim information for every claim incurred for the period March 1, 2012 through March 31, 2019. The dataset includes but is not limited to (1) individual member information – date of birth, risk group, health plan; (2) provider information – type of provider, NPI, bill type, taxonomy code, NABP; (3) procedure information – diagnosis, procedure code, claim modifier, NDC; and (4) payment information – paid amount, billed amount. This information is used to identify the providers and services which will receive or have received reimbursement changes in order to determine the cost impact of such changes.
- Claim lag reports by age group for each health plan for the period September 2015 through February 2019. These reports were provided by the health plans and include monthly paid claims by month of service.
- Financial Statistical Reports (FSR) for each participating health plan for FY2017, FY2018 and the first six months of FY2019. The FSR contains detailed information regarding monthly enrollment, revenue, incurred claims and administrative expenses, as reported by the health plan. The FSR is audited by an external auditor.
- Reports from the EQRO summarizing their analysis of the health plan's encounter data.
- Reports from the health plans providing information on high volume claimants during the experience period.
- Current (FY2019) premium rates for each health plan.
- The number of maternity deliveries by health plan and risk group for the period September 2015 through February 2019.

- Information from both HHSC and the health plans regarding recent changes in covered services and provider reimbursement under the State Medicaid and CHIP programs.
- Information from the health plans regarding current and projected payment rates for certain capitated services, such as mental health and vision.
- FY2018 acuity risk adjustment analysis prepared by the EQRO for each participating health plan.
- Information from the health plans regarding current and projected reinsurance premium rates.
- Information provided by HHSC regarding FY2018 CHIP health plan claims cost by type of service for certain services. This information was obtained from the encounter database.
- Information from HHSC regarding FY2019 and proposed FY2020 Medicaid provider reimbursement rates.

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

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

In addition, HHSC employs the Institute for Child Health Policy (ICHP) as an External Quality Review Organization. ICHP reviews the encounter data and provides certification of the data quality. Below is an excerpt from the data certification report for the detail encounter period September 1, 2017 through August 31, 2018 (FY2018).

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

1. *The encounter data for the most recent measurement year are complete, accurate, and reliable.*

2. *No statistically significant variability in the encounter data is attributable to incompleteness, inaccuracy, or other deficiency as compared to equivalent data for similar populations and when evaluated against professionally accepted standards.*

Based on the review of the data by the EQRO, HHSC and Rudd and Wisdom, we have concluded that all data sources are consistent, complete and accurate. It is our opinion that the data collected for the rate development is high quality and we have no concerns over the availability or applicability to the FY2020 rate development. The accumulation of data sources noted above have been assigned full credibility.

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

II. Overview of the Rate Setting Methodology

This report details the development of the medical and prescription drug components of the CHIP premium rate. Information regarding the CHIP Dental program can be found in the report titled “State of Texas Medicaid and CHIP Managed Care Dental Rate Setting FY2020”.

The actuarial model used to derive the FY2020 CHIP premium rates relies primarily on historical health plan experience. The historical claims experience for the program was analyzed and estimates for the base period were developed. Due to the significant differences between claim run out patterns, different base periods were selected for medical and prescription drug. The base period for the medical component was defined as FY2018 (September 1, 2017 through August 31, 2018) while the base period for the prescription drug component was defined as CY2018 (January 1, 2018 through December 31, 2018). The primary reason for varying the base periods between medical and prescription is that prescription drug claims complete much faster and therefore require minimal estimation of incurred but unpaid claims (IBNR). Estimates of the base period include an estimate of IBNR using claims paid through February 28, 2019 and represents the following percentage of incurred claims by type of service:

- Medical – 0.23%
- Prescription Drug – 0.0%

These estimates were then projected forward to FY2020 using assumed trend rates. Other plan expenditures such as capitated amounts, reinsurance costs and administrative expenses were added to the claims component in order to project the total FY2020 cost under the health plan. These projected total cost rates were determined separately for each risk group for each health plan in each service area. The results of this analysis were then combined for all health plans in a service area in order to develop a set of community rates for each service area.

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

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

Premium rates were determined for the following age groups:

- Children Under Age One Year
- Children Ages 1 to 5 Years
- Children Ages 6 to 14 Years

- Children Ages 15 to 18 Years
- Perinate Newborn 198%-202%
- Perinate Mother <198%
- Perinate Mother 198%-202%

The services used in the analysis include the following:

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

Services specifically excluded from the analysis include:

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

We projected the FY2020 cost for each individual health plan by estimating their base period average claims cost and then applying trend and other adjustment factors. (These adjustment factors are described in more detail in Section III.) We added capitation expenses for services capitated by the health plan (such as vision and behavioral health), a net cost of reinsurance, a reasonable provision for administrative expenses and a risk margin. Attachment 2 presents a description and an example of the experience analysis for a sample health plan. This type of analysis was conducted on the experience of each participating CHIP health plan.

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

HHSC utilized the combination of two rating methodologies in setting the FY2020 CHIP premium rates – individual plan experience rating and community rating. The individual plan experience rating method is described above and documented in Attachment 2. The community rates are developed by a weighted average of the projected FY2020 cost for each health plan in the service area (from the individual plan experience rating method). The weights used in this formula are the projected FY2020 number of members enrolled in each health plan by age group. Attachment 3 presents the summary community rating

exhibit for each service area along with a description of the analysis.

The projected FY2020 average total per-capita cost in a service area is called the unadjusted premium rate. This rate includes provision for all health care and administrative services to be provided by the health plan. This rate is then separated into two components – (i) non-maternity related expenses and (ii) maternity expenses. The premium rate for non-maternity expenses is called the adjusted premium rate. These are the monthly rates paid to the health plan. The amount paid for maternity expenses is called the Delivery Supplemental Payment (DSP). Additional information regarding DSP is included in Attachment 7.

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 6.

The FY2020 CHIP health plan premium rates were then defined as the following: the minimum of (a) 108% of the rate developed using the individual experience of the plan and (b) community rate with risk adjustment. The enrollment for children under age one, Perinate Newborn 198%-202% and Perinate Mother 198%-202% risk groups were so small that credible rates could not be set by area. As a result, the rates for these risk groups were calculated on a statewide basis. By limiting the final premium rates to no greater than 108% of the rate developed using the individual experience of the plan, the CHIP rates continue to incentivize the efficient provision of services while limiting the ability of a relatively low-cost plan from benefiting excessively from the higher community average premium rates. The 108% minimum impacts ten of the thirty-two health plan/SDA options in the CHIP program. This methodology prevents a lower cost health plan from being excessively profitable as a result of a significantly different cost structure in comparison to their competition.

III. Adjustment Factors

This section contains a description of the adjustment factors used in the FY2020 CHIP rate setting process.

Trend Factors - Medical

The rating methodology uses assumed trend factors to adjust the base period claims cost to the projection period. The cost trend factors used in this analysis are a combination of utilization and inflation components. The projected trend rate assumptions were developed by the actuary based on an analysis of recent experience under the CHIP program. A single trend assumption applies to all service areas but varies by CHIP Perinate versus CHIP non-Perinate programs and by projection year (FY2019 and FY2020).

Attachment 4 – Exhibit A presents the derivation of the medical trend assumption. The trend analysis resulted in an annual trend assumption of 2.9% for FY2019 and 2.8% for FY2020 for the CHIP non-Perinate program and 2.2% for FY2019 and 1.8% for FY2020 for the CHIP Perinate program.

Trend Factors - Pharmacy

The rating methodology uses assumed pharmacy trend factors to adjust the base period (CY2018) claims cost to the rating period (FY2020). The trend rate assumptions were developed by the actuary based on an analysis of recent pharmacy claims experience under the CHIP program and the actuary's professional judgment regarding anticipated future cost changes. The trend rate assumption is the same for all CHIP risk groups and service areas.

Attachment 4 – Exhibit B presents the derivation of the pharmacy trend assumption. The trend analysis resulted in an annual trend assumption of 6.5%.

Provider Reimbursement and Benefit Revision Adjustment

There were several significant revisions to the Texas Medicaid fee schedule which were included in the CHIP rating analysis. Provider reimbursement and benefit changes were recognized for the following services:

- Therapy Policy Change
- Anesthesiology Reimbursement Change
- Ambulance Reimbursement Change
- Remove Invalid Clinician Administered Drugs
- Medical Cost Share Increase
- Private Duty Nursing Reimbursement Change
- FQHC Wrap Payment Removal
- Tort and Coordination of Benefit Recoveries Policy Change

- Potentially Preventable Readmissions Quality Improvement
- Potentially Preventable Readmissions Reduction
- Potentially Preventable Complications Reduction
- Hospital Reimbursement Changes
- Limit Related Party Reimbursement to 100% of Medicaid
- Pharmacy Carve-in

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

Risk Adjustment

Several risk adjustment techniques are employed in the rate setting methodology. Premium rates are established separately by area and age group in order to recognize the inherent geographical and demographical variation in the cost of delivering care. In an attempt to treat the health plans more equitably regarding maternity expenses, the methodology includes a separate payment for maternity services. The rating methodology also includes a health status adjustment.

The base community rate in each service area was adjusted to reflect the health status, or acuity, of the population enrolled in each health plan. The purpose of acuity risk adjustment is to recognize the anticipated cost differential between multiple health plans in a service area by analyzing the health status of their respective members. The risk analysis was performed by the University of Florida's Institute for Child Health Policy (ICHP). The methodology used to incorporate the acuity risk adjustment is the Chronic Illness and Disability Payment System (CDPS). Additional information regarding risk adjustment is included in Attachment 6.

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, Taxes and Risk Margin

The rating methodology includes an explicit provision for health plan administrative services. The amount allocated for medical administrative expenses is \$7.50 per member per month (pppm) for the CHIP non-Perinate program and \$12.50 pppm for the CHIP Perinate program plus 5.75% of gross premium. The amount allocated for pharmacy administrative expenses is \$1.80 pppm. This amount is intended to provide for all administrative-related services performed by the HMO.

The premium rates also include an amount for premium tax (1.75% of premium), maintenance tax (\$0.06 pppm) and a risk margin (1.50% of premium).

The capitation rates included in this document do not include provision for the Affordable Care Act (ACA) Health Insurance Providers Fee. HHSC has developed a procedure for reimbursing the MCOs for (i) the ACA Health Insurance Providers Fee, (ii) any applicable federal income tax impact resulting from payment of the ACA Health Insurance Providers Fee and (iii) any applicable state premium tax impact resulting from payment of the ACA Health Insurance Providers Fee. Such reimbursement will be provided based on a CMS-approved methodology, if necessary or applicable. HHSC has included the Health Insurance Providers Fee in the managed care capitation rates for each of 2014, 2015 and 2016 and 2018 through amendments to the initially certified rates for these time periods.

V. CHIP Dental

This report details the development of the medical and prescription drug component of the premium. Further information regarding the dental premium rate can be found in the report titled “State of Texas Medicaid and CHIP Managed Care Dental Rate Setting FY2020.”

VI. Summary

The chart below presents the results of the FY2020 CHIP rating analysis and includes all components of the premium – medical and prescription drug.

Health Plan	CHIP - Medical & Prescription Drug Rates				
	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	DSP
FY2020 CHIP Premium Rates pppm					
Aetna - Bexar	394.57	121.39	107.00	128.86	3,100.00
Amerigroup - Bexar	394.57	129.27	108.56	81.15	3,100.00
CFHP - Bexar	394.57	133.02	132.74	136.73	3,100.00
Superior - Bexar	394.57	142.45	109.99	129.64	3,100.00
Amerigroup - Dallas	394.57	158.98	121.50	172.27	3,100.00
Molina - Dallas	394.57	192.42	91.93	106.86	3,100.00
Parkland - Dallas	394.57	171.11	124.69	168.09	3,100.00
El Paso Health - El Paso	394.57	134.16	103.81	151.67	3,100.00
Superior - El Paso	394.57	172.24	96.91	140.84	3,100.00
Amerigroup - Harris	394.57	159.10	107.47	148.51	3,100.00
CHC - Harris	394.57	158.84	125.00	166.77	3,100.00
Molina - Harris	394.57	94.53	115.30	87.02	3,100.00
TCHP - Harris	394.57	159.28	145.59	201.20	3,100.00
United - Harris	394.57	170.67	120.06	150.52	3,100.00
Amerigroup - Jefferson	394.57	156.12	436.48	113.43	3,100.00
CHC - Jefferson	394.57	168.42	124.90	129.10	3,100.00
Molina - Jefferson	394.57	74.01	113.90	144.78	3,100.00
TCHP - Jefferson	394.57	162.16	179.56	202.79	3,100.00
United - Jefferson	394.57	181.95	179.40	198.98	3,100.00
Firstcare - Lubbock	394.57	132.15	102.89	157.54	3,100.00
Superior - Lubbock	394.57	111.60	95.87	168.83	3,100.00
United - Nueces	394.57	142.58	96.76	110.13	3,100.00
Driscoll - Nueces	394.57	183.35	182.00	203.40	3,100.00
Superior - Nueces	394.57	176.80	138.74	200.47	3,100.00
Aetna - Tarrant	394.57	116.66	94.40	117.65	3,100.00
Amerigroup - Tarrant	394.57	107.54	109.04	124.04	3,100.00
Cook - Tarrant	394.57	142.87	128.66	156.35	3,100.00
BCBS - Travis	394.57	143.73	132.92	124.04	3,100.00
DCHP - Travis	394.57	137.14	112.02	142.07	3,100.00
Superior - Travis	394.57	163.45	117.44	125.04	3,100.00
Molina - RSA	394.57	111.34	104.19	121.44	3,100.00
Superior - RSA	394.57	127.68	112.71	127.37	3,100.00

Health Plan	CHIP Perinate - Medical & Prescription Drug Rates			
	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2020 CHIP Perinate Premium Rates pmpm				
Aetna - Bexar	517.22	370.75	496.67	3,100.00
Amerigroup - Bexar	517.22	308.57	496.67	3,100.00
CFHP - Bexar	517.22	423.38	496.67	3,100.00
Superior - Bexar	517.22	411.13	496.67	3,100.00
Amerigroup - Dallas	517.22	402.28	496.67	3,100.00
Molina - Dallas	517.22	366.72	496.67	3,100.00
Parkland - Dallas	517.22	418.22	496.67	3,100.00
El Paso Health - El Paso	517.22	407.69	496.67	3,100.00
Superior - El Paso	517.22	408.90	496.67	3,100.00
Amerigroup - Harris	517.22	526.88	496.67	3,100.00
CHC - Harris	517.22	580.59	496.67	3,100.00
Molina - Harris	517.22	492.65	496.67	3,100.00
TCHP - Harris	517.22	575.07	496.67	3,100.00
United - Harris	517.22	553.30	496.67	3,100.00
Amerigroup - Jefferson	517.22	495.00	496.67	3,100.00
CHC - Jefferson	517.22	746.78	496.67	3,100.00
Molina - Jefferson	517.22	585.23	496.67	3,100.00
TCHP - Jefferson	517.22	665.94	496.67	3,100.00
United - Jefferson	517.22	506.24	496.67	3,100.00
Firstcare - Lubbock	517.22	431.88	496.67	3,100.00
Superior - Lubbock	517.22	394.14	496.67	3,100.00
United - Nueces	517.22	329.57	496.67	3,100.00
Driscoll - Nueces	517.22	470.31	496.67	3,100.00
Superior - Nueces	517.22	432.60	496.67	3,100.00
Aetna - Tarrant	517.22	446.45	496.67	3,100.00
Amerigroup - Tarrant	517.22	457.53	496.67	3,100.00
Cook - Tarrant	517.22	457.39	496.67	3,100.00
BCBS - Travis	517.22	490.29	496.67	3,100.00
DCHP - Travis	517.22	453.40	496.67	3,100.00
Superior - Travis	517.22	495.47	496.67	3,100.00
Molina - RSA	517.22	427.28	496.67	3,100.00
Superior - RSA	517.22	439.63	496.67	3,100.00

Health Plan	CHIP Dental Rates			
	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18
FY2020 Premium Rates pmpm	2.95	17.71	25.50	25.02

Attachment 1 presents additional information regarding the FY2020 CHIP medical and pharmacy rates including a comparison to current (FY2019) rates. This report details the development of the medical and prescription drug component of the premium. Further information regarding the CHIP dental premium rate can be found in the report titled “State of Texas Medicaid and CHIP Managed Care Dental Rate Setting FY2020”.

Attachment 9 presents the required rating index summarizing the applicable sections from the 2019-2020 Medicaid Managed Care Rate Development Guide.

VII. Actuarial Certification of FY2020 CHIP HMO Premium Rates

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

Rudd and Wisdom has been retained by the Texas Health and Human Services Commission (HHSC) to assist in the development of the CHIP premium rate for the period September 1, 2019 through August 31, 2020 and to provide the actuarial certification required under Centers for Medicare and Medicaid Services (CMS) requirements 42 CFR 438.4.

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

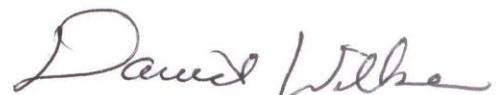
- (a) The premium rate has been developed in accordance with generally accepted actuarial principles and practices;
- (b) The premium rate is appropriate for the populations and services covered under the managed care contract; and
- (c) The premium rate is actuarially sound as defined in the regulations.

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

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



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VIII. Attachments

Attachment 1 – Summary of FY2020 CHIP Medical and Pharmacy Rating Analysis

Attachment 2 – Individual Health Plan Experience Analysis

Attachment 3 – Community Experience Analysis

Attachment 4 – Trend Analysis

Attachment 5 – Provider Reimbursement and Benefit Adjustment Factors

Attachment 6 – Acuity Risk Adjustment

Attachment 7 – Delivery Supplemental Payment

Attachment 8 – Pay-for-Quality (P4Q) Program

Attachment 9 – Index for 2019-2020 Medicaid Managed Care Rate Development Guide

Attachment I

Summary of FY2020 CHIP Medical and Pharmacy Rating Analysis

Exhibit A presents summary information regarding the FY2020 CHIP health plan rates. Included on the exhibit are current (FY2019) premium rates, split between medical, prescription drug, and delivery supplemental payment (DSP) components; FY2020 premium rates, split between medical, prescription drug and DSP components; and a comparison of FY2019 and FY2020 premium rates.

Exhibit B presents a comparison of the projected expenditures under the current (FY2019) premium rates and the FY2020 premium rates. The projection is split by medical (includes DSP), pharmacy and dental.

FY2020 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
Current (9/1/18-8/31/19) Medical Premium Rates pmpm								
Aetna - Bexar	494.21	116.22	72.70	103.02	514.95	312.47	466.47	3,100.00
Amerigroup - Bexar	494.21	83.74	66.69	38.37	514.95	302.44	466.47	3,100.00
CFHP - Bexar	494.21	111.50	84.75	93.83	514.95	354.72	466.47	3,100.00
Superior - Bexar	494.21	101.38	77.17	89.78	514.95	364.36	466.47	3,100.00
Amerigroup - Dallas	494.21	125.09	100.31	126.28	514.95	361.66	466.47	3,100.00
Molina - Dallas	494.21	96.21	86.99	93.85	514.95	329.12	466.47	3,100.00
Parkland - Dallas	494.21	139.46	93.76	131.54	514.95	381.72	466.47	3,100.00
El Paso Health - El Paso	494.21	106.56	77.44	84.49	514.95	333.83	466.47	3,100.00
Superior - El Paso	494.21	82.87	64.69	87.56	514.95	332.52	466.47	3,100.00
Amerigroup - Harris	494.21	128.92	77.64	136.42	514.95	479.72	466.47	3,100.00
CHC - Harris	494.21	145.04	100.90	133.65	514.95	513.73	466.47	3,100.00
Molina - Harris	494.21	90.62	80.14	64.19	514.95	436.75	466.47	3,100.00
TCHP - Harris	494.21	164.18	124.78	164.04	514.95	512.77	466.47	3,100.00
United - Harris	494.21	124.41	95.82	135.03	514.95	502.21	466.47	3,100.00
Amerigroup - Jefferson	494.21	162.35	66.26	122.55	514.95	579.43	466.47	3,100.00
CHC - Jefferson	494.21	112.45	79.34	329.47	514.95	510.10	466.47	3,100.00
Molina - Jefferson	494.21	90.37	107.11	77.27	514.95	476.61	466.47	3,100.00
TCHP - Jefferson	494.21	129.92	123.63	192.42	514.95	522.28	466.47	3,100.00
United - Jefferson	494.21	135.72	91.89	92.27	514.95	520.95	466.47	3,100.00
Firstcare - Lubbock	494.21	117.01	71.45	97.82	514.95	385.25	466.47	3,100.00
Superior - Lubbock	494.21	107.10	70.19	73.31	514.95	355.70	466.47	3,100.00
United - Nueces	494.21	138.45	94.78	114.19	514.95	398.45	466.47	3,100.00
Driscoll - Nueces	494.21	163.23	120.01	159.64	514.95	461.18	466.47	3,100.00
Superior - Nueces	494.21	125.80	98.94	184.71	514.95	436.07	466.47	3,100.00
Aetna - Tarrant	494.21	86.33	70.54	108.03	514.95	324.55	466.47	3,100.00
Amerigroup - Tarrant	494.21	104.30	86.79	107.41	514.95	346.56	466.47	3,100.00
Cook - Tarrant	494.21	134.56	97.16	115.03	514.95	327.29	466.47	3,100.00
BCBS - Travis	494.21	121.60	69.19	84.09	514.95	425.43	466.47	3,100.00
DCHP - Travis	494.21	127.87	88.12	86.52	514.95	414.76	466.47	3,100.00
Superior - Travis	494.21	136.76	75.13	92.40	514.95	412.84	466.47	3,100.00
Molina - RSA	494.21	87.84	66.73	88.48	514.95	361.77	466.47	3,100.00
Superior - RSA	494.21	101.42	71.77	99.26	514.95	380.64	466.47	3,100.00

FY2020 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
Current (9/1/18-8/31/19) Prescription Drug Premium Rates pmpm								
Aetna - Bexar	14.97	17.23	30.34	45.64	6.15	50.78	95.43	
Amerigroup - Bexar	14.97	14.19	34.96	15.30	6.15	49.15	95.43	
CFHP - Bexar	14.97	16.53	35.37	41.56	6.15	57.65	95.43	
Superior - Bexar	14.97	14.58	34.70	35.46	6.15	59.22	95.43	
Amerigroup - Dallas	14.97	17.50	33.50	35.14	6.15	28.33	95.43	
Molina - Dallas	14.97	13.46	29.05	26.12	6.15	25.78	95.43	
Parkland - Dallas	14.97	19.50	31.31	36.60	6.15	29.91	95.43	
El Paso Health - El Paso	14.97	36.55	25.80	28.47	6.15	66.07	95.43	
Superior - El Paso	14.97	28.42	21.55	29.51	6.15	65.81	95.43	
Amerigroup - Harris	14.97	16.12	36.94	44.74	6.15	81.73	95.43	
CHC - Harris	14.97	14.20	27.44	32.00	6.15	87.53	95.43	
Molina - Harris	14.97	11.67	36.01	33.87	6.15	74.41	95.43	
TCHP - Harris	14.97	16.07	33.94	39.28	6.15	87.36	95.43	
United - Harris	14.97	15.55	32.41	31.40	6.15	85.57	95.43	
Amerigroup - Jefferson	14.97	23.09	72.41	31.23	6.15	90.26	95.43	
CHC - Jefferson	14.97	18.56	25.65	34.32	6.15	79.46	95.43	
Molina - Jefferson	14.97	20.44	29.47	31.54	6.15	74.24	95.43	
TCHP - Jefferson	14.97	17.62	55.62	51.14	6.15	81.36	95.43	
United - Jefferson	14.97	16.94	92.62	56.18	6.15	81.15	95.43	
Firstcare - Lubbock	14.97	13.30	33.26	43.11	6.15	66.30	95.43	
Superior - Lubbock	14.97	12.18	32.67	32.31	6.15	61.22	95.43	
United - Nueces	14.97	14.90	35.21	25.11	6.15	96.54	95.43	
Driscoll - Nueces	14.97	17.57	44.58	35.10	6.15	111.74	95.43	
Superior - Nueces	14.97	20.28	43.88	49.08	6.15	105.66	95.43	
Aetna - Tarrant	14.97	13.73	26.22	31.88	6.15	101.55	95.43	
Amerigroup - Tarrant	14.97	11.52	30.51	40.99	6.15	108.44	95.43	
Cook - Tarrant	14.97	14.87	34.16	43.90	6.15	102.41	95.43	
BCBS - Travis	14.97	14.47	31.93	29.57	6.15	39.26	95.43	
DCHP - Travis	14.97	15.22	40.67	30.42	6.15	38.27	95.43	
Superior - Travis	14.97	16.28	34.67	32.49	6.15	38.10	95.43	
Molina - RSA	14.97	16.88	35.49	33.93	6.15	72.08	95.43	
Superior - RSA	14.97	19.49	38.17	38.06	6.15	75.84	95.43	

FY2020 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
Current Total Premium Rates pppm								
Aetna - Bexar	509.18	133.45	103.04	148.66	521.10	363.25	561.90	3,100.00
Amerigroup - Bexar	509.18	97.93	101.65	53.67	521.10	351.59	561.90	3,100.00
CFHP - Bexar	509.18	128.03	120.12	135.39	521.10	412.37	561.90	3,100.00
Superior - Bexar	509.18	115.96	111.87	125.24	521.10	423.58	561.90	3,100.00
Amerigroup - Dallas	509.18	142.59	133.81	161.42	521.10	389.99	561.90	3,100.00
Molina - Dallas	509.18	109.67	116.04	119.97	521.10	354.90	561.90	3,100.00
Parkland - Dallas	509.18	158.96	125.07	168.14	521.10	411.63	561.90	3,100.00
El Paso Health - El Paso	509.18	143.11	103.24	112.96	521.10	399.90	561.90	3,100.00
Superior - El Paso	509.18	111.29	86.24	117.07	521.10	398.33	561.90	3,100.00
Amerigroup - Harris	509.18	145.04	114.58	181.16	521.10	561.45	561.90	3,100.00
CHC - Harris	509.18	159.24	128.34	165.65	521.10	601.26	561.90	3,100.00
Molina - Harris	509.18	102.29	116.15	98.06	521.10	511.16	561.90	3,100.00
TCHP - Harris	509.18	180.25	158.72	203.32	521.10	600.13	561.90	3,100.00
United - Harris	509.18	139.96	128.23	166.43	521.10	587.78	561.90	3,100.00
Amerigroup - Jefferson	509.18	185.44	138.67	153.78	521.10	669.69	561.90	3,100.00
CHC - Jefferson	509.18	131.01	104.99	363.79	521.10	589.56	561.90	3,100.00
Molina - Jefferson	509.18	110.81	136.58	108.81	521.10	550.85	561.90	3,100.00
TCHP - Jefferson	509.18	147.54	179.25	243.56	521.10	603.64	561.90	3,100.00
United - Jefferson	509.18	152.66	184.51	148.45	521.10	602.10	561.90	3,100.00
Firstcare - Lubbock	509.18	130.31	104.71	140.93	521.10	451.55	561.90	3,100.00
Superior - Lubbock	509.18	119.28	102.86	105.62	521.10	416.92	561.90	3,100.00
United - Nueces	509.18	153.35	129.99	139.30	521.10	494.99	561.90	3,100.00
Driscoll - Nueces	509.18	180.80	164.59	194.74	521.10	572.92	561.90	3,100.00
Superior - Nueces	509.18	146.08	142.82	233.79	521.10	541.73	561.90	3,100.00
Aetna - Tarrant	509.18	100.06	96.76	139.91	521.10	426.10	561.90	3,100.00
Amerigroup - Tarrant	509.18	115.82	117.30	148.40	521.10	455.00	561.90	3,100.00
Cook - Tarrant	509.18	149.43	131.32	158.93	521.10	429.70	561.90	3,100.00
BCBS - Travis	509.18	136.07	101.12	113.66	521.10	464.69	561.90	3,100.00
DCHP - Travis	509.18	143.09	128.79	116.94	521.10	453.03	561.90	3,100.00
Superior - Travis	509.18	153.04	109.80	124.89	521.10	450.94	561.90	3,100.00
Molina - RSA	509.18	104.72	102.22	122.41	521.10	433.85	561.90	3,100.00
Superior - RSA	509.18	120.91	109.94	137.32	521.10	456.48	561.90	3,100.00

FY2020 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2020 Medical Premium Rates pppm								
Aetna - Bexar	378.44	103.91	78.61	84.05	511.84	306.07	407.15	3,100.00
Amerigroup - Bexar	378.44	106.75	65.79	60.89	511.84	260.50	407.15	3,100.00
CFHP - Bexar	378.44	113.87	97.52	89.18	511.84	349.52	407.15	3,100.00
Superior - Bexar	378.44	121.94	80.81	84.56	511.84	339.41	407.15	3,100.00
Amerigroup - Dallas	378.44	142.96	92.41	136.89	511.84	369.37	407.15	3,100.00
Molina - Dallas	378.44	173.03	69.92	84.91	511.84	336.72	407.15	3,100.00
Parkland - Dallas	378.44	153.87	94.84	133.57	511.84	384.00	407.15	3,100.00
El Paso Health - El Paso	378.44	90.35	75.69	92.27	511.84	336.28	407.15	3,100.00
Superior - El Paso	378.44	116.00	70.66	85.68	511.84	337.28	407.15	3,100.00
Amerigroup - Harris	378.44	133.13	75.79	118.59	511.84	433.50	407.15	3,100.00
CHC - Harris	378.44	143.91	97.86	138.89	511.84	487.12	407.15	3,100.00
Molina - Harris	378.44	80.72	82.18	70.42	511.84	420.71	407.15	3,100.00
TCHP - Harris	378.44	144.31	113.98	167.56	511.84	482.49	407.15	3,100.00
United - Harris	378.44	154.63	93.99	125.35	511.84	464.22	407.15	3,100.00
Amerigroup - Jefferson	378.44	137.95	159.95	88.02	511.84	416.42	407.15	3,100.00
CHC - Jefferson	378.44	144.62	87.70	90.52	511.84	597.32	407.15	3,100.00
Molina - Jefferson	378.44	62.52	85.57	115.35	511.84	516.18	407.15	3,100.00
TCHP - Jefferson	378.44	144.21	135.61	157.34	511.84	553.41	407.15	3,100.00
United - Jefferson	378.44	163.99	109.15	145.37	511.84	438.26	407.15	3,100.00
Firstcare - Lubbock	378.44	117.69	68.46	115.41	511.84	355.02	407.15	3,100.00
Superior - Lubbock	378.44	97.86	64.73	122.45	511.84	323.28	407.15	3,100.00
United - Nueces	378.44	113.20	67.93	86.93	511.84	252.21	407.15	3,100.00
Driscoll - Nueces	378.44	155.31	131.22	165.90	511.84	387.28	407.15	3,100.00
Superior - Nueces	378.44	143.11	92.49	155.65	511.84	369.83	407.15	3,100.00
Aetna - Tarrant	378.44	104.88	68.54	87.94	511.84	325.92	407.15	3,100.00
Amerigroup - Tarrant	378.44	96.68	79.17	92.72	511.84	334.01	407.15	3,100.00
Cook - Tarrant	378.44	128.44	93.41	116.87	511.84	333.91	407.15	3,100.00
BCBS - Travis	378.44	130.22	90.61	92.47	511.84	446.00	407.15	3,100.00
DCHP - Travis	378.44	124.25	76.36	105.91	511.84	412.44	407.15	3,100.00
Superior - Travis	378.44	148.09	80.06	93.22	511.84	450.71	407.15	3,100.00
Molina - RSA	378.44	94.26	69.13	88.45	511.84	351.74	407.15	3,100.00
Superior - RSA	378.44	108.09	74.78	92.77	511.84	361.91	407.15	3,100.00

FY2020 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2020 Prescription Drug Premium Rates pppm								
Aetna - Bexar	16.13	17.48	28.39	44.81	5.38	64.68	89.52	
Amerigroup - Bexar	16.13	22.52	42.77	20.26	5.38	48.07	89.52	
CFHP - Bexar	16.13	19.15	35.22	47.55	5.38	73.86	89.52	
Superior - Bexar	16.13	20.51	29.18	45.08	5.38	71.72	89.52	
Amerigroup - Dallas	16.13	16.02	29.09	35.38	5.38	32.91	89.52	
Molina - Dallas	16.13	19.39	22.01	21.95	5.38	30.00	89.52	
Parkland - Dallas	16.13	17.24	29.85	34.52	5.38	34.22	89.52	
El Paso Health - El Paso	16.13	43.81	28.12	59.40	5.38	71.41	89.52	
Superior - El Paso	16.13	56.24	26.25	55.16	5.38	71.62	89.52	
Amerigroup - Harris	16.13	25.97	31.68	29.92	5.38	93.38	89.52	
CHC - Harris	16.13	14.93	27.14	27.88	5.38	93.47	89.52	
Molina - Harris	16.13	13.81	33.12	16.60	5.38	71.94	89.52	
TCHP - Harris	16.13	14.97	31.61	33.64	5.38	92.58	89.52	
United - Harris	16.13	16.04	26.07	25.17	5.38	89.08	89.52	
Amerigroup - Jefferson	16.13	18.17	276.53	25.41	5.38	78.58	89.52	
CHC - Jefferson	16.13	23.80	37.20	38.58	5.38	149.46	89.52	
Molina - Jefferson	16.13	11.49	28.33	29.43	5.38	69.05	89.52	
TCHP - Jefferson	16.13	17.95	43.95	45.45	5.38	112.53	89.52	
United - Jefferson	16.13	17.96	70.25	53.61	5.38	67.98	89.52	
Firstcare - Lubbock	16.13	14.46	34.43	42.13	5.38	76.86	89.52	
Superior - Lubbock	16.13	13.74	31.14	46.38	5.38	70.86	89.52	
United - Nueces	16.13	29.38	28.83	23.20	5.38	77.36	89.52	
Driscoll - Nueces	16.13	28.04	50.78	37.50	5.38	83.03	89.52	
Superior - Nueces	16.13	33.69	46.25	44.82	5.38	62.77	89.52	
Aetna - Tarrant	16.13	11.78	25.86	29.71	5.38	120.53	89.52	
Amerigroup - Tarrant	16.13	10.86	29.87	31.32	5.38	123.52	89.52	
Cook - Tarrant	16.13	14.43	35.25	39.48	5.38	123.48	89.52	
BCBS - Travis	16.13	13.51	42.31	31.57	5.38	44.29	89.52	
DCHP - Travis	16.13	12.89	35.66	36.16	5.38	40.96	89.52	
Superior - Travis	16.13	15.36	37.38	31.82	5.38	44.76	89.52	
Molina - RSA	16.13	17.08	35.06	32.99	5.38	75.54	89.52	
Superior - RSA	16.13	19.59	37.93	34.60	5.38	77.72	89.52	

FY2020 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2020 Total Premium Rates pmpm								
Aetna - Bexar	394.57	121.39	107.00	128.86	517.22	370.75	496.67	3,100.00
Amerigroup - Bexar	394.57	129.27	108.56	81.15	517.22	308.57	496.67	3,100.00
CFHP - Bexar	394.57	133.02	132.74	136.73	517.22	423.38	496.67	3,100.00
Superior - Bexar	394.57	142.45	109.99	129.64	517.22	411.13	496.67	3,100.00
Amerigroup - Dallas	394.57	158.98	121.50	172.27	517.22	402.28	496.67	3,100.00
Molina - Dallas	394.57	192.42	91.93	106.86	517.22	366.72	496.67	3,100.00
Parkland - Dallas	394.57	171.11	124.69	168.09	517.22	418.22	496.67	3,100.00
El Paso Health - El Paso	394.57	134.16	103.81	151.67	517.22	407.69	496.67	3,100.00
Superior - El Paso	394.57	172.24	96.91	140.84	517.22	408.90	496.67	3,100.00
Amerigroup - Harris	394.57	159.10	107.47	148.51	517.22	526.88	496.67	3,100.00
CHC - Harris	394.57	158.84	125.00	166.77	517.22	580.59	496.67	3,100.00
Molina - Harris	394.57	94.53	115.30	87.02	517.22	492.65	496.67	3,100.00
TCHP - Harris	394.57	159.28	145.59	201.20	517.22	575.07	496.67	3,100.00
United - Harris	394.57	170.67	120.06	150.52	517.22	553.30	496.67	3,100.00
Amerigroup - Jefferson	394.57	156.12	436.48	113.43	517.22	495.00	496.67	3,100.00
CHC - Jefferson	394.57	168.42	124.90	129.10	517.22	746.78	496.67	3,100.00
Molina - Jefferson	394.57	74.01	113.90	144.78	517.22	585.23	496.67	3,100.00
TCHP - Jefferson	394.57	162.16	179.56	202.79	517.22	665.94	496.67	3,100.00
United - Jefferson	394.57	181.95	179.40	198.98	517.22	506.24	496.67	3,100.00
Firstcare - Lubbock	394.57	132.15	102.89	157.54	517.22	431.88	496.67	3,100.00
Superior - Lubbock	394.57	111.60	95.87	168.83	517.22	394.14	496.67	3,100.00
United - Nueces	394.57	142.58	96.76	110.13	517.22	329.57	496.67	3,100.00
Driscoll - Nueces	394.57	183.35	182.00	203.40	517.22	470.31	496.67	3,100.00
Superior - Nueces	394.57	176.80	138.74	200.47	517.22	432.60	496.67	3,100.00
Aetna - Tarrant	394.57	116.66	94.40	117.65	517.22	446.45	496.67	3,100.00
Amerigroup - Tarrant	394.57	107.54	109.04	124.04	517.22	457.53	496.67	3,100.00
Cook - Tarrant	394.57	142.87	128.66	156.35	517.22	457.39	496.67	3,100.00
BCBS - Travis	394.57	143.73	132.92	124.04	517.22	490.29	496.67	3,100.00
DCHP - Travis	394.57	137.14	112.02	142.07	517.22	453.40	496.67	3,100.00
Superior - Travis	394.57	163.45	117.44	125.04	517.22	495.47	496.67	3,100.00
Molina - RSA	394.57	111.34	104.19	121.44	517.22	427.28	496.67	3,100.00
Superior - RSA	394.57	127.68	112.71	127.37	517.22	439.63	496.67	3,100.00

FY2020 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2020 Medical Premium Rate Change								
Aetna - Bexar	-23.4%	-10.6%	8.1%	-18.4%	-0.6%	-2.0%	-12.7%	0.0%
Amerigroup - Bexar	-23.4%	27.5%	-1.3%	58.7%	-0.6%	-13.9%	-12.7%	0.0%
CFHP - Bexar	-23.4%	2.1%	15.1%	-5.0%	-0.6%	-1.5%	-12.7%	0.0%
Superior - Bexar	-23.4%	20.3%	4.7%	-5.8%	-0.6%	-6.8%	-12.7%	0.0%
Amerigroup - Dallas	-23.4%	14.3%	-7.9%	8.4%	-0.6%	2.1%	-12.7%	0.0%
Molina - Dallas	-23.4%	79.8%	-19.6%	-9.5%	-0.6%	2.3%	-12.7%	0.0%
Parkland - Dallas	-23.4%	10.3%	1.2%	1.5%	-0.6%	0.6%	-12.7%	0.0%
El Paso Health - El Paso	-23.4%	-15.2%	-2.3%	9.2%	-0.6%	0.7%	-12.7%	0.0%
Superior - El Paso	-23.4%	40.0%	9.2%	-2.1%	-0.6%	1.4%	-12.7%	0.0%
Amerigroup - Harris	-23.4%	3.3%	-2.4%	-13.1%	-0.6%	-9.6%	-12.7%	0.0%
CHC - Harris	-23.4%	-0.8%	-3.0%	3.9%	-0.6%	-5.2%	-12.7%	0.0%
Molina - Harris	-23.4%	-10.9%	2.5%	9.7%	-0.6%	-3.7%	-12.7%	0.0%
TCHP - Harris	-23.4%	-12.1%	-8.7%	2.1%	-0.6%	-5.9%	-12.7%	0.0%
United - Harris	-23.4%	24.3%	-1.9%	-7.2%	-0.6%	-7.6%	-12.7%	0.0%
Amerigroup - Jefferson	-23.4%	-15.0%	141.4%	-28.2%	-0.6%	-28.1%	-12.7%	0.0%
CHC - Jefferson	-23.4%	28.6%	10.5%	-72.5%	-0.6%	17.1%	-12.7%	0.0%
Molina - Jefferson	-23.4%	-30.8%	-20.1%	49.3%	-0.6%	8.3%	-12.7%	0.0%
TCHP - Jefferson	-23.4%	11.0%	9.7%	-18.2%	-0.6%	6.0%	-12.7%	0.0%
United - Jefferson	-23.4%	20.8%	18.8%	57.5%	-0.6%	-15.9%	-12.7%	0.0%
Firstcare - Lubbock	-23.4%	0.6%	-4.2%	18.0%	-0.6%	-7.8%	-12.7%	0.0%
Superior - Lubbock	-23.4%	-8.6%	-7.8%	67.0%	-0.6%	-9.1%	-12.7%	0.0%
United - Nueces	-23.4%	-18.2%	-28.3%	-23.9%	-0.6%	-36.7%	-12.7%	0.0%
Driscoll - Nueces	-23.4%	-4.9%	9.3%	3.9%	-0.6%	-16.0%	-12.7%	0.0%
Superior - Nueces	-23.4%	13.8%	-6.5%	-15.7%	-0.6%	-15.2%	-12.7%	0.0%
Aetna - Tarrant	-23.4%	21.5%	-2.8%	-18.6%	-0.6%	0.4%	-12.7%	0.0%
Amerigroup - Tarrant	-23.4%	-7.3%	-8.8%	-13.7%	-0.6%	-3.6%	-12.7%	0.0%
Cook - Tarrant	-23.4%	-4.5%	-3.9%	1.6%	-0.6%	2.0%	-12.7%	0.0%
BCBS - Travis	-23.4%	7.1%	31.0%	10.0%	-0.6%	4.8%	-12.7%	0.0%
DCHP - Travis	-23.4%	-2.8%	-13.3%	22.4%	-0.6%	-0.6%	-12.7%	0.0%
Superior - Travis	-23.4%	8.3%	6.6%	0.9%	-0.6%	9.2%	-12.7%	0.0%
Molina - RSA	-23.4%	7.3%	3.6%	0.0%	-0.6%	-2.8%	-12.7%	0.0%
Superior - RSA	-23.4%	6.6%	4.2%	-6.5%	-0.6%	-4.9%	-12.7%	0.0%

FY2020 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2020 Prescription Drug Premium Rate Change								
Aetna - Bexar	7.7%	1.5%	-6.4%	-1.8%	-12.5%	27.4%	-6.2%	
Amerigroup - Bexar	7.7%	58.7%	22.3%	32.4%	-12.5%	-2.2%	-6.2%	
CFHP - Bexar	7.7%	15.8%	-0.4%	14.4%	-12.5%	28.1%	-6.2%	
Superior - Bexar	7.7%	40.7%	-15.9%	27.1%	-12.5%	21.1%	-6.2%	
Amerigroup - Dallas	7.7%	-8.5%	-13.2%	0.7%	-12.5%	16.2%	-6.2%	
Molina - Dallas	7.7%	44.1%	-24.2%	-16.0%	-12.5%	16.4%	-6.2%	
Parkland - Dallas	7.7%	-11.6%	-4.7%	-5.7%	-12.5%	14.4%	-6.2%	
El Paso Health - El Paso	7.7%	19.9%	9.0%	108.6%	-12.5%	8.1%	-6.2%	
Superior - El Paso	7.7%	97.9%	21.8%	86.9%	-12.5%	8.8%	-6.2%	
Amerigroup - Harris	7.7%	61.1%	-14.2%	-33.1%	-12.5%	14.3%	-6.2%	
CHC - Harris	7.7%	5.1%	-1.1%	-12.9%	-12.5%	6.8%	-6.2%	
Molina - Harris	7.7%	18.3%	-8.0%	-51.0%	-12.5%	-3.3%	-6.2%	
TCHP - Harris	7.7%	-6.8%	-6.9%	-14.4%	-12.5%	6.0%	-6.2%	
United - Harris	7.7%	3.2%	-19.6%	-19.8%	-12.5%	4.1%	-6.2%	
Amerigroup - Jefferson	7.7%	-21.3%	281.9%	-18.6%	-12.5%	-12.9%	-6.2%	
CHC - Jefferson	7.7%	28.2%	45.0%	12.4%	-12.5%	88.1%	-6.2%	
Molina - Jefferson	7.7%	-43.8%	-3.9%	-6.7%	-12.5%	-7.0%	-6.2%	
TCHP - Jefferson	7.7%	1.9%	-21.0%	-11.1%	-12.5%	38.3%	-6.2%	
United - Jefferson	7.7%	6.0%	-24.2%	-4.6%	-12.5%	-16.2%	-6.2%	
Firstcare - Lubbock	7.7%	8.7%	3.5%	-2.3%	-12.5%	15.9%	-6.2%	
Superior - Lubbock	7.7%	12.8%	-4.7%	43.5%	-12.5%	15.7%	-6.2%	
United - Nueces	7.7%	97.2%	-18.1%	-7.6%	-12.5%	-19.9%	-6.2%	
Driscoll - Nueces	7.7%	59.6%	13.9%	6.8%	-12.5%	-25.7%	-6.2%	
Superior - Nueces	7.7%	66.1%	5.4%	-8.7%	-12.5%	-40.6%	-6.2%	
Aetna - Tarrant	7.7%	-14.2%	-1.4%	-6.8%	-12.5%	18.7%	-6.2%	
Amerigroup - Tarrant	7.7%	-5.7%	-2.1%	-23.6%	-12.5%	13.9%	-6.2%	
Cook - Tarrant	7.7%	-3.0%	3.2%	-10.1%	-12.5%	20.6%	-6.2%	
BCBS - Travis	7.7%	-6.6%	32.5%	6.8%	-12.5%	12.8%	-6.2%	
DCHP - Travis	7.7%	-15.3%	-12.3%	18.9%	-12.5%	7.0%	-6.2%	
Superior - Travis	7.7%	-5.7%	7.8%	-2.1%	-12.5%	17.5%	-6.2%	
Molina - RSA	7.7%	1.2%	-1.2%	-2.8%	-12.5%	4.8%	-6.2%	
Superior - RSA	7.7%	0.5%	-0.6%	-9.1%	-12.5%	2.5%	-6.2%	

FY2020 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2020 Total Premium Rate Change								
Aetna - Bexar	-22.5%	-9.0%	3.8%	-13.3%	-0.7%	2.1%	-11.6%	0.0%
Amerigroup - Bexar	-22.5%	32.0%	6.8%	51.2%	-0.7%	-12.2%	-11.6%	0.0%
CFHP - Bexar	-22.5%	3.9%	10.5%	1.0%	-0.7%	2.7%	-11.6%	0.0%
Superior - Bexar	-22.5%	22.8%	-1.7%	3.5%	-0.7%	-2.9%	-11.6%	0.0%
Amerigroup - Dallas	-22.5%	11.5%	-9.2%	6.7%	-0.7%	3.2%	-11.6%	0.0%
Molina - Dallas	-22.5%	75.5%	-20.8%	-10.9%	-0.7%	3.3%	-11.6%	0.0%
Parkland - Dallas	-22.5%	7.6%	-0.3%	0.0%	-0.7%	1.6%	-11.6%	0.0%
El Paso Health - El Paso	-22.5%	-6.3%	0.6%	34.3%	-0.7%	1.9%	-11.6%	0.0%
Superior - El Paso	-22.5%	54.8%	12.4%	20.3%	-0.7%	2.7%	-11.6%	0.0%
Amerigroup - Harris	-22.5%	9.7%	-6.2%	-18.0%	-0.7%	-6.2%	-11.6%	0.0%
CHC - Harris	-22.5%	-0.3%	-2.6%	0.7%	-0.7%	-3.4%	-11.6%	0.0%
Molina - Harris	-22.5%	-7.6%	-0.7%	-11.3%	-0.7%	-3.6%	-11.6%	0.0%
TCHP - Harris	-22.5%	-11.6%	-8.3%	-1.0%	-0.7%	-4.2%	-11.6%	0.0%
United - Harris	-22.5%	21.9%	-6.4%	-9.6%	-0.7%	-5.9%	-11.6%	0.0%
Amerigroup - Jefferson	-22.5%	-15.8%	214.8%	-26.2%	-0.7%	-26.1%	-11.6%	0.0%
CHC - Jefferson	-22.5%	28.6%	19.0%	-64.5%	-0.7%	26.7%	-11.6%	0.0%
Molina - Jefferson	-22.5%	-33.2%	-16.6%	33.1%	-0.7%	6.2%	-11.6%	0.0%
TCHP - Jefferson	-22.5%	9.9%	0.2%	-16.7%	-0.7%	10.3%	-11.6%	0.0%
United - Jefferson	-22.5%	19.2%	-2.8%	34.0%	-0.7%	-15.9%	-11.6%	0.0%
Firstcare - Lubbock	-22.5%	1.4%	-1.7%	11.8%	-0.7%	-4.4%	-11.6%	0.0%
Superior - Lubbock	-22.5%	-6.4%	-6.8%	59.8%	-0.7%	-5.5%	-11.6%	0.0%
United - Nueces	-22.5%	-7.0%	-25.6%	-20.9%	-0.7%	-33.4%	-11.6%	0.0%
Driscoll - Nueces	-22.5%	1.4%	10.6%	4.4%	-0.7%	-17.9%	-11.6%	0.0%
Superior - Nueces	-22.5%	21.0%	-2.9%	-14.3%	-0.7%	-20.1%	-11.6%	0.0%
Aetna - Tarrant	-22.5%	16.6%	-2.4%	-15.9%	-0.7%	4.8%	-11.6%	0.0%
Amerigroup - Tarrant	-22.5%	-7.1%	-7.0%	-16.4%	-0.7%	0.6%	-11.6%	0.0%
Cook - Tarrant	-22.5%	-4.4%	-2.0%	-1.6%	-0.7%	6.4%	-11.6%	0.0%
BCBS - Travis	-22.5%	5.6%	31.4%	9.1%	-0.7%	5.5%	-11.6%	0.0%
DCHP - Travis	-22.5%	-4.2%	-13.0%	21.5%	-0.7%	0.1%	-11.6%	0.0%
Superior - Travis	-22.5%	6.8%	7.0%	0.1%	-0.7%	9.9%	-11.6%	0.0%
Molina - RSA	-22.5%	6.3%	1.9%	-0.8%	-0.7%	-1.5%	-11.6%	0.0%
Superior - RSA	-22.5%	5.6%	2.5%	-7.2%	-0.7%	-3.7%	-11.6%	0.0%

FY2020 CHIP Rating Summary

Projected Expenditures

	Projected PMPM		Projected FY2020 Premium		% Rate Change
	FY2019 Rates	FY2020 Rates	FY2019 Rates	FY2020 Rates	
Medical (1)	127.13	126.02	642,015,492	636,424,799	-0.9%
Pharmacy	33.46	33.37	168,977,053	168,509,713	-0.3%
Dental	23.95	23.53	112,089,986	110,119,471	-1.8%
Total			923,082,532	915,053,983	-0.9%

Notes:

(1) Includes Delivery Supplemental Payments.

Attachment 2

Individual Health Plan Experience Analysis

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

Exhibit A. This exhibit shows monthly enrollment and earned premium by age group for the period September 2015 through February 2019. This information was provided by HHSC.

Exhibit B. This exhibit shows a sample of a claim lag report. This report includes claim amounts by payment month and month of service. We analyzed claims experience for each plan by age group for the period September 2015 through February 2019.

Exhibit C. This exhibit shows the calculation of estimated monthly incurred claims. The exhibit includes the following information: (i) monthly enrollment, (ii) claim amounts incurred in that month and paid through February 28, 2019, (iii) estimated proportion of that month's incurred claims paid through February 28, 2019 (completion factor), (iv) estimated incurred claims, (v) estimated incurred claims pppm and (vi) the ratio of this month's incurred claims pppm to the same statistic from one year ago (trend factor). The assumed completion factors and estimated incurred claims were derived based on the actual historical claims payment pattern of the health plan.

Exhibit D. This exhibit is a summary of the sample health plan's projected FY2020 cost based on the plan's actual experience. The top of the exhibit shows summary base period (FY2018) enrollment, premium and claims experience. Trend assumptions for FY2019 and FY2020 are used to project the average base period claims cost to FY2020. Following that are several adjustments for benefit and provider reimbursement changes.

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

The rating methodology includes an explicit provision for administrative expenses. The amount allocated for administrative expenses is \$7.50 per member per month (pppm) for the CHIP non-Perinate program and \$12.50 pppm for the CHIP Perinate program plus 5.75% of gross premium. Provisions are also included for risk margin (1.50% of gross premium), premium tax (1.75%) and maintenance tax (\$.06 pppm).

At the bottom of Exhibit D is a summary of the projected FY2020 cost based on the above assumptions.

Month	Number of Members				Total Members	Premium	Premium ppm
	<1	1-5	6-14	15-18			
Sep-15	124	5,188	15,901	5,132	26,345	1,912,339	72.59
Oct-15	114	4,896	15,278	4,918	25,206	1,827,852	72.52
Nov-15	104	4,410	14,441	4,721	23,676	1,719,029	72.61
Dec-15	98	4,151	13,842	4,541	22,632	1,643,508	72.62
Jan-16	84	3,945	13,248	4,363	21,640	1,569,212	72.51
Feb-16	80	3,778	12,940	4,286	21,084	1,529,380	72.54
Mar-16	85	3,602	12,610	4,236	20,533	1,493,965	72.76
Apr-16	72	3,458	12,326	4,107	19,963	1,448,064	72.54
May-16	68	3,360	12,063	4,013	19,504	1,413,847	72.49
Jun-16	57	3,315	11,940	3,987	19,299	1,396,455	72.36
Jul-16	54	3,298	11,968	4,010	19,330	1,398,322	72.34
Aug-16	48	3,276	11,957	4,033	19,314	1,396,413	72.30
Sep-16	52	3,228	11,979	4,045	19,304	1,497,835	77.59
Oct-16	44	3,134	11,888	3,989	19,055	1,473,875	77.35
Nov-16	45	3,062	11,636	3,994	18,737	1,453,300	77.56
Dec-16	46	3,004	11,658	3,966	18,674	1,446,630	77.47
Jan-17	43	2,927	11,618	3,986	18,574	1,438,250	77.43
Feb-17	42	2,904	11,562	3,948	18,456	1,428,000	77.37
Mar-17	45	2,878	11,497	3,941	18,361	1,422,305	77.46
Apr-17	45	2,910	11,557	3,950	18,463	1,430,030	77.46
May-17	45	2,927	11,645	3,985	18,603	1,440,864	77.45
Jun-17	46	2,950	11,747	4,021	18,764	1,453,372	77.46
Jul-17	46	2,982	11,862	4,058	18,949	1,467,683	77.45
Aug-17	47	3,013	11,992	4,103	19,155	1,483,648	77.45
Sep-17	46	3,002	11,971	4,090	19,109	1,449,030	75.83
Oct-17	45	2,991	11,950	4,077	19,063	1,444,963	75.80
Nov-17	44	2,980	11,929	4,064	19,017	1,440,896	75.77
Dec-17	43	2,969	11,908	4,051	18,971	1,436,829	75.74
Jan-18	42	2,958	11,887	4,038	18,925	1,432,762	75.71
Feb-18	41	2,947	11,866	4,025	18,879	1,428,695	75.67
Mar-18	40	2,936	11,845	4,012	18,833	1,424,628	75.64
Apr-18	44	2,964	11,847	4,040	18,895	1,431,973	75.79
May-18	44	2,994	11,965	4,080	19,083	1,446,064	75.78
Jun-18	43	3,024	12,085	4,121	19,273	1,459,960	75.75
Jul-18	43	3,039	12,145	4,142	19,369	1,467,176	75.75
Aug-18	47	3,059	12,226	4,170	19,502	1,478,560	75.82
Sep-18	47	3,065	12,252	4,179	19,543	1,561,595	79.91
Oct-18	47	3,068	12,264	4,183	19,562	1,563,110	79.91
Nov-18	47	3,075	12,292	4,193	19,607	1,566,706	79.91
Dec-18	45	3,078	12,304	4,197	19,624	1,567,980	79.90
Jan-19	48	3,081	12,316	4,201	19,646	1,569,858	79.91
Feb-19	46	3,084	12,328	4,205	19,663	1,571,132	79.90
FY2016	988	46,677	158,514	52,347	258,526	18,748,386	72.52
FY2017	547	35,920	140,641	47,987	225,095	17,435,792	77.46
FY2018	520	35,865	143,623	48,913	228,922	17,341,535	75.75

Sample Health Plan
CHIP Incurred Claims Summary Lag Report

Attachment 2 - Exhibit B

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

Sample Health Plan
Estimated Claims Experience

Attachment 2 - Exhibit C

Month	Ages 6-14						Ages 15-18					
	Members	Inc & Pd Claims	Compl Factor	Est. Inc. Claims	Est. Inc. pmpm	Trend Factor	Members	Inc & Pd Claims	Compl Factor	Est. Inc. Claims	Est. Inc. pmpm	Trend Factor
Nov-18	12,292	568,615	0.998	569,754	46.35	0.837	4,193	160,190	0.988	162,135	38.67	1.051
Dec-18	12,304	527,662	0.992	531,917	43.23	0.897	4,197	140,761	0.980	143,634	34.22	0.969
Jan-19	12,316	480,186	0.956	502,287	40.78	0.763	4,201	120,835	0.930	129,930	30.93	0.678
Feb-19	12,328	37,308	0.758	49,220	3.99	0.091	4,205	117,532	0.650	180,819	43.00	1.041
FY2016	158,514			6,528,516	41.19		52,347			1,948,470	37.22	
FY2017	140,641			8,824,296	62.74	1.523	47,987			1,689,551	35.21	0.946
FY2018	143,623			7,559,003	52.63	0.839	48,913			2,128,554	43.52	1.236

Sample Health Plan

Experienced Based Renewal Rating

Projection Period: FY2020 (9/1/2019 - 8/31/2020)

Attachment 2 - Exhibit D

	<1		1-5		6-14		15-18		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience 9/1/2017 - 8/31/2018										
Member Months	520		35,865		143,623		48,913		228,922	
Premium Revenue	221,417	425.65	3,075,099	85.74	8,653,311	60.25	5,391,708	110.23	17,341,535	75.75
Adjusted Premium (Current Rates)	62,813	120.75	3,057,884	85.26	10,768,883	74.98	4,400,236	89.96	18,289,816	79.90
Estimated Incurred Claims	48,251	92.76	2,254,965	62.87	7,559,003	52.63	2,128,554	43.52	11,990,773	52.38
Projected FY2020 Member Months	335		27,561		119,625		44,598		192,119	
Projected FY2020 Premium Current Rates	40,451	120.75	2,349,851	85.26	8,969,483	74.98	4,012,036	89.96	15,371,821	80.01
Annual Trend Assumptions										
FY2019	2.9 %		2.9 %		2.9 %		2.9 %			
FY2020	2.8 %		2.8 %		2.8 %		2.8 %			
Provider Reimbursement Changes	0.9985		1.0012		0.9878		0.9998			
Other Reimbursement Changes	0.9798		0.9811		0.9811		0.9806			
Inpatient Reimbursement Changes	0.9891		0.9912		0.9844		0.9902			
Projected Incurred Claims	31,820	94.99	1,785,334	64.78	6,356,102	53.13	1,993,669	44.70	10,166,925	52.92
Capitation Expenses										
Vision		1.00		1.00		1.00		1.00		
Behavioral Health		2.50		2.50		2.50		2.50		
Other		0.50		0.50		0.50		0.50		
Total	1,340	4.00	110,244	4.00	478,500	4.00	178,392	4.00	768,476	4.00
Reinsurance Expenses										
Gross Premium		1.25		1.25		1.25		1.25		
Projected Reinsurance Recoveries		0.75		0.75		0.75		0.75		
Net Reinsurance Cost	168	0.50	13,781	0.50	59,813	0.50	22,299	0.50	96,060	0.50

Sample Health Plan

Experienced Based Renewal Rating

Projection Period: FY2020 (9/1/2019 - 8/31/2020)

Attachment 2 - Exhibit D

	<1		1-5		6-14		15-18		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Administrative Expenses										
Fixed Amount	2,513	7.50	206,708	7.50	897,188	7.50	334,485	7.50	1,440,893	7.50
Percentage of Premium	5.75 %	6.76	5.75 %	4.86	5.75 %	4.12	5.75 %	3.59	5.75 %	4.11
Risk Margin	1.50 %	1.76	1.50 %	1.27	1.50 %	1.07	1.50 %	0.94	1.50 %	1.07
Premium Tax	1.75 %	2.06	1.75 %	1.48	1.75 %	1.25	1.75 %	1.09	1.75 %	1.25
Maintenance Tax	20	0.060	1,654	0.060	7,178	0.060	2,676	0.060	11,527	0.060
Projected Total Cost	39,407	117.63	2,327,164	84.44	8,570,087	71.64	2,781,891	62.38	13,718,549	71.41
Experience Rate Increase		-2.6%		-1.0%		-4.5%		-30.7%		-10.8%

Attachment 3

Community Experience Analysis - Medical

The following exhibits present a summary of the experience analysis performed for each service area. HHSC utilizes an adjusted community rating methodology in setting the CHIP premium rates. The base community rates by age group vary by service area but are the same for each health plan in a service area. The community rates are developed by a weighted average of the projected FY2020 cost for each health plan in the service area. The weights used in this formula are the projected number of FY2020 members enrolled in each health plan.

Below is a brief description of each of the exhibits contained in the attachment. The exhibits present the derivation of the FY2020 CHIP medical community premium rates for the following service areas:

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

These exhibits show projected FY2020 experience for each of the service areas. These amounts were derived by summing amounts from each individual health plan in the service area. The experience analysis for individual HMOs is described in Attachment 2. The top of the exhibit shows summary base period (FY2018) enrollment, premium and claims experience. Trend assumptions for FY2019 and FY2020 are used to project the average base period claims cost to FY2020. Following that are several adjustments to the base period claims cost to account for benefit and provider reimbursement changes.

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

The rating methodology includes an explicit provision for administrative expenses. The amount allocated for administrative expenses is \$7.50 per member per month (pppm) for the CHIP non-Perinate program and \$12.50 pppm for the CHIP Perinate program plus 5.75% of gross premium. Provisions are also included for risk margin (1.50% of gross premium), premium tax (1.75%) and maintenance tax (\$.06 pppm).

At the bottom of the exhibit is a summary of the projected FY2020 cost based on these assumptions. Cost projections are presented both with and without the inclusion of maternity expenses.

Community Experience Analysis – Pharmacy

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

Below is a brief description of the exhibits contained in this attachment. The exhibits present the derivation of the FY2020 CHIP pharmacy community capitation rates for the following service areas:

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

These exhibits present projected FY2020 experience for each service area and risk group. These amounts were derived by summing amounts from each individual health plan in the service area. The experience analysis for individual health plans is described in Attachment 2. The top portion of the exhibit shows summary base period (CY2018) experience and projected FY2020 enrollment and incurred claims experience.

A provision for administrative expenses is included in the amount of \$1.80 pppm. Additional provisions are also included for premium tax (1.75% of premium) and risk margin (1.50% of premium).

The bottom of the exhibit shows a summary of the projected FY2020 cost based on these assumptions.

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	72		89,482		215,208		80,216	
Estimated Incurred Claims								
Professional	4,646	64.52	4,669,183	52.18	5,761,212	26.77	2,030,016	25.31
Emergency Room	1,171	16.27	544,432	6.08	1,035,202	4.81	508,157	6.33
Outpatient Facility	428	5.94	1,248,729	13.96	2,908,290	13.51	912,713	11.38
Inpatient Facility	0	0.00	948,361	10.60	2,576,269	11.97	684,495	8.53
Others	10	0.14	755,782	8.45	2,472,363	11.49	1,217,243	15.17
Total	6,254	86.87	8,166,487	91.26	14,753,335	68.55	5,352,624	66.73
Projected FY2020 Member Months	62		91,356		207,924		75,276	
Projected FY2020 Premiums								
Current Rates	30,641	494.21	9,786,238	107.12	16,794,290	80.77	6,910,565	91.80
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions								
FY2019		2.9 %		2.9 %		2.9 %		2.9 %
FY2020		2.8 %		2.8 %		2.8 %		2.8 %
Provider Reimbursement Change	1.0042		1.0088		1.0011		1.0006	
Other Reimbursement Change	1.0031		0.9992		1.0021		1.0017	
Inpatient Reimbursement Change	1.0000		1.0027		1.0050		1.0032	
FQHC Wrap Adjustment	1.0000		0.9929		0.9941		0.9962	
Projected Incurred Claims	5,741	92.60	8,854,503	96.92	15,118,306	72.71	5,324,615	70.73
Capitation & Other Expenses/Refunds								
Total	-25	-0.40	95,115	1.04	270,572	1.30	93,424	1.24
Reinsurance Expenses								
Net Reinsurance Cost	12	0.19	16,148	0.18	39,164	0.19	14,514	0.19
Administrative Expenses								
Fixed Amount	465	7.50	685,170	7.50	1,559,430	7.50	564,570	7.50
Percentage of Premium	5.75 %	6.32	5.75 %	6.68	5.75 %	5.17	5.75 %	5.04
Risk Margin	1.50 %	1.65	1.50 %	1.74	1.50 %	1.35	1.50 %	1.31
Premium Tax	1.75 %	1.92	1.75 %	2.03	1.75 %	1.57	1.75 %	1.53
Maintenance Tax	4	0.060	5,481	0.060	12,475	0.060	4,517	0.060
Projected Total Cost	6,810	109.84	10,611,448	116.15	18,681,261	89.85	6,595,209	87.61
Adjusted Total Cost	6,810	109.84	10,611,448	116.15	18,681,261	89.85	6,595,209	87.61
Experience Rate Increase		-77.8 %		8.4 %		11.2 %		-4.6 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	93		18,190		402		403,663	
Estimated Incurred Claims								
Professional	16,212	174.32	2,592,919	142.55	91,584	227.82	15,165,772	37.57
Emergency Room	76	0.82	9,203	0.51	379	0.94	2,098,620	5.20
Outpatient Facility	162	1.74	1,090,746	59.96	17,360	43.18	6,178,428	15.31
Inpatient Facility	103,566	1,113.62	356,488	19.60	34,287	85.29	4,703,467	11.65
Others	92	0.99	1,558,813	85.70	6,339	15.77	6,010,642	14.89
Total	120,109	1,291.49	5,608,170	308.31	149,948	373.01	34,156,928	84.62
Projected FY2020 Member Months	61		15,504		312		390,495	
Projected FY2020 Premiums								
Current Rates	31,412	514.95	5,339,534	344.40	145,539	466.47	39,038,218	99.97
Current DSP Rates	0	0.00	0	0.00	69,583	223.02	69,583	0.18
Annual Trend Assumptions								
FY2019	2.2 %		2.2 %		2.2 %			
FY2020	1.8 %		1.8 %		1.8 %			
Provider Reimbursement Change	1.0000		1.0022		1.0012			
Other Reimbursement Change	1.0031		1.0031		1.0031			
Inpatient Reimbursement Change	0.9997		1.0000		1.0100			
FQHC Wrap Adjustment	0.8938		0.9050		0.9655			
Projected Incurred Claims	73,474	1,204.50	4,525,522	291.89	118,603	380.14	34,020,764	87.12
Capitation & Other Expenses/Refunds								
Total	-20	-0.33	-17,345	-1.12	-699	-2.24	441,023	1.13
Reinsurance Expenses								
Net Reinsurance Cost	4	0.06	1,682	0.11	37	0.12	71,562	0.18
Administrative Expenses								
Fixed Amount	763	12.50	193,800	12.50	3,900	12.50	3,008,098	7.70
Percentage of Premium	5.75 %	76.88	5.75 %	19.17	5.75 %	24.68	5.75 %	6.08
Risk Margin	1.50 %	20.06	1.50 %	5.00	1.50 %	6.44	1.50 %	1.59
Premium Tax	1.75 %	23.40	1.75 %	5.84	1.75 %	7.51	1.75 %	1.85
Maintenance Tax	4	0.060	930	0.060	19	0.060	23,430	0.060
Projected Total Cost	81,565	1,337.12	5,169,879	333.45	133,912	429.21	41,280,083	105.71
Adjusted Total Cost	81,565	1,337.12	5,169,879	333.45	64,330	206.18	41,210,501	105.53
Experience Rate Increase		159.7 %		-3.2 %		-55.8 %		5.6 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	171		183,053		450,332		153,024	
Estimated Incurred Claims								
Professional	19,656	114.94	7,431,350	40.60	10,043,460	22.30	3,313,685	21.65
Emergency Room	3,790	22.16	4,293,987	23.46	5,879,268	13.06	2,081,889	13.60
Outpatient Facility	8,179	47.83	6,064,001	33.13	10,336,259	22.95	6,852,626	44.78
Inpatient Facility	645	3.77	2,215,249	12.10	3,682,340	8.18	2,682,710	17.53
Others	0	0.00	1,817,520	9.93	1,885,571	4.19	1,109,115	7.25
Total	32,269	188.71	21,822,107	119.21	31,826,897	70.67	16,040,025	104.82
Projected FY2020 Member Months	96		176,760		426,816		144,288	
Projected FY2020 Premiums								
Current Rates	47,444	494.21	22,768,907	128.81	41,420,929	97.05	18,213,784	126.23
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions								
FY2019		2.9 %		2.9 %		2.9 %		2.9 %
FY2020		2.8 %		2.8 %		2.8 %		2.8 %
Provider Reimbursement Change	1.0083		1.0021		1.0013		1.0011	
Other Reimbursement Change	1.0008		1.0011		1.0007		1.0008	
Inpatient Reimbursement Change	0.9928		1.0068		1.0060		1.0090	
FQHC Wrap Adjustment	1.0000		0.9981		0.9982		0.9989	
Projected Incurred Claims	19,206	200.06	22,479,738	127.18	32,119,022	75.25	16,163,279	112.02
Capitation & Other Expenses/Refunds								
Total	86	0.90	164,970	0.93	405,018	0.95	134,300	0.93
Reinsurance Expenses								
Net Reinsurance Cost	3	0.03	4,265	0.02	10,063	0.02	3,525	0.02
Administrative Expenses								
Fixed Amount	720	7.50	1,325,700	7.50	3,201,120	7.50	1,082,160	7.50
Percentage of Premium	5.75 %	13.18	5.75 %	8.57	5.75 %	5.29	5.75 %	7.62
Risk Margin	1.50 %	3.44	1.50 %	2.24	1.50 %	1.38	1.50 %	1.99
Premium Tax	1.75 %	4.01	1.75 %	2.61	1.75 %	1.61	1.75 %	2.32
Maintenance Tax	6	0.060	10,606	0.060	25,609	0.060	8,657	0.060
Projected Total Cost	22,001	229.17	26,357,450	149.11	39,297,618	92.07	19,112,001	132.46
Adjusted Total Cost	22,001	229.17	26,357,450	149.11	39,297,618	92.07	19,112,001	132.46
Experience Rate Increase		-53.6 %		15.8 %		-5.1 %		4.9 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	237		75,436		784		863,037	
Estimated Incurred Claims								
Professional	14,398	60.75	10,930,008	144.89	233,945	298.40	31,986,503	37.06
Emergency Room	3,279	13.83	155,674	2.06	5,736	7.32	12,423,622	14.40
Outpatient Facility	11,154	47.06	13,893,438	184.18	217,228	277.08	37,382,885	43.32
Inpatient Facility	3,103	13.09	32,988	0.44	30,671	39.12	8,647,706	10.02
Others	0	0.00	2,388,334	31.66	281	0.36	7,200,821	8.34
Total	31,933	134.74	27,400,443	363.23	487,861	622.27	97,641,535	113.14
Projected FY2020 Member Months	240		66,684		768		815,652	
Projected FY2020 Premiums								
Current Rates	123,588	514.95	24,131,082	361.87	358,249	466.47	107,063,983	131.26
Current DSP Rates	0	0.00	0	0.00	200,579	261.17	200,579	0.25
Annual Trend Assumptions								
FY2019		2.2 %		2.2 %		2.2 %		
FY2020		1.8 %		1.8 %		1.8 %		
Provider Reimbursement Change	1.0034		1.0001		1.0024			
Other Reimbursement Change	1.0010		1.0010		1.0010			
Inpatient Reimbursement Change	1.0003		0.8603		0.8852			
FQHC Wrap Adjustment	0.9894		0.9876		1.0000			
Projected Incurred Claims	33,449	139.37	21,438,136	321.49	441,702	575.13	92,694,532	113.64
Capitation & Other Expenses/Refunds								
Total	32	0.14	8,748	0.13	142	0.19	713,297	0.87
Reinsurance Expenses								
Net Reinsurance Cost	10	0.04	2,675	0.04	30	0.04	20,571	0.03
Administrative Expenses								
Fixed Amount	3,000	12.50	833,550	12.50	9,600	12.50	6,455,850	7.91
Percentage of Premium	5.75 %	9.61	5.75 %	21.12	5.75 %	37.15	5.75 %	7.74
Risk Margin	1.50 %	2.51	1.50 %	5.51	1.50 %	9.69	1.50 %	2.02
Premium Tax	1.75 %	2.93	1.75 %	6.43	1.75 %	11.31	1.75 %	2.36
Maintenance Tax	14	0.060	4,001	0.060	46	0.060	48,939	0.060
Projected Total Cost	40,117	167.15	24,491,330	367.27	496,176	646.06	109,816,692	134.64
Adjusted Total Cost	40,117	167.15	24,491,330	367.27	295,598	384.89	109,616,113	134.39
Experience Rate Increase		-67.5 %		1.5 %		-17.5 %		2.4 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	23		36,841		99,255		42,121	
Estimated Incurred Claims								
Professional	1,407	61.17	1,873,685	50.86	3,341,676	33.67	1,490,529	35.39
Emergency Room	0	0.00	174,638	4.74	374,047	3.77	182,941	4.34
Outpatient Facility	0	0.00	460,777	12.51	746,441	7.52	524,016	12.44
Inpatient Facility	0	0.00	261,933	7.11	619,630	6.24	549,921	13.06
Others	0	0.00	47,141	1.28	271,682	2.74	171,598	4.07
Total	1,407	61.17	2,818,175	76.50	5,353,476	53.94	2,919,004	69.30
Projected FY2020 Member Months	48		35,436		93,732		39,156	
Projected FY2020 Premiums								
Current Rates	23,722	494.21	3,472,449	97.99	6,850,555	73.09	3,350,325	85.56
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions								
FY2019		2.9 %		2.9 %		2.9 %		2.9 %
FY2020		2.8 %		2.8 %		2.8 %		2.8 %
Provider Reimbursement Change	1.0000		0.9911		0.9934		0.9988	
Other Reimbursement Change	1.0004		0.9997		1.0001		0.9697	
Inpatient Reimbursement Change	1.0000		1.0049		1.0085		1.0102	
FQHC Wrap Adjustment	1.0000		0.9973		0.9964		0.9972	
Projected Incurred Claims	3,109	64.76	2,848,241	80.38	5,340,788	56.98	2,801,740	71.55
Capitation & Other Expenses/Refunds								
Total	126	2.62	83,979	2.37	226,379	2.42	93,846	2.40
Reinsurance Expenses								
Net Reinsurance Cost	19	0.40	12,592	0.36	34,064	0.36	14,101	0.36
Administrative Expenses								
Fixed Amount	360	7.50	265,770	7.50	702,990	7.50	293,670	7.50
Percentage of Premium	5.75 %	4.76	5.75 %	5.73	5.75 %	4.25	5.75 %	5.17
Risk Margin	1.50 %	1.24	1.50 %	1.49	1.50 %	1.11	1.50 %	1.35
Premium Tax	1.75 %	1.45	1.75 %	1.74	1.75 %	1.29	1.75 %	1.57
Maintenance Tax	3	0.060	2,126	0.060	5,624	0.060	2,349	0.060
Projected Total Cost	3,974	82.79	3,530,448	99.63	6,933,896	73.98	3,522,754	89.97
Adjusted Total Cost	3,974	82.79	3,530,448	99.63	6,933,896	73.98	3,522,754	89.97
Experience Rate Increase		-83.2 %		1.7 %		1.2 %		5.1 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	32		8,009		140		186,421	
Estimated Incurred Claims								
Professional	1,758	54.92	1,958,009	244.48	32,624	233.03	8,699,688	46.67
Emergency Room	0	0.00	454	0.06	0	0.00	732,079	3.93
Outpatient Facility	0	0.00	281,524	35.15	2,590	18.50	2,015,349	10.81
Inpatient Facility	0	0.00	-1,630	-0.20	14,850	106.07	1,444,705	7.75
Others	0	0.00	19,710	2.46	529	3.78	510,659	2.74
Total	1,758	54.92	2,258,068	281.94	50,592	361.37	13,402,479	71.89
Projected FY2020 Member Months	60		6,888		192		175,512	
Projected FY2020 Premiums								
Current Rates	30,897	514.95	2,296,827	333.45	89,562	466.47	16,114,338	91.81
Current DSP Rates	0	0.00	0	0.00	40,154	209.13	40,154	0.23
Annual Trend Assumptions								
FY2019	2.2 %		2.2 %		2.2 %			
FY2020	1.8 %		1.8 %		1.8 %			
Provider Reimbursement Change	1.0000		1.0026		1.0012			
Other Reimbursement Change	1.0004		0.9997		0.9985			
Inpatient Reimbursement Change	1.0000		1.0000		1.0002			
FQHC Wrap Adjustment	1.0000		0.9966		1.0000			
Projected Incurred Claims	3,431	57.18	2,018,605	293.06	72,193	376.01	13,088,106	74.57
Capitation & Other Expenses/Refunds								
Total	34	0.56	1,861	0.27	56	0.29	406,281	2.31
Reinsurance Expenses								
Net Reinsurance Cost	16	0.26	2,652	0.39	72	0.38	63,516	0.36
Administrative Expenses								
Fixed Amount	750	12.50	86,100	12.50	2,400	12.50	1,352,040	7.70
Percentage of Premium	5.75 %	4.46	5.75 %	19.35	5.75 %	24.59	5.75 %	5.37
Risk Margin	1.50 %	1.16	1.50 %	5.05	1.50 %	6.42	1.50 %	1.40
Premium Tax	1.75 %	1.36	1.75 %	5.89	1.75 %	7.49	1.75 %	1.63
Maintenance Tax	4	0.060	413	0.060	12	0.060	10,531	0.060
Projected Total Cost	4,652	77.54	2,318,276	336.57	82,124	427.73	16,396,125	93.42
Adjusted Total Cost	4,652	77.54	2,318,276	336.57	41,970	218.60	16,355,971	93.19
Experience Rate Increase		-84.9 %		0.9 %		-53.1 %		1.5 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	401		306,208		736,340		269,808	
Estimated Incurred Claims								
Professional	76,110	189.80	14,475,152	47.27	20,162,733	27.38	8,408,106	31.16
Emergency Room	15,700	39.15	5,306,672	17.33	9,297,358	12.63	5,434,703	20.14
Outpatient Facility	23,523	58.66	9,000,940	29.39	17,811,411	24.19	10,479,878	38.84
Inpatient Facility	26,552	66.21	4,227,248	13.81	10,013,405	13.60	7,263,783	26.92
Others	683	1.70	2,733,177	8.93	4,047,073	5.50	1,861,247	6.90
Total	142,568	355.53	35,743,189	116.73	61,331,980	83.29	33,447,716	123.97
Projected FY2020 Member Months	218		279,396		665,484		234,600	
Projected FY2020 Premiums								
Current Rates	107,738	494.21	42,686,569	152.78	74,405,124	111.81	35,112,150	149.67
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions								
FY2019		2.9 %		2.9 %		2.9 %		2.9 %
FY2020		2.8 %		2.8 %		2.8 %		2.8 %
Provider Reimbursement Change	0.9997		1.0004		0.9999		1.0006	
Other Reimbursement Change	1.0008		1.0011		1.0002		1.0011	
Inpatient Reimbursement Change	0.9941		0.9860		0.9789		0.9790	
FQHC Wrap Adjustment	0.9841		0.9956		0.9967		0.9983	
Projected Incurred Claims	80,273	368.23	33,928,775	121.44	57,234,953	86.01	30,131,414	128.44
Capitation & Other Expenses/Refunds								
Total	504	2.31	732,046	2.62	1,645,425	2.47	587,593	2.50
Reinsurance Expenses								
Net Reinsurance Cost	37	0.17	46,617	0.17	107,490	0.16	36,630	0.16
Administrative Expenses								
Fixed Amount	1,635	7.50	2,095,470	7.50	4,991,130	7.50	1,759,500	7.50
Percentage of Premium	5.75 %	23.90	5.75 %	8.33	5.75 %	6.08	5.75 %	8.76
Risk Margin	1.50 %	6.24	1.50 %	2.17	1.50 %	1.59	1.50 %	2.29
Premium Tax	1.75 %	7.27	1.75 %	2.53	1.75 %	1.85	1.75 %	2.67
Maintenance Tax	13	0.060	16,764	0.060	39,929	0.060	14,076	0.060
Projected Total Cost	90,618	415.68	40,461,178	144.82	70,350,469	105.71	35,746,387	152.37
Adjusted Total Cost	90,618	415.68	40,461,178	144.82	70,350,469	105.71	35,746,387	152.37
Experience Rate Increase		-15.9 %		-5.2 %		-5.4 %		1.8 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	386		130,883		1,388		1,445,414	
Estimated Incurred Claims								
Professional	29,787	77.17	39,031,078	298.21	505,833	364.43	82,688,798	57.21
Emergency Room	6,084	15.76	500,505	3.82	14,209	10.24	20,575,231	14.23
Outpatient Facility	7,676	19.89	12,514,351	95.61	129,205	93.09	49,966,983	34.57
Inpatient Facility	173,103	448.45	161,094	1.23	310,021	223.36	22,175,206	15.34
Others	0	0.00	2,792,988	21.34	4,824	3.48	11,439,991	7.91
Total	216,649	561.27	55,000,015	420.22	964,091	694.59	186,846,208	129.27
Projected FY2020 Member Months	492		119,544		1,428		1,301,162	
Projected FY2020 Premiums								
Current Rates	253,355	514.95	59,475,815	497.52	666,119	466.47	212,706,870	163.47
Current DSP Rates	0	0.00	0	0.00	141,706	99.23	141,706	0.11
Annual Trend Assumptions								
FY2019	2.2 %		2.2 %		2.2 %			
FY2020	1.8 %		1.8 %		1.8 %			
Provider Reimbursement Change	1.0000		1.0012		1.0014			
Other Reimbursement Change	1.0012		1.0012		1.0012			
Inpatient Reimbursement Change	1.0033		0.9981		1.0000			
FQHC Wrap Adjustment	1.0000		0.9545		0.9798			
Projected Incurred Claims	288,658	586.70	49,922,048	417.60	1,013,876	710.00	172,599,997	132.65
Capitation & Other Expenses/Refunds								
Total	450	0.91	109,508	0.92	1,181	0.83	3,076,707	2.36
Reinsurance Expenses								
Net Reinsurance Cost	75	0.15	17,382	0.15	238	0.17	208,469	0.16
Administrative Expenses								
Fixed Amount	6,150	12.50	1,494,300	12.50	17,850	12.50	10,366,035	7.97
Percentage of Premium	5.75 %	37.93	5.75 %	27.25	5.75 %	45.72	5.75 %	9.05
Risk Margin	1.50 %	9.90	1.50 %	7.11	1.50 %	11.93	1.50 %	2.36
Premium Tax	1.75 %	11.54	1.75 %	8.29	1.75 %	13.91	1.75 %	2.75
Maintenance Tax	30	0.060	7,173	0.060	86	0.060	78,070	0.060
Projected Total Cost	324,574	659.70	56,648,804	473.87	1,135,419	795.11	204,757,448	157.37
Adjusted Total Cost	324,574	659.70	56,648,804	473.87	993,713	695.88	204,615,742	157.26
Experience Rate Increase		28.1 %		-4.8 %		49.2 %		-3.8 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	8		24,979		58,172		20,437	
Estimated Incurred Claims								
Professional	3,136	392.02	1,288,418	51.58	1,920,646	33.02	712,689	34.87
Emergency Room	161	20.09	263,777	10.56	462,345	7.95	298,493	14.61
Outpatient Facility	1	0.15	607,804	24.33	937,542	16.12	628,890	30.77
Inpatient Facility	1,191	148.86	314,722	12.60	2,548,443	43.81	589,781	28.86
Others	0	0.00	140,444	5.62	240,840	4.14	133,416	6.53
Total	4,489	561.12	2,615,165	104.69	6,109,815	105.03	2,363,269	115.64
Projected FY2020 Member Months	39		21,720		51,432		16,884	
Projected FY2020 Premiums								
Current Rates	19,274	494.21	2,767,539	127.42	5,272,403	102.51	3,192,139	189.06
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions								
FY2019		2.9 %		2.9 %		2.9 %		2.9 %
FY2020		2.8 %		2.8 %		2.8 %		2.8 %
Provider Reimbursement Change		1.0000		1.0003		1.0001		1.0002
Other Reimbursement Change		1.0002		1.0001		1.0000		0.9999
Inpatient Reimbursement Change		0.9695		0.9960		1.0006		0.9858
FQHC Wrap Adjustment		1.0000		0.9953		0.9978		0.9969
Projected Incurred Claims	22,455	575.78	2,386,590	109.88	5,707,780	110.98	2,030,585	120.27
Capitation & Other Expenses/Refunds								
Total	60	1.55	44,982	2.07	108,076	2.10	34,409	2.04
Reinsurance Expenses								
Net Reinsurance Cost	2	0.06	3,027	0.14	7,250	0.14	2,222	0.13
Administrative Expenses								
Fixed Amount	293	7.50	162,900	7.50	385,740	7.50	126,630	7.50
Percentage of Premium	5.75 %	36.96	5.75 %	7.56	5.75 %	7.63	5.75 %	8.21
Risk Margin		1.50 %	9.64	1.50 %	1.97	1.50 %	1.99	1.50 %
Premium Tax		1.75 %	11.25	1.75 %	2.30	1.75 %	2.32	1.75 %
Maintenance Tax	2	0.060	1,303	0.060	3,086	0.060	1,013	0.060
Projected Total Cost	25,069	642.80	2,855,827	131.48	6,826,299	132.72	2,411,933	142.85
Adjusted Total Cost	25,069	642.80	2,855,827	131.48	6,826,299	132.72	2,411,933	142.85
Experience Rate Increase		30.1 %		3.2 %		29.5 %		-24.4 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	34		6,315		94		110,039	
Estimated Incurred Claims								
Professional	1,869	54.97	1,327,277	210.18	22,523	239.61	5,276,558	47.95
Emergency Room	211	6.20	31,442	4.98	703	7.48	1,057,132	9.61
Outpatient Facility	126	3.71	927,617	146.89	11,672	124.17	3,113,651	28.30
Inpatient Facility	2,893	85.09	10,404	1.65	25,777	274.22	3,493,211	31.75
Others	0	0.00	216,938	34.35	341	3.63	731,981	6.65
Total	5,099	149.97	2,513,678	398.05	61,017	649.11	13,672,533	124.25
Projected FY2020 Member Months	51		5,544		121		95,791	
Projected FY2020 Premiums								
Current Rates	26,262	514.95	2,897,115	522.57	56,443	466.47	14,231,175	148.56
Current DSP Rates	0	0.00	0	0.00	37,613	310.85	37,613	0.39
Annual Trend Assumptions								
FY2019	2.2 %		2.2 %		2.2 %			
FY2020	1.8 %		1.8 %		1.8 %			
Provider Reimbursement Change	1.0000		1.0005		1.0017			
Other Reimbursement Change	1.0002		0.9996		1.0002			
Inpatient Reimbursement Change	0.9984		0.9995		1.0157			
FQHC Wrap Adjustment	1.0000		0.9888		1.0000			
Projected Incurred Claims	7,948	155.84	2,269,721	409.40	83,172	687.37	12,508,251	130.58
Capitation & Other Expenses/Refunds								
Total	444	8.70	27,112	4.89	755	6.24	215,838	2.25
Reinsurance Expenses								
Net Reinsurance Cost	4	0.08	628	0.11	17	0.14	13,150	0.14
Administrative Expenses								
Fixed Amount	638	12.50	69,300	12.50	1,513	12.50	747,013	7.80
Percentage of Premium	5.75 %	11.20	5.75 %	26.98	5.75 %	44.63	5.75 %	8.90
Risk Margin	1.50 %	2.92	1.50 %	7.04	1.50 %	11.64	1.50 %	2.32
Premium Tax	1.75 %	3.41	1.75 %	8.21	1.75 %	13.58	1.75 %	2.71
Maintenance Tax	3	0.060	333	0.060	7	0.060	5,747	0.060
Projected Total Cost	9,930	194.71	2,601,201	469.19	93,916	776.17	14,824,176	154.76
Adjusted Total Cost	9,930	194.71	2,601,201	469.19	56,303	465.32	14,786,563	154.36
Experience Rate Increase		-62.2 %		-10.2 %		-0.2 %		3.9 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	29		28,427		65,251		22,020	
Estimated Incurred Claims								
Professional	1,448	49.93	1,259,691	44.31	1,698,903	26.04	660,028	29.97
Emergency Room	7	0.23	126,635	4.45	225,157	3.45	118,867	5.40
Outpatient Facility	38	1.30	583,587	20.53	659,483	10.11	414,576	18.83
Inpatient Facility	427	14.74	556,022	19.56	399,211	6.12	693,506	31.49
Others	0	0.00	155,357	5.47	330,121	5.06	137,656	6.25
Total	1,920	66.19	2,681,293	94.32	3,312,874	50.77	2,024,633	91.95
Projected FY2020 Member Months	13		27,036		63,444		21,576	
Projected FY2020 Premiums								
Current Rates	6,425	494.21	3,040,876	112.48	4,495,410	70.86	1,859,974	86.21
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions								
FY2019		2.9 %		2.9 %		2.9 %		2.9 %
FY2020		2.8 %		2.8 %		2.8 %		2.8 %
Provider Reimbursement Change		1.0000		0.9950		0.9994		0.9985
Other Reimbursement Change		1.0007		1.0014		1.0003		1.0004
Inpatient Reimbursement Change		1.0000		1.0068		1.0069		1.0165
FQHC Wrap Adjustment		1.0000		0.9955		0.9922		0.9965
Projected Incurred Claims	911	70.10	2,694,979	99.68	3,404,501	53.66	2,124,128	98.45
Capitation & Other Expenses/Refunds								
Total	7	0.56	19,901	0.74	46,375	0.73	15,749	0.73
Reinsurance Expenses								
Net Reinsurance Cost	2	0.13	8,569	0.32	19,765	0.31	6,698	0.31
Administrative Expenses								
Fixed Amount	98	7.50	202,770	7.50	475,830	7.50	161,820	7.50
Percentage of Premium	5.75 %	4.95	5.75 %	6.84	5.75 %	3.93	5.75 %	6.76
Risk Margin		1.50 %	1.29	1.50 %	1.79	1.50 %	1.03	1.50 %
Premium Tax		1.75 %	1.51	1.75 %	2.08	1.75 %	1.20	1.75 %
Maintenance Tax	1	0.060	1,622	0.060	3,807	0.060	1,295	0.060
Projected Total Cost	1,119	86.10	3,217,409	119.00	4,340,965	68.42	2,538,121	117.64
Adjusted Total Cost	1,119	86.10	3,217,409	119.00	4,340,965	68.42	2,538,121	117.64
Experience Rate Increase		-82.6 %		5.8 %		-3.4 %		36.5 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	28		4,529		90		120,374	
Estimated Incurred Claims								
Professional	1,477	52.76	883,728	195.13	13,927	154.74	4,519,202	37.54
Emergency Room	0	0.00	17,154	3.79	0	0.00	487,819	4.05
Outpatient Facility	1	0.02	344,605	76.09	2,424	26.94	2,004,714	16.65
Inpatient Facility	2,028	72.43	2,984	0.66	7,041	78.23	1,661,219	13.80
Others	0	0.00	170,637	37.68	115	1.28	793,887	6.60
Total	3,506	125.21	1,419,108	313.34	23,508	261.20	9,466,841	78.65
Projected FY2020 Member Months	25		4,260		96		116,450	
Projected FY2020 Premiums								
Current Rates	12,874	514.95	1,567,408	367.94	44,781	466.47	11,027,748	94.70
Current DSP Rates	0	0.00	0	0.00	26,040	271.25	26,040	0.22
Annual Trend Assumptions								
FY2019	2.2 %		2.2 %		2.2 %			
FY2020	1.8 %		1.8 %		1.8 %			
Provider Reimbursement Change	1.0000		1.0011		1.0000			
Other Reimbursement Change	1.0007		1.0007		1.0007			
Inpatient Reimbursement Change	1.0833		1.0000		1.0323			
FQHC Wrap Adjustment	1.0000		0.9431		1.0000			
Projected Incurred Claims	3,531	141.25	1,312,381	308.07	26,955	280.78	9,567,387	82.16
Capitation & Other Expenses/Refunds								
Total	22	0.89	2,928	0.69	60	0.63	85,043	0.73
Reinsurance Expenses								
Net Reinsurance Cost	12	0.48	1,132	0.27	19	0.20	36,197	0.31
Administrative Expenses								
Fixed Amount	313	12.50	53,250	12.50	1,200	12.50	895,280	7.69
Percentage of Premium	5.75 %	9.81	5.75 %	20.32	5.75 %	18.59	5.75 %	5.75
Risk Margin	1.50 %	2.56	1.50 %	5.30	1.50 %	4.85	1.50 %	1.50
Premium Tax	1.75 %	2.98	1.75 %	6.18	1.75 %	5.66	1.75 %	1.75
Maintenance Tax	2	0.060	256	0.060	6	0.060	6,987	0.060
Projected Total Cost	4,263	170.54	1,505,436	353.39	31,033	323.26	11,638,346	99.94
Adjusted Total Cost	4,263	170.54	1,505,436	353.39	4,993	52.01	11,612,306	99.72
Experience Rate Increase		-66.9 %		-4.0 %		-88.9 %		5.3 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	12		26,622		61,820		24,655	
Estimated Incurred Claims								
Professional	331	27.55	966,680	36.31	1,512,027	24.46	670,078	27.18
Emergency Room	0	0.00	404,854	15.21	769,648	12.45	451,110	18.30
Outpatient Facility	89	7.43	1,128,000	42.37	1,786,019	28.89	1,057,508	42.89
Inpatient Facility	0	0.00	221,460	8.32	649,190	10.50	245,753	9.97
Others	0	0.00	129,923	4.88	387,451	6.27	235,764	9.56
Total	420	34.99	2,850,918	107.09	5,104,335	82.57	2,660,213	107.90
Projected FY2020 Member Months	3		24,228		54,588		21,360	
Projected FY2020 Premiums								
Current Rates	1,483	494.21	3,811,346	157.31	6,316,825	115.72	3,475,487	162.71
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions								
FY2019		2.9 %		2.9 %		2.9 %		2.9 %
FY2020		2.8 %		2.8 %		2.8 %		2.8 %
Provider Reimbursement Change		1.0000		0.9992		0.9988		0.9992
Other Reimbursement Change		1.0166		1.0213		1.0212		1.0213
Inpatient Reimbursement Change		1.0000		1.0082		1.0087		1.0091
FQHC Wrap Adjustment		1.0000		0.9984		0.9985		0.9986
Projected Incurred Claims	113	37.64	2,820,392	116.41	4,899,852	89.76	2,507,950	117.41
Capitation & Other Expenses/Refunds								
Total	26	8.72	499,639	20.62	1,075,501	19.70	421,904	19.75
Reinsurance Expenses								
Net Reinsurance Cost	1	0.20	10,525	0.43	22,826	0.42	8,928	0.42
Administrative Expenses								
Fixed Amount	23	7.50	181,710	7.50	409,410	7.50	160,200	7.50
Percentage of Premium	5.75 %	3.42	5.75 %	9.16	5.75 %	7.42	5.75 %	9.17
Risk Margin		1.50 %	0.89	1.50 %	2.39	1.50 %	1.94	1.50 %
Premium Tax		1.75 %	1.04	1.75 %	2.79	1.75 %	2.26	1.75 %
Maintenance Tax	0	0.060	1,454	0.060	3,275	0.060	1,282	0.060
Projected Total Cost	178	59.48	3,861,230	159.37	7,044,907	129.06	3,406,883	159.50
Adjusted Total Cost	178	59.48	3,861,230	159.37	7,044,907	129.06	3,406,883	159.50
Experience Rate Increase		-88.0 %		1.3 %		11.5 %		-2.0 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	33		2,993		108		116,243	
Estimated Incurred Claims								
Professional	2,989	90.59	675,698	225.76	19,559	181.10	3,847,362	33.10
Emergency Room	178	5.38	11,415	3.81	400	3.70	1,637,605	14.09
Outpatient Facility	0	0.00	60,235	20.13	2,635	24.40	4,034,487	34.71
Inpatient Facility	572	17.32	11,785	3.94	4,631	42.88	1,133,391	9.75
Others	0	0.00	186,640	62.36	1,378	12.76	941,157	8.10
Total	3,739	113.29	945,774	316.00	28,603	264.84	11,594,001	99.74
Projected FY2020 Member Months	60		2,508		168		102,915	
Projected FY2020 Premiums								
Current Rates	30,897	514.95	1,107,546	441.61	78,367	466.47	14,821,951	144.02
Current DSP Rates	0	0.00	0	0.00	42,371	252.21	42,371	0.41
Annual Trend Assumptions								
FY2019	2.2 %		2.2 %		2.2 %			
FY2020	1.8 %		1.8 %		1.8 %			
Provider Reimbursement Change	1.0000		1.0029		1.0035			
Other Reimbursement Change	1.0215		1.0215		1.0215			
Inpatient Reimbursement Change	1.0000		1.0022		1.0110			
FQHC Wrap Adjustment	1.0000		0.9563		1.0000			
Projected Incurred Claims	7,226	120.43	809,721	322.86	47,983	285.61	11,093,237	107.79
Capitation & Other Expenses/Refunds								
Total	298	4.97	15,303	6.10	760	4.52	2,013,432	19.56
Reinsurance Expenses								
Net Reinsurance Cost	14	0.24	712	0.28	37	0.22	43,043	0.42
Administrative Expenses								
Fixed Amount	750	12.50	31,350	12.50	2,100	12.50	785,543	7.63
Percentage of Premium	5.75 %	8.73	5.75 %	21.60	5.75 %	19.14	5.75 %	8.56
Risk Margin	1.50 %	2.28	1.50 %	5.63	1.50 %	4.99	1.50 %	2.23
Premium Tax	1.75 %	2.66	1.75 %	6.57	1.75 %	5.83	1.75 %	2.61
Maintenance Tax	4	0.060	150	0.060	10	0.060	6,175	0.060
Projected Total Cost	9,112	151.87	942,018	375.61	55,923	332.88	15,320,252	148.86
Adjusted Total Cost	9,112	151.87	942,018	375.61	13,553	80.67	15,277,881	148.45
Experience Rate Increase		-70.5 %		-14.9 %		-82.7 %		3.1 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	315		249,699		586,358		221,838	
Estimated Incurred Claims								
Professional	59,949	190.32	12,207,990	48.89	16,647,679	28.39	6,651,514	29.98
Emergency Room	1,568	4.98	1,475,739	5.91	2,679,200	4.57	1,613,953	7.28
Outpatient Facility	15,431	48.99	3,142,277	12.58	4,749,193	8.10	2,458,522	11.08
Inpatient Facility	74,885	237.73	2,294,716	9.19	5,364,167	9.15	3,574,008	16.11
Others	11,304	35.89	1,652,944	6.62	3,160,245	5.39	1,415,779	6.38
Total	163,137	517.89	20,773,666	83.19	32,600,484	55.60	15,713,776	70.83
Projected FY2020 Member Months	276		242,616		561,156		205,500	
Projected FY2020 Premiums								
Current Rates	136,402	494.21	23,965,030	98.78	39,620,982	70.61	19,861,086	96.65
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions								
FY2019		2.9 %		2.9 %		2.9 %		2.9 %
FY2020		2.8 %		2.8 %		2.8 %		2.8 %
Provider Reimbursement Change	1.0006		0.9980		0.9987		0.9994	
Other Reimbursement Change	1.0016		1.0018		1.0014		1.0015	
Inpatient Reimbursement Change	1.0119		1.0074		1.0079		1.0095	
FQHC Wrap Adjustment	0.9950		0.9872		0.9874		0.9915	
Projected Incurred Claims	152,625	552.99	21,236,969	87.53	32,859,067	58.56	15,431,379	75.09
Capitation & Other Expenses/Refunds								
Total	405	1.47	172,884	0.71	362,186	0.65	145,647	0.71
Reinsurance Expenses								
Net Reinsurance Cost	30	0.11	25,206	0.10	58,708	0.10	21,546	0.10
Administrative Expenses								
Fixed Amount	2,070	7.50	1,819,620	7.50	4,208,670	7.50	1,541,250	7.50
Percentage of Premium	5.75 %	35.52	5.75 %	6.06	5.75 %	4.23	5.75 %	5.27
Risk Margin	1.50 %	9.27	1.50 %	1.58	1.50 %	1.10	1.50 %	1.38
Premium Tax	1.75 %	10.81	1.75 %	1.84	1.75 %	1.29	1.75 %	1.61
Maintenance Tax	17	0.060	14,557	0.060	33,669	0.060	12,330	0.060
Projected Total Cost	170,491	617.72	25,570,589	105.40	41,233,296	73.48	18,848,519	91.72
Adjusted Total Cost	170,491	617.72	25,570,589	105.40	41,233,296	73.48	18,848,519	91.72
Experience Rate Increase		25.0 %		6.7 %		4.1 %		-5.1 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	353		77,112		1,054		1,136,729	
Estimated Incurred Claims								
Professional	59,888	169.65	21,383,902	277.31	260,721	247.36	57,271,642	50.38
Emergency Room	1,987	5.63	317,617	4.12	3,742	3.55	6,093,806	5.36
Outpatient Facility	5,703	16.16	2,247,088	29.14	33,916	32.18	12,652,129	11.13
Inpatient Facility	85,245	241.49	35,049	0.45	137,194	130.16	11,565,264	10.17
Others	10,907	30.90	860,514	11.16	11,546	10.95	7,123,239	6.27
Total	163,729	463.82	24,844,169	322.18	447,119	424.21	94,706,080	83.31
Projected FY2020 Member Months	360		64,620		1,176		1,075,704	
Projected FY2020 Premiums								
Current Rates	185,382	514.95	24,180,760	374.20	548,569	466.47	108,498,211	100.86
Current DSP Rates	0	0.00	0	0.00	301,149	256.08	301,149	0.28
Annual Trend Assumptions								
FY2019		2.2 %		2.2 %		2.2 %		
FY2020		1.8 %		1.8 %		1.8 %		
Provider Reimbursement Change	1.0000		1.0022		1.0004			
Other Reimbursement Change	1.0018		1.0018		1.0018			
Inpatient Reimbursement Change	1.0370		1.0002		1.0799			
FQHC Wrap Adjustment	0.9900		0.9249		0.9917			
Projected Incurred Claims	178,696	496.38	20,120,952	311.37	557,190	473.80	90,536,879	84.17
Capitation & Other Expenses/Refunds								
Total	496	1.38	138,039	2.14	2,557	2.17	822,215	0.76
Reinsurance Expenses								
Net Reinsurance Cost	38	0.10	6,903	0.11	124	0.11	112,554	0.10
Administrative Expenses								
Fixed Amount	4,500	12.50	807,750	12.50	14,700	12.50	8,398,560	7.81
Percentage of Premium	5.75 %	32.25	5.75 %	20.61	5.75 %	30.88	5.75 %	5.87
Risk Margin	1.50 %	8.41	1.50 %	5.38	1.50 %	8.05	1.50 %	1.53
Premium Tax	1.75 %	9.82	1.75 %	6.27	1.75 %	9.40	1.75 %	1.79
Maintenance Tax	22	0.060	3,877	0.060	71	0.060	64,542	0.060
Projected Total Cost	201,925	560.90	23,162,112	358.44	631,474	536.97	109,818,407	102.09
Adjusted Total Cost	201,925	560.90	23,162,112	358.44	330,325	280.89	109,517,258	101.81
Experience Rate Increase		8.9 %		-4.2 %		-39.8 %		0.9 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	114		139,960		318,056		103,304	
Estimated Incurred Claims								
Professional	7,212	63.26	4,346,819	31.06	6,507,368	20.46	2,124,466	20.57
Emergency Room	2,556	22.42	1,653,983	11.82	2,860,778	8.99	998,573	9.67
Outpatient Facility	2,522	22.13	2,485,454	17.76	4,337,551	13.64	2,348,593	22.73
Inpatient Facility	4,885	42.85	2,044,963	14.61	3,169,577	9.97	1,311,899	12.70
Others	144	1.26	1,718,420	12.28	3,361,576	10.57	1,496,780	14.49
Total	17,319	151.92	12,249,639	87.52	20,236,849	63.63	8,280,311	80.15
Projected FY2020 Member Months	120		134,652		301,944		98,424	
Projected FY2020 Premiums								
Current Rates	59,305	494.21	15,453,196	114.76	27,013,112	89.46	10,928,148	111.03
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions								
FY2019		2.9 %		2.9 %		2.9 %		2.9 %
FY2020		2.8 %		2.8 %		2.8 %		2.8 %
Provider Reimbursement Change		1.0000		1.0033		1.0020		1.0015
Other Reimbursement Change		0.9994		1.0004		1.0000		0.9993
Inpatient Reimbursement Change		1.0000		1.0161		1.0148		1.0075
FQHC Wrap Adjustment		1.0000		0.9998		0.9998		0.9998
Projected Incurred Claims	19,281	160.67	12,716,833	94.44	20,669,220	68.45	8,416,353	85.51
Capitation & Other Expenses/Refunds								
Total	57	0.47	78,129	0.58	187,316	0.62	62,545	0.64
Reinsurance Expenses								
Net Reinsurance Cost	45	0.37	35,220	0.26	80,280	0.27	25,372	0.26
Administrative Expenses								
Fixed Amount	900	7.50	1,009,890	7.50	2,264,580	7.50	738,180	7.50
Percentage of Premium	5.75 %	10.68	5.75 %	6.50	5.75 %	4.86	5.75 %	5.94
Risk Margin		1.50 %	2.79	1.50 %	1.70	1.50 %	1.27	1.50 %
Premium Tax		1.75 %	3.25	1.75 %	1.98	1.75 %	1.48	1.75 %
Maintenance Tax	7	0.060	8,079	0.060	18,117	0.060	5,905	0.060
Projected Total Cost	22,296	185.80	15,217,749	113.02	25,515,947	84.51	10,163,029	103.26
Adjusted Total Cost	22,296	185.80	15,217,749	113.02	25,515,947	84.51	10,163,029	103.26
Experience Rate Increase		-62.4 %		-1.5 %		-5.5 %		-7.0 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	176		36,708		633		598,951	
Estimated Incurred Claims								
Professional	23,895	135.77	4,807,770	130.97	190,835	301.48	18,008,365	30.07
Emergency Room	447	2.54	71,439	1.95	11,771	18.60	5,599,546	9.35
Outpatient Facility	3,579	20.33	3,225,806	87.88	61,838	97.69	12,465,343	20.81
Inpatient Facility	4,671	26.54	1,316	0.04	51,945	82.06	6,589,255	11.00
Others	0	0.00	2,285,972	62.27	4,666	7.37	8,867,558	14.81
Total	32,591	185.18	10,392,303	283.11	321,055	507.20	51,530,068	86.03
Projected FY2020 Member Months	120		32,796		576		568,632	
Projected FY2020 Premiums								
Current Rates	61,794	514.95	10,954,243	334.01	268,687	466.47	64,738,484	113.85
Current DSP Rates	0	0.00	0	0.00	79,906	138.73	79,906	0.14
Annual Trend Assumptions								
FY2019		2.2 %		2.2 %		2.2 %		
FY2020		1.8 %		1.8 %		1.8 %		
Provider Reimbursement Change	1.0000		1.0013		1.0007			
Other Reimbursement Change	0.9998		1.0004		1.0003			
Inpatient Reimbursement Change	1.0092		1.0002		1.0096			
FQHC Wrap Adjustment	1.0000		0.9801		0.9944			
Projected Incurred Claims	23,332	194.43	9,487,389	289.28	305,512	530.40	51,637,919	90.81
Capitation & Other Expenses/Refunds								
Total	0	0.00	-493	-0.02	0	0.00	327,554	0.58
Reinsurance Expenses								
Net Reinsurance Cost	36	0.30	10,098	0.31	211	0.37	151,261	0.27
Administrative Expenses								
Fixed Amount	1,500	12.50	409,950	12.50	7,200	12.50	4,432,200	7.79
Percentage of Premium	5.75 %	13.10	5.75 %	19.09	5.75 %	34.33	5.75 %	6.29
Risk Margin	1.50 %	3.42	1.50 %	4.98	1.50 %	8.96	1.50 %	1.64
Premium Tax	1.75 %	3.99	1.75 %	5.81	1.75 %	10.45	1.75 %	1.91
Maintenance Tax	7	0.060	1,968	0.060	35	0.060	34,118	0.060
Projected Total Cost	27,335	227.79	10,888,914	332.02	343,909	597.06	62,179,179	109.35
Adjusted Total Cost	27,335	227.79	10,888,914	332.02	264,003	458.34	62,099,273	109.21
Experience Rate Increase		-55.8 %		-0.6 %		-1.7 %		-4.1 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	36		78,868		173,453		57,735	
Estimated Incurred Claims								
Professional	4,462	123.94	4,322,465	54.81	5,642,794	32.53	1,876,882	32.51
Emergency Room	70	1.94	522,050	6.62	802,624	4.63	413,280	7.16
Outpatient Facility	1,780	49.44	1,801,044	22.84	1,624,705	9.37	522,108	9.04
Inpatient Facility	0	0.00	1,730,776	21.95	2,151,952	12.41	1,215,274	21.05
Others	0	0.00	367,632	4.66	800,558	4.62	370,340	6.41
Total	6,311	175.32	8,743,967	110.87	11,022,634	63.55	4,397,884	76.17
Projected FY2020 Member Months	72		76,236		167,628		55,332	
Projected FY2020 Premiums								
Current Rates	35,583	494.21	9,840,454	129.08	12,814,828	76.45	4,894,066	88.45
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions								
FY2019		2.9 %		2.9 %		2.9 %		2.9 %
FY2020		2.8 %		2.8 %		2.8 %		2.8 %
Provider Reimbursement Change	1.0342		1.0031		1.0019		1.0016	
Other Reimbursement Change	1.0013		1.0030		1.0020		1.0020	
Inpatient Reimbursement Change	1.0000		1.0121		1.0119		1.0138	
FQHC Wrap Adjustment	1.0000		0.9769		0.9692		0.9814	
Projected Incurred Claims	13,833	192.12	8,897,702	116.71	11,098,091	66.21	4,453,485	80.49
Capitation & Other Expenses/Refunds								
Total	-1	-0.01	-44,355	-0.58	-8,705	-0.05	-6,512	-0.12
Reinsurance Expenses								
Net Reinsurance Cost	22	0.31	15,996	0.21	35,695	0.21	11,811	0.21
Administrative Expenses								
Fixed Amount	540	7.50	571,770	7.50	1,257,210	7.50	414,990	7.50
Percentage of Premium	5.75 %	12.64	5.75 %	7.83	5.75 %	4.67	5.75 %	5.57
Risk Margin	1.50 %	3.30	1.50 %	2.04	1.50 %	1.22	1.50 %	1.45
Premium Tax	1.75 %	3.85	1.75 %	2.38	1.75 %	1.42	1.75 %	1.70
Maintenance Tax	4	0.060	4,574	0.060	10,058	0.060	3,320	0.060
Projected Total Cost	15,822	219.75	10,379,877	136.15	13,617,965	81.24	5,359,444	96.86
Adjusted Total Cost	15,822	219.75	10,379,877	136.15	13,617,965	81.24	5,359,444	96.86
Experience Rate Increase		-55.5 %		5.5 %		6.3 %		9.5 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	84		25,426		329		335,931	
Estimated Incurred Claims								
Professional	47,674	567.55	10,083,792	396.59	97,707	296.98	22,075,777	65.72
Emergency Room	2,239	26.66	136,170	5.36	2,328	7.08	1,878,761	5.59
Outpatient Facility	1,683	20.03	1,018,325	40.05	4,832	14.69	4,974,477	14.81
Inpatient Facility	59,727	711.04	302,198	11.89	34,500	104.86	5,494,427	16.36
Others	0	0.00	40,546	1.59	959	2.92	1,580,035	4.70
Total	111,324	1,325.28	11,581,030	455.48	140,326	426.52	36,003,476	107.18
Projected FY2020 Member Months	48		22,380		336		322,032	
Projected FY2020 Premiums								
Current Rates	24,718	514.95	9,337,760	417.24	156,734	466.47	37,104,142	115.22
Current DSP Rates	0	0.00	0	0.00	117,996	351.18	117,996	0.37
Annual Trend Assumptions								
FY2019	2.2 %		2.2 %		2.2 %			
FY2020	1.8 %		1.8 %		1.8 %			
Provider Reimbursement Change	1.0000		1.0005		0.9993			
Other Reimbursement Change	1.0027		1.0025		1.0027			
Inpatient Reimbursement Change	1.0014		1.0009		1.0055			
FQHC Wrap Adjustment	0.9966		0.8441		0.9761			
Projected Incurred Claims	66,245	1,380.10	8,988,665	401.64	146,653	436.47	33,664,673	104.54
Capitation & Other Expenses/Refunds								
Total	-436	-9.08	-327,247	-14.62	-5,882	-17.51	-393,137	-1.22
Reinsurance Expenses								
Net Reinsurance Cost	8	0.18	4,599	0.21	78	0.23	68,210	0.21
Administrative Expenses								
Fixed Amount	600	12.50	279,750	12.50	4,200	12.50	2,529,060	7.85
Percentage of Premium	5.75 %	87.44	5.75 %	25.26	5.75 %	27.28	5.75 %	7.04
Risk Margin	1.50 %	22.81	1.50 %	6.59	1.50 %	7.12	1.50 %	1.84
Premium Tax	1.75 %	26.61	1.75 %	7.69	1.75 %	8.30	1.75 %	2.14
Maintenance Tax	3	0.060	1,343	0.060	20	0.060	19,322	0.060
Projected Total Cost	72,989	1,520.61	9,831,989	439.32	159,417	474.46	39,437,503	122.46
Adjusted Total Cost	72,989	1,520.61	9,831,989	439.32	41,421	123.28	39,319,507	122.10
Experience Rate Increase		195.3 %		5.3 %		-73.6 %		6.0 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	1,181		1,164,139		2,764,245		995,158	
Estimated Incurred Claims								
Professional	180,094	152.49	52,856,489	45.40	73,217,144	26.49	27,842,046	27.98
Emergency Room	20,779	17.59	14,648,538	12.58	24,179,086	8.75	11,923,552	11.98
Outpatient Facility	46,802	39.63	26,318,504	22.61	45,488,083	16.46	25,931,387	26.06
Inpatient Facility	114,171	96.67	14,785,189	12.70	30,955,856	11.20	18,655,593	18.75
Others	13,014	11.02	9,515,779	8.17	17,001,592	6.15	8,188,851	8.23
Total	374,860	317.41	118,124,500	101.47	190,841,761	69.04	92,541,429	92.99
Projected FY2020 Member Months	947		1,109,436		2,594,148		912,396	
Projected FY2020 Premiums								
Current Rates	468,017	494.21	137,592,605	124.02	235,004,457	90.59	107,797,723	118.15
Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions								
FY2019		2.9 %		2.9 %		2.9 %		2.9 %
FY2020		2.8 %		2.8 %		2.8 %		2.8 %
Provider Reimbursement Change	1.0022		1.0010		1.0002		1.0005	
Other Reimbursement Change	1.0011		1.0016		1.0013		1.0005	
Inpatient Reimbursement Change	1.0015		1.0017		0.9992		0.9982	
FQHC Wrap Adjustment	0.9935		0.9935		0.9938		0.9963	
Projected Incurred Claims	317,546	335.32	118,864,723	107.14	188,451,580	72.64	89,384,927	97.97
Capitation & Other Expenses/Refunds								
Total	1,246	1.32	1,847,291	1.67	4,318,142	1.66	1,582,906	1.73
Reinsurance Expenses								
Net Reinsurance Cost	173	0.18	178,166	0.16	415,306	0.16	145,348	0.16
Administrative Expenses								
Fixed Amount	7,103	7.50	8,320,770	7.50	19,456,110	7.50	6,842,970	7.50
Percentage of Premium	5.75 %	21.76	5.75 %	7.36	5.75 %	5.18	5.75 %	6.79
Risk Margin	1.50 %	5.68	1.50 %	1.92	1.50 %	1.35	1.50 %	1.77
Premium Tax	1.75 %	6.62	1.75 %	2.24	1.75 %	1.58	1.75 %	2.07
Maintenance Tax	57	0.060	66,566	0.060	155,649	0.060	54,744	0.060
Projected Total Cost	358,379	378.44	142,063,204	128.05	233,842,622	90.14	107,704,279	118.05
Adjusted Total Cost	358,379	378.44	142,063,204	128.05	233,842,622	90.14	107,704,279	118.05
Experience Rate Increase		-23.4 %		3.2 %		-0.5 %		-0.1 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - FY2018								
Member Months	1,456		385,601		5,022		5,316,802	
Estimated Incurred Claims								
Professional	173,380	119.08	93,771,475	243.18	1,460,109	290.74	249,500,736	46.93
Emergency Room	14,756	10.13	1,251,817	3.25	38,175	7.60	52,076,703	9.79
Outpatient Facility	29,362	20.17	35,913,189	93.14	469,390	93.47	134,196,717	25.24
Inpatient Facility	406,136	278.94	902,078	2.34	659,614	131.34	66,478,638	12.50
Others	10,734	7.37	10,541,026	27.34	30,772	6.13	45,301,768	8.52
Total	634,367	435.69	142,379,585	369.24	2,658,059	529.28	547,554,562	102.99
Projected FY2020 Member Months	1,517		340,728		5,173		4,964,345	
Projected FY2020 Premiums								
Current Rates	781,179	514.95	141,288,090	414.67	2,413,049	466.47	625,345,120	125.97
Current DSP Rates	0	0.00	0	0.00	1,057,095	204.35	1,057,095	0.21
Annual Trend Assumptions								
FY2019	2.2 %		2.2 %		2.2 %			
FY2020	1.8 %		1.8 %		1.8 %			
Provider Reimbursement Change	1.0002		1.0012		1.0012			
Other Reimbursement Change	1.0019		1.0015		1.0016			
Inpatient Reimbursement Change	1.0115		0.9725		0.9972			
FQHC Wrap Adjustment	0.9840		0.9470		0.9877			
Projected Incurred Claims	685,989	452.20	120,893,141	354.81	2,813,839	543.95	521,411,745	105.03
Capitation & Other Expenses/Refunds								
Total	1,321	0.87	-41,584	-0.12	-1,069	-0.21	7,708,252	1.55
Reinsurance Expenses								
Net Reinsurance Cost	217	0.14	48,462	0.14	864	0.17	788,535	0.16
Administrative Expenses								
Fixed Amount	18,963	12.50	4,259,100	12.50	64,663	12.50	38,969,678	7.85
Percentage of Premium	5.75 %	29.43	5.75 %	23.21	5.75 %	35.16	5.75 %	7.24
Risk Margin	1.50 %	7.68	1.50 %	6.06	1.50 %	9.17	1.50 %	1.89
Premium Tax	1.75 %	8.96	1.75 %	7.07	1.75 %	10.70	1.75 %	2.20
Maintenance Tax	91	0.060	20,444	0.060	310	0.060	297,861	0.060
Projected Total Cost	776,462	511.84	137,559,959	403.72	3,163,304	611.50	625,468,210	125.99
Adjusted Total Cost	776,462	511.84	137,559,959	403.72	2,106,209	407.15	624,411,115	125.78
Experience Rate Increase		-0.6 %		-2.6 %		-12.7 %		-0.1 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	66		89,237		212,096		78,665	
Estimated Pharmacy Claims								
Incurred Claims	131	1.99	1,391,001	15.59	5,568,675	26.26	3,088,052	39.26
Other Pharmacy Cost	-14	-0.21	-16,958	-0.19	-39,385	-0.19	-14,492	-0.18
Total	118	1.78	1,374,043	15.40	5,529,289	26.07	3,073,559	39.07
Projected FY2020 Member Months	62		91,356		207,924		75,276	
Projected FY2020 Premiums								
Current Rates	928	14.97	1,440,236	15.77	7,213,485	34.69	2,961,669	39.34
Annual Trend Assumption	6.5 %		6.5 %		6.5 %		6.5 %	
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0220		1.0000	
Adjustment #2	1.0000		1.0000		1.0000		1.0000	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	123	1.98	1,562,338	17.10	6,152,832	29.59	3,266,625	43.40
Administrative Expenses	112	1.80	164,441	1.80	374,263	1.80	135,497	1.80
Risk Margin	1.50 %	0.06	1.50 %	0.29	1.50 %	0.49	1.50 %	0.70
Premium Tax	1.75 %	0.07	1.75 %	0.34	1.75 %	0.57	1.75 %	0.82
Projected Total Cost	242	3.91	1,784,785	19.54	6,746,351	32.45	3,516,405	46.71
Experience Rate Increase		-73.9 %		23.9 %		-6.5 %		18.7 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	96		17,704		378		398,242	
Estimated Pharmacy Claims								
Incurred Claims	126	1.31	1,061,599	59.96	12,759	33.75		
Other Pharmacy Cost	-17	-0.18	-3,633	-0.21	-81	-0.21		
Total	109	1.14	1,057,967	59.76	12,678	33.54	11,047,764	27.74
Projected FY2020 Member Months	61		15,504		312		390,495	
Projected FY2020 Premiums								
Current Rates	375	6.15	867,798	55.97	29,774	95.43	12,514,265	32.05
Annual Trend Assumption	6.5 %		6.5 %		6.5 %			
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0000			
Adjustment #2	1.0000		1.0000		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	77	1.26	1,029,028	66.37	11,623	37.25	12,022,645	30.79
Administrative Expenses	110	1.80	27,907	1.80	562	1.80	702,891	1.80
Risk Margin	1.50 %	0.05	1.50 %	1.06	1.50 %	0.61	1.50 %	0.51
Premium Tax	1.75 %	0.06	1.75 %	1.23	1.75 %	0.71	1.75 %	0.59
Projected Total Cost	193	3.17	1,092,439	70.46	12,594	40.36	13,153,009	33.68
Experience Rate Increase		-48.5 %		25.9 %		-57.7 %		5.1 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	150		181,129		442,351		150,906	
Estimated Pharmacy Claims								
Incurred Claims	993	6.62	2,347,077	12.96	10,460,362	23.65	4,259,692	28.23
Other Pharmacy Cost	-5	-0.04	-4,662	-0.03	-9,712	-0.02	-3,521	-0.02
Total	988	6.59	2,342,415	12.93	10,450,649	23.63	4,256,171	28.20
Projected FY2020 Member Months	96		176,760		426,816		144,288	
Projected FY2020 Premiums								
Current Rates	1,437	14.97	3,184,647	18.02	13,832,676	32.41	5,068,199	35.13
Annual Trend Assumption	6.5 %		6.5 %		6.5 %		6.5 %	
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0000		1.0000	
Adjustment #2	1.0000		1.0000		1.0000		1.0000	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	702	7.32	2,538,883	14.36	11,199,526	26.24	4,519,865	31.33
Administrative Expenses	173	1.80	318,168	1.80	768,269	1.80	259,718	1.80
Risk Margin	1.50 %	0.14	1.50 %	0.25	1.50 %	0.43	1.50 %	0.51
Premium Tax	1.75 %	0.16	1.75 %	0.29	1.75 %	0.51	1.75 %	0.60
Projected Total Cost	905	9.42	2,953,024	16.71	12,369,813	28.98	4,940,138	34.24
Experience Rate Increase		-37.1 %		-7.3 %		-10.6 %		-2.5 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	247		73,257		772		848,812	
Estimated Pharmacy Claims								
Incurred Claims	515	2.09	1,975,626	26.97	63,115	81.76		
Other Pharmacy Cost	-36	-0.15	-5,951	-0.08	-60	-0.08		
Total	479	1.94	1,969,675	26.89	63,055	81.68	19,083,433	22.48
Projected FY2020 Member Months	240		66,684		768		815,652	
Projected FY2020 Premiums								
Current Rates	1,476	6.15	1,890,490	28.35	73,290	95.43	24,052,216	29.49
Annual Trend Assumption	6.5 %		6.5 %		6.5 %			
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0000			
Adjustment #2	1.0000		1.0000		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	517	2.16	1,991,360	29.86	69,670	90.72	20,320,523	24.91
Administrative Expenses	432	1.80	120,031	1.80	1,382	1.80	1,468,174	1.80
Risk Margin	1.50 %	0.06	1.50 %	0.49	1.50 %	1.43	1.50 %	0.41
Premium Tax	1.75 %	0.07	1.75 %	0.57	1.75 %	1.67	1.75 %	0.48
Projected Total Cost	981	4.09	2,182,317	32.73	73,439	95.62	22,520,617	27.61
Experience Rate Increase		-33.5 %		15.4 %		0.2 %		-6.4 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	34		36,349		97,223		40,884	
Estimated Pharmacy Claims								
Incurred Claims	163	4.79	1,476,357	40.62	2,185,370	22.48	2,002,955	48.99
Other Pharmacy Cost	-5	-0.15	-5,777	-0.16	-15,295	-0.16	-6,459	-0.16
Total	158	4.64	1,470,580	40.46	2,170,075	22.32	1,996,496	48.83
Projected FY2020 Member Months	48		35,436		93,732		39,156	
Projected FY2020 Premiums								
Current Rates	719	14.97	1,190,992	33.61	2,282,269	24.35	1,129,011	28.83
Annual Trend Assumption	6.5 %		6.5 %		6.5 %		6.5 %	
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0000		1.0000	
Adjustment #2	1.0000		1.0000		1.0000		1.0000	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	247	5.15	1,592,295	44.93	2,323,680	24.79	2,123,714	54.24
Administrative Expenses	86	1.80	63,785	1.80	168,718	1.80	70,481	1.80
Risk Margin	1.50 %	0.11	1.50 %	0.72	1.50 %	0.41	1.50 %	0.87
Premium Tax	1.75 %	0.13	1.75 %	0.85	1.75 %	0.48	1.75 %	1.01
Projected Total Cost	345	7.18	1,711,711	48.30	2,576,122	27.48	2,267,902	57.92
Experience Rate Increase		-52.0 %		43.7 %		12.9 %		100.9 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	42		7,661		152		182,345	
Estimated Pharmacy Claims								
Incurred Claims	344	8.20	470,412	61.40	25,214	165.88		
Other Pharmacy Cost	-22	-0.52	-5,867	-0.77	-113	-0.75		
Total	323	7.68	464,546	60.64	25,101	165.14	6,127,278	33.60
Projected FY2020 Member Months	60		6,888		192		175,512	
Projected FY2020 Premiums								
Current Rates	369	6.15	454,575	66.00	18,323	95.43	5,076,257	28.92
Annual Trend Assumption	6.5 %		6.5 %		6.5 %			
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0000			
Adjustment #2	1.0000		1.0000		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	512	8.53	463,894	67.35	35,215	183.41	6,539,558	37.26
Administrative Expenses	108	1.80	12,398	1.80	346	1.80	315,922	1.80
Risk Margin	1.50 %	0.16	1.50 %	1.07	1.50 %	2.87	1.50 %	0.61
Premium Tax	1.75 %	0.19	1.75 %	1.25	1.75 %	3.35	1.75 %	0.71
Projected Total Cost	641	10.68	492,292	71.47	36,755	191.43	7,085,767	40.37
Experience Rate Increase		73.6 %		8.3 %		100.6 %		39.6 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	321		295,005		704,362		256,550	
Estimated Pharmacy Claims								
Incurred Claims	2,583	8.05	3,381,589	11.46	16,841,127	23.91	6,444,109	25.12
Other Pharmacy Cost	-33	-0.10	1,755	0.01	-69,475	-0.10	-23,215	-0.09
Total	2,550	7.94	3,383,344	11.47	16,771,653	23.81	6,420,894	25.03
Projected FY2020 Member Months	218		279,396		665,484		234,600	
Projected FY2020 Premiums								
Current Rates	3,263	14.97	4,322,768	15.47	21,620,244	32.49	8,756,298	37.32
Annual Trend Assumption	6.5 %		6.5 %		6.5 %		6.5 %	
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0046		1.0000	
Adjustment #2	1.0000		1.0000		1.0000		1.0000	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	1,924	8.82	3,558,931	12.74	17,680,454	26.57	6,521,300	27.80
Administrative Expenses	392	1.80	502,913	1.80	1,197,871	1.80	422,280	1.80
Risk Margin	1.50 %	0.16	1.50 %	0.23	1.50 %	0.44	1.50 %	0.46
Premium Tax	1.75 %	0.19	1.75 %	0.26	1.75 %	0.51	1.75 %	0.54
Projected Total Cost	2,394	10.98	4,198,289	15.03	19,512,481	29.32	7,176,827	30.59
Experience Rate Increase		-26.6 %		-2.9 %		-9.7 %		-18.0 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	411		129,727		1,456		1,387,832	
Estimated Pharmacy Claims								
Incurred Claims	202	0.49	10,093,637	77.81	132,401	90.93		
Other Pharmacy Cost	-61	-0.15	-28,380	-0.22	-304	-0.21		
Total	140	0.34	10,065,257	77.59	132,096	90.73	36,775,935	26.50
Projected FY2020 Member Months	492		119,544		1,428		1,301,162	
Projected FY2020 Premiums								
Current Rates	3,026	6.15	10,133,242	84.77	136,274	95.43	44,975,115	34.57
Annual Trend Assumption	6.5 %		6.5 %		6.5 %			
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0000			
Adjustment #2	1.0000		1.0000		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	187	0.38	10,301,606	86.17	143,893	100.77	38,208,296	29.36
Administrative Expenses	886	1.80	215,179	1.80	2,570	1.80	2,342,092	1.80
Risk Margin	1.50 %	0.03	1.50 %	1.36	1.50 %	1.59	1.50 %	0.48
Premium Tax	1.75 %	0.04	1.75 %	1.59	1.75 %	1.86	1.75 %	0.56
Projected Total Cost	1,108	2.25	10,870,063	90.93	151,384	106.01	41,912,545	32.21
Experience Rate Increase		-63.4 %		7.3 %		11.1 %		-6.8 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	11		23,448		55,254		19,178	
Estimated Pharmacy Claims								
Incurred Claims	438	39.83	350,403	14.94	11,030,192	199.63	688,520	35.90
Other Pharmacy Cost	-39	-3.58	-34,578	-1.47	-75,028	-1.36	-30,760	-1.60
Total	399	36.25	315,825	13.47	10,955,164	198.27	657,760	34.30
Projected FY2020 Member Months	39		21,720		51,432		16,884	
Projected FY2020 Premiums								
Current Rates	584	14.97	394,793	18.18	2,903,245	56.45	791,327	46.87
Annual Trend Assumption	6.5 %		6.5 %		6.5 %		6.5 %	
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0000		1.0000	
Adjustment #2	1.0000		1.0000		1.0000		1.0000	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	1,570	40.26	324,925	14.96	11,325,861	220.21	643,165	38.09
Administrative Expenses	70	1.80	39,096	1.80	92,578	1.80	30,391	1.80
Risk Margin	1.50 %	0.65	1.50 %	0.26	1.50 %	3.44	1.50 %	0.62
Premium Tax	1.75 %	0.76	1.75 %	0.30	1.75 %	4.02	1.75 %	0.72
Projected Total Cost	1,696	43.48	376,249	17.32	11,802,004	229.47	696,182	41.23
Experience Rate Increase		190.4 %		-4.7 %		306.5 %		-12.0 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	47		6,230		110		104,278	
Estimated Pharmacy Claims								
Incurred Claims	0	0.00	480,633	77.15	2,657	24.16		
Other Pharmacy Cost	-129	-2.75	-10,253	-1.65	-24	-0.22		
Total	-129	-2.75	470,380	75.50	2,633	23.94	12,402,032	118.93
Projected FY2020 Member Months	51		5,544		121		95,791	
Projected FY2020 Premiums								
Current Rates	314	6.15	451,295	81.40	11,547	95.43	4,553,105	47.53
Annual Trend Assumption	6.5 %		6.5 %		6.5 %			
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0000			
Adjustment #2	1.0000		1.0000		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	-156	-3.05	464,908	83.86	3,217	26.59	12,763,491	133.24
Administrative Expenses	92	1.80	9,979	1.80	218	1.80	172,424	1.80
Risk Margin	1.50 %	-0.02	1.50 %	1.33	1.50 %	0.44	1.50 %	2.09
Premium Tax	1.75 %	-0.02	1.75 %	1.55	1.75 %	0.51	1.75 %	2.44
Projected Total Cost	-66	-1.29	490,839	88.54	3,550	29.34	13,370,454	139.58
Experience Rate Increase		-121.0 %		8.8 %		-69.3 %		193.7 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	29		27,925		64,394		21,886	
Estimated Pharmacy Claims								
Incurred Claims	24	0.83	317,416	11.37	1,842,570	28.61	767,873	35.09
Other Pharmacy Cost	-9	-0.31	-7,118	-0.25	-16,520	-0.26	-5,622	-0.26
Total	15	0.52	310,298	11.11	1,826,051	28.36	762,252	34.83
Projected FY2020 Member Months	13		27,036		63,444		21,576	
Projected FY2020 Premiums								
Current Rates	195	14.97	345,722	12.79	2,092,511	32.98	819,722	37.99
Annual Trend Assumption	6.5 %		6.5 %		6.5 %		6.5 %	
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0000		1.0275	
Adjustment #2	1.0000		1.0000		1.0000		1.0000	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	7	0.58	333,665	12.34	1,998,208	31.50	857,566	39.75
Administrative Expenses	23	1.80	48,665	1.80	114,199	1.80	38,837	1.80
Risk Margin	1.50 %	0.04	1.50 %	0.22	1.50 %	0.52	1.50 %	0.64
Premium Tax	1.75 %	0.04	1.75 %	0.26	1.75 %	0.60	1.75 %	0.75
Projected Total Cost	32	2.46	395,173	14.62	2,183,367	34.41	926,514	42.94
Experience Rate Increase		-83.6 %		14.3 %		4.3 %		13.0 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	29		4,553		92		118,908	
Estimated Pharmacy Claims								
Incurred Claims	0	0.00	297,278	65.29	3,900	42.39		
Other Pharmacy Cost	-6	-0.20	-1,231	-0.27	-27	-0.29		
Total	-6	-0.20	296,047	65.02	3,873	42.10	3,198,530	26.90
Projected FY2020 Member Months	25		4,260		96		116,450	
Projected FY2020 Premiums								
Current Rates	154	6.15	269,758	63.32	9,161	95.43	3,537,223	30.38
Annual Trend Assumption	6.5 %		6.5 %		6.5 %			
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0000			
Adjustment #2	1.0000		1.0000		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	-6	-0.23	307,649	72.22	4,489	46.76	3,501,579	30.07
Administrative Expenses	45	1.80	7,668	1.80	173	1.80	209,610	1.80
Risk Margin	1.50 %	0.02	1.50 %	1.15	1.50 %	0.75	1.50 %	0.49
Premium Tax	1.75 %	0.03	1.75 %	1.34	1.75 %	0.88	1.75 %	0.58
Projected Total Cost	41	1.63	325,909	76.50	4,818	50.19	3,835,854	32.94
Experience Rate Increase		-73.6 %		20.8 %		-47.4 %		8.4 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	10		25,687		58,805		23,469	
Estimated Pharmacy Claims								
Incurred Claims	0	0.00	601,825	23.43	2,462,637	41.88	698,845	29.78
Other Pharmacy Cost	-1	-0.06	358	0.01	240	0.00	164	0.01
Total	-1	-0.06	602,184	23.44	2,462,878	41.88	699,009	29.78
Projected FY2020 Member Months	3		24,228		54,588		21,360	
Projected FY2020 Premiums								
Current Rates	45	14.97	434,996	17.95	2,417,661	44.29	795,149	37.23
Annual Trend Assumption	6.5 %		6.5 %		6.5 %		6.5 %	
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0000		1.0000	
Adjustment #2	1.0000		1.0000		1.0000		1.0000	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	0	-0.07	630,835	26.04	2,539,268	46.52	706,598	33.08
Administrative Expenses	5	1.80	43,610	1.80	98,258	1.80	38,448	1.80
Risk Margin	1.50 %	0.03	1.50 %	0.43	1.50 %	0.75	1.50 %	0.54
Premium Tax	1.75 %	0.03	1.75 %	0.50	1.75 %	0.87	1.75 %	0.63
Projected Total Cost	5	1.79	697,101	28.77	2,726,125	49.94	770,073	36.05
Experience Rate Increase		-88.0 %		60.3 %		12.8 %		-3.2 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	52		2,860		111		110,994	
Estimated Pharmacy Claims								
Incurred Claims	56	1.08	196,114	68.57	8,870	79.91		
Other Pharmacy Cost	-4	-0.07	-120	-0.04	-9	-0.08		
Total	52	1.01	195,995	68.53	8,861	79.83	3,968,978	35.76
Projected FY2020 Member Months	60		2,508		168		102,915	
Projected FY2020 Premiums								
Current Rates	369	6.15	268,351	107.00	16,032	95.43	3,932,604	38.21
Annual Trend Assumption	6.5 %		6.5 %		6.5 %			
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0000			
Adjustment #2	1.0000		1.0000		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	67	1.12	190,892	76.11	14,896	88.67	4,082,555	39.67
Administrative Expenses	108	1.80	4,514	1.80	302	1.80	185,247	1.80
Risk Margin	1.50 %	0.05	1.50 %	1.21	1.50 %	1.40	1.50 %	0.64
Premium Tax	1.75 %	0.05	1.75 %	1.41	1.75 %	1.64	1.75 %	0.75
Projected Total Cost	181	3.02	201,971	80.53	15,709	93.51	4,411,165	42.86
Experience Rate Increase		-51.0 %		-24.7 %		-2.0 %		12.2 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	318		248,088		577,597		216,772	
Estimated Pharmacy Claims								
Incurred Claims	7,936	24.96	3,798,934	15.31	17,603,193	30.48	6,128,963	28.27
Other Pharmacy Cost	-92	-0.29	-73,730	-0.30	-161,700	-0.28	-61,620	-0.28
Total	7,844	24.67	3,725,204	15.02	17,441,493	30.20	6,067,343	27.99
Projected FY2020 Member Months	276		242,616		561,156		205,500	
Projected FY2020 Premiums								
Current Rates	4,132	14.97	4,605,373	18.98	21,071,997	37.55	7,615,656	37.06
Annual Trend Assumption	6.5 %		6.5 %		6.5 %		6.5 %	
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0214		1.0069	
Adjustment #2	1.0000		1.0000		1.0000		1.0000	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	7,562	27.40	4,046,191	16.68	19,222,987	34.26	6,432,447	31.30
Administrative Expenses	497	1.80	436,709	1.80	1,010,081	1.80	369,900	1.80
Risk Margin	1.50 %	0.45	1.50 %	0.29	1.50 %	0.56	1.50 %	0.51
Premium Tax	1.75 %	0.53	1.75 %	0.33	1.75 %	0.65	1.75 %	0.60
Projected Total Cost	8,329	30.18	4,633,488	19.10	20,912,732	37.27	7,030,849	34.21
Experience Rate Increase		101.6 %		0.6 %		-0.8 %		-7.7 %

	Newborn 198%+ Amount	Newborn 198%+ pmpm	Perinate <198% Amount	Perinate <198% pmpm	Perinate 198%+ Amount	Perinate 198%+ pmpm	Total Amount	Total pmpm
Estimated Experience - CY2018								
Member Months	380		74,501		1,096		1,118,752	
Estimated Pharmacy Claims								
Incurred Claims	937	2.47	4,900,498	65.78	65,309	59.59		
Other Pharmacy Cost	-153	-0.40	-25,585	-0.34	-423	-0.39		
Total	784	2.06	4,874,914	65.43	64,886	59.20	32,182,468	28.77
Projected FY2020 Member Months	360		64,620		1,176		1,075,704	
Projected FY2020 Premiums								
Current Rates	2,214	6.15	4,817,850	74.56	112,226	95.43	38,229,447	35.54
Annual Trend Assumption	6.5 %		6.5 %		6.5 %			
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0000			
Adjustment #2	1.0000		1.0000		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	825	2.29	4,696,285	72.68	77,327	65.75	34,483,624	32.06
Administrative Expenses	648	1.80	116,316	1.80	2,117	1.80	1,936,267	1.80
Risk Margin	1.50 %	0.06	1.50 %	1.15	1.50 %	1.05	1.50 %	0.52
Premium Tax	1.75 %	0.07	1.75 %	1.35	1.75 %	1.22	1.75 %	0.61
Projected Total Cost	1,522	4.23	4,974,265	76.98	82,113	69.82	37,643,298	34.99
Experience Rate Increase		-31.3 %		3.2 %		-26.8 %		-1.5 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	119		138,416		312,599		102,015	
Estimated Pharmacy Claims								
Incurred Claims	27	0.23	1,316,941	9.51	7,866,981	25.17	2,750,288	26.96
Other Pharmacy Cost	-11	-0.09	-10,510	-0.08	-38,628	-0.12	-12,368	-0.12
Total	17	0.14	1,306,431	9.44	7,828,353	25.04	2,737,921	26.84
Projected FY2020 Member Months	120		134,652		301,944		98,424	
Projected FY2020 Premiums								
Current Rates	1,796	14.97	1,818,999	13.51	9,557,877	31.65	4,042,427	41.07
Annual Trend Assumption	6.5 %		6.5 %		6.5 %		6.5 %	
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0445		1.0718	
Adjustment #2	1.0000		1.0000		1.0000		1.0000	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	19	0.15	1,411,548	10.48	8,772,035	29.05	3,144,519	31.95
Administrative Expenses	216	1.80	242,374	1.80	543,499	1.80	177,163	1.80
Risk Margin	1.50 %	0.03	1.50 %	0.19	1.50 %	0.48	1.50 %	0.52
Premium Tax	1.75 %	0.04	1.75 %	0.22	1.75 %	0.56	1.75 %	0.61
Projected Total Cost	242	2.02	1,709,480	12.70	9,628,459	31.89	3,433,264	34.88
Experience Rate Increase		-86.5 %		-6.0 %		0.7 %		-15.1 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	159		36,023		598		589,929	
Estimated Pharmacy Claims								
Incurred Claims	652	4.10	3,797,836	105.43	64,384	107.67		
Other Pharmacy Cost	-204	-1.28	-3,400	-0.09	-555	-0.93		
Total	448	2.82	3,794,436	105.33	63,829	106.74	15,731,435	26.67
Projected FY2020 Member Months	120		32,796		576		568,632	
Projected FY2020 Premiums								
Current Rates	738	6.15	3,427,598	104.51	54,968	95.43	18,904,403	33.25
Annual Trend Assumption	6.5 %		6.5 %		6.5 %			
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0000			
Adjustment #2	1.0000		1.0000		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	376	3.13	3,836,816	116.99	68,285	118.55	17,233,597	30.31
Administrative Expenses	216	1.80	59,033	1.80	1,037	1.80	1,023,538	1.80
Risk Margin	1.50 %	0.08	1.50 %	1.84	1.50 %	1.87	1.50 %	0.50
Premium Tax	1.75 %	0.09	1.75 %	2.15	1.75 %	2.18	1.75 %	0.58
Projected Total Cost	612	5.10	4,026,717	122.78	71,650	124.39	18,870,424	33.19
Experience Rate Increase		-17.1 %		17.5 %		30.3 %		-0.2 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	50		77,930		171,516		57,117	
Estimated Pharmacy Claims								
Incurred Claims	583	11.67	843,057	10.82	5,254,349	30.63	1,560,909	27.33
Other Pharmacy Cost	-7	-0.15	-10,608	-0.14	-24,776	-0.14	-8,224	-0.14
Total	576	11.52	832,448	10.68	5,229,572	30.49	1,552,685	27.18
Projected FY2020 Member Months	72		76,236		167,628		55,332	
Projected FY2020 Premiums								
Current Rates	1,078	14.97	1,171,257	15.36	5,913,985	35.28	1,720,845	31.10
Annual Trend Assumption	6.5 %		6.5 %		6.5 %		6.5 %	
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0306		1.0000	
Adjustment #2	1.0000		1.0000		1.0000		1.0000	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	921	12.80	904,473	11.86	5,850,337	34.90	1,670,617	30.19
Administrative Expenses	130	1.80	137,225	1.80	301,730	1.80	99,598	1.80
Risk Margin	1.50 %	0.23	1.50 %	0.21	1.50 %	0.57	1.50 %	0.50
Premium Tax	1.75 %	0.26	1.75 %	0.25	1.75 %	0.66	1.75 %	0.58
Projected Total Cost	1,086	15.09	1,076,690	14.12	6,358,726	37.93	1,829,679	33.07
Experience Rate Increase		0.8 %		-8.1 %		7.5 %		6.3 %

	Newborn 198%+	Perinate <198%	Perinate 198%+	Total				
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	61		24,858		332		331,864	
Estimated Pharmacy Claims								
Incurred Claims	3,173	52.01	907,225	36.50	9,042	27.24		
Other Pharmacy Cost	-8	-0.13	-2,845	-0.11	-29	-0.09		
Total	3,165	51.88	904,380	36.38	9,013	27.15	8,531,839	25.71
Projected FY2020 Member Months	48		22,380		336		322,032	
Projected FY2020 Premiums								
Current Rates	295	6.15	861,699	38.50	32,064	95.43	9,701,224	30.13
Annual Trend Assumption	6.5 %		6.5 %		6.5 %			
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0000			
Adjustment #2	1.0000		1.0000		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	2,766	57.63	904,331	40.41	10,131	30.15	9,343,577	29.01
Administrative Expenses	86	1.80	40,284	1.80	605	1.80	579,658	1.80
Risk Margin	1.50 %	0.92	1.50 %	0.65	1.50 %	0.50	1.50 %	0.48
Premium Tax	1.75 %	1.07	1.75 %	0.76	1.75 %	0.58	1.75 %	0.56
Projected Total Cost	2,948	61.42	976,346	43.63	11,097	33.03	10,256,573	31.85
Experience Rate Increase		898.7 %		13.3 %		-65.4 %		5.7 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience - CY2018								
Member Months	1,108		1,143,214		2,696,197		967,442	
Estimated Pharmacy Claims								
Incurred Claims	14,114	12.74	15,845,139	13.86	80,834,989	29.98	28,431,748	29.39
Other Pharmacy Cost	-340	-0.31	-161,955	-0.14	-449,910	-0.17	-164,815	-0.17
Total	13,774	12.43	15,683,185	13.72	80,385,079	29.81	28,266,934	29.22
Projected FY2020 Member Months	947		1,109,436		2,594,148		912,396	
Projected FY2020 Premiums								
Current Rates	14,177	14.97	18,909,784	17.04	88,905,950	34.27	33,700,303	36.94
Annual Trend Assumption	6.5 %		6.5 %		6.5 %		6.5 %	
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0135		1.0094	
Adjustment #2	1.0000		1.0000		1.0000		1.0000	
Adjustment #3	1.0000		1.0000		1.0000		1.0000	
Projected Incurred Claims	13,075	13.81	16,904,085	15.24	87,065,188	33.56	29,886,416	32.76
Administrative Expenses	1,705	1.80	1,996,985	1.80	4,669,466	1.80	1,642,313	1.80
Risk Margin	1.50 %	0.24	1.50 %	0.26	1.50 %	0.55	1.50 %	0.54
Premium Tax	1.75 %	0.28	1.75 %	0.31	1.75 %	0.64	1.75 %	0.63
Projected Total Cost	15,276	16.13	19,535,989	17.61	94,816,181	36.55	32,587,833	35.72
Experience Rate Increase		7.8 %		3.3 %		6.6 %		-3.3 %

	Newborn 198%+ Amount	Newborn 198%+ pmpm	Perinate <198% Amount	Perinate <198% pmpm	Perinate 198%+ Amount	Perinate 198%+ pmpm	Total Amount	Total pmpm
Estimated Experience - CY2018								
Member Months	1,524		377,374		5,097		5,191,956	
Estimated Pharmacy Claims								
Incurred Claims	5,279	3.46	24,205,673	64.14	390,857	76.68		
Other Pharmacy Cost	-608	-0.40	-86,670	-0.23	-1,629	-0.32		
Total	4,672	3.07	24,119,002	63.91	389,228	76.36	148,861,872	28.67
Projected FY2020 Member Months	1,517		340,728		5,173		4,964,345	
Projected FY2020 Premiums								
Current Rates	9,330	6.15	23,442,657	68.80	493,659	95.43	165,475,860	33.33
Annual Trend Assumption	6.5 %		6.5 %		6.5 %			
Pharmacy Adjustments								
Drug Carve-in	1.0000		1.0000		1.0000			
Adjustment #2	1.0000		1.0000		1.0000			
Adjustment #3	1.0000		1.0000		1.0000			
Projected Incurred Claims	5,165	3.40	24,186,770	70.99	438,747	84.81	158,499,445	31.93
Administrative Expenses	2,731	1.80	613,310	1.80	9,311	1.80	8,935,821	1.80
Risk Margin	1.50 %	0.08	1.50 %	1.13	1.50 %	1.34	1.50 %	0.52
Premium Tax	1.75 %	0.09	1.75 %	1.32	1.75 %	1.57	1.75 %	0.61
Projected Total Cost	8,161	5.38	25,633,158	75.23	463,109	89.52	173,059,706	34.86
Experience Rate Increase		-12.5 %		9.3 %		-6.2 %		4.6 %

Attachment 4

Trend Analysis – Medical

The rating methodology uses assumed trend factors to adjust the base period claims cost to the projection period. The cost trend factors used in this analysis are a combination of utilization and inflation components. The projected trend rate assumptions were developed by the actuary based on an analysis of recent experience under the CHIP program. A single trend assumption applies to all service areas but varies by CHIP Perinate versus CHIP non-Perinate programs and by projection year (FY2019 and FY2020).

The trend analysis included a review of health plan claims experience data through February 2019. Based on this information, estimates of monthly incurred claims were made through December 2018. The claims cost and trend experience were reviewed separately by service area and risk group. The service area trends were then combined into a statewide average using a weighted average formula with estimated incurred claims as the weights. All historical trends have been calculated as the average cost per member per month during a specified time period (monthly, quarterly or annually) compared to the same time period from the prior year. For example, the FY2018 trend has been calculated as the change in average cost per member per month during the period September 1, 2017 through August 31, 2018 (FY2018) compared to the average cost per member per month during the period September 1, 2016 through August 31, 2017 (FY2017). The experience trends for all time periods were adjusted to remove the impact of various provider reimbursement changes and other revisions that have impacted the cost of the program.

The Projected Trend for the period January 2019 through August 2019 and all of FY2020 was estimated using a simple average of the FY2016, FY2017 and FY2018 statewide trend.

The FY2019 trend assumption was developed from two components: (i) the actual estimated trend for the period September 2018 through December 2018 and (ii) the Projected Trend for the period January 2019 through August 2019 via the following formula:

$$\text{FY2019 Trend} = \frac{(9/18-12/18 \text{ actual statewide trend}) \times 4 + (\text{Projected Trend}) \times 8}{12}$$

This analysis was used to select an annual trend assumption of 2.9% for FY2019 and 2.8% for FY2020 for the CHIP non-Perinate program and 2.2% for FY2019 and 1.8% for FY2020 for the CHIP Perinate program.

Attachment 4 – Exhibit A presents the derivation of the medical trend assumption.

Trend Analysis – Pharmacy

The rating methodology uses assumed pharmacy trend factors to adjust the base period (CY2018) claims cost to the rating period (FY2020). The trend rate assumptions were developed by the actuary based on an analysis of recent pharmacy claims experience under the CHIP program and the actuary's professional judgment regarding anticipated future cost changes. The trend rate assumption is the same for all risk groups and service areas.

The trend analysis included a review of CHIP utilization and cost experience data paid through March 2019. Incurred monthly utilization (days supply per member) and cost per service (plan payments per days supply) statistics were developed by risk group and drug type (brand, generic and specialty) through February 2019. From this experience, the average annual utilization and cost per service were determined for each of the four 12-month periods ending February 2019.

Certain drugs and drug categories are excluded from the pharmacy trend analysis. Anti-viral agents used for the treatment of the Hepatitis C virus and the drug Orkambi were carved in to the managed care contract effective September 1, 2018 but they were excluded from the trend analysis due to their extraordinary one-time impact on recent trends. In addition, experience for the drugs Tamiflu and Makena were removed from our trend analysis. Tamiflu was removed due to the significant variation in the intensity of flu season from year to year. Makena was removed due to its one-time distortion of pharmacy trends for pregnant women. Please note that while excluded from the pharmacy trend analysis, the historical managed care claims for all of these drugs were included in the base period experience used in developing the pharmacy component of the rates.

The CHIP pharmacy trend assumptions for the remainder of FY2019 and all of FY2020 were developed by risk group using the following formula. The utilization and cost per service trend assumptions were set equal to one-sixth of the experience trend rate for the 12-month period ending February 2017 plus two-sixths of the experience trend rate for the 12-month period ending February 2018 plus three-sixths of the experience trend rate for the 12-month period ending February 2019. The final cost trend assumptions were then determined by applying the assumed utilization and cost per service trends by individual drug type to actual experience for the 12-month period ending February 2019 and combining the results into a single trend assumption.

Attachment 4 Exhibit B includes a summary of the CHIP pharmacy trend analysis and the derivation of the trend assumptions used in the rating analysis. The trend analysis resulted in an annual trend rate assumption of 6.5% for all risk groups.

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

FY2020 CHIP Rating
Trend Analysis
Medical

	Adjusted Trends (1)				Selected Trends	
	FY2016	FY2017	FY2018	9/18-12/18	FY2019 (2)	FY2020 (3)
Traditional CHIP						
Bexar	7.2%	-4.1%	6.7%	-2.2%		
Dallas	-3.0%	20.2%	4.4%	-7.8%		
El Paso	4.0%	1.3%	12.5%	13.5%		
Harris	-0.2%	8.7%	-4.0%	8.0%		
Jefferson	1.2%	5.2%	25.4%	33.9%		
Lubbock	-2.9%	-0.9%	9.3%	-10.3%		
Nueces	3.7%	-8.7%	3.3%	0.3%		
RSA	1.1%	3.7%	5.2%	1.9%		
Tarrant	-5.4%	1.8%	-4.7%	-0.1%		
Travis	5.8%	-11.7%	7.7%	6.5%		
Total	0.2%	6.1%	2.2%	3.0%	2.9%	2.8%
CHIP Perinate						
Bexar	1.6%	3.1%	8.0%	-4.3%		
Dallas	-1.4%	0.8%	0.5%	3.2%		
El Paso	-10.0%	-0.9%	6.1%	0.4%		
Harris	3.8%	4.1%	-0.9%	-1.4%		
Jefferson	1.1%	-5.3%	-4.5%	-2.4%		
Lubbock	-2.8%	5.4%	-1.1%	13.5%		
Nueces	3.2%	-5.2%	1.1%	12.7%		
RSA	0.7%	4.1%	0.3%	6.1%		
Tarrant	-1.0%	-3.1%	2.3%	-4.8%		
Travis	14.3%	5.3%	1.6%	22.8%		
Total	2.3%	2.7%	0.5%	3.0%	2.2%	1.8%

Notes:

- (1) Trends adjusted to remove various reimbursement changes that have impacted the program.
- (2) Trends for FY2019 were selected based on weighted average of i) actual 9/18-12/18 trend and ii) projected FY2020 trend.
- (3) Trends for FY2020 were selected based on simple average of i) FY16 trend, ii) FY17 trend and iii) FY18 trend.

FY2020 Prescription Drug Rating Analysis
CHIP Pharmacy Trends

	Age <1	Age 1-5	Age 6-14	Age 15-18	All CHIP Perinatal	Total	Case-Mix Adjusted
Annual Trend in Number of Scripts per Member per Month							
Brand Drugs							
3/2013-2/2014	-21.6 %	-28.6 %	-16.8 %	-11.6 %	1.9 %	-15.3 %	-15.7 %
3/2014-2/2015	15.6 %	-6.3 %	-8.6 %	-11.1 %	6.9 %	-4.0 %	-6.4 %
3/2015-2/2016	36.2 %	-0.5 %	-8.3 %	-7.6 %	14.4 %	-1.5 %	-3.3 %
3/2016-2/2017	-31.4 %	-11.3 %	-15.4 %	-14.6 %	13.3 %	-9.4 %	-8.9 %
3/2017-2/2018	-22.2 %	-24.4 %	-6.8 %	-10.2 %	-0.7 %	-10.3 %	-8.2 %
3/2018-2/2019	-27.9 %	-18.4 %	-14.2 %	-11.4 %	-1.4 %	-11.3 %	-10.9 %
Use	-26.6 %	-19.2 %	-11.9 %	-11.6 %	1.3 %	-10.0 %	-8.6 %
Generic Drugs							
3/2013-2/2014	-2.9 %	-2.0 %	1.4 %	2.7 %	-6.7 %	0.3 %	0.0 %
3/2014-2/2015	49.4 %	7.8 %	6.0 %	0.5 %	13.2 %	6.9 %	6.1 %
3/2015-2/2016	5.4 %	-4.4 %	-1.0 %	-0.7 %	4.6 %	0.0 %	-1.5 %
3/2016-2/2017	-27.1 %	-11.5 %	-1.4 %	0.9 %	10.7 %	-2.4 %	-2.7 %
3/2017-2/2018	13.5 %	7.3 %	6.8 %	8.3 %	-0.7 %	6.1 %	6.5 %
3/2018-2/2019	-5.2 %	0.4 %	-1.4 %	2.5 %	8.2 %	0.6 %	0.5 %
Use	-2.6 %	0.7 %	1.3 %	4.2 %	5.6 %	1.9 %	2.1 %
Specialty Drugs							
3/2013-2/2014	0.2 %	-0.1 %	-8.4 %	5.5 %	35.0 %	-2.8 %	-2.4 %
3/2014-2/2015	4.0 %	6.6 %	-2.2 %	-3.0 %	16.6 %	-0.9 %	0.1 %
3/2015-2/2016	61.1 %	8.5 %	5.6 %	8.3 %	21.4 %	7.0 %	7.8 %
3/2016-2/2017	93.9 %	-5.0 %	4.3 %	5.4 %	12.6 %	3.8 %	3.8 %
3/2017-2/2018	464.3 %	3.5 %	2.4 %	10.5 %	32.0 %	6.8 %	7.2 %
3/2018-2/2019	-100.0 %	-4.8 %	6.0 %	-1.9 %	34.8 %	6.1 %	6.1 %
Use	120.4 %	-2.1 %	4.5 %	3.4 %	30.2 %	6.9 %	7.6 %
All Drugs							
3/2013-2/2014	-5.4 %	-7.2 %	-4.6 %	-1.0 %	-3.2 %	-4.3 %	-4.5 %
3/2014-2/2015	45.5 %	5.7 %	1.9 %	-2.3 %	10.6 %	4.0 %	2.9 %
3/2015-2/2016	8.2 %	-3.8 %	-2.8 %	-2.1 %	8.6 %	-0.3 %	-1.8 %
3/2016-2/2017	-27.8 %	-11.4 %	-4.6 %	-2.2 %	11.8 %	-4.0 %	-4.1 %
3/2017-2/2018	13.8 %	2.9 %	3.9 %	5.1 %	-0.5 %	2.5 %	3.3 %
3/2018-2/2019	-10.3 %	-1.5 %	-3.8 %	0.3 %	4.3 %	-1.7 %	-1.6 %
Use	-3.9 %	-0.9 %	-0.8 %	2.2 %	4.2 %	-0.1 %	0.3 %

FY2020 Prescription Drug Rating Analysis
CHIP Pharmacy Trends

	Age <1	Age 1-5	Age 6-14	Age 15-18	All CHIP Perinatal	Total	Case-Mix Adjusted
Annual Trend in Days Supply per Member per Month							
Brand Drugs							
3/2013-2/2014	-22.9 %	-25.8 %	-14.9 %	-11.3 %	1.8 %	-13.2 %	-13.3 %
3/2014-2/2015	4.4 %	-5.2 %	-7.8 %	-10.1 %	8.4 %	-2.3 %	-5.1 %
3/2015-2/2016	72.4 %	-2.1 %	-9.0 %	-8.0 %	14.1 %	-1.7 %	-3.6 %
3/2016-2/2017	-32.8 %	-14.6 %	-16.3 %	-15.0 %	12.4 %	-9.9 %	-9.3 %
3/2017-2/2018	-14.4 %	-16.9 %	-6.2 %	-9.5 %	0.5 %	-8.6 %	-5.9 %
3/2018-2/2019	-19.5 %	-19.8 %	-14.2 %	-10.8 %	-1.4 %	-10.9 %	-10.4 %
Use	-20.0 %	-18.0 %	-11.9 %	-11.1 %	1.5 %	-9.3 %	-7.7 %
Generic Drugs							
3/2013-2/2014	-3.7 %	6.3 %	11.4 %	9.4 %	-9.4 %	8.7 %	8.3 %
3/2014-2/2015	49.3 %	6.9 %	6.0 %	2.7 %	19.8 %	6.4 %	6.4 %
3/2015-2/2016	18.7 %	-2.1 %	3.6 %	2.9 %	9.2 %	2.9 %	2.5 %
3/2016-2/2017	-30.7 %	-9.6 %	2.2 %	2.5 %	16.0 %	1.0 %	0.6 %
3/2017-2/2018	15.5 %	7.9 %	7.0 %	9.5 %	0.9 %	6.8 %	7.2 %
3/2018-2/2019	-12.2 %	3.0 %	2.2 %	6.4 %	9.3 %	3.8 %	3.8 %
Use	-6.0 %	2.5 %	3.8 %	6.8 %	7.6 %	4.3 %	4.5 %
Specialty Drugs							
3/2013-2/2014	-31.8 %	-0.7 %	-8.1 %	7.4 %	43.5 %	-2.2 %	-1.8 %
3/2014-2/2015	-46.7 %	10.0 %	-0.1 %	-1.8 %	21.2 %	0.5 %	2.0 %
3/2015-2/2016	222.3 %	5.0 %	3.6 %	5.4 %	24.6 %	4.5 %	5.9 %
3/2016-2/2017	93.9 %	2.0 %	6.8 %	11.4 %	12.8 %	7.5 %	7.8 %
3/2017-2/2018	544.9 %	7.2 %	2.8 %	10.4 %	22.6 %	6.3 %	7.0 %
3/2018-2/2019	-100.0 %	1.1 %	6.8 %	-2.3 %	33.3 %	7.0 %	7.2 %
Use	147.3 %	3.3 %	5.4 %	4.2 %	26.3 %	7.4 %	8.1 %
All Drugs							
3/2013-2/2014	-7.0 %	-2.3 %	-0.3 %	2.0 %	-2.7 %	-0.3 %	-0.5 %
3/2014-2/2015	42.9 %	4.4 %	0.8 %	-1.3 %	12.9 %	3.2 %	2.3 %
3/2015-2/2016	24.3 %	-2.1 %	-0.7 %	-0.1 %	12.2 %	1.4 %	0.5 %
3/2016-2/2017	-31.1 %	-10.4 %	-3.5 %	-1.9 %	13.8 %	-2.5 %	-2.4 %
3/2017-2/2018	14.6 %	3.5 %	3.4 %	5.2 %	0.8 %	2.2 %	3.4 %
3/2018-2/2019	-15.4 %	-0.2 %	-1.7 %	3.0 %	3.3 %	-0.2 %	0.1 %
Use	-7.3 %	0.3 %	0.6 %	3.9 %	4.5 %	1.2 %	1.7 %

FY2020 Prescription Drug Rating Analysis
CHIP Pharmacy Trends

	Age <1	Age 1-5	Age 6-14	Age 15-18	All CHIP Perinatal	Total	Case-Mix Adjusted
Annual Trend in Incurred Claims per Days Supply							
Brand Drugs							
3/2013-2/2014	15.3 %	1.9 %	7.7 %	13.2 %	16.9 %	7.2 %	9.7 %
3/2014-2/2015	5.3 %	9.3 %	11.8 %	10.9 %	17.3 %	5.4 %	12.4 %
3/2015-2/2016	-37.8 %	1.1 %	10.5 %	13.7 %	31.6 %	6.9 %	14.3 %
3/2016-2/2017	62.1 %	0.6 %	4.1 %	4.8 %	16.5 %	3.3 %	6.7 %
3/2017-2/2018	38.4 %	12.0 %	4.3 %	3.5 %	9.0 %	6.2 %	5.8 %
3/2018-2/2019	-69.4 %	9.1 %	3.6 %	3.0 %	-2.7 %	1.2 %	2.4 %
Use	-11.6 %	8.6 %	3.9 %	3.5 %	4.4 %	3.0 %	4.3 %
Generic Drugs							
3/2013-2/2014	4.6 %	-4.5 %	-6.1 %	7.4 %	12.2 %	-2.0 %	-2.4 %
3/2014-2/2015	-12.7 %	-4.8 %	1.9 %	5.3 %	31.1 %	1.3 %	2.9 %
3/2015-2/2016	3.5 %	-8.1 %	0.9 %	4.3 %	7.9 %	-0.3 %	0.6 %
3/2016-2/2017	-37.0 %	-18.2 %	-6.4 %	-9.4 %	-5.4 %	-8.3 %	-8.8 %
3/2017-2/2018	-18.3 %	-10.8 %	-11.0 %	-10.4 %	-9.3 %	-10.8 %	-10.7 %
3/2018-2/2019	13.6 %	-7.3 %	-0.6 %	-1.7 %	5.9 %	-1.4 %	-1.3 %
Use	-5.5 %	-10.3 %	-5.0 %	-5.8 %	-1.1 %	-5.5 %	-5.5 %
Specialty Drugs							
3/2013-2/2014	-98.1 %	140.3 %	27.3 %	15.3 %	-11.8 %	27.3 %	27.8 %
3/2014-2/2015	144.5 %	4.3 %	-0.6 %	4.7 %	-25.1 %	-1.7 %	-0.1 %
3/2015-2/2016	-100.0 %	-51.7 %	3.5 %	46.0 %	11.6 %	5.9 %	8.6 %
3/2016-2/2017	-100.0 %	0.8 %	5.2 %	-30.1 %	10.8 %	-7.6 %	-8.1 %
3/2017-2/2018	680.3 %	53.1 %	34.2 %	-1.3 %	-16.8 %	22.0 %	22.4 %
3/2018-2/2019	-100.0 %	32.4 %	23.8 %	4.9 %	0.7 %	16.4 %	19.2 %
Use	160.1 %	34.0 %	24.2 %	-3.0 %	-3.4 %	17.1 %	19.0 %
All Drugs							
3/2013-2/2014	-1.4 %	-0.6 %	-0.7 %	7.4 %	19.0 %	2.2 %	2.4 %
3/2014-2/2015	-15.2 %	0.4 %	2.7 %	3.9 %	15.0 %	0.1 %	3.6 %
3/2015-2/2016	-6.4 %	-12.0 %	3.6 %	18.6 %	26.5 %	4.1 %	7.0 %
3/2016-2/2017	-0.7 %	-7.1 %	-2.0 %	-12.3 %	11.0 %	-3.3 %	-3.9 %
3/2017-2/2018	6.4 %	0.8 %	3.4 %	-5.4 %	5.2 %	1.7 %	1.3 %
3/2018-2/2019	-46.8 %	0.7 %	7.4 %	-4.2 %	-2.2 %	2.8 %	3.0 %
Use	-10.2 %	5.5 %	8.8 %	-6.2 %	2.7 %	4.9 %	4.8 %

Attachment 5

Provider Reimbursement and Benefit Revisions Effective During FY2018, FY2019 and FY2020

This attachment presents information regarding rating adjustments for the various provider reimbursement and benefit revisions that became effective (or will become effective) after the base period used in rate setting (FY2018) and before the end of the FY2020 rating period.

All adjustments have been calculated through an analysis of encounter data repriced using the old and new reimbursement terms and the impact determined as the relative change in cost. For each adjustment, the applicable FY2018 encounter data was repriced using the FFS reimbursement in place during FY2018, the FFS reimbursement that will be in place during FY2020 and the applicable percentage change determined. Although the MCOs are not required to change their reimbursement levels based on changes implemented by HHSC, the Medicaid fee schedule serves as a primary negotiating tool for both MCOs and providers in Texas. Many MCO/provider reimbursement contracts are directly tied to the Medicaid FFS fee schedule through established percentages (e.g. 100%, 102%, 95% etc.) As a result, MCO reimbursement has historically changed in conjunction with Medicaid FFS fee schedule changes, both increases and decreases. Furthermore, it is common for provider reimbursement contracts that are directly tied to the Medicaid fee schedule (i.e. set at a % of Medicaid) to automatically adjust when the Medicaid fee schedule changes with no further need for re-contracting. The correlation between managed care reimbursement and FFS fee schedules has been consistently observed throughout the history of the Texas managed care programs and is reiterated through discussions with the MCOs.

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

Exhibit A – Ambulance Reimbursement Change

Exhibit B – Anesthesiology Reimbursement Change

Exhibit C – Therapy Reimbursement Change

Exhibit D – Private Duty Nursing Reimbursement Change

Exhibit E – Subrogation Recoveries Policy Change

Exhibit F – Invalid Clinician Administered Drug Adjustment

Exhibit G – Medical Cost Share Increase

Exhibit H – Potentially Preventable Complications (PPC) Reimbursement Change

Exhibit I – Potentially Preventable Readmissions (PPR) Quality Improvement

Exhibit J – Potentially Preventable Readmissions (PPR) Reimbursement Change

Exhibit K – Hospital Reimbursement Changes

Exhibit L – Limit Related Party Reimbursement to 100% of Medicaid

Exhibit M – FQHC Wrap Payment Removal

Exhibit N – Pharmacy Carve-in

Effective September 1, 2018 HHSC made revisions to the reimbursement for ambulance services. Exhibit A presents a summary of the derivation of the rating adjustment factors.

Effective November 1, 2017 and March 1, 2019 HHSC made revisions to the reimbursement for anesthesiology services. Exhibit B presents a summary of the derivation of the rating adjustment factors.

Effective September 1, 2019 HHSC will make revisions to the reimbursement rates for therapy services. Exhibit C presents a summary of the derivation of the rating adjustment factors.

Effective September 1, 2019 HHSC will increase the reimbursement for private duty nursing (PDN) by 2.5%. Exhibit D presents a summary of the derivation of the rating adjustment factors.

Effective September 1, 2018 HHSC instituted a change in policy that shifts claim recoveries associated with tort and coordination of benefit recoveries beyond 120 days from the MCOs to HHSC. Exhibit E presents a summary of the necessary rating adjustment factors. The adjustment factors have been calculated in aggregate across all risk groups. Tort and coordination of benefit recovery information was not available at the risk group level.

Invalid clinician administered drugs have been removed from the base period. HHSC has provided guidance to the MCOs which specifies the reporting requirements for a CAD to be considered a valid claim. Exhibit F presents a summary of the derivation of the rating adjustment factors.

Effective May 1, 2018, HHSC increased member cost share for CHIP non-Perinate members under 100% of Federal Poverty Level (FPL). Exhibit G presents a summary of the derivation of the rating adjustment factor for medical service.

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 and can change from one fiscal year to the next. A new PPC reduction list will become effective September 1, 2019. As a result, the adjustment factors shown in Exhibit H represent the restoration of those reductions that were in place during FY2018 net of those reductions that will be in place during FY2020.

Effective September 1, 2019 HHSC is utilizing an adjustment to the FY2018 base period data that analyzes inefficiencies and potentially preventable expenses that unnecessarily increase managed care costs. This analysis was performed using the 3MTM PPR methodology which is a computerized algorithm to identify readmissions with a plausible clinical relationship to the care rendered during or immediately following a prior hospital admission. An expected reduction of PPR events of 10% has been applied for FY2020. The 10% PPR adjustment is intended to be an introductory step in improving the quality and efficiency of the managed care programs. This assumption will be monitored as actual experience develops and reassessed in future rating periods. Exhibit I presents a summary of the derivation of the rating adjustment factors.

Beginning May 1, 2013 HHSC implemented revisions to hospital reimbursement to account for Potentially Preventable Readmissions (PPR). The reimbursement reductions amount to 1-2% depending on a hospital's performance during the evaluation time period and can change from one fiscal year to the next. A new PPR reduction list will become effective September 1, 2019. As a result, the adjustment factors shown in Exhibit J represent the restoration of those reductions that were in place during FY2018 net of those reductions that will be in place during FY2020.

As a result of annual evaluations, several hospitals have had their Standard Dollar Amount (SDA) revised between FY2018 and FY2020. In addition, the SDAs for all rural and children's hospitals will be increased effective September 1, 2019. Exhibit K presents a summary of the

derivation of the rating adjustment factors associated with these revisions.

The rating methodology excludes from the claims experience base any amounts paid by a health plan to a related party in excess of 100% of Medicaid. Attached Exhibit L presents a summary of the derivation of the rating adjustment factors.

Effective March 1, 2018 FQHC wrap payments were carved out of managed care. HHSC has developed policy language to ensure that FQHCs are reimbursed their full encounter rate; however, the MCO will only be responsible for reimbursing the FQHC an amount no less than the rate paid to non-FQHC providers providing similar services. This adjustment was calculated by collecting the FQHC wrap payments paid by the MCOs during the period March 1, 2018 through August 31, 2018. Exhibit M presents a summary of the derivation of the rating adjustment factors.

HHSC has carved-in several low-utilization, high-cost drugs to the managed care capitated arrangement. These drugs were previously covered services under the plan but their cost was reimbursed to the MCOs using a non-risk arrangement. Anti-viral medications for the treatment of Hepatitis C (Epclusa, Harvoni, Viekira Pak, etc.) and Orkambi (a treatment for Cystic Fibrosis) have been added to capitated services effective September 1, 2018. As a result, a portion of the base period (CY2018) excludes the cost of these drugs and an adjustment factor is required to account for this understatement. The carve-in adjustment factors are based on the actual experience of the program. The cost adjustment factors were determined by comparing pre carve-in (January 2018 through August 2018) base period claims cost for the Hepatitis-C drugs and Orkambi to the base period capitated pharmacy services claims cost, by service area and risk group. The resulting factors were then applied to projected FY2020 incurred pharmacy claims to account for the new capitated benefit. Exhibit N of this attachment presents a summary of the derivation of the rating adjustment factors.

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

Attachment 3 Rating Adjustment Heading

Medical - Provider Reimbursement Change
Medical - Other Reimbursement Change
Medical - Inpatient Reimbursement Change
Medical – FQHC Wrap Adjustment
Pharmacy – Rx Carve-In Adjustment

Attachment 5 Exhibits

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

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

FY2020 CHIP Rating
 Inpatient Hospital Reimbursement Change Adjustment
 Limit Reimbursement to Related Parties

	< 1	1-5	6-14	15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Provider Reimbursement Reduction (1)								
Parkland - Dallas	-179	-93,643	-135,627	-90,001	-26	-4,015,770	-21,132	-4,356,379
TCHP - Harris	-526	-682,521	-1,713,122	-855,796	-583	-91,168	-148	-3,343,863
TCHP - Jefferson	-102	-32,766	-59,371	-46,126	0	-1,623	0	-139,989
All Others	0	0	0	0	0	0	0	0
Total	-807	-808,930	-1,908,119	-991,923	-610	-4,108,561	-21,280	-7,840,232
FY2018 Total Incurred Claims (2)								
Parkland - Dallas	4,397	9,183,165	12,682,140	4,977,298	17,439	16,555,314	97,785	43,517,539
TCHP - Harris	62,471	20,296,768	39,160,966	18,879,226	31,538	13,513,955	186,551	92,131,476
TCHP - Jefferson	1,550	1,106,940	2,606,495	969,462	4,814	748,284	21,284	5,458,830
All Others	132,429	86,091,089	132,691,631	63,571,372	491,344	107,968,481	1,353,407	392,299,753
Total	200,847	116,677,962	187,141,233	88,397,358	545,134	138,786,035	1,659,027	533,407,597
Adjustment Factor by Plan (3)								
Parkland - Dallas	-4.08 %	-1.02 %	-1.07 %	-1.81 %	-0.15 %	-24.26 %	-21.61 %	-10.01 %
TCHP - Harris	-0.84 %	-3.36 %	-4.37 %	-4.53 %	-1.85 %	-0.67 %	-0.08 %	-3.63 %
TCHP - Jefferson	-6.58 %	-2.96 %	-2.28 %	-4.76 %	0.00 %	-0.22 %	0.00 %	-2.56 %
All Others	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Total	-0.40 %	-0.69 %	-1.02 %	-1.12 %	-0.11 %	-2.96 %	-1.28 %	-1.47 %
Adjustment Factor by SDA (4)								
Bexar	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Dallas	-0.72 %	-0.43 %	-0.43 %	-0.57 %	-0.07 %	-13.97 %	-11.56 %	
El Paso	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
Harris	-0.59 %	-1.99 %	-2.94 %	-2.83 %	-0.01 %	-0.20 %	-0.03 %	
Jefferson	-3.05 %	-1.26 %	-0.96 %	-2.03 %	0.00 %	-0.05 %	0.00 %	
Lubbock	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
Nueces	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
RSA	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
Tarrant	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
Travis	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	

Footnotes:

(1) Equals the cost impact from limiting reimbursement to a related party to 100% of Medicaid.

(2) Equals FY2018 health plan fee-for-service claims for all services (ICHP provided encounter data).

(3) Cost impact divided by FY2018 Total Incurred Claims.

(4) Adjustment factor applied by service delivery area.

	< 1	1-5	6-14	15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%
Medical - Provider Reimbursement Change Factor (1)							
Bexar	0.9789	0.9731	0.9944	0.9999	1.0000	1.0022	1.0012
Dallas	1.0083	0.9895	0.9988	1.0008	1.0016	1.0001	1.0024
El Paso	1.0000	0.9740	0.9859	0.9973	1.0000	1.0026	1.0012
Harris	0.9995	0.9897	0.9976	1.0003	1.0000	1.0012	1.0014
Jefferson	1.0000	0.9914	0.9990	1.0001	1.0000	1.0005	1.0017
Lubbock	1.0000	0.9903	0.9982	0.9982	1.0000	1.0011	1.0000
Nueces	1.0000	0.9925	0.9974	0.9982	1.0000	1.0029	1.0035
RSA	0.9983	0.9878	0.9960	0.9986	1.0000	1.0022	1.0004
Tarrant	1.0000	0.9885	0.9990	1.0015	1.0000	1.0013	1.0007
Travis	1.0000	0.9944	0.9999	1.0010	1.0000	1.0005	0.9993
Medical - Other Reimbursement Change Factor (2)							
Bexar	1.0031	0.9992	1.0021	1.0017	1.0031	1.0031	1.0031
Dallas	1.0008	1.0011	1.0007	1.0008	1.0010	1.0010	1.0010
El Paso	1.0004	0.9997	1.0001	0.9697	1.0004	0.9997	0.9985
Harris	1.0008	1.0011	1.0002	1.0011	1.0012	1.0012	1.0012
Jefferson	1.0002	1.0001	1.0000	0.9999	1.0002	0.9996	1.0002
Lubbock	1.0007	1.0014	1.0003	1.0004	1.0007	1.0007	1.0007
Nueces	1.0166	1.0213	1.0212	1.0213	1.0215	1.0215	1.0215
RSA	1.0016	1.0018	1.0014	1.0015	1.0018	1.0018	1.0018
Tarrant	0.9994	1.0004	1.0000	0.9993	0.9998	1.0004	1.0003
Travis	1.0013	1.0030	1.0020	1.0020	1.0027	1.0025	1.0027
Medical - Inpatient Reimbursement Change Factor (3)							
Bexar	1.0000	0.9992	0.9955	0.9971	0.9997	1.0000	1.0111
Dallas	0.9928	0.9967	0.9962	0.9951	1.0003	0.8603	0.8852
El Paso	1.0000	0.9992	1.0001	0.9979	1.0000	1.0000	1.0002
Harris	0.9941	0.9799	0.9699	0.9713	1.0023	0.9981	1.0000
Jefferson	0.9695	0.9876	0.9915	0.9806	0.9984	0.9995	1.0179
Lubbock	1.0000	1.0023	1.0021	0.9961	1.0986	1.0000	1.0364
Nueces	1.0000	1.0020	0.9990	1.0017	1.0000	1.0024	1.0123
RSA	1.0119	1.0011	1.0012	1.0016	1.0424	1.0002	1.0888
Tarrant	1.0000	1.0007	0.9988	0.9976	1.0108	1.0002	1.0105
Travis	1.0000	0.9978	0.9971	1.0020	1.0014	1.0009	1.0055

Footnotes:

- (1) The Medical Provider Reimbursement Change Factor consolidates the following adjustments from Exhibit A-C
 - Exhibit A - Ambulance Reimbursement Change
 - Exhibit B - Anesthesiology Reimbursement Change
 - Exhibit C - Therapy Reimbursement Change
- (2) The Medical Other Reimbursement Change Factor consolidates the following adjustments from Exhibit D-G
 - Exhibit D - Private Duty Nursing Reimbursement Change
 - Exhibit E - Subrogation Recoveries Policy Change
 - Exhibit F - Invalid Clinician Administered Drug Adjustment
 - Exhibit G - Medical Cost Share Increase
- (3) The Medical Inpatient Reimbursement Change Factor consolidates the following adjustments from Exhibit H-L
 - Exhibit H - Potentially Preventable Complications (PPC) Reimbursement Change
 - Exhibit I - Potentially Preventable Readmissions (PPR) Quality Improvement
 - Exhibit J - Potentially Preventable Readmissions (PPR) Reimbursement Change
 - Exhibit K - Hospital Reimbursement Changes - Standard Dollar Amount
 - Exhibit L - Limit Reimbursement to Related Parties

Attachment 6

Acuity Risk Adjustment

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

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

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

The risk adjustment factors determined by ICHP for the Under Age 1, Newborn 198%-202% and Perinate 198%-202% risk groups were not applied in developing the FY2020 premium rates due to the small size and the resulting variation in acuity scores.

TEXAS CHIP CDPS SA/Health Plan Risk

Attachment 6 - Exhibit C

Reporting Period: Sep 1, 2017 to Aug 31, 2018

TEXAS CHIP						
SDA/Health Plan	Number of Enrollees	Percent Affected	Actual PMPM Expenditures Based on Paid Amounts	Predicted PMPM Payment	Case Mix	Spend Ratio
CDPS						
Age 15-18	125,078	100.00	118.58	118.58	1.00	1.00
Bexar	10,012	100.00	107.76	119.70	1.00	0.90
Aetna - Bexar	903	9.02	171.16	114.84	0.96	1.49
Amerigroup - Bexar	280	2.80	51.87	132.58	1.11	0.39
CFHP - Bexar	5,889	58.82	112.70	121.85	1.02	0.92
Superior - Bexar	2,940	29.36	84.20	115.54	0.97	0.73
Dallas	19,165	100.00	130.03	121.41	1.00	1.07
Amerigroup - Dallas	11,053	57.67	142.16	125.05	1.03	1.14
Molina - Dallas	1,076	5.61	95.44	77.57	0.64	1.23
Parkland - Dallas	7,036	36.71	116.02	122.02	1.01	0.95
El Paso	5,168	100.00	110.54	137.94	1.00	0.80
El Paso Health - El Paso	3,447	66.70	97.73	141.26	1.02	0.69
Superior - El Paso	1,721	33.30	136.73	131.17	0.95	1.04
Harris	34,706	100.00	138.80	111.91	1.00	1.24
Amerigroup - Harris	3,859	11.12	113.54	96.94	0.87	1.17
CHC - Harris	8,651	24.93	114.40	102.20	0.91	1.12
Molina - Harris	521	1.50	106.02	84.29	0.75	1.26
TCHP - Harris	18,655	53.75	158.29	123.30	1.10	1.28
United - Harris	3,020	8.70	124.51	92.24	0.82	1.35
Jefferson	2,607	100.00	149.14	135.34	1.00	1.10
Amerigroup - Jefferson	130	4.99	346.64	83.11	0.61	4.17
CHC - Jefferson	555	21.29	89.06	138.39	1.02	0.64
Molina - Jefferson	77	2.95	106.08	114.57	0.85	0.93
TCHP - Jefferson	1,093	41.93	165.49	139.87	1.03	1.18
United - Jefferson	752	28.85	139.75	137.36	1.01	1.02
Lubbock	2,759	100.00	121.10	137.19	1.00	0.88
Firstcare - Lubbock	1,433	51.94	120.75	134.54	0.98	0.90
Superior - Lubbock	1,326	48.06	121.48	140.02	1.02	0.87
Nueces	3,147	100.00	139.05	134.27	1.00	1.04
Driscoll - Nueces	2,522	80.14	140.45	139.68	1.04	1.01
Superior - Nueces	528	16.78	148.83	119.40	0.89	1.25
United - Nueces	97	3.08	50.50	68.78	0.51	0.73
RSA	27,367	100.00	94.99	118.94	1.00	0.80
Molina - RSA	7,258	26.52	95.38	114.84	0.97	0.83
Superior - RSA	20,109	73.48	94.84	120.45	1.01	0.79
Tarrant	13,047	100.00	105.24	117.08	1.00	0.90
Aetna - Tarrant	1,777	13.62	81.90	99.49	0.85	0.82
Amerigroup - Tarrant	5,168	39.61	86.37	104.89	0.90	0.82
Cook - Tarrant	6,102	46.77	127.58	132.21	1.13	0.96
Travis	7,100	100.00	104.86	108.53	1.00	0.97
BCBS - Travis	1,661	23.39	117.33	103.44	0.95	1.13
DCHP - Travis	2,154	30.34	85.42	118.47	1.09	0.72
Superior - Travis	3,285	46.27	111.88	104.28	0.96	1.07

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

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

TEXAS CHIP CDPS SA/Health Plan Risk

Attachment 6 - Exhibit D

Reporting Period: Sep 1, 2017 to Aug 31, 2018

TEXAS CHIP						
SDA/Health Plan	Number of Enrollees	Percent Affected	Actual PMPM Expenditures Based on Paid Amounts	Predicted PMPM Payment	Case Mix	Spend Ratio
CDPS						
Perinatal <= 198% FPL	51,027	100.00	410.99	410.99	1.00	1.00
Bexar	2,394	100.00	349.40	402.77	1.00	0.87
Aetna - Bexar	213	8.90	277.80	365.56	0.91	0.76
Amerigroup - Bexar	240	10.03	269.40	368.50	0.91	0.73
CFHP - Bexar	928	38.76	379.40	417.45	1.04	0.91
Superior - Bexar	1,013	42.31	356.18	405.37	1.01	0.88
Dallas	10,119	100.00	375.43	427.40	1.00	0.88
Amerigroup - Dallas	3,315	32.76	291.07	427.42	1.00	0.68
Molina - Dallas	2,078	20.54	278.42	389.64	0.91	0.71
Parkland - Dallas	4,726	46.70	477.90	444.34	1.04	1.08
El Paso	1,057	100.00	332.98	420.79	1.00	0.79
El Paso Health - El Paso	729	68.97	339.49	420.39	1.00	0.81
Superior - El Paso	328	31.03	318.66	421.65	1.00	0.76
Harris	17,451	100.00	466.20	408.17	1.00	1.14
Amerigroup - Harris	2,284	13.09	411.62	393.64	0.96	1.05
CHC - Harris	6,302	36.11	537.26	417.31	1.02	1.29
Molina - Harris	1,331	7.63	467.44	385.26	0.94	1.21
TCHP - Harris	5,457	31.27	411.85	413.34	1.01	1.00
United - Harris	2,077	11.90	453.59	397.69	0.97	1.14
Jefferson	831	100.00	471.45	415.49	1.00	1.13
Amerigroup - Jefferson	104	12.52	405.28	365.48	0.88	1.11
CHC - Jefferson	232	27.92	549.12	418.92	1.01	1.31
Molina - Jefferson	63	7.58	464.54	425.15	1.02	1.09
TCHP - Jefferson	245	29.48	453.59	437.29	1.05	1.04
United - Jefferson	187	22.50	437.65	405.79	0.98	1.08
Lubbock	610	100.00	362.99	425.19	1.00	0.85
Firstcare - Lubbock	233	38.20	431.55	427.27	1.00	1.01
Superior - Lubbock	377	61.80	321.13	423.92	1.00	0.76
Nueces	405	100.00	388.73	391.70	1.00	0.99
Driscoll - Nueces	266	65.68	421.71	396.43	1.01	1.06
Superior - Nueces	111	27.41	333.96	391.63	1.00	0.85
United - Nueces	28	6.91	285.74	341.54	0.87	0.84
RSA	10,180	100.00	374.54	396.99	1.00	0.94
Molina - RSA	3,280	32.22	393.58	389.36	0.98	1.01
Superior - RSA	6,900	67.78	365.51	400.61	1.01	0.91
Tarrant	4,897	100.00	381.49	427.11	1.00	0.89
Aetna - Tarrant	1,031	21.05	331.53	418.94	0.98	0.79
Amerigroup - Tarrant	2,108	43.05	396.93	429.34	1.01	0.92
Cook - Tarrant	1,758	35.90	392.06	429.21	1.00	0.91
Travis	3,083	100.00	453.09	395.44	1.00	1.15
BCBS - Travis	1,012	32.83	530.44	398.64	1.01	1.33
DCHP - Travis	554	17.97	426.79	368.64	0.93	1.16
Superior - Travis	1,517	49.21	410.80	402.85	1.02	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 4 continuous months (age≥1) (permitting one month lapse in enrollment within the 4 months period).

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

FY2020 CHIP Rating Summary
Adjusted Acuity Scores

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%
Raw Unadjusted Acuity Scores (1)							
Aetna - Bexar	1.000	0.897	0.874	0.959	1.000	0.908	1.000
Amerigroup - Bexar	1.000	0.998	0.819	1.108	1.000	0.915	1.000
CFHP - Bexar	1.000	0.983	1.084	1.018	1.000	1.036	1.000
Superior - Bexar	1.000	1.053	0.898	0.965	1.000	1.006	1.000
Amerigroup - Dallas	1.000	0.960	1.002	1.030	1.000	1.000	1.000
Molina - Dallas	1.000	1.162	0.758	0.639	1.000	0.912	1.000
Parkland - Dallas	1.000	1.033	1.028	1.005	1.000	1.040	1.000
El Paso Health - El Paso	1.000	0.921	1.021	1.024	1.000	0.999	1.000
Superior - El Paso	1.000	1.182	0.953	0.951	1.000	1.002	1.000
Amerigroup - Harris	1.000	0.988	0.855	0.866	1.000	0.964	1.000
CHC - Harris	1.000	0.994	0.927	0.913	1.000	1.022	1.000
Molina - Harris	1.000	0.950	0.592	0.753	1.000	0.944	1.000
TCHP - Harris	1.000	0.997	1.079	1.102	1.000	1.013	1.000
United - Harris	1.000	1.068	0.890	0.824	1.000	0.974	1.000
Amerigroup - Jefferson	1.000	1.046	1.201	0.614	1.000	0.880	1.000
CHC - Jefferson	1.000	0.937	0.862	1.023	1.000	1.008	1.000
Molina - Jefferson	1.000	0.504	1.052	0.847	1.000	1.023	1.000
TCHP - Jefferson	1.000	1.146	1.050	1.033	1.000	1.052	1.000
United - Jefferson	1.000	0.866	0.988	1.015	1.000	0.977	1.000
Firstcare - Lubbock	1.000	0.989	1.000	0.981	1.000	1.005	1.000
Superior - Lubbock	1.000	1.013	0.999	1.021	1.000	0.997	1.000
United - Nueces	1.000	0.758	0.954	0.512	1.000	0.872	1.000
Driscoll - Nueces	1.000	0.980	1.016	1.040	1.000	1.012	1.000
Superior - Nueces	1.000	1.163	0.930	0.889	1.000	1.000	1.000
Aetna - Tarrant	1.000	0.928	0.811	0.850	1.000	0.981	1.000
Amerigroup - Tarrant	1.000	0.856	0.937	0.896	1.000	1.005	1.000
Cook - Tarrant	1.000	1.137	1.106	1.129	1.000	1.005	1.000
BCBS - Travis	1.000	0.958	1.114	0.953	1.000	1.008	1.000
DCHP - Travis	1.000	0.914	0.939	1.092	1.000	0.932	1.000
Superior - Travis	1.000	1.089	0.985	0.961	1.000	1.019	1.000
Molina - RSA	1.000	0.898	0.942	0.966	1.000	0.981	1.000
Superior - RSA	1.000	1.030	1.019	1.013	1.000	1.009	1.000

FY2020 CHIP Rating Summary
Adjusted Acuity Scores

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%
Budget Neutrality Adjustment Factor (2)							
Aetna - Bexar	1.000	0.997	1.001	1.000	1.000	1.011	1.000
Amerigroup - Bexar	1.000	0.997	1.001	1.000	1.000	1.011	1.000
CFHP - Bexar	1.000	0.997	1.001	1.000	1.000	1.011	1.000
Superior - Bexar	1.000	0.997	1.001	1.000	1.000	1.011	1.000
Amerigroup - Dallas	1.000	0.999	1.002	1.003	1.000	1.006	1.000
Molina - Dallas	1.000	0.999	1.002	1.003	1.000	1.006	1.000
Parkland - Dallas	1.000	0.999	1.002	1.003	1.000	1.006	1.000
El Paso Health - El Paso	1.000	0.985	1.002	1.002	1.000	1.000	1.000
Superior - El Paso	1.000	0.985	1.002	1.002	1.000	1.000	1.000
Amerigroup - Harris	1.000	1.000	0.999	0.998	1.000	1.005	1.000
CHC - Harris	1.000	1.000	0.999	0.998	1.000	1.005	1.000
Molina - Harris	1.000	1.000	0.999	0.998	1.000	1.005	1.000
TCHP - Harris	1.000	1.000	0.999	0.998	1.000	1.005	1.000
United - Harris	1.000	1.000	0.999	0.998	1.000	1.005	1.000
Amerigroup - Jefferson	1.000	1.003	1.004	1.003	1.000	1.009	1.000
CHC - Jefferson	1.000	1.003	1.004	1.003	1.000	1.009	1.000
Molina - Jefferson	1.000	1.003	1.004	1.003	1.000	1.009	1.000
TCHP - Jefferson	1.000	1.003	1.004	1.003	1.000	1.009	1.000
United - Jefferson	1.000	1.003	1.004	1.003	1.000	1.009	1.000
Firstcare - Lubbock	1.000	1.000	1.000	1.000	1.000	1.000	1.000
Superior - Lubbock	1.000	1.000	1.000	1.000	1.000	1.000	1.000
United - Nueces	1.000	0.995	1.001	1.000	1.000	1.019	1.000
Driscoll - Nueces	1.000	0.995	1.001	1.000	1.000	1.019	1.000
Superior - Nueces	1.000	0.995	1.001	1.000	1.000	1.019	1.000
Aetna - Tarrant	1.000	1.000	1.000	1.002	1.000	1.001	1.000
Amerigroup - Tarrant	1.000	1.000	1.000	1.002	1.000	1.001	1.000
Cook - Tarrant	1.000	1.000	1.000	1.002	1.000	1.001	1.000
BCBS - Travis	1.000	0.999	1.001	1.002	1.000	1.007	1.000
DCHP - Travis	1.000	0.999	1.001	1.002	1.000	1.007	1.000
Superior - Travis	1.000	0.999	1.001	1.002	1.000	1.007	1.000
Molina - RSA	1.000	0.996	0.999	0.999	1.000	1.001	1.000
Superior - RSA	1.000	0.996	0.999	0.999	1.000	1.001	1.000

Attachment 7

Delivery Supplemental Payment

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

Attachment 8

Pay for Quality Program

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

The table below provides a description of the at risk and bonus measures and the calendar year(s) to which each applies for each program.

At-Risk Measures

Measure	STAR+ PLUS	STAR	STAR Kids	CHIP
Potentially Preventable Emergency Room Visits (PPVs)	2018 2019 2020	2018 2019 2020	2020	2018 2019 2020
Appropriate Treatment for Children with Upper Respiratory Infection (URI)		2018 2019 2020		2018 2019 2020
Prenatal and Postpartum Care (PPC)		2018		
Well Child Visits in the First 15 months of Life (W15)		2018 2019 2020		
Diabetes Control - HbA1c < 8% (CDC)	2018 2019 2020			
Controlling High Blood Pressure (CBP)	2020			
Diabetes Screening for Members with Schizophrenia or Bipolar Disorder who are using antipsychotics (SSD)	2018 2019 2020			
Cervical cancer screening (CCS)	2018 2019 2020			
Adolescent Well Care (AWC)			2020	2018 2019
Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents (WCC)			2020	2018 2019 2020
Follow-up After Hospitalization for Mental Illness (FUH)			2020	
Immunizations for Adolescents (IMA) Combination 2		2020		2020
Getting Specialized Services composite			2020	

Bonus Pool Measures

Measure	STAR+ PLUS	STAR	STAR Kids	CHIP
Potentially preventable readmissions (PPR)	2018 2019 2020			
Potentially preventable admissions (PPA)		2018 2019 2020		
Prevention Quality Indicator (PQI) Composite	2018 2019 2020			
Potentially preventable complications (PPC)	2018 2019 2020			
Follow-up Care for Children Prescribed ADHD Medication (ADD) - Initiation submeasure		2020		2020
Low Birth Weight		2018 2019 2020		
Childhood Immunization Status (CIS) Combination 10		2020		2018 2019 2020
Immunizations for Adolescents (IMA) Combination 2			2020	
Good access to urgent care	2018 2019 2020	2018 2019		2018 2019
Getting Care Quickly composite		2020		
Rating health plan a 9 or 10	2018 2019	2018 2019		2018 2019
Rating their child's personal doctor a 9 or 10				2020
Getting care quickly composite				2020
Transition to care as an adult			2020	
Help with care coordination			2020	
Prenatal and Postpartum Care (PPC)		2020		

The medical P4Q program assesses MCOs based on three categories:

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

The performance against self and performance against benchmarks measures are the at-risk components of the program: MCOs can lose money based on their performance on these measures. Utilizing both the performance against self and performance against benchmarks rewards high performing MCOs while still incentivizing improvement regardless of current level

of performance. The total percent capitation earned/lost for each at-risk measure in a program is added to determine the total capitation earned/lost for each MCO across all at-risk measures for that program.

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

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

The maximum bonus or penalty in the P4Q program is 3.0%; however, the typical results are far below these limits.

Historically the impact of the P4Q program on total premium has been immaterial. HHSC performed simulations on the 2014 and 2015 managed care data and the average impact by MCO was less 0.1%. As a result, we do not believe the P4Q program has a material impact on the premium rate development.

Attachment 9

FY2020 CHIP Rate Certification Index

The index below includes the pages of this report that correspond to the applicable sections of the 2019-2020 Medicaid Managed Care Rate Development Guide, dated March 2019.

Section I. Medicaid Managed Care Rates

1. General Information

A. Rate Development Standards

- i. Rates are for the period September 1, 2019 through August 31, 2020 (FY2020).
- ii. (a) The certification letter is on page 14 of the report.
(b) The final capitation rates are shown on pages 11-12 of the report.
(c) (i) See pages 1 through 6 of the report.
(ii) See page 1 through 6 of the report.
(iii) See page 1 through 6 of the report.
(iv) Not applicable.
(v) See Attachment 8 pages 116 through 118 of the report.
(vi) Acknowledged.
- iii. Acknowledged.
- iv. Acknowledged.
- v. Acknowledged.
- vi. Acknowledged.
- vii. Acknowledged
- viii. Acknowledged.
- ix. Acknowledged.

B. Appropriate Documentation

- i. Acknowledged.

- ii. Acknowledged.
- iii. Acknowledged.
- iv. See Attachment 1 pages 16 through 26 of the report.

2. Data

- A. Rate Development Standards
 - i. (a) Acknowledged.
(b) Acknowledged.
(c) Acknowledged.
(d) Not applicable.
- B. Appropriate Documentation
 - i. (a) See pages 1 through 3 of the report.
 - ii. (a) See pages 1 through 3 of the report.
(b) See pages 1 through 3 of the report.
(c) See pages 1 through 3 of the report.
(d) Not applicable.
 - iii. (a) Base period data is fully credible.
(b) See page 4 of the report.
(c) No errors found in the data.
(d) See pages 7 through 8 of the report.
(e) See page 5 of the report.

3. Projected benefit Costs and Trends

- A. Rate Development Standards
 - i. Acknowledged.
 - ii. Acknowledged.

- iii. Acknowledged.
 - iv. Acknowledged.
 - v. Not applicable.
- B. Appropriate Documentation
- i. See pages 11 through 12 and Attachment 1 pages 16 through 26 of the report.
 - ii.
 - (a) See Attachment 3 pages 35 through 80 of the report.
 - (b) There have been no significant changes in the development of the benefit cost since the last certification.
 - (c) All recoupments and recoveries resulting from overpayments to providers have been netted out of the claim payments used in the rate development. MCOs are required to adjust encounter data to remove all overpayments and correct the submitted information. Any provider recoveries not adjusted for in the submitted encounter data are excluded from the base period as a negative add-on payment.
 - iii.
 - (a) See Attachment 4 pages 81 through 87 of the report.
 - (b) See Attachment 4 pages 81 through 87 of the report.
 - (c) See Attachment 4 pages 81 through 87 of the report.
 - (d) See Attachment 4 pages 81 through 87 of the report.
 - (e) Not applicable.
 - iv. Not applicable.
 - v. Not applicable.
- vi.
 - (a) Restorative enrollment can occur when an individual is deemed to have been CHIP eligible during a prior period. If the individual was eligible for and enrolled in CHIP managed care during the prior period, then the individual is retrospectively enrolled in the same managed care plan as their prior enrollment segment. The managed care plan is then retrospectively responsible for all CHIP expenses incurred during this retrospective period and is also paid a retrospective premium for this time period.
 - (b) All claims paid during retroactive enrollment periods are included in the base period data used to develop the FY2020 premium rate.

(c) All enrollment data during retroactive enrollment periods are included in the base period data used to develop the FY2020 premium rate.

(d) No adjustments are necessary to account for retroactive enrollment periods because the enrollment criteria has not changed from the base period to the rating period. All retroactive enrollment and claims information has been included in the base period data, the trend calculations and all other adjustment factors.

vii. See Attachment 5 pages 88 through 106 of the report.

viii. See Attachment 5 pages 88 through 106 of the report.

4. Special Contract Provisions Related to Payment

A. Incentive Arrangements

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

(a) See Attachment 8 pages 116 through 118 of the report.

B. Withhold Arrangements

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

(a) See Attachment 8 pages 116 through 118 of the report.

(b) Acknowledged.

C. Risk-Sharing Arrangements

i. Rate Development Standards

Not applicable.

ii. Appropriate Documentation

HHSC includes an experience rebate provision in its uniform managed care contracts which requires the MCOs to return a portion of net income before taxes if greater than the specified percentages. The net income is measured by the financial statistical reports (FSRs) submitted by the MCOs and audited by an external auditor. Net income is aggregated across all programs and service delivery areas. The aggregated net income is shared as follows:

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

D. Delivery System and Provider Payment Initiatives

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

(a) Not applicable.

E. Pass-Through Payments

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

(a) Not applicable.

5. Projected Non-Benefit Costs

A. Rate Development Standards

i. Acknowledged.

ii. Acknowledged.

iii. Acknowledged.

iv. Acknowledged.

B. Appropriate Documentation

i. See page 9 of the report.

ii. See page 9 of the report.

iii. See page 9 of the report.

6. Risk Adjustment and Acuity Adjustments

A. Rate Development Standards

i. Acknowledged.

ii. Acknowledged.

iii. Acknowledged.

B. Appropriate Documentation

i. See Attachment 6 pages 107 through 114 of the report.

ii. Not applicable, risk adjustment is only applied on a prospective basis.

iii. No material changes have been made to the risk adjustment model other than annual updates of the data since the last rating period.

iv. Risk adjustment has been applied in a budget neutral manner in accordance with 42 CFR 438.5(g).