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April 8, 2021

Ms. Rachel Butler
Chief Actuary
Health and Human Services Commission
4900 North Lamar
Austin, Texas 78751

Re: STAR+PLUS Rate Amendment UMCC 529-12-0002 V2.33, STAR+PLUS Expansion 529-10-0020 V1.37, STAR+PLUS MRSA 529-13-0042 V1.22

Dear Ms. Butler:

This letter amends the report titled State of Texas Medicaid Managed Care STAR+PLUS Program Rate Setting State Fiscal Year 2021 and dated July 8, 2020 which was amended in the letter titled STAR+PLUS Rate Amendment and dated January 7, 2021. The amended FY2021 capitation rates were developed using identical methods and assumptions as the rates described in this report. The amended rates are assumed to be payable for the period June 1, 2021 through August 31, 2021.

A. Summary of the Revisions

Non-Emergency Transportation (NEMT) Carve-in

During the Texas 86th Legislature, Regular Session, the Legislature passed House Bill 1576 which requires the Medicaid MCOs to administer non-emergency medical transportation (NEMT) and non-medical transportation (NMT) services. Currently, medical transportation organizations (MTOs) are providing NEMT services to Medicaid members under a risk-based contract. Effective June 1, 2021 NEMT and NMT services will be provided by the Medicaid managed care organizations (MCOs).

B. Report Amendments

This section of the letter details the amendments to the original actuarial report.

Section I. Introduction

The following language has been added to this section.

Base-year NEMT costs were developed from financial experience from the MTOs and fee-for-service (FFS) Region 4 for the period September 1, 2018, through August 31, 2019. Three sources of claims data were used in the NEMT rating analysis: detailed MTO encounter data, claims lag reports and financial statistical reports (FSR). The three sources of data were required for various aspects of the analysis. The total claim amounts under the three data sources were compared in order to ensure consistent results.

Section II. Overview of Rate Setting Methodology

The rates have been calculated for the same service delivery areas, risk groups and services as outlined in the original report using the same general methodology.

Section III. Adjustment Factors

The following language has been added to this section.

NEMT Trend - The NEMT rating analysis uses a 3.42 percent annual trend assumption. The trend assumption was developed using a combination of the i) historical trends experienced under the Medical Transportation Program for demand response service and ii) the industry trend from the Consumer Price Index published by the Bureau of Labor Statistics for transportation services.

NEMT Individual Transportation Participants (ITP) Service Reimbursement Change - Effective January 1, 2020, reimbursement for ITP changed to \$0.575 per mile, consistent with the state employee travel rate. The base period operating cost for ITP service has been adjusted to reflect this change.

NEMT Seasonality Adjustment - The NEMT carve-in rates will be effective for the three-month period June 1, 2021 through August 31, 2021. A seasonality adjustment was applied to reflect the cost difference between the twelve months used in the base period and three-months used in the rating period.

NEMT Transportation Network Company (TNC) Adjustment - H.B. 1576 allows TNCs such as Uber and Lyft to participate in the Medicaid program. An adjustment was applied to reflect i) the cost difference between TNC and traditional demand response providers and ii) the utilization impact on overall NEMT utilization. We assumed TNC cost per trip would be 15% less than traditional demand response providers. In addition, we assumed 10% of current utilization for demand response service trips under 15 miles would shift to TNCs and utilization would increase by 2.5% for demand response service trips under 15 miles.

No other changes are applicable to this section.

Section IV. Administrative Fees, Taxes and Risk Margin

The following language has been added to this section.

The NEMT rates include an explicit provision for administrative expenses. The amount allocated for administrative expense is a fixed \$0.175 per member per month (PMPM) and a variable 22.0 percent of premium. This approach recognizes that there is a fixed cost for administration regardless of the number of trips provided and that more expensive clients require additional administrative effort.

Section V. Summary

The tables in this section are replaced in their entirety with the following mid-year rates effective June 1, 2021 through August 31, 2021.

Health Plan	Medicaid Only OCC	Medicaid Only HCBS	Dual Eligible OCC	Dual Eligible HCBS
Monthly Premium Rates				
Amerigroup - Bexar	\$1,558.32	\$5,152.82	\$462.73	\$2,214.43
Molina - Bexar	1,655.80	4,836.27	468.44	2,094.23
Superior - Bexar	1,720.07	5,393.24	502.66	2,310.51
Molina - Dallas	1,718.51	4,807.44	502.08	2,018.12
Superior - Dallas	1,566.67	5,075.43	420.27	2,070.13
Amerigroup - El Paso	1,719.99	4,755.80	585.45	2,276.62
Molina - El Paso	1,862.10	5,059.68	672.91	2,257.45
Amerigroup - Harris	2,123.49	7,235.18	404.27	2,598.18
Molina - Harris	1,893.94	6,181.74	416.04	2,520.51
United - Harris	2,300.49	6,374.17	466.33	2,435.00
Health Spring - Hidalgo	2,032.58	5,560.02	1,056.29	2,717.93
Molina - Hidalgo	1,945.48	5,421.85	968.62	2,657.60
Superior - Hidalgo	2,175.44	5,766.00	1,178.49	2,719.46
Amerigroup - Jefferson	1,720.73	5,962.40	358.38	2,061.55
Molina - Jefferson	1,686.08	5,172.94	336.07	1,924.45
United - Jefferson	2,007.53	5,116.14	261.46	1,842.51
Amerigroup - Lubbock	1,573.69	4,713.56	225.53	1,644.51
Superior - Lubbock	1,444.31	5,108.22	231.85	1,744.43
Superior - Nueces	1,703.46	5,132.94	635.08	2,317.42
United - Nueces	2,032.55	5,093.54	583.91	2,255.41
Amerigroup - Tarrant	1,744.25	5,416.77	390.67	1,905.22
Health Spring - Tarrant	1,491.41	5,263.02	323.74	2,055.93
Amerigroup - Travis	1,576.36	5,830.85	415.36	2,162.52
United - Travis	1,651.00	5,689.86	262.96	2,140.50
Superior - MRSA Central	1,520.90	5,444.82	296.62	2,003.11
United - MRSA Central	1,596.98	5,602.92	316.56	2,072.98
Health Spring - MRSA Northeast	1,401.99	5,144.00	295.8	1,975.90
United - MRSA Northeast	1,603.45	5,387.18	324.31	1,696.07
Amerigroup - MRSA West	1,533.76	5,621.09	347.23	1,817.69
Superior - MRSA West	1,533.30	4,987.11	305.21	1,813.32

Health Plan	Medicaid	Dual	IDD	MBCCP
	Only	Eligible		
	NF	NF	Over 21	
Monthly Premium Rates				
Amerigroup - Bexar	\$8,851.41	\$6,125.81	\$1,052.21	\$3,866.68
Molina - Bexar	8,743.33	6,125.81	1,013.83	4,501.03
Superior - Bexar	9,048.38	6,125.81	1,313.42	3,880.13
Molina - Dallas	9,400.75	6,249.98	874.45	3,787.02
Superior - Dallas	10,087.82	6,249.98	998.72	4,938.33
Amerigroup - El Paso	9,689.53	5,646.42	1,625.28	3,350.90
Molina - El Paso	9,674.80	5,646.42	1,826.70	2,899.26
Amerigroup - Harris	10,438.45	5,980.35	1,337.70	5,498.14
Molina - Harris	10,060.31	5,980.35	1,148.85	5,959.11
United - Harris	10,345.86	5,980.35	1,452.11	4,600.44
Health Spring - Hidalgo	9,854.09	6,406.67	1,074.19	3,303.88
Molina - Hidalgo	9,740.17	6,406.67	1,133.60	4,245.36
Superior - Hidalgo	10,180.15	6,406.67	1,319.74	3,711.87
Amerigroup - Jefferson	9,422.53	5,517.00	1,175.61	4,580.90
Molina - Jefferson	9,203.16	5,517.00	1,153.17	4,587.36
United - Jefferson	8,944.26	5,517.00	1,292.28	4,717.69
Amerigroup - Lubbock	8,820.86	6,105.96	975.32	4,236.18
Superior - Lubbock	8,922.35	6,105.96	1,084.41	4,385.28
Superior - Nueces	8,732.89	6,191.19	1,053.52	3,696.15
United - Nueces	8,678.19	6,191.19	1,094.05	3,788.19
Amerigroup - Tarrant	8,980.74	5,914.61	1,124.29	4,282.26
Health Spring - Tarrant	8,599.14	5,914.61	876.59	4,233.63
Amerigroup - Travis	8,892.97	6,515.58	1,049.53	3,469.22
United - Travis	9,142.41	6,515.58	1,173.16	3,939.55
Superior - MRSA Central	8,578.14	5,810.99	1,046.32	4,348.75
United - MRSA Central	8,520.24	5,810.99	1,191.37	5,603.99
Health Spring - MRSA Northeast	9,055.25	5,833.94	964.1	4,110.79
United - MRSA Northeast	9,047.76	5,833.94	1,066.94	3,403.49
Amerigroup - MRSA West	8,977.38	6,029.03	1,211.49	3,287.55
Superior - MRSA West	8,840.90	6,029.03	1,232.24	3,678.85

Section VI. Actuarial Certification of FY2021 STAR+PLUS Premium Rate

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

Rudd and Wisdom has been retained by the Texas Health and Human Services Commission (HHSC) to assist in the development of the STAR+PLUS premium rates for the period June 1, 2021 through August 31, 2021 and to provide the actuarial certification required under Centers for Medicare and Medicaid Services (CMS) requirements 42 CFR 438.4.

We certify that the amended FY2021 premium rates developed by HHSC and Rudd and Wisdom satisfy the following:

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

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

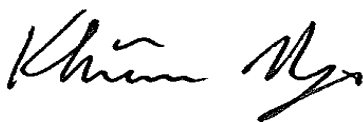
Please note that actual health plan contractor experience will differ from these projections. Rudd and Wisdom has developed these rates on behalf of the State to demonstrate compliance with the CMS requirements under 42 CFR 438.3(c), 438.3(e), 438.4, 438.5, 438.6 and 438.7. Any health plan contracting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



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Section VII. Attachments

The following sections indicate any revisions applicable to each of the attachments in the original actuarial report dated July 8, 2020.

Attachment 1 - Summary of FY2021 STAR+PLUS Rating Analysis

Exhibit A Revised. This exhibit presents summary information regarding the FY2021 rates. Included on the exhibit are current (March 1, 2021 – May 31, 2021) premium rates split between medical (acute care and long-term care), prescription drug, NAIP, QIPP and UHRIP rates; June 1, 2021 through August 31, 2021 premium rates split between medical (acute care and long-term care), prescription drug, NAIP, QIPP and UHRIP rates and a comparison of March 1, 2021 and June 1, 2021 premium rates.

Exhibit B Revised. This exhibit presents a comparison of the projected expenditures under the current (March 1, 2021 through May 31, 2021) premium rates and the June 1, 2021 through August 31, 2021 premium rates. The projection is split by each component.

The reasons for the rate changes shown in Exhibit A Revised are due solely to the addition of NEMT carve-in rates as described above. There are no other changes to the premium rates effective June 1, 2021.

Attachment 2 - Individual Health Plan Experience Analysis

No changes applicable to this section.

Attachment 3 - Community Experience Analysis

The following language has been added to this section.

Community Experience Analysis – NEMT

The following exhibits present a summary of the NEMT experience analysis performed for each STAR+PLUS service area for NEMT services. As with medical, HHSC utilizes a community rating methodology in setting the NEMT carve-in 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 FY2021 STAR+PLUS NEMT carve-in community capitation rates for the following service areas:

- Exhibit A.3 – Bexar Service Area
- Exhibit B.3 – Dallas Service Area
- Exhibit C.3 – El Paso Service Area
- Exhibit D.3 – Harris Service Area
- Exhibit E.3– Hidalgo Service Area
- Exhibit F.3 – Jefferson Service Area
- Exhibit G.3 – Lubbock Service Area
- Exhibit H.3 – Nueces Service Area

Exhibit I.3 – Tarrant Service Area
Exhibit J.3 – Travis Service Area
Exhibit K.3 – MRSA Central Service Area
Exhibit L.3 – MRSA Northeast Service Area
Exhibit M.3 – MRSA West Service Area
Exhibit N.3 – Statewide

These exhibits present projected FY2021 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 exhibits show (a) summary base period (FY2019) enrollment and estimated incurred claims, (b) projected rating period enrollment, (c) assumed trend and claims adjustment factor assumptions, (d) projected rating period incurred claims, (e) non-benefit costs for administrative expenses, taxes and risk margin and (f) total projected rating period costs.

A provision for administrative expenses is included in the amount of \$0.175 pmpm plus 22.0% of gross premiums. Additional provisions are also included for premium tax (1.75% of premium) and risk margin (1.75% of premium).

Attachment 4 - Trend Analysis

The following language has been added to this section.

Trend Analysis – NEMT

The NEMT rating methodology uses assumed trend factors to adjust the base period claims cost to the projection period. The trend factors used in this analysis are a combination of utilization and inflation components. The trend factors were developed using a combination of i) the actual trend experience under the MTP program and ii) the industry trend from the Consumer Price Index published by the Bureau of Labor Statistics for transportation services. The annual trend assumption of 3.42% was used in the rating analysis to project historical experience forward to the rating period.

Exhibit G presents the historical trends experience under the MTP program. The historical trends include demand response service and excludes experience for MTO regions 1, 4 and 10. MTO regions 1 and 10 switched organizations effective September 1, 2017 and MTO region 4 is operated under fee-for-service.

Exhibit H presents the industry trend from the Consumer Price Index published by the Bureau of Labor Statistics for transportation services.

Exhibit I presents a summary of the NEMT trend analysis. The NEMT trend is selected based on the simple average of the actual and industry average trends.

Attachment 5 - Provider Reimbursement and Benefit Revisions Effective During FY2019, FY2020 and FY2021

The following language has been added to this section.

NEMT Individual Transportation Participants (ITP) Service Reimbursement Change - Effective January 1, 2020, reimbursement for ITP changed to \$0.575 per mile, consistent with the state employee travel rate. The base period operating cost for ITP service has been adjusted to reflect this change. Exhibit N presents a summary of the derivation of the adjustment factors.

NEMT Seasonality Adjustment - The NEMT carve-in rates will be effective for the three-month period June 1, 2021 through August 31, 2021. A seasonality adjustment was applied to reflect the cost difference between the twelve months used in the base period and three-months used in the rating period. Exhibit O presents a summary of the derivation of the adjustment factors.

NEMT Transportation Network Company (TNC) Adjustment - H.B. 1576 allows TNCs such as Uber and Lyft to participate in the Medicaid program. An adjustment was applied to reflect i) the cost difference between TNC and traditional demand response providers and ii) the utilization impact on overall NEMT utilization. We assumed TNC cost per trip would be 15% less than traditional demand response providers. In addition, we assumed 10% of current utilization for demand response service trips under 15 miles would shift to TNCs and utilization would increase by 2.5% for demand response service trips under 15 miles. Exhibit P presents a summary of the derivation of the adjustment factors.

Attachment 6 – Acuity Risk Adjustment – Acute Care

There have been no changes to this section.

Attachment 7 – Acuity Risk Adjustment – Long Term Care

There have been no changes to this section.

Attachment 8 – Network Access Improvement Program (NAIP)

There have been no changes to this section.

Attachment 9 – Quality Incentive Payment Program (QIPP)

There have been no changes to this section.

Attachment 10 – Uniform Hospital Rate Increase Program

There have been no changes to this section.

Attachment 11– Community First Choice Initiative (CFC)

There have been no changes to this section.

Attachment 12– Pay for Quality Program

There have been no changes to this section.

Attachment 13– FY2021 STAR+PLUS Rate Certification Index

FY2021 STAR+PLUS Rate Certification Index

The index below includes the pages of this report that correspond to the applicable sections of the 2020-2021 Medicaid Managed Care Rate Development Guide, dated July 2020.

Section I. Medicaid Managed Care Rates

1. General Information

A. Rate Development Standards

- i. Rates are for the period June 1, 2021 through August 31, 2021.
- ii. (a) The certification letter is on page 5 of the amendment letter.

(b) The final capitation rates are shown on pages 3 and 4 of the amendment letter.

(c) (i) See pages 1 and 4 through 6 of the original report and pages 1 through 2 of the amendment letter.

(ii) See page 1 of the amendment letter

(iii) See page 1 of the original report.

(iv) There have been no changes to program eligibility; however, there were changes in risk group classification as discussed on pages 12, 184-185 and 207-210 of the original report. No further changes in this amendment.

(v) Pages 242-246 (NAIP), 247-259 (QIPP), 260-275 (UHRIP) and 283-285 (P4Q) of the original report. Changes to the QIPP and UHRIP programs are detailed on page 2 of the amendment letter dated January 7, 2021.

(vi) Not applicable.
- 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 pages 276 through 282 of the original report.

v. (a) See Attachment 1 Revised pages 18 through 41 of the amendment letter.

(b) Not applicable. All rating adjustment factors have been included in the report.

vi. Not applicable. While amendments may be necessary in future months there are none known at this time.

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 original report and pages 1 through 2 of the amendment letter.

ii. (a) See pages 1 through 3 of the original report and pages 1 through 2 of the amendment letter.

(b) See pages 2 through 3 of the original report and pages 1 through 2 of the amendment letter.

- (c) See pages 2 through 3 of the original report and pages 1 through 2 of the amendment letter.
- (d) Not applicable.
- iii. (a) Base period data is fully credible.
- (b) See page 4 of the original report.
- (c) No errors found in the data.
- (d) See Attachment 5 pages 183 through 216 of the original report, Attachment 5 Revised pages 69 and 70 of the amendment letter dated January 7, 2021 and Attachment 5 Revised pages 88 through 100 of the amendment letter.
- (e) Value added services and non-capitated services have been excluded from the analysis.

3. Projected Benefit Costs and Trends

A. Rate Development Standards

- i. Acknowledged.
- ii. Acknowledged.
- iii. Acknowledged.
- iv. Acknowledged.
- v. See page 184 and pages 199 through 202 of the original report.

B. Appropriate Documentation

- i. See pages 3 and 4 and Attachment 1 Revised pages 18 through 41 of the amendment letter.
- ii. (a) See Attachment 3 pages 52 through 157 of the original report and Attachment 3 Revised pages 43 through 84 of the amendment letter.
- (b) The only changes since the last certification are outlined on pages 1 and 2 of the amendment letter.
- (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 158 through 182 of the original report and Attachment 4 Revised pages 85 through 87 of the amendment letter.

(b) See Attachment 4 pages 158 through 182 of the original report and Attachment 4 Revised pages 85 through 87 of the amendment letter.

(c) See Attachment 4 pages 158 through 182 of the original report and Attachment 4 Revised pages 85 through 87 of the amendment letter.

(d) See Attachment 4 pages 158 through 182 of the original report and Attachment 4 Revised pages 85 through 87 of the amendment letter.

(e) Not applicable.

iv. Not applicable.

v. The STAR+PLUS program stipulates the following provisions related to in lieu of services:

- The MCO may provide inpatient services for acute psychiatric conditions in a free-standing psychiatric hospital in lieu of an acute care inpatient hospital setting.
- The MCO may provide substance use disorder treatment services in a chemical dependency treatment facility in lieu of an acute care inpatient hospital setting.
- For individuals between the ages of 21 and 64, services are provided in IMDs only in lieu of an acute care hospital setting. IMD services for individuals under age 21 and age 65 and over are covered pursuant to the Texas state plan.

The cost for in lieu of services is not tracked from other services and are included in the rate development and are not treated differently than any other category of service. Historically these services have made up less than 1.0% of total base period claims.

vi. (a) Restorative enrollment can occur when an individual is deemed to have been Medicaid eligible during a prior period. If the individual was eligible for and enrolled in Medicaid managed care during the prior six months, 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 Medicaid 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 FY2021 premium rate.

(c) All enrollment data during retroactive enrollment periods are included in the base period data used to develop the FY2021 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 183 through 216 of the original report, Attachment 5 Revised pages 69 and 70 of the amendment letter dated January 7, 2021 and Attachment 5 Revised pages 88 through 100 of the amendment letter.

viii. See Attachment 5 pages 183 through 216 of the original report, Attachment 5 Revised pages 69 and 70 of the amendment letter dated January 7, 2021 and Attachment 5 Revised pages 88 through 100 of the amendment letter.

4. Special Contract Provisions Related to Payment

A. Incentive Arrangements

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

See Attachment 12 pages 283 through 285 of the original report.

B. Withhold Arrangements

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

See Attachment 12 pages 283 through 285 of the original report.

C. Risk-Sharing Arrangements

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

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

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

D. Delivery System and Provider Payment Initiatives

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

(a) See Attachment 9 pages 247 through 259 and Attachment 10 pages 260 through 275 of the original report and Attachment 9 Revised page 71 and Attachment 10 Revised pages 72 through 84 of the amendment letter dated January 7, 2021 for a description of the QIPP and UHRIP programs. See Attachment 1 Revised page 42 of the amendment letter dated January 7, 2021 for the estimated value of these programs.

(b) A minimum fee schedule for nursing facility reimbursement is a statutory requirement per Texas Government Section Code 533.00251(c). This requirement has been in place since nursing facility services were carved into the STAR+PLUS program on March 1, 2015. Reimbursement as a result of this minimum fee schedule is reflected in the historical nursing facility claims data used as the base period and all other rating analysis and requires no further adjustments in the FY2021 rate development.

(c) Confirmed.

E. Pass-Through Payments

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

(a) See Attachment 8 pages 242 through 246 of the original report.

(b) See Attachment 8 pages 242 through 246 of the original report.

(c) See Attachment 8 pages 242 through 246 of the original report.

5. Projected Non-Benefit Costs

A. Rate Development Standards

i. Acknowledged.

ii. Acknowledged.

iii. Acknowledged.

iv. Acknowledged.

B. Appropriate Documentation

i. See pages 16-17 of the original report and page 3 of the amendment letter.

ii. See pages 16-17 of the original report and page 3 of the amendment letter.

iii. See pages 16-17 of the original report and page 3 of the amendment letter.

iv. (a) See pages 16-17 of the original report and page 3 of the amendment letter.

(b) Not applicable.

(c) Not applicable.

(d) See pages 16-17 of the original report and page 3 of the amendment letter.

(e) See Attachment 1 Revised pages 18 through 41 of the amendment letter.

(f) See pages 16-17 of the original report and page 3 of the amendment letter.

6. Risk Adjustment and Acuity Adjustments

A. Rate Development Standards

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

B. Appropriate Documentation

- i. See Attachments 6 and 7 pages 217 through 241 of the original 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 applied to acute care or long term care other than annual updates of the data since the last rating period. Risk adjustment has been applied in a budget neutral manner in accordance with 42 CFR 438.5(g).
- iv. See Attachments 6 and 7 pages 217 through 241 of the original report.

Section II. Medicaid Managed Care Rates with Long-Term Services and Supports

1. Managed Long-Term Services and Supports

A. Acknowledged.

B. Long term care rate development follows the same methodology as all other services described throughout the report.

C. Appropriate Documentation

- i. (a) Rates are set for the risk groups specified on page 5 of the original report. This is a “non-blended” approach.
- (b) Rate cells are specified on page 5 of the original report. Description of the rate setting methodology is included in Attachment 3 pages 52 through 157 of the original report and Attachment 3 Revised pages 43 through 84 of the amendment letter. All trend analysis and other adjustment factors follow the same methodology as described throughout the report.
- (c) Not applicable.
- (d) LTSS has been managed under STAR+PLUS since its inception. The impact of managing these services on utilization and unit costs of services

is reflected in the base period utilized in the rate development and requires no further adjustments.

(e) LTSS has been managed under STAR+PLUS since its inception. The impact of managing these services on utilization and unit costs of services is reflected in the base period utilized in the rate development and requires no further adjustments.

- ii. The development of the administrative cost is described on pages 16 and 17 of the original report. Service coordination expenditures are based on the amounts reported by the MCO as discussed on page 2 of the original report.
- iii. The rate setting is based on historical managed care data for all services, including long term care. The managed care data is fully credible and therefore no reliance is necessary on outside studies or research.

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-5/31/2021 Acute Care Premium Rates pmpm (Community Rates with Risk Adjustment)								
Amerigroup - Bexar	634.59	1,518.94	0.00	0.00	1,343.84	0.00	465.59	2,565.08
Molina - Bexar	642.73	1,478.18	0.00	0.00	1,308.38	0.00	444.98	2,804.12
Superior - Bexar	660.66	1,544.71	0.00	0.00	1,391.28	0.00	564.02	2,439.79
Molina - Dallas	709.65	1,523.39	0.00	0.00	1,881.38	0.00	429.66	2,390.91
Superior - Dallas	680.45	1,681.17	0.00	0.00	2,206.60	0.00	479.36	3,101.05
Amerigroup - El Paso	683.54	1,417.59	0.00	0.00	2,658.87	0.00	716.38	1,842.74
Molina - El Paso	701.70	1,568.91	0.00	0.00	2,461.93	0.00	806.91	1,591.25
Amerigroup - Harris	741.11	1,871.74	0.00	0.00	1,745.87	0.00	476.33	2,533.95
Molina - Harris	666.70	1,631.96	0.00	0.00	1,684.14	0.00	406.14	2,434.72
United - Harris	815.94	1,895.52	0.00	0.00	1,855.85	0.00	540.42	2,735.24
Health Spring - Hidalgo	559.21	1,457.25	0.00	0.00	2,387.12	0.00	546.42	1,787.27
Molina - Hidalgo	543.86	1,382.26	0.00	0.00	2,187.49	0.00	571.14	2,252.22
Superior - Hidalgo	600.92	1,516.09	0.00	0.00	2,536.06	0.00	647.39	1,940.28
Amerigroup - Jefferson	654.02	1,911.71	0.00	0.00	1,678.05	0.00	421.59	2,417.80
Molina - Jefferson	640.89	1,595.70	0.00	0.00	1,497.33	0.00	386.84	2,384.28
United - Jefferson	763.92	1,726.47	0.00	0.00	1,524.27	0.00	467.06	2,778.71
Amerigroup - Lubbock	696.54	1,548.48	0.00	0.00	1,166.55	0.00	433.27	2,203.73
Superior - Lubbock	653.05	1,741.20	0.00	0.00	1,282.55	0.00	500.13	2,460.98
Superior - Nueces	583.86	1,427.44	0.00	0.00	1,258.38	0.00	442.88	2,222.55
United - Nueces	670.12	1,365.74	0.00	0.00	1,321.10	0.00	418.45	2,426.76
Amerigroup - Tarrant	727.39	1,778.34	0.00	0.00	1,590.52	0.00	476.01	2,630.82
Health Spring - Tarrant	620.86	1,709.61	0.00	0.00	1,428.54	0.00	382.89	2,595.72
Amerigroup - Travis	629.47	1,415.07	0.00	0.00	936.22	0.00	382.58	2,269.14
United - Travis	673.27	1,480.33	0.00	0.00	1,120.59	0.00	434.00	2,757.40
Superior - MRSA Central	659.00	1,566.73	0.00	0.00	1,330.69	0.00	435.51	2,493.90
United - MRSA Central	669.93	1,609.44	0.00	0.00	1,292.55	0.00	484.93	3,071.31
Health Spring - MRSA Northeast	561.67	1,478.23	0.00	0.00	1,441.68	0.00	430.31	2,618.20
United - MRSA Northeast	638.69	1,716.08	0.00	0.00	1,493.51	0.00	471.67	2,228.08
Amerigroup - MRSA West	634.38	1,818.70	0.00	0.00	1,404.17	0.00	490.74	2,147.45
Superior - MRSA West	633.65	1,528.63	0.00	0.00	1,369.22	0.00	510.61	2,381.88

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-5/31/2021 Long Term Care Premium Rates pmpm (Community Rates with Risk Adjustment)								
Amerigroup - Bexar	261.27	2,146.84	449.39	2,167.88	4,715.61	4,407.19	0.00	103.38
Molina - Bexar	307.35	1,856.49	455.10	2,047.68	4,715.61	4,407.19	0.00	103.38
Superior - Bexar	325.88	2,255.65	489.32	2,263.96	4,715.61	4,407.19	0.00	103.38
Molina - Dallas	349.28	1,855.59	485.39	1,972.99	4,622.95	4,301.39	0.00	125.43
Superior - Dallas	248.42	1,902.89	403.58	2,025.00	4,622.95	4,301.39	0.00	125.43
Amerigroup - El Paso	332.69	2,037.37	575.16	2,236.51	4,653.01	4,521.89	0.00	121.59
Molina - El Paso	426.74	1,938.47	662.62	2,217.34	4,653.01	4,521.89	0.00	121.59
Amerigroup - Harris	279.77	2,753.41	392.67	2,567.94	4,837.14	4,315.81	0.00	109.55
Molina - Harris	287.71	2,580.53	404.44	2,490.27	4,837.14	4,315.81	0.00	109.55
United - Harris	353.05	2,491.65	454.73	2,404.76	4,837.14	4,315.81	0.00	109.55
Health Spring - Hidalgo	828.37	2,727.15	1,045.76	2,688.49	4,547.60	4,936.00	0.00	419.62
Molina - Hidalgo	749.07	2,652.97	958.09	2,628.16	4,547.60	4,936.00	0.00	419.62
Superior - Hidalgo	857.88	2,750.68	1,167.96	2,690.02	4,547.60	4,936.00	0.00	419.62
Amerigroup - Jefferson	195.85	2,181.93	334.18	1,982.63	4,374.13	3,948.85	0.00	93.10
Molina - Jefferson	216.82	1,819.53	311.87	1,845.53	4,374.13	3,948.85	0.00	93.10
United - Jefferson	199.76	1,781.76	237.26	1,763.59	4,374.13	3,948.85	0.00	93.10
Amerigroup - Lubbock	108.36	1,679.60	196.66	1,559.44	4,576.60	4,132.89	0.00	121.64
Superior - Lubbock	137.86	1,798.79	202.98	1,659.36	4,576.60	4,132.89	0.00	121.64
Superior - Nueces	405.64	2,177.04	616.35	2,267.86	4,458.05	4,444.01	0.00	203.84
United - Nueces	471.34	2,226.80	565.18	2,205.85	4,458.05	4,444.01	0.00	203.84
Amerigroup - Tarrant	184.17	1,924.34	373.17	1,861.05	4,146.70	4,085.51	0.00	84.18
Health Spring - Tarrant	190.66	1,975.94	306.24	2,011.76	4,146.70	4,085.51	0.00	84.18
Amerigroup - Travis	271.55	2,600.16	395.12	2,095.91	4,532.42	4,278.38	0.00	107.06
United - Travis	203.48	2,410.91	242.72	2,073.89	4,532.42	4,278.38	0.00	107.06
Superior - MRSA Central	187.32	2,053.45	259.65	1,914.50	4,634.78	4,284.53	0.00	101.58
United - MRSA Central	186.15	2,152.15	279.59	1,984.37	4,634.78	4,284.53	0.00	101.58
Health Spring - MRSA Northeast	207.09	2,091.93	274.16	1,919.07	4,530.17	4,215.41	0.00	118.38
United - MRSA Northeast	228.48	1,897.42	302.67	1,639.24	4,530.17	4,215.41	0.00	118.38
Amerigroup - MRSA West	144.89	1,890.97	322.63	1,750.31	4,318.30	4,074.57	0.00	79.90
Superior - MRSA West	160.87	1,799.74	280.61	1,745.94	4,318.30	4,074.57	0.00	79.90

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-5/31/2021 Prescription Drug Premium Rates pmpm (Community Rates with Risk Adjustment)								
Amerigroup - Bexar	518.04	1,179.57	0.00	0.00	728.50	0.00	525.47	1,008.04
Molina - Bexar	524.69	1,147.92	0.00	0.00	709.28	0.00	502.21	1,101.98
Superior - Bexar	539.33	1,199.58	0.00	0.00	754.21	0.00	636.57	958.80
Molina - Dallas	425.82	862.90	0.00	0.00	462.79	0.00	373.48	528.25
Superior - Dallas	408.29	952.28	0.00	0.00	542.79	0.00	416.68	685.15
Amerigroup - El Paso	552.95	1,063.56	0.00	0.00	509.87	0.00	780.52	959.34
Molina - El Paso	567.65	1,177.09	0.00	0.00	472.10	0.00	879.16	828.41
Amerigroup - Harris	521.55	1,081.65	0.00	0.00	706.20	0.00	566.54	991.99
Molina - Harris	469.19	943.08	0.00	0.00	681.23	0.00	483.06	953.14
United - Harris	574.22	1,095.39	0.00	0.00	750.69	0.00	642.77	1,070.79
Health Spring - Hidalgo	505.64	1,060.92	0.00	0.00	711.01	0.00	465.37	716.18
Molina - Hidalgo	491.76	1,006.33	0.00	0.00	651.55	0.00	486.42	902.49
Superior - Hidalgo	543.36	1,103.76	0.00	0.00	755.37	0.00	551.37	777.49
Amerigroup - Jefferson	478.10	1,027.90	0.00	0.00	771.88	0.00	571.13	954.32
Molina - Jefferson	468.49	857.98	0.00	0.00	688.76	0.00	524.06	941.09
United - Jefferson	558.43	928.30	0.00	0.00	701.15	0.00	632.73	1,096.77
Amerigroup - Lubbock	478.10	957.47	0.00	0.00	683.62	0.00	429.67	773.64
Superior - Lubbock	448.25	1,076.64	0.00	0.00	751.60	0.00	495.98	863.95
Superior - Nueces	462.73	993.70	0.00	0.00	688.46	0.00	503.34	583.59
United - Nueces	531.10	950.74	0.00	0.00	722.77	0.00	475.58	637.21
Amerigroup - Tarrant	526.51	1,094.09	0.00	0.00	811.18	0.00	525.19	1,130.68
Health Spring - Tarrant	449.39	1,051.81	0.00	0.00	728.57	0.00	422.45	1,115.60
Amerigroup - Travis	484.34	1,359.38	0.00	0.00	766.41	0.00	588.97	545.72
United - Travis	518.03	1,422.08	0.00	0.00	917.34	0.00	668.13	663.15
Superior - MRSA Central	428.67	1,227.40	0.00	0.00	590.26	0.00	509.40	1,035.22
United - MRSA Central	435.78	1,260.86	0.00	0.00	573.35	0.00	567.20	1,274.90
Health Spring - MRSA Northeast	438.23	1,038.11	0.00	0.00	872.42	0.00	446.53	860.04
United - MRSA Northeast	498.31	1,205.15	0.00	0.00	903.78	0.00	489.45	731.89
Amerigroup - MRSA West	497.51	1,336.99	0.00	0.00	707.71	0.00	577.07	547.20
Superior - MRSA West	496.94	1,123.75	0.00	0.00	690.09	0.00	600.43	606.93

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-5/31/2021 NAIP Rates pmpm								
Amerigroup - Bexar	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - Bexar	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - Bexar	7.97	7.97	0.00	0.00	0.00	0.00	7.97	0.00
Molina - Dallas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - Dallas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - El Paso	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - El Paso	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - Harris	35.75	35.75	0.00	0.00	0.00	0.00	35.75	0.00
Molina - Harris	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - Harris	26.90	26.90	0.00	0.00	0.00	0.00	26.90	0.00
Health Spring - Hidalgo	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - Hidalgo	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - Hidalgo	3.45	3.45	0.00	0.00	0.00	0.00	3.45	0.00
Amerigroup - Jefferson	5.94	5.94	0.00	0.00	0.00	0.00	5.94	0.00
Molina - Jefferson	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - Jefferson	25.02	25.02	0.00	0.00	0.00	0.00	25.02	0.00
Amerigroup - Lubbock	23.38	23.38	0.00	0.00	0.00	0.00	23.38	0.00
Superior - Lubbock	16.17	16.17	0.00	0.00	0.00	0.00	16.17	0.00
Superior - Nueces	38.44	38.44	0.00	0.00	0.00	0.00	38.44	0.00
United - Nueces	119.93	119.93	0.00	0.00	0.00	0.00	119.93	0.00
Amerigroup - Tarrant	5.00	5.00	0.00	0.00	0.00	0.00	5.00	0.00
Health Spring - Tarrant	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - Travis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - Travis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - MRSA Central	4.05	4.05	0.00	0.00	0.00	0.00	4.05	0.00
United - MRSA Central	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Health Spring - MRSA Northeast	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - MRSA Northeast	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - MRSA West	31.74	31.74	0.00	0.00	0.00	0.00	31.74	0.00
Superior - MRSA West	19.62	19.62	0.00	0.00	0.00	0.00	19.62	0.00

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-5/31/2021 QIPP Rates pmpm								
Amerigroup - Bexar	0.00	0.00	0.00	0.00	1,712.85	1,712.85	0.00	0.00
Molina - Bexar	0.00	0.00	0.00	0.00	1,712.85	1,712.85	0.00	0.00
Superior - Bexar	0.00	0.00	0.00	0.00	1,712.85	1,712.85	0.00	0.00
Molina - Dallas	0.00	0.00	0.00	0.00	1,941.58	1,941.58	0.00	0.00
Superior - Dallas	0.00	0.00	0.00	0.00	1,941.58	1,941.58	0.00	0.00
Amerigroup - El Paso	0.00	0.00	0.00	0.00	1,102.47	1,102.47	0.00	0.00
Molina - El Paso	0.00	0.00	0.00	0.00	1,102.47	1,102.47	0.00	0.00
Amerigroup - Harris	0.00	0.00	0.00	0.00	1,659.88	1,659.88	0.00	0.00
Molina - Harris	0.00	0.00	0.00	0.00	1,659.88	1,659.88	0.00	0.00
United - Harris	0.00	0.00	0.00	0.00	1,659.88	1,659.88	0.00	0.00
Health Spring - Hidalgo	0.00	0.00	0.00	0.00	1,465.81	1,465.81	0.00	0.00
Molina - Hidalgo	0.00	0.00	0.00	0.00	1,465.81	1,465.81	0.00	0.00
Superior - Hidalgo	0.00	0.00	0.00	0.00	1,465.81	1,465.81	0.00	0.00
Amerigroup - Jefferson	0.00	0.00	0.00	0.00	1,561.47	1,561.47	0.00	0.00
Molina - Jefferson	0.00	0.00	0.00	0.00	1,561.47	1,561.47	0.00	0.00
United - Jefferson	0.00	0.00	0.00	0.00	1,561.47	1,561.47	0.00	0.00
Amerigroup - Lubbock	0.00	0.00	0.00	0.00	1,951.23	1,951.23	0.00	0.00
Superior - Lubbock	0.00	0.00	0.00	0.00	1,951.23	1,951.23	0.00	0.00
Superior - Nueces	0.00	0.00	0.00	0.00	1,741.41	1,741.41	0.00	0.00
United - Nueces	0.00	0.00	0.00	0.00	1,741.41	1,741.41	0.00	0.00
Amerigroup - Tarrant	0.00	0.00	0.00	0.00	1,818.93	1,818.93	0.00	0.00
Health Spring - Tarrant	0.00	0.00	0.00	0.00	1,818.93	1,818.93	0.00	0.00
Amerigroup - Travis	0.00	0.00	0.00	0.00	2,217.25	2,217.25	0.00	0.00
United - Travis	0.00	0.00	0.00	0.00	2,217.25	2,217.25	0.00	0.00
Superior - MRSA Central	0.00	0.00	0.00	0.00	1,514.30	1,514.30	0.00	0.00
United - MRSA Central	0.00	0.00	0.00	0.00	1,514.30	1,514.30	0.00	0.00
Health Spring - MRSA Northeast	0.00	0.00	0.00	0.00	1,611.45	1,611.45	0.00	0.00
United - MRSA Northeast	0.00	0.00	0.00	0.00	1,611.45	1,611.45	0.00	0.00
Amerigroup - MRSA West	0.00	0.00	0.00	0.00	1,942.35	1,942.35	0.00	0.00
Superior - MRSA West	0.00	0.00	0.00	0.00	1,942.35	1,942.35	0.00	0.00

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-5/31/2021 UHRIP Rates pmpm								
Amerigroup - Bexar	128.08	266.65	0.00	0.00	340.17	0.00	57.81	174.37
Molina - Bexar	164.69	312.86	0.00	0.00	286.77	0.00	63.30	475.74
Superior - Bexar	169.89	344.51	0.00	0.00	463.99	0.00	101.52	362.35
Molina - Dallas	217.46	510.23	0.00	0.00	481.61	0.00	67.97	726.62
Superior - Dallas	213.21	483.76	0.00	0.00	763.46	0.00	99.34	1,010.89
Amerigroup - El Paso	137.69	200.03	0.00	0.00	754.87	0.00	125.04	411.42
Molina - El Paso	152.89	337.96	0.00	0.00	974.85	0.00	137.29	342.20
Amerigroup - Harris	530.26	1,448.97	0.00	0.00	1,478.92	0.00	255.74	1,846.84
Molina - Harris	455.29	982.51	0.00	0.00	1,187.48	0.00	256.31	2,445.89
United - Harris	515.33	821.05	0.00	0.00	1,231.86	0.00	238.68	669.05
Health Spring - Hidalgo	131.88	285.92	0.00	0.00	732.11	0.00	59.06	365.00
Molina - Hidalgo	153.31	351.51	0.00	0.00	877.28	0.00	72.70	655.22
Superior - Hidalgo	162.35	363.24	0.00	0.00	864.87	0.00	114.19	558.67
Amerigroup - Jefferson	357.23	739.69	0.00	0.00	1,026.56	0.00	173.61	1,099.87
Molina - Jefferson	330.29	804.50	0.00	0.00	1,071.03	0.00	238.93	1,153.08
United - Jefferson	430.81	559.36	0.00	0.00	772.80	0.00	164.13	733.30
Amerigroup - Lubbock	248.69	435.38	0.00	0.00	432.42	0.00	85.66	1,121.36
Superior - Lubbock	170.36	406.17	0.00	0.00	349.93	0.00	68.79	922.90
Superior - Nueces	186.13	407.13	0.00	0.00	576.15	0.00	65.52	670.36
United - Nueces	213.40	341.14	0.00	0.00	424.42	0.00	76.75	504.57
Amerigroup - Tarrant	278.73	557.79	0.00	0.00	602.97	0.00	114.75	420.77
Health Spring - Tarrant	208.05	468.45	0.00	0.00	465.96	0.00	67.91	422.32
Amerigroup - Travis	171.52	398.26	0.00	0.00	430.23	0.00	74.64	531.49
United - Travis	236.74	318.56	0.00	0.00	344.37	0.00	67.69	396.13
Superior - MRSA Central	216.42	480.19	0.00	0.00	497.67	0.00	94.02	702.24
United - MRSA Central	279.68	467.47	0.00	0.00	494.82	0.00	135.90	1,140.39
Health Spring - MRSA Northeast	170.15	457.90	0.00	0.00	589.09	0.00	83.92	498.36
United - MRSA Northeast	213.12	490.70	0.00	0.00	498.41	0.00	102.48	309.33
Amerigroup - MRSA West	205.95	471.16	0.00	0.00	594.41	0.00	108.60	497.19
Superior - MRSA West	202.93	443.84	0.00	0.00	510.50	0.00	98.24	594.33

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-5/31/2021 NEMT Carve-in Rates pmpm								
Amerigroup - Bexar	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - Bexar	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - Bexar	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - Dallas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - Dallas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - El Paso	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - El Paso	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - Harris	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - Harris	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - Harris	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Health Spring - Hidalgo	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - Hidalgo	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - Hidalgo	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - Jefferson	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - Jefferson	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - Jefferson	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - Lubbock	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - Lubbock	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - Nueces	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - Nueces	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - Tarrant	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Health Spring - Tarrant	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - Travis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - Travis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - MRSA Central	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - MRSA Central	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Health Spring - MRSA Northeast	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - MRSA Northeast	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - MRSA West	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - MRSA West	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-5/31/2021 Total Premium Rates pmpm								
Amerigroup - Bexar	1,541.98	5,112.00	449.39	2,167.88	8,840.97	6,120.04	1,048.87	3,850.87
Molina - Bexar	1,639.46	4,795.45	455.10	2,047.68	8,732.89	6,120.04	1,010.49	4,485.22
Superior - Bexar	1,703.73	5,352.42	489.32	2,263.96	9,037.94	6,120.04	1,310.08	3,864.32
Molina - Dallas	1,702.21	4,752.11	485.39	1,972.99	9,390.31	6,242.97	871.11	3,771.21
Superior - Dallas	1,550.37	5,020.10	403.58	2,025.00	10,077.38	6,242.97	995.38	4,922.52
Amerigroup - El Paso	1,706.87	4,718.55	575.16	2,236.51	9,679.09	5,624.36	1,621.94	3,335.09
Molina - El Paso	1,848.98	5,022.43	662.62	2,217.34	9,664.36	5,624.36	1,823.36	2,883.45
Amerigroup - Harris	2,108.44	7,191.52	392.67	2,567.94	10,428.01	5,975.69	1,334.36	5,482.33
Molina - Harris	1,878.89	6,138.08	404.44	2,490.27	10,049.87	5,975.69	1,145.51	5,943.30
United - Harris	2,285.44	6,330.51	454.73	2,404.76	10,335.42	5,975.69	1,448.77	4,584.63
Health Spring - Hidalgo	2,025.10	5,531.24	1,045.76	2,688.49	9,843.65	6,401.81	1,070.85	3,288.07
Molina - Hidalgo	1,938.00	5,393.07	958.09	2,628.16	9,729.73	6,401.81	1,130.26	4,229.55
Superior - Hidalgo	2,167.96	5,737.22	1,167.96	2,690.02	10,169.71	6,401.81	1,316.40	3,696.06
Amerigroup - Jefferson	1,691.14	5,867.17	334.18	1,982.63	9,412.09	5,510.32	1,172.27	4,565.09
Molina - Jefferson	1,656.49	5,077.71	311.87	1,845.53	9,192.72	5,510.32	1,149.83	4,571.55
United - Jefferson	1,977.94	5,020.91	237.26	1,763.59	8,933.82	5,510.32	1,288.94	4,701.88
Amerigroup - Lubbock	1,555.07	4,644.31	196.66	1,559.44	8,810.42	6,084.12	971.98	4,220.37
Superior - Lubbock	1,425.69	5,038.97	202.98	1,659.36	8,911.91	6,084.12	1,081.07	4,369.47
Superior - Nueces	1,676.80	5,043.75	616.35	2,267.86	8,722.45	6,185.42	1,050.18	3,680.34
United - Nueces	2,005.89	5,004.35	565.18	2,205.85	8,667.75	6,185.42	1,090.71	3,772.38
Amerigroup - Tarrant	1,721.80	5,359.56	373.17	1,861.05	8,970.30	5,904.44	1,120.95	4,266.45
Health Spring - Tarrant	1,468.96	5,205.81	306.24	2,011.76	8,588.70	5,904.44	873.25	4,217.82
Amerigroup - Travis	1,556.88	5,772.87	395.12	2,095.91	8,882.53	6,495.63	1,046.19	3,453.41
United - Travis	1,631.52	5,631.88	242.72	2,073.89	9,131.97	6,495.63	1,169.82	3,923.74
Superior - MRSA Central	1,495.46	5,331.82	259.65	1,914.50	8,567.70	5,798.83	1,042.98	4,332.94
United - MRSA Central	1,571.54	5,489.92	279.59	1,984.37	8,509.80	5,798.83	1,188.03	5,588.18
Health Spring - MRSA Northeast	1,377.14	5,066.17	274.16	1,919.07	9,044.81	5,826.86	960.76	4,094.98
United - MRSA Northeast	1,578.60	5,309.35	302.67	1,639.24	9,037.32	5,826.86	1,063.60	3,387.68
Amerigroup - MRSA West	1,514.47	5,549.56	322.63	1,750.31	8,966.94	6,016.92	1,208.15	3,271.74
Superior - MRSA West	1,514.01	4,915.58	280.61	1,745.94	8,830.46	6,016.92	1,228.90	3,663.04

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
6/1/2021-8/31/2021 Acute Care Premium Rates pmpm (Community Rates with Risk Adjustment)								
Amerigroup - Bexar	634.59	1,518.94	0.00	0.00	1,343.84	0.00	465.59	2,565.08
Molina - Bexar	642.73	1,478.18	0.00	0.00	1,308.38	0.00	444.98	2,804.12
Superior - Bexar	660.66	1,544.71	0.00	0.00	1,391.28	0.00	564.02	2,439.79
Molina - Dallas	709.65	1,523.39	0.00	0.00	1,881.38	0.00	429.66	2,390.91
Superior - Dallas	680.45	1,681.17	0.00	0.00	2,206.60	0.00	479.36	3,101.05
Amerigroup - El Paso	683.54	1,417.59	0.00	0.00	2,658.87	0.00	716.38	1,842.74
Molina - El Paso	701.70	1,568.91	0.00	0.00	2,461.93	0.00	806.91	1,591.25
Amerigroup - Harris	741.11	1,871.74	0.00	0.00	1,745.87	0.00	476.33	2,533.95
Molina - Harris	666.70	1,631.96	0.00	0.00	1,684.14	0.00	406.14	2,434.72
United - Harris	815.94	1,895.52	0.00	0.00	1,855.85	0.00	540.42	2,735.24
Health Spring - Hidalgo	559.21	1,457.25	0.00	0.00	2,387.12	0.00	546.42	1,787.27
Molina - Hidalgo	543.86	1,382.26	0.00	0.00	2,187.49	0.00	571.14	2,252.22
Superior - Hidalgo	600.92	1,516.09	0.00	0.00	2,536.06	0.00	647.39	1,940.28
Amerigroup - Jefferson	654.02	1,911.71	0.00	0.00	1,678.05	0.00	421.59	2,417.80
Molina - Jefferson	640.89	1,595.70	0.00	0.00	1,497.33	0.00	386.84	2,384.28
United - Jefferson	763.92	1,726.47	0.00	0.00	1,524.27	0.00	467.06	2,778.71
Amerigroup - Lubbock	696.54	1,548.48	0.00	0.00	1,166.55	0.00	433.27	2,203.73
Superior - Lubbock	653.05	1,741.20	0.00	0.00	1,282.55	0.00	500.13	2,460.98
Superior - Nueces	583.86	1,427.44	0.00	0.00	1,258.38	0.00	442.88	2,222.55
United - Nueces	670.12	1,365.74	0.00	0.00	1,321.10	0.00	418.45	2,426.76
Amerigroup - Tarrant	727.39	1,778.34	0.00	0.00	1,590.52	0.00	476.01	2,630.82
Health Spring - Tarrant	620.86	1,709.61	0.00	0.00	1,428.54	0.00	382.89	2,595.72
Amerigroup - Travis	629.47	1,415.07	0.00	0.00	936.22	0.00	382.58	2,269.14
United - Travis	673.27	1,480.33	0.00	0.00	1,120.59	0.00	434.00	2,757.40
Superior - MRSA Central	659.00	1,566.73	0.00	0.00	1,330.69	0.00	435.51	2,493.90
United - MRSA Central	669.93	1,609.44	0.00	0.00	1,292.55	0.00	484.93	3,071.31
Health Spring - MRSA Northeast	561.67	1,478.23	0.00	0.00	1,441.68	0.00	430.31	2,618.20
United - MRSA Northeast	638.69	1,716.08	0.00	0.00	1,493.51	0.00	471.67	2,228.08
Amerigroup - MRSA West	634.38	1,818.70	0.00	0.00	1,404.17	0.00	490.74	2,147.45
Superior - MRSA West	633.65	1,528.63	0.00	0.00	1,369.22	0.00	510.61	2,381.88

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
6/1/2021-8/31/2021 Long Term Care Premium Rates pmpm (Community Rates with Risk Adjustment)								
Amerigroup - Bexar	261.27	2,146.84	449.39	2,167.88	4,715.61	4,407.19	0.00	103.38
Molina - Bexar	307.35	1,856.49	455.10	2,047.68	4,715.61	4,407.19	0.00	103.38
Superior - Bexar	325.88	2,255.65	489.32	2,263.96	4,715.61	4,407.19	0.00	103.38
Molina - Dallas	349.28	1,855.59	485.39	1,972.99	4,622.95	4,301.39	0.00	125.43
Superior - Dallas	248.42	1,902.89	403.58	2,025.00	4,622.95	4,301.39	0.00	125.43
Amerigroup - El Paso	332.69	2,037.37	575.16	2,236.51	4,653.01	4,521.89	0.00	121.59
Molina - El Paso	426.74	1,938.47	662.62	2,217.34	4,653.01	4,521.89	0.00	121.59
Amerigroup - Harris	279.77	2,753.41	392.67	2,567.94	4,837.14	4,315.81	0.00	109.55
Molina - Harris	287.71	2,580.53	404.44	2,490.27	4,837.14	4,315.81	0.00	109.55
United - Harris	353.05	2,491.65	454.73	2,404.76	4,837.14	4,315.81	0.00	109.55
Health Spring - Hidalgo	828.37	2,727.15	1,045.76	2,688.49	4,547.60	4,936.00	0.00	419.62
Molina - Hidalgo	749.07	2,652.97	958.09	2,628.16	4,547.60	4,936.00	0.00	419.62
Superior - Hidalgo	857.88	2,750.68	1,167.96	2,690.02	4,547.60	4,936.00	0.00	419.62
Amerigroup - Jefferson	195.85	2,181.93	334.18	1,982.63	4,374.13	3,948.85	0.00	93.10
Molina - Jefferson	216.82	1,819.53	311.87	1,845.53	4,374.13	3,948.85	0.00	93.10
United - Jefferson	199.76	1,781.76	237.26	1,763.59	4,374.13	3,948.85	0.00	93.10
Amerigroup - Lubbock	108.36	1,679.60	196.66	1,559.44	4,576.60	4,132.89	0.00	121.64
Superior - Lubbock	137.86	1,798.79	202.98	1,659.36	4,576.60	4,132.89	0.00	121.64
Superior - Nueces	405.64	2,177.04	616.35	2,267.86	4,458.05	4,444.01	0.00	203.84
United - Nueces	471.34	2,226.80	565.18	2,205.85	4,458.05	4,444.01	0.00	203.84
Amerigroup - Tarrant	184.17	1,924.34	373.17	1,861.05	4,146.70	4,085.51	0.00	84.18
Health Spring - Tarrant	190.66	1,975.94	306.24	2,011.76	4,146.70	4,085.51	0.00	84.18
Amerigroup - Travis	271.55	2,600.16	395.12	2,095.91	4,532.42	4,278.38	0.00	107.06
United - Travis	203.48	2,410.91	242.72	2,073.89	4,532.42	4,278.38	0.00	107.06
Superior - MRSA Central	187.32	2,053.45	259.65	1,914.50	4,634.78	4,284.53	0.00	101.58
United - MRSA Central	186.15	2,152.15	279.59	1,984.37	4,634.78	4,284.53	0.00	101.58
Health Spring - MRSA Northeast	207.09	2,091.93	274.16	1,919.07	4,530.17	4,215.41	0.00	118.38
United - MRSA Northeast	228.48	1,897.42	302.67	1,639.24	4,530.17	4,215.41	0.00	118.38
Amerigroup - MRSA West	144.89	1,890.97	322.63	1,750.31	4,318.30	4,074.57	0.00	79.90
Superior - MRSA West	160.87	1,799.74	280.61	1,745.94	4,318.30	4,074.57	0.00	79.90

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
6/1/2021-8/31/2021 Prescription Drug Premium Rates pmpm (Community Rates with Risk Adjustment)								
Amerigroup - Bexar	518.04	1,179.57	0.00	0.00	728.50	0.00	525.47	1,008.04
Molina - Bexar	524.69	1,147.92	0.00	0.00	709.28	0.00	502.21	1,101.98
Superior - Bexar	539.33	1,199.58	0.00	0.00	754.21	0.00	636.57	958.80
Molina - Dallas	425.82	862.90	0.00	0.00	462.79	0.00	373.48	528.25
Superior - Dallas	408.29	952.28	0.00	0.00	542.79	0.00	416.68	685.15
Amerigroup - El Paso	552.95	1,063.56	0.00	0.00	509.87	0.00	780.52	959.34
Molina - El Paso	567.65	1,177.09	0.00	0.00	472.10	0.00	879.16	828.41
Amerigroup - Harris	521.55	1,081.65	0.00	0.00	706.20	0.00	566.54	991.99
Molina - Harris	469.19	943.08	0.00	0.00	681.23	0.00	483.06	953.14
United - Harris	574.22	1,095.39	0.00	0.00	750.69	0.00	642.77	1,070.79
Health Spring - Hidalgo	505.64	1,060.92	0.00	0.00	711.01	0.00	465.37	716.18
Molina - Hidalgo	491.76	1,006.33	0.00	0.00	651.55	0.00	486.42	902.49
Superior - Hidalgo	543.36	1,103.76	0.00	0.00	755.37	0.00	551.37	777.49
Amerigroup - Jefferson	478.10	1,027.90	0.00	0.00	771.88	0.00	571.13	954.32
Molina - Jefferson	468.49	857.98	0.00	0.00	688.76	0.00	524.06	941.09
United - Jefferson	558.43	928.30	0.00	0.00	701.15	0.00	632.73	1,096.77
Amerigroup - Lubbock	478.10	957.47	0.00	0.00	683.62	0.00	429.67	773.64
Superior - Lubbock	448.25	1,076.64	0.00	0.00	751.60	0.00	495.98	863.95
Superior - Nueces	462.73	993.70	0.00	0.00	688.46	0.00	503.34	583.59
United - Nueces	531.10	950.74	0.00	0.00	722.77	0.00	475.58	637.21
Amerigroup - Tarrant	526.51	1,094.09	0.00	0.00	811.18	0.00	525.19	1,130.68
Health Spring - Tarrant	449.39	1,051.81	0.00	0.00	728.57	0.00	422.45	1,115.60
Amerigroup - Travis	484.34	1,359.38	0.00	0.00	766.41	0.00	588.97	545.72
United - Travis	518.03	1,422.08	0.00	0.00	917.34	0.00	668.13	663.15
Superior - MRSA Central	428.67	1,227.40	0.00	0.00	590.26	0.00	509.40	1,035.22
United - MRSA Central	435.78	1,260.86	0.00	0.00	573.35	0.00	567.20	1,274.90
Health Spring - MRSA Northeast	438.23	1,038.11	0.00	0.00	872.42	0.00	446.53	860.04
United - MRSA Northeast	498.31	1,205.15	0.00	0.00	903.78	0.00	489.45	731.89
Amerigroup - MRSA West	497.51	1,336.99	0.00	0.00	707.71	0.00	577.07	547.20
Superior - MRSA West	496.94	1,123.75	0.00	0.00	690.09	0.00	600.43	606.93

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
6/1/2021-8/31/2021 NAIP Rates pmpm								
Amerigroup - Bexar	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - Bexar	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - Bexar	7.97	7.97	0.00	0.00	0.00	0.00	7.97	0.00
Molina - Dallas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - Dallas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - El Paso	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - El Paso	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - Harris	35.75	35.75	0.00	0.00	0.00	0.00	35.75	0.00
Molina - Harris	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - Harris	26.90	26.90	0.00	0.00	0.00	0.00	26.90	0.00
Health Spring - Hidalgo	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - Hidalgo	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - Hidalgo	3.45	3.45	0.00	0.00	0.00	0.00	3.45	0.00
Amerigroup - Jefferson	5.94	5.94	0.00	0.00	0.00	0.00	5.94	0.00
Molina - Jefferson	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - Jefferson	25.02	25.02	0.00	0.00	0.00	0.00	25.02	0.00
Amerigroup - Lubbock	23.38	23.38	0.00	0.00	0.00	0.00	23.38	0.00
Superior - Lubbock	16.17	16.17	0.00	0.00	0.00	0.00	16.17	0.00
Superior - Nueces	38.44	38.44	0.00	0.00	0.00	0.00	38.44	0.00
United - Nueces	119.93	119.93	0.00	0.00	0.00	0.00	119.93	0.00
Amerigroup - Tarrant	5.00	5.00	0.00	0.00	0.00	0.00	5.00	0.00
Health Spring - Tarrant	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - Travis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - Travis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - MRSA Central	4.05	4.05	0.00	0.00	0.00	0.00	4.05	0.00
United - MRSA Central	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Health Spring - MRSA Northeast	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - MRSA Northeast	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - MRSA West	31.74	31.74	0.00	0.00	0.00	0.00	31.74	0.00
Superior - MRSA West	19.62	19.62	0.00	0.00	0.00	0.00	19.62	0.00

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
6/1/2021-8/31/2021 QIPP Rates pmpm								
Amerigroup - Bexar	0.00	0.00	0.00	0.00	1,712.85	1,712.85	0.00	0.00
Molina - Bexar	0.00	0.00	0.00	0.00	1,712.85	1,712.85	0.00	0.00
Superior - Bexar	0.00	0.00	0.00	0.00	1,712.85	1,712.85	0.00	0.00
Molina - Dallas	0.00	0.00	0.00	0.00	1,941.58	1,941.58	0.00	0.00
Superior - Dallas	0.00	0.00	0.00	0.00	1,941.58	1,941.58	0.00	0.00
Amerigroup - El Paso	0.00	0.00	0.00	0.00	1,102.47	1,102.47	0.00	0.00
Molina - El Paso	0.00	0.00	0.00	0.00	1,102.47	1,102.47	0.00	0.00
Amerigroup - Harris	0.00	0.00	0.00	0.00	1,659.88	1,659.88	0.00	0.00
Molina - Harris	0.00	0.00	0.00	0.00	1,659.88	1,659.88	0.00	0.00
United - Harris	0.00	0.00	0.00	0.00	1,659.88	1,659.88	0.00	0.00
Health Spring - Hidalgo	0.00	0.00	0.00	0.00	1,465.81	1,465.81	0.00	0.00
Molina - Hidalgo	0.00	0.00	0.00	0.00	1,465.81	1,465.81	0.00	0.00
Superior - Hidalgo	0.00	0.00	0.00	0.00	1,465.81	1,465.81	0.00	0.00
Amerigroup - Jefferson	0.00	0.00	0.00	0.00	1,561.47	1,561.47	0.00	0.00
Molina - Jefferson	0.00	0.00	0.00	0.00	1,561.47	1,561.47	0.00	0.00
United - Jefferson	0.00	0.00	0.00	0.00	1,561.47	1,561.47	0.00	0.00
Amerigroup - Lubbock	0.00	0.00	0.00	0.00	1,951.23	1,951.23	0.00	0.00
Superior - Lubbock	0.00	0.00	0.00	0.00	1,951.23	1,951.23	0.00	0.00
Superior - Nueces	0.00	0.00	0.00	0.00	1,741.41	1,741.41	0.00	0.00
United - Nueces	0.00	0.00	0.00	0.00	1,741.41	1,741.41	0.00	0.00
Amerigroup - Tarrant	0.00	0.00	0.00	0.00	1,818.93	1,818.93	0.00	0.00
Health Spring - Tarrant	0.00	0.00	0.00	0.00	1,818.93	1,818.93	0.00	0.00
Amerigroup - Travis	0.00	0.00	0.00	0.00	2,217.25	2,217.25	0.00	0.00
United - Travis	0.00	0.00	0.00	0.00	2,217.25	2,217.25	0.00	0.00
Superior - MRSA Central	0.00	0.00	0.00	0.00	1,514.30	1,514.30	0.00	0.00
United - MRSA Central	0.00	0.00	0.00	0.00	1,514.30	1,514.30	0.00	0.00
Health Spring - MRSA Northeast	0.00	0.00	0.00	0.00	1,611.45	1,611.45	0.00	0.00
United - MRSA Northeast	0.00	0.00	0.00	0.00	1,611.45	1,611.45	0.00	0.00
Amerigroup - MRSA West	0.00	0.00	0.00	0.00	1,942.35	1,942.35	0.00	0.00
Superior - MRSA West	0.00	0.00	0.00	0.00	1,942.35	1,942.35	0.00	0.00

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
6/1/2021-8/31/2021 UHRIP Rates pmpm								
Amerigroup - Bexar	128.08	266.65	0.00	0.00	340.17	0.00	57.81	174.37
Molina - Bexar	164.69	312.86	0.00	0.00	286.77	0.00	63.30	475.74
Superior - Bexar	169.89	344.51	0.00	0.00	463.99	0.00	101.52	362.35
Molina - Dallas	217.46	510.23	0.00	0.00	481.61	0.00	67.97	726.62
Superior - Dallas	213.21	483.76	0.00	0.00	763.46	0.00	99.34	1,010.89
Amerigroup - El Paso	137.69	200.03	0.00	0.00	754.87	0.00	125.04	411.42
Molina - El Paso	152.89	337.96	0.00	0.00	974.85	0.00	137.29	342.20
Amerigroup - Harris	530.26	1,448.97	0.00	0.00	1,478.92	0.00	255.74	1,846.84
Molina - Harris	455.29	982.51	0.00	0.00	1,187.48	0.00	256.31	2,445.89
United - Harris	515.33	821.05	0.00	0.00	1,231.86	0.00	238.68	669.05
Health Spring - Hidalgo	131.88	285.92	0.00	0.00	732.11	0.00	59.06	365.00
Molina - Hidalgo	153.31	351.51	0.00	0.00	877.28	0.00	72.70	655.22
Superior - Hidalgo	162.35	363.24	0.00	0.00	864.87	0.00	114.19	558.67
Amerigroup - Jefferson	357.23	739.69	0.00	0.00	1,026.56	0.00	173.61	1,099.87
Molina - Jefferson	330.29	804.50	0.00	0.00	1,071.03	0.00	238.93	1,153.08
United - Jefferson	430.81	559.36	0.00	0.00	772.80	0.00	164.13	733.30
Amerigroup - Lubbock	248.69	435.38	0.00	0.00	432.42	0.00	85.66	1,121.36
Superior - Lubbock	170.36	406.17	0.00	0.00	349.93	0.00	68.79	922.90
Superior - Nueces	186.13	407.13	0.00	0.00	576.15	0.00	65.52	670.36
United - Nueces	213.40	341.14	0.00	0.00	424.42	0.00	76.75	504.57
Amerigroup - Tarrant	278.73	557.79	0.00	0.00	602.97	0.00	114.75	420.77
Health Spring - Tarrant	208.05	468.45	0.00	0.00	465.96	0.00	67.91	422.32
Amerigroup - Travis	171.52	398.26	0.00	0.00	430.23	0.00	74.64	531.49
United - Travis	236.74	318.56	0.00	0.00	344.37	0.00	67.69	396.13
Superior - MRSA Central	216.42	480.19	0.00	0.00	497.67	0.00	94.02	702.24
United - MRSA Central	279.68	467.47	0.00	0.00	494.82	0.00	135.90	1,140.39
Health Spring - MRSA Northeast	170.15	457.90	0.00	0.00	589.09	0.00	83.92	498.36
United - MRSA Northeast	213.12	490.70	0.00	0.00	498.41	0.00	102.48	309.33
Amerigroup - MRSA West	205.95	471.16	0.00	0.00	594.41	0.00	108.60	497.19
Superior - MRSA West	202.93	443.84	0.00	0.00	510.50	0.00	98.24	594.33

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
6/1/2021-8/31/2021 NEMT Carve-in Rates pmpm								
Amerigroup - Bexar	16.34	40.82	13.34	46.55	10.44	5.77	3.34	15.81
Molina - Bexar	16.34	40.82	13.34	46.55	10.44	5.77	3.34	15.81
Superior - Bexar	16.34	40.82	13.34	46.55	10.44	5.77	3.34	15.81
Molina - Dallas	16.30	55.33	16.69	45.13	10.44	7.01	3.34	15.81
Superior - Dallas	16.30	55.33	16.69	45.13	10.44	7.01	3.34	15.81
Amerigroup - El Paso	13.12	37.25	10.29	40.11	10.44	22.06	3.34	15.81
Molina - El Paso	13.12	37.25	10.29	40.11	10.44	22.06	3.34	15.81
Amerigroup - Harris	15.05	43.66	11.60	30.24	10.44	4.66	3.34	15.81
Molina - Harris	15.05	43.66	11.60	30.24	10.44	4.66	3.34	15.81
United - Harris	15.05	43.66	11.60	30.24	10.44	4.66	3.34	15.81
Health Spring - Hidalgo	7.48	28.78	10.53	29.44	10.44	4.86	3.34	15.81
Molina - Hidalgo	7.48	28.78	10.53	29.44	10.44	4.86	3.34	15.81
Superior - Hidalgo	7.48	28.78	10.53	29.44	10.44	4.86	3.34	15.81
Amerigroup - Jefferson	29.59	95.23	24.20	78.92	10.44	6.68	3.34	15.81
Molina - Jefferson	29.59	95.23	24.20	78.92	10.44	6.68	3.34	15.81
United - Jefferson	29.59	95.23	24.20	78.92	10.44	6.68	3.34	15.81
Amerigroup - Lubbock	18.62	69.25	28.87	85.07	10.44	21.84	3.34	15.81
Superior - Lubbock	18.62	69.25	28.87	85.07	10.44	21.84	3.34	15.81
Superior - Nueces	26.66	89.19	18.73	49.56	10.44	5.77	3.34	15.81
United - Nueces	26.66	89.19	18.73	49.56	10.44	5.77	3.34	15.81
Amerigroup - Tarrant	22.45	57.21	17.50	44.17	10.44	10.17	3.34	15.81
Health Spring - Tarrant	22.45	57.21	17.50	44.17	10.44	10.17	3.34	15.81
Amerigroup - Travis	19.48	57.98	20.24	66.61	10.44	19.95	3.34	15.81
United - Travis	19.48	57.98	20.24	66.61	10.44	19.95	3.34	15.81
Superior - MRSA Central	25.44	113.00	36.97	88.61	10.44	12.16	3.34	15.81
United - MRSA Central	25.44	113.00	36.97	88.61	10.44	12.16	3.34	15.81
Health Spring - MRSA Northeast	24.85	77.83	21.64	56.83	10.44	7.08	3.34	15.81
United - MRSA Northeast	24.85	77.83	21.64	56.83	10.44	7.08	3.34	15.81
Amerigroup - MRSA West	19.29	71.53	24.60	67.38	10.44	12.11	3.34	15.81
Superior - MRSA West	19.29	71.53	24.60	67.38	10.44	12.11	3.34	15.81

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
6/1/2021-8/31/2021 Total Premium Rates pmpm								
Amerigroup - Bexar	1,558.32	5,152.82	462.73	2,214.43	8,851.41	6,125.81	1,052.21	3,866.68
Molina - Bexar	1,655.80	4,836.27	468.44	2,094.23	8,743.33	6,125.81	1,013.83	4,501.03
Superior - Bexar	1,720.07	5,393.24	502.66	2,310.51	9,048.38	6,125.81	1,313.42	3,880.13
Molina - Dallas	1,718.51	4,807.44	502.08	2,018.12	9,400.75	6,249.98	874.45	3,787.02
Superior - Dallas	1,566.67	5,075.43	420.27	2,070.13	10,087.82	6,249.98	998.72	4,938.33
Amerigroup - El Paso	1,719.99	4,755.80	585.45	2,276.62	9,689.53	5,646.42	1,625.28	3,350.90
Molina - El Paso	1,862.10	5,059.68	672.91	2,257.45	9,674.80	5,646.42	1,826.70	2,899.26
Amerigroup - Harris	2,123.49	7,235.18	404.27	2,598.18	10,438.45	5,980.35	1,337.70	5,498.14
Molina - Harris	1,893.94	6,181.74	416.04	2,520.51	10,060.31	5,980.35	1,148.85	5,959.11
United - Harris	2,300.49	6,374.17	466.33	2,435.00	10,345.86	5,980.35	1,452.11	4,600.44
Health Spring - Hidalgo	2,032.58	5,560.02	1,056.29	2,717.93	9,854.09	6,406.67	1,074.19	3,303.88
Molina - Hidalgo	1,945.48	5,421.85	968.62	2,657.60	9,740.17	6,406.67	1,133.60	4,245.36
Superior - Hidalgo	2,175.44	5,766.00	1,178.49	2,719.46	10,180.15	6,406.67	1,319.74	3,711.87
Amerigroup - Jefferson	1,720.73	5,962.40	358.38	2,061.55	9,422.53	5,517.00	1,175.61	4,580.90
Molina - Jefferson	1,686.08	5,172.94	336.07	1,924.45	9,203.16	5,517.00	1,153.17	4,587.36
United - Jefferson	2,007.53	5,116.14	261.46	1,842.51	8,944.26	5,517.00	1,292.28	4,717.69
Amerigroup - Lubbock	1,573.69	4,713.56	225.53	1,644.51	8,820.86	6,105.96	975.32	4,236.18
Superior - Lubbock	1,444.31	5,108.22	231.85	1,744.43	8,922.35	6,105.96	1,084.41	4,385.28
Superior - Nueces	1,703.46	5,132.94	635.08	2,317.42	8,732.89	6,191.19	1,053.52	3,696.15
United - Nueces	2,032.55	5,093.54	583.91	2,255.41	8,678.19	6,191.19	1,094.05	3,788.19
Amerigroup - Tarrant	1,744.25	5,416.77	390.67	1,905.22	8,980.74	5,914.61	1,124.29	4,282.26
Health Spring - Tarrant	1,491.41	5,263.02	323.74	2,055.93	8,599.14	5,914.61	876.59	4,233.63
Amerigroup - Travis	1,576.36	5,830.85	415.36	2,162.52	8,892.97	6,515.58	1,049.53	3,469.22
United - Travis	1,651.00	5,689.86	262.96	2,140.50	9,142.41	6,515.58	1,173.16	3,939.55
Superior - MRSA Central	1,520.90	5,444.82	296.62	2,003.11	8,578.14	5,810.99	1,046.32	4,348.75
United - MRSA Central	1,596.98	5,602.92	316.56	2,072.98	8,520.24	5,810.99	1,191.37	5,603.99
Health Spring - MRSA Northeast	1,401.99	5,144.00	295.80	1,975.90	9,055.25	5,833.94	964.10	4,110.79
United - MRSA Northeast	1,603.45	5,387.18	324.31	1,696.07	9,047.76	5,833.94	1,066.94	3,403.49
Amerigroup - MRSA West	1,533.76	5,621.09	347.23	1,817.69	8,977.38	6,029.03	1,211.49	3,287.55
Superior - MRSA West	1,533.30	4,987.11	305.21	1,813.32	8,840.90	6,029.03	1,232.24	3,678.85

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
6/1/2021-8/31/2021 Acute Care Premium Rate Change								
Amerigroup - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
6/1/2021-8/31/2021 Long Term Care Premium Rate Change								
Amerigroup - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
6/1/2021-8/31/2021 Prescription Drug Premium Rate Change								
Amerigroup - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
6/1/2021-8/31/2021 NAIP Premium Rate Change								
Amerigroup - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
6/1/2021-8/31/2021 QIPP Premium Rate Change								
Amerigroup - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
6/1/2021-8/31/2021 UHRIP Premium Rate Change								
Amerigroup - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
6/1/2021-8/31/2021 NEMT Carve-in Premium Rate Change								
Amerigroup - Bexar	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Molina - Bexar	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Superior - Bexar	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Molina - Dallas	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Superior - Dallas	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Amerigroup - El Paso	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Molina - El Paso	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Amerigroup - Harris	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Molina - Harris	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
United - Harris	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Health Spring - Hidalgo	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Molina - Hidalgo	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Superior - Hidalgo	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Amerigroup - Jefferson	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Molina - Jefferson	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
United - Jefferson	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Amerigroup - Lubbock	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Superior - Lubbock	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Superior - Nueces	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
United - Nueces	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Amerigroup - Tarrant	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Health Spring - Tarrant	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Amerigroup - Travis	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
United - Travis	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Superior - MRSA Central	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
United - MRSA Central	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Health Spring - MRSA Northeast	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
United - MRSA Northeast	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Amerigroup - MRSA West	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Superior - MRSA West	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
6/1/2021-8/31/2021 Total Premium Rate Change								
Amerigroup - Bexar	1.1%	0.8%	3.0%	2.1%	0.1%	0.1%	0.3%	0.4%
Molina - Bexar	1.0%	0.9%	2.9%	2.3%	0.1%	0.1%	0.3%	0.4%
Superior - Bexar	1.0%	0.8%	2.7%	2.1%	0.1%	0.1%	0.3%	0.4%
Molina - Dallas	1.0%	1.2%	3.4%	2.3%	0.1%	0.1%	0.4%	0.4%
Superior - Dallas	1.1%	1.1%	4.1%	2.2%	0.1%	0.1%	0.3%	0.3%
Amerigroup - El Paso	0.8%	0.8%	1.8%	1.8%	0.1%	0.4%	0.2%	0.5%
Molina - El Paso	0.7%	0.7%	1.6%	1.8%	0.1%	0.4%	0.2%	0.5%
Amerigroup - Harris	0.7%	0.6%	3.0%	1.2%	0.1%	0.1%	0.3%	0.3%
Molina - Harris	0.8%	0.7%	2.9%	1.2%	0.1%	0.1%	0.3%	0.3%
United - Harris	0.7%	0.7%	2.6%	1.3%	0.1%	0.1%	0.2%	0.3%
Health Spring - Hidalgo	0.4%	0.5%	1.0%	1.1%	0.1%	0.1%	0.3%	0.5%
Molina - Hidalgo	0.4%	0.5%	1.1%	1.1%	0.1%	0.1%	0.3%	0.4%
Superior - Hidalgo	0.3%	0.5%	0.9%	1.1%	0.1%	0.1%	0.3%	0.4%
Amerigroup - Jefferson	1.7%	1.6%	7.2%	4.0%	0.1%	0.1%	0.3%	0.3%
Molina - Jefferson	1.8%	1.9%	7.8%	4.3%	0.1%	0.1%	0.3%	0.3%
United - Jefferson	1.5%	1.9%	10.2%	4.5%	0.1%	0.1%	0.3%	0.3%
Amerigroup - Lubbock	1.2%	1.5%	14.7%	5.5%	0.1%	0.4%	0.3%	0.4%
Superior - Lubbock	1.3%	1.4%	14.2%	5.1%	0.1%	0.4%	0.3%	0.4%
Superior - Nueces	1.6%	1.8%	3.0%	2.2%	0.1%	0.1%	0.3%	0.4%
United - Nueces	1.3%	1.8%	3.3%	2.2%	0.1%	0.1%	0.3%	0.4%
Amerigroup - Tarrant	1.3%	1.1%	4.7%	2.4%	0.1%	0.2%	0.3%	0.4%
Health Spring - Tarrant	1.5%	1.1%	5.7%	2.2%	0.1%	0.2%	0.4%	0.4%
Amerigroup - Travis	1.3%	1.0%	5.1%	3.2%	0.1%	0.3%	0.3%	0.5%
United - Travis	1.2%	1.0%	8.3%	3.2%	0.1%	0.3%	0.3%	0.4%
Superior - MRSA Central	1.7%	2.1%	14.2%	4.6%	0.1%	0.2%	0.3%	0.4%
United - MRSA Central	1.6%	2.1%	13.2%	4.5%	0.1%	0.2%	0.3%	0.3%
Health Spring - MRSA Northeast	1.8%	1.5%	7.9%	3.0%	0.1%	0.1%	0.3%	0.4%
United - MRSA Northeast	1.6%	1.5%	7.1%	3.5%	0.1%	0.1%	0.3%	0.5%
Amerigroup - MRSA West	1.3%	1.3%	7.6%	3.8%	0.1%	0.2%	0.3%	0.5%
Superior - MRSA West	1.3%	1.5%	8.8%	3.9%	0.1%	0.2%	0.3%	0.4%

FY2021 STAR+PLUS Rating Summary - Amended

	Projected PMPM		Projected 6/1/2021-8/31/2021 Premium		% Rate Change
	<u>Current Rates</u>	<u>6.1.21 Rates</u>	<u>Current Rates</u>	<u>6.1.21 Rates</u>	
NEMT Carve-in	0.00	19.90	0	32,055,034	n/a

STAR+PLUS

Bexar

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Medicaid Only OCC		Medicaid Only HCBS		Medicaid Only Nursing Facility		Dual Eligible OCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	222,661		25,425		7,135		196,447	
Estimated Incurred Claims								
Demand Response >15 Miles	759,393	3.41	234,575	9.23	1,218	0.17	431,430	2.20
Demand Response <= 15 Miles	1,614,493	7.25	422,421	16.61	5,584	0.78	1,225,026	6.24
Mileage Reimbursement	37,339	0.17	22,312	0.88	-	-	45,456	0.23
Meals	50	0.00	-	-	-	-	-	-
Lodging	74	0.00	-	-	-	-	-	-
Airfare	-	-	-	-	-	-	1,164	0.01
All Others	20,356	0.09	13,024	0.51	-	-	37,928	0.19
Total	2,431,705	10.92	692,332	27.23	6,802	0.95	1,741,004	8.86
Projected Member Months - Rating Period	60,667		7,150		1,853		49,263	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0097		1.0209		1.1197		1.0120
TNC Adjustment		1.0041		1.0038		1.0050		1.0044
Mileage Reimbursement Adjustment		1.0002		1.0004		1.0000		1.0003
Projected Incurred Claims - Rating Period	727,719	12.00	216,192	30.24	2,153	1.16	480,817	9.76
Administrative Expense - Formula								
Fixed Amount PMPM	10,617	0.175	1,251	0.175	324	0.175	8,621	0.175
Percent of Premium	218,032	22.0%	64,211	22.0%	731	22.0%	144,532	22.0%
Total	228,649	3.77	65,463	9.16	1,056	0.57	153,153	3.11
Risk Margin	17,343	1.75 %	5,108	1.75 %	58	1.75 %	11,497	1.75 %
Premium Tax	17,343	1.75 %	5,108	1.75 %	58	1.75 %	11,497	1.75 %
Projected Total Cost	991,054	16.34	291,870	40.82	3,325	1.79	656,964	13.34

STAR+PLUS

Bexar

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Dual Eligible HCBS		Dual Eligible Nursing Facility		IDD >21		MBCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	33,664		38,440		20,823		4,254	
Estimated Incurred Claims								
Demand Response >15 Miles	260,646	7.74	11,301	0.29	6,882	0.33	17,965	4.22
Demand Response <= 15 Miles	741,913	22.04	127,412	3.31	9,708	0.47	6,235	1.47
Mileage Reimbursement	40,495	1.20	-	-	4,831	0.23	512	0.12
Meals	-	-	-	-	-	-	-	-
Lodging	-	-	-	-	-	-	-	-
Airfare	-	-	-	-	-	-	-	-
All Others	9,733	0.29	-	-	-	-	-	-
Total	1,052,787	31.27	138,713	3.61	21,420	1.03	24,712	5.81
Projected Member Months - Rating Period	8,248		9,573		5,291		1,112	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0136		1.0487		1.0181		0.9794
TNC Adjustment		1.0044		1.0057		1.0029		1.0016
Mileage Reimbursement Adjustment		1.0005		1.0000		1.0026		1.0002
Projected Incurred Claims - Rating Period	284,563	34.50	39,465	4.12	6,035	1.14	6,866	6.17
Administrative Expense - Formula								
Fixed Amount PMPM	1,443	0.175	1,675	0.175	926	0.175	195	0.175
Percent of Premium	84,458	22.0%	12,149	22.0%	2,056	22.0%	2,085	22.0%
Total	85,902	10.42	13,824	1.44	2,982	0.56	2,280	2.05
Risk Margin	6,718	1.75 %	966	1.75 %	164	1.75 %	166	1.75 %
Premium Tax	6,718	1.75 %	966	1.75 %	164	1.75 %	166	1.75 %
Projected Total Cost	383,901	46.55	55,222	5.77	9,344	1.77	9,477	8.52

STAR+PLUS

Bexar

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	<u>Total</u>	
	amount	pmpm
FY2019 Experience Period		
Member Months	548,849	
Estimated Incurred Claims		
Demand Response >15 Miles	1,723,410	3.14
Demand Response <= 15 Miles	4,152,791	7.57
Mileage Reimbursement	150,944	0.28
Meals	50	0.00
Lodging	74	0.00
Airfare	1,164	0.00
All Others	81,040	0.15
Total	6,109,474	11.13
Projected Member Months - Rating Period	143,157	
Annual Trend Assumption		3.42%
Rating Adjustment Factors		
Seasonality Adjustment		
TNC Adjustment		
Mileage Reimbursement Adjustment		
Projected Incurred Claims - Rating Period	1,763,809	12.32
Administrative Expense - Formula		
Fixed Amount PMPM	25,053	0.175
Percent of Premium	528,255	22.0%
Total	553,307	3.87
Risk Margin	42,020	1.75 %
Premium Tax	42,020	1.75 %
Projected Total Cost	2,401,157	16.77

STAR+PLUS

Dallas

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Medicaid Only OCC		Medicaid Only HCBS		Medicaid Only Nursing Facility		Dual Eligible OCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	308,728		33,354		10,059		250,592	
Estimated Incurred Claims								
Demand Response >15 Miles	1,345,134	4.36	492,586	14.77	34,048	3.38	963,526	3.84
Demand Response <= 15 Miles	1,653,169	5.35	657,466	19.71	29,924	2.97	1,614,885	6.44
Mileage Reimbursement	55,949	0.18	29,336	0.88	140	0.01	109,316	0.44
Meals	-	-	-	-	-	-	-	-
Lodging	-	-	-	-	-	-	-	-
Airfare	-	-	-	-	-	-	220	0.00
All Others	312,320	1.01	54,335	1.63	2,162	0.21	102,586	0.41
Total	3,366,572	10.90	1,233,723	36.99	66,274	6.59	2,790,533	11.14
Projected Member Months - Rating Period	83,152		10,303		2,664		62,754	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0097		1.0209		1.1197		1.0120
TNC Adjustment		1.0031		1.0033		1.0028		1.0036
Mileage Reimbursement Adjustment		1.0002		1.0003		1.0000		1.0005
Projected Incurred Claims - Rating Period	994,927	11.97	422,931	41.05	21,350	8.01	769,141	12.26
Administrative Expense - Formula								
Fixed Amount PMPM	14,552	0.175	1,803	0.175	466	0.175	10,982	0.175
Percent of Premium	298,101	22.0%	125,425	22.0%	6,442	22.0%	230,372	22.0%
Total	312,653	3.76	127,228	12.35	6,909	2.59	241,354	3.85
Risk Margin	23,713	1.75 %	9,977	1.75 %	512	1.75 %	18,325	1.75 %
Premium Tax	23,713	1.75 %	9,977	1.75 %	512	1.75 %	18,325	1.75 %
Projected Total Cost	1,355,005	16.30	570,113	55.33	29,284	10.99	1,047,144	16.69

STAR+PLUS

Dallas

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Dual Eligible HCBS		Dual Eligible Nursing Facility		IDD >21		MBCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	50,933		55,848		26,601		5,780	
Estimated Incurred Claims								
Demand Response >15 Miles	531,084	10.43	30,310	0.54	27,096	1.02	21,164	3.66
Demand Response <= 15 Miles	918,223	18.03	215,947	3.87	12,741	0.48	21,122	3.65
Mileage Reimbursement	75,992	1.49	56	0.00	5,333	0.20	5,810	1.01
Meals	-	-	-	-	-	-	-	-
Lodging	-	-	-	-	-	-	-	-
Airfare	-	-	-	-	-	-	-	-
All Others	19,587	0.38	514	0.01	1,058	0.04	3,629	0.63
Total	1,544,886	30.33	246,827	4.42	46,229	1.74	51,725	8.95
Projected Member Months - Rating Period	14,191		13,576		6,961		1,507	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0136		1.0487		1.0181		0.9794
TNC Adjustment		1.0037		1.0055		1.0017		1.0026
Mileage Reimbursement Adjustment		1.0006		1.0000		1.0014		1.0013
Projected Incurred Claims - Rating Period	474,589	33.44	68,527	5.05	13,381	1.92	14,363	9.53
Administrative Expense - Formula								
Fixed Amount PMPM	2,483	0.175	2,376	0.175	1,218	0.175	264	0.175
Percent of Premium	140,880	22.0%	20,938	22.0%	4,311	22.0%	4,319	22.0%
Total	143,364	10.10	23,313	1.72	5,529	0.79	4,583	3.04
Risk Margin	11,206	1.75 %	1,666	1.75 %	343	1.75 %	344	1.75 %
Premium Tax	11,206	1.75 %	1,666	1.75 %	343	1.75 %	344	1.75 %
Projected Total Cost	640,365	45.13	95,172	7.01	19,596	2.82	19,634	13.03

STAR+PLUS
 Dallas
 Rating Period - 6/ 1/2021 - 8/31/21
 NEMT Carve-In

	<u>Total</u>	
	amount	pmpm
FY2019 Experience Period		
Member Months	741,895	
Estimated Incurred Claims		
Demand Response >15 Miles	3,444,949	4.64
Demand Response <= 15 Miles	5,123,478	6.91
Mileage Reimbursement	281,931	0.38
Meals	-	-
Lodging	-	-
Airfare	220	0.00
All Others	496,192	0.67
Total	9,346,769	12.60
Projected Member Months - Rating Period	195,107	
Annual Trend Assumption		3.42%
Rating Adjustment Factors		
Seasonality Adjustment		
TNC Adjustment		
Mileage Reimbursement Adjustment		
Projected Incurred Claims - Rating Period	2,779,209	14.24
Administrative Expense - Formula		
Fixed Amount PMPM	34,144	0.175
Percent of Premium	830,789	22.0%
Total	864,932	4.43
Risk Margin	66,085	1.75 %
Premium Tax	66,085	1.75 %
Projected Total Cost	3,776,312	19.36

STAR+PLUS
 El Paso
 Rating Period - 6/ 1/2021 - 8/31/21
 NEMT Carve-In

	Medicaid Only OCC		Medicaid Only HCBS		Medicaid Only Nursing Facility		Dual Eligible OCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	70,548		9,221		997		140,961	
Estimated Incurred Claims								
Demand Response >15 Miles	122,601	1.74	36,546	3.96	140	0.14	204,990	1.45
Demand Response <= 15 Miles	391,310	5.55	165,049	17.90	8,434	8.46	703,117	4.99
Mileage Reimbursement	53,237	0.75	10,523	1.14	-	-	36,800	0.26
Meals	-	-	-	-	-	-	-	-
Lodging	-	-	-	-	-	-	-	-
Airfare	46,019	0.65	13,490	1.46	-	-	11,486	0.08
All Others	3,051	0.04	3,199	0.35	891	0.89	2,211	0.02
Total	616,217	8.73	228,807	24.81	9,465	9.49	958,603	6.80
Projected Member Months - Rating Period	19,224		2,574		272		36,014	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0097		1.0209		1.1197		1.0120
TNC Adjustment		1.0040		1.0045		1.0055		1.0046
Mileage Reimbursement Adjustment		1.0010		1.0005		1.0000		1.0005
Projected Incurred Claims - Rating Period	184,561	9.60	70,976	27.58	3,147	11.58	269,826	7.49
Administrative Expense - Formula								
Fixed Amount PMPM	3,364	0.175	450	0.175	48	0.175	6,302	0.175
Percent of Premium	55,495	22.0%	21,092	22.0%	943	22.0%	81,541	22.0%
Total	58,859	3.06	21,543	8.37	991	3.65	87,844	2.44
Risk Margin	4,414	1.75 %	1,678	1.75 %	75	1.75 %	6,486	1.75 %
Premium Tax	4,414	1.75 %	1,678	1.75 %	75	1.75 %	6,486	1.75 %
Projected Total Cost	252,249	13.12	95,875	37.25	4,288	15.77	370,643	10.29

STAR+PLUS
 El Paso
 Rating Period - 6/ 1/2021 - 8/31/21
 NEMT Carve-In

	Dual Eligible HCBS		Dual Eligible Nursing Facility		IDD >21		MBCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	15,615		6,999		5,988		3,334	
Estimated Incurred Claims								
Demand Response >15 Miles	82,292	5.27	1,592	0.23	711	0.12	2,574	0.77
Demand Response <= 15 Miles	306,829	19.65	97,986	14.00	1,355	0.23	3,726	1.12
Mileage Reimbursement	23,261	1.49	-	-	3,592	0.60	1,192	0.36
Meals	-	-	-	-	-	-	-	-
Lodging	-	-	-	-	-	-	-	-
Airfare	6,276	0.40	-	-	6,324	1.06	-	-
All Others	1,670	0.11	-	-	760	0.13	-	-
Total	420,327	26.92	99,578	14.23	12,742	2.13	7,492	2.25
Projected Member Months - Rating Period	4,061		1,700		1,546		850	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0136		1.0487		1.0181		0.9794
TNC Adjustment		1.0046		1.0062		1.0007		1.0031
Mileage Reimbursement Adjustment		1.0006		1.0000		1.0033		1.0019
Projected Incurred Claims - Rating Period	120,644	29.71	27,647	16.26	3,643	2.36	2,037	2.40
Administrative Expense - Formula								
Fixed Amount PMPM	711	0.175	298	0.175	271	0.175	149	0.175
Percent of Premium	35,836	22.0%	8,252	22.0%	1,156	22.0%	645	22.0%
Total	36,547	9.00	8,550	5.03	1,426	0.92	794	0.93
Risk Margin	2,851	1.75 %	656	1.75 %	92	1.75 %	51	1.75 %
Premium Tax	2,851	1.75 %	656	1.75 %	92	1.75 %	51	1.75 %
Projected Total Cost	162,892	40.11	37,510	22.06	5,253	3.40	2,934	3.45

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El Paso

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	<u>Total</u>	
	amount	pmpm
FY2019 Experience Period		
Member Months	253,663	
Estimated Incurred Claims		
Demand Response >15 Miles	451,445	1.78
Demand Response <= 15 Miles	1,677,804	6.61
Mileage Reimbursement	128,604	0.51
Meals	-	-
Lodging	-	-
Airfare	83,594	0.33
All Others	11,782	0.05
Total	2,353,230	9.28
Projected Member Months - Rating Period	66,242	
Annual Trend Assumption		3.42%
Rating Adjustment Factors		
Seasonality Adjustment		
TNC Adjustment		
Mileage Reimbursement Adjustment		
Projected Incurred Claims - Rating Period	682,482	10.30
Administrative Expense - Formula		
Fixed Amount PMPM	11,592	0.175
Percent of Premium	204,962	22.0%
Total	216,554	3.27
Risk Margin	16,304	1.75 %
Premium Tax	16,304	1.75 %
Projected Total Cost	931,643	14.06

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Harris

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Medicaid Only OCC		Medicaid Only HCBS		Medicaid Only Nursing Facility		Dual Eligible OCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	491,103		37,726		10,620		525,275	
Estimated Incurred Claims								
Demand Response >15 Miles	2,848,333	5.80	551,900	14.63	4,509	0.42	1,563,734	2.98
Demand Response <= 15 Miles	1,885,314	3.84	509,539	13.51	21,733	2.05	2,240,163	4.26
Mileage Reimbursement	181,634	0.37	34,198	0.91	-	-	219,961	0.42
Meals	-	-	-	-	-	-	-	-
Lodging	-	-	-	-	-	-	-	-
Airfare	-	-	-	-	-	-	-	-
All Others	26,935	0.05	4,363	0.12	15	0.00	18,023	0.03
Total	4,942,216	10.06	1,100,001	29.16	26,256	2.47	4,041,882	7.69
Projected Member Months - Rating Period	138,643		10,987		2,802		134,912	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0097		1.0209		1.1197		1.0120
TNC Adjustment		1.0024		1.0029		1.0052		1.0035
Mileage Reimbursement Adjustment		1.0004		1.0004		1.0000		1.0006
Projected Incurred Claims - Rating Period	1,530,166	11.04	355,418	32.35	8,444	3.01	1,142,597	8.47
Administrative Expense - Formula								
Fixed Amount PMPM	24,262	0.175	1,923	0.175	490	0.175	23,610	0.175
Percent of Premium	459,026	22.0%	105,523	22.0%	2,638	22.0%	344,383	22.0%
Total	483,288	3.49	107,446	9.78	3,129	1.12	367,993	2.73
Risk Margin	36,513	1.75 %	8,394	1.75 %	210	1.75 %	27,394	1.75 %
Premium Tax	36,513	1.75 %	8,394	1.75 %	210	1.75 %	27,394	1.75 %
Projected Total Cost	2,086,481	15.05	479,652	43.66	11,993	4.28	1,565,378	11.60

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Harris

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Dual Eligible HCBS		Dual Eligible Nursing Facility		IDD >21		MBCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	59,188		67,765		45,535		10,783	
Estimated Incurred Claims								
Demand Response >15 Miles	474,625	8.02	33,923	0.50	17,126	0.38	68,421	6.35
Demand Response <= 15 Miles	661,366	11.17	161,594	2.38	7,950	0.17	21,725	2.01
Mileage Reimbursement	58,123	0.98	-	-	13,529	0.30	8,959	0.83
Meals	-	-	-	-	-	-	-	-
Lodging	-	-	-	-	-	-	-	-
Airfare	-	-	-	-	-	-	-	-
All Others	6,012	0.10	263	0.00	30	0.00	195	0.02
Total	1,200,127	20.28	195,780	2.89	38,636	0.85	99,300	9.21
Projected Member Months - Rating Period	15,444		16,552		11,769		2,709	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0136		1.0487		1.0181		0.9794
TNC Adjustment		1.0034		1.0052		1.0013		1.0014
Mileage Reimbursement Adjustment		1.0006		1.0000		1.0041		1.0011
Projected Incurred Claims - Rating Period	345,186	22.35	54,602	3.30	11,071	0.94	26,533	9.79
Administrative Expense - Formula								
Fixed Amount PMPM	2,703	0.175	2,897	0.175	2,060	0.175	474	0.175
Percent of Premium	102,732	22.0%	16,979	22.0%	3,878	22.0%	7,975	22.0%
Total	105,435	6.83	19,876	1.20	5,937	0.50	8,449	3.12
Risk Margin	8,172	1.75 %	1,351	1.75 %	308	1.75 %	634	1.75 %
Premium Tax	8,172	1.75 %	1,351	1.75 %	308	1.75 %	634	1.75 %
Projected Total Cost	466,965	30.24	77,179	4.66	17,625	1.50	36,251	13.38

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Harris

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	<u>Total</u>	
	amount	pmpm
FY2019 Experience Period		
Member Months	1,247,995	
Estimated Incurred Claims		
Demand Response >15 Miles	5,562,572	4.46
Demand Response <= 15 Miles	5,509,384	4.41
Mileage Reimbursement	516,404	0.41
Meals	-	-
Lodging	-	-
Airfare	-	-
All Others	55,837	0.04
Total	11,644,197	9.33
Projected Member Months - Rating Period	333,819	
Annual Trend Assumption		3.42%
Rating Adjustment Factors		
Seasonality Adjustment		
TNC Adjustment		
Mileage Reimbursement Adjustment		
Projected Incurred Claims - Rating Period	3,474,017	10.41
Administrative Expense - Formula		
Fixed Amount PMPM	58,418	0.175
Percent of Premium	1,043,135	22.0%
Total	1,101,553	3.30
Risk Margin	82,977	1.75 %
Premium Tax	82,977	1.75 %
Projected Total Cost	4,741,524	14.20

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Hidalgo

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Medicaid Only OCC		Medicaid Only HCBS		Medicaid Only Nursing Facility		Dual Eligible OCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	168,354		30,277		2,891		392,963	
Estimated Incurred Claims								
Demand Response >15 Miles	367,439	2.18	243,841	8.05	2,548	0.88	1,026,504	2.61
Demand Response <= 15 Miles	298,805	1.77	222,656	7.35	1,300	0.45	1,220,972	3.11
Mileage Reimbursement	155,474	0.92	113,131	3.74	220	0.08	482,282	1.23
Meals	75	0.00	-	-	-	-	100	0.00
Lodging	693	0.00	-	-	-	-	145	0.00
Airfare	4,569	0.03	-	-	-	-	6,017	0.02
All Others	-	-	-	-	-	-	316	0.00
Total	827,054	4.91	579,628	19.14	4,067	1.41	2,736,336	6.96
Projected Member Months - Rating Period	47,960		8,905		771		96,613	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0097		1.0209		1.1197		1.0120
TNC Adjustment		1.0023		1.0024		1.0021		1.0028
Mileage Reimbursement Adjustment		1.0022		1.0023		1.0006		1.0021
Projected Incurred Claims - Rating Period	258,833	5.40	189,403	21.27	1,319	1.71	741,043	7.67
Administrative Expense - Formula								
Fixed Amount PMPM	8,393	0.175	1,558	0.175	135	0.175	16,907	0.175
Percent of Premium	78,912	22.0%	56,391	22.0%	429	22.0%	223,824	22.0%
Total	87,305	1.82	57,950	6.51	564	0.73	240,732	2.49
Risk Margin	6,277	1.75 %	4,486	1.75 %	34	1.75 %	17,804	1.75 %
Premium Tax	6,277	1.75 %	4,486	1.75 %	34	1.75 %	17,804	1.75 %
Projected Total Cost	358,692	7.48	256,325	28.78	1,952	2.53	1,017,383	10.53

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Hidalgo

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Dual Eligible HCBS		Dual Eligible Nursing Facility		IDD >21		MBCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	122,942		29,484		11,610		6,373	
Estimated Incurred Claims								
Demand Response >15 Miles	690,840	5.62	3,617	0.12	2,228	0.19	25,076	3.93
Demand Response <= 15 Miles	1,412,099	11.49	85,043	2.88	4,782	0.41	5,929	0.93
Mileage Reimbursement	304,063	2.47	329	0.01	16,996	1.46	49,255	7.73
Meals	275	0.00	-	-	-	-	234	0.04
Lodging	584	0.00	-	-	-	-	1,425	0.22
Airfare	15,898	0.13	-	-	-	-	-	-
All Others	-	-	-	-	-	-	-	-
Total	2,423,759	19.71	88,989	3.02	24,005	2.07	81,920	12.85
Projected Member Months - Rating Period	32,088		7,397		2,997		1,661	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0136		1.0487		1.0181		0.9794
TNC Adjustment		1.0036		1.0060		1.0013		1.0005
Mileage Reimbursement Adjustment		1.0015		1.0000		1.0083		1.0071
Projected Incurred Claims - Rating Period	698,070	21.75	25,512	3.45	6,900	2.30	22,826	13.74
Administrative Expense - Formula								
Fixed Amount PMPM	5,615	0.175	1,294	0.175	525	0.175	291	0.175
Percent of Premium	207,800	22.0%	7,916	22.0%	2,192	22.0%	6,826	22.0%
Total	213,415	6.65	9,211	1.25	2,717	0.91	7,117	4.28
Risk Margin	16,530	1.75 %	630	1.75 %	174	1.75 %	543	1.75 %
Premium Tax	16,530	1.75 %	630	1.75 %	174	1.75 %	543	1.75 %
Projected Total Cost	944,544	29.44	35,982	4.86	9,965	3.32	31,029	18.68

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Hidalgo

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	<u>Total</u>	
	amount	pmpm
FY2019 Experience Period		
Member Months	764,894	
Estimated Incurred Claims		
Demand Response >15 Miles	2,362,093	3.09
Demand Response <= 15 Miles	3,251,584	4.25
Mileage Reimbursement	1,121,750	1.47
Meals	684	0.00
Lodging	2,847	0.00
Airfare	26,484	0.03
All Others	316	0.00
Total	6,765,758	8.85
Projected Member Months - Rating Period	198,393	
Annual Trend Assumption		3.42%
Rating Adjustment Factors		
Seasonality Adjustment		
TNC Adjustment		
Mileage Reimbursement Adjustment		
Projected Incurred Claims - Rating Period	1,943,906	9.80
Administrative Expense - Formula		
Fixed Amount PMPM	34,719	0.175
Percent of Premium	584,292	22.0%
Total	619,011	3.12
Risk Margin	46,478	1.75 %
Premium Tax	46,478	1.75 %
Projected Total Cost	2,655,872	13.39

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Jefferson

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Medicaid Only OCC		Medicaid Only HCBS		Medicaid Only Nursing Facility		Dual Eligible OCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	92,428		7,863		2,517		84,432	
Estimated Incurred Claims								
Demand Response >15 Miles	1,345,474	14.56	359,501	45.72	7,052	2.80	911,640	10.80
Demand Response <= 15 Miles	241,111	2.61	88,893	11.31	14,321	5.69	296,656	3.51
Mileage Reimbursement	249,077	2.69	53,619	6.82	313	0.12	162,990	1.93
Meals	1,025	0.01	-	-	-	-	-	-
Lodging	6,768	0.07	-	-	-	-	-	-
Airfare	-	-	-	-	-	-	-	-
All Others	85	0.00	-	-	-	-	14	0.00
Total	1,843,539	19.95	502,013	63.85	21,686	8.62	1,371,300	16.24
Projected Member Months - Rating Period	24,361		2,311		631		21,350	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0097		1.0209		1.1197		1.0120
TNC Adjustment		1.0008		1.0011		1.0042		1.0014
Mileage Reimbursement Adjustment		1.0016		1.0013		1.0002		1.0014
Projected Incurred Claims - Rating Period	532,687	21.87	163,552	70.77	6,625	10.50	381,150	17.85
Administrative Expense - Formula								
Fixed Amount PMPM	4,263	0.175	404	0.175	110	0.175	3,736	0.175
Percent of Premium	158,562	22.0%	48,417	22.0%	1,989	22.0%	113,658	22.0%
Total	162,826	6.68	48,821	21.12	2,099	3.33	117,394	5.50
Risk Margin	12,613	1.75 %	3,851	1.75 %	158	1.75 %	9,041	1.75 %
Premium Tax	12,613	1.75 %	3,851	1.75 %	158	1.75 %	9,041	1.75 %
Projected Total Cost	720,738	29.59	220,076	95.23	9,040	14.32	516,625	24.20

STAR+PLUS

Jefferson

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Dual Eligible HCBS		Dual Eligible Nursing Facility		IDD >21		MBCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	14,848		20,798		4,590		1,768	
Estimated Incurred Claims								
Demand Response >15 Miles	415,476	27.98	45,855	2.20	13,021	2.84	9,449	5.34
Demand Response <= 15 Miles	261,211	17.59	41,256	1.98	807	0.18	2,033	1.15
Mileage Reimbursement	113,065	7.61	513	0.02	21,606	4.71	13,306	7.53
Meals	-	-	-	-	-	-	-	-
Lodging	-	-	-	-	-	-	-	-
Airfare	-	-	-	-	-	-	-	-
All Others	-	-	-	-	-	-	-	-
Total	789,752	53.19	87,625	4.21	35,434	7.72	24,789	14.02
Projected Member Months - Rating Period	3,821		5,098		1,183		453	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0136		1.0487		1.0181		0.9794
TNC Adjustment		1.0021		1.0029		1.0001		1.0005
Mileage Reimbursement Adjustment		1.0017		1.0001		1.0072		1.0063
Projected Incurred Claims - Rating Period	223,971	58.62	24,472	4.80	10,143	8.58	6,781	14.97
Administrative Expense - Formula								
Fixed Amount PMPM	669	0.175	892	0.175	207	0.175	79	0.175
Percent of Premium	66,337	22.0%	7,490	22.0%	3,057	22.0%	2,026	22.0%
Total	67,005	17.54	8,382	1.64	3,264	2.76	2,105	4.65
Risk Margin	5,277	1.75 %	596	1.75 %	243	1.75 %	161	1.75 %
Premium Tax	5,277	1.75 %	596	1.75 %	243	1.75 %	161	1.75 %
Projected Total Cost	301,530	78.92	34,045	6.68	13,893	11.75	9,208	20.34

STAR+PLUS

Jefferson

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	<u>Total</u>	
	amount	pmpm
FY2019 Experience Period		
Member Months	229,244	
Estimated Incurred Claims		
Demand Response >15 Miles	3,107,469	13.56
Demand Response <= 15 Miles	946,288	4.13
Mileage Reimbursement	614,489	2.68
Meals	1,025	0.00
Lodging	6,768	0.03
Airfare	-	-
All Others	99	0.00
Total	4,676,138	20.40
Projected Member Months - Rating Period	59,208	
Annual Trend Assumption		3.42%
Rating Adjustment Factors		
Seasonality Adjustment		
TNC Adjustment		
Mileage Reimbursement Adjustment		
Projected Incurred Claims - Rating Period	1,349,380	22.79
Administrative Expense - Formula		
Fixed Amount PMPM	10,361	0.175
Percent of Premium	401,534	22.0%
Total	411,896	6.96
Risk Margin	31,940	1.75 %
Premium Tax	31,940	1.75 %
Projected Total Cost	1,825,156	30.83

STAR+PLUS
Lubbock
Rating Period - 6/ 1/2021 - 8/31/21
NEMT Carve-In

	Medicaid Only OCC		Medicaid Only HCBS		Medicaid Only Nursing Facility		Dual Eligible OCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	56,648		3,509		2,241		62,699	
Estimated Incurred Claims								
Demand Response >15 Miles	355,233	6.27	84,530	24.09	22,954	10.24	544,416	8.68
Demand Response <= 15 Miles	275,202	4.86	68,202	19.44	31,066	13.86	585,866	9.34
Mileage Reimbursement	64,620	1.14	9,704	2.77	-	-	83,038	1.32
Meals	-	-	-	-	-	-	-	-
Lodging	82	0.00	-	-	-	-	-	-
Airfare	12,007	0.21	182	0.05	-	-	2,365	0.04
All Others	-	-	-	-	-	-	-	-
Total	707,143	12.48	162,618	46.34	54,020	24.11	1,215,686	19.39
Projected Member Months - Rating Period	15,628		1,096		574		15,831	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0097		1.0209		1.1197		1.0120
TNC Adjustment		1.0024		1.0026		1.0036		1.0030
Mileage Reimbursement Adjustment		1.0011		1.0007		1.0000		1.0008
Projected Incurred Claims - Rating Period	214,106	13.70	56,366	51.41	16,838	29.34	337,738	21.33
Administrative Expense - Formula								
Fixed Amount PMPM	2,735	0.175	192	0.175	100	0.175	2,770	0.175
Percent of Premium	64,034	22.0%	16,702	22.0%	5,002	22.0%	100,553	22.0%
Total	66,769	4.27	16,894	15.41	5,102	8.89	103,323	6.53
Risk Margin	5,094	1.75 %	1,329	1.75 %	398	1.75 %	7,999	1.75 %
Premium Tax	5,094	1.75 %	1,329	1.75 %	398	1.75 %	7,999	1.75 %
Projected Total Cost	291,062	18.62	75,917	69.25	22,737	39.62	457,058	28.87

STAR+PLUS
Lubbock
Rating Period - 6/ 1/2021 - 8/31/21
NEMT Carve-In

	Dual Eligible HCBS		Dual Eligible Nursing Facility		IDD >21		MBCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	6,756		18,682		6,985		1,386	
Estimated Incurred Claims								
Demand Response >15 Miles	187,336	27.73	104,757	5.61	1,927	0.28	17,561	12.67
Demand Response <= 15 Miles	189,903	28.11	158,956	8.51	1,427	0.20	6,872	4.96
Mileage Reimbursement	8,569	1.27	-	-	1,982	0.28	2,843	2.05
Meals	-	-	-	-	-	-	-	-
Lodging	-	-	-	-	-	-	-	-
Airfare	1,805	0.27	-	-	5,333	0.76	1,398	1.01
All Others	-	-	-	-	-	-	-	-
Total	387,613	57.37	263,713	14.12	10,669	1.53	28,673	20.69
Projected Member Months - Rating Period	1,817		4,600		1,777		344	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0136		1.0487		1.0181		0.9794
TNC Adjustment		1.0031		1.0038		1.0008		1.0015
Mileage Reimbursement Adjustment		1.0003		1.0000		1.0022		1.0012
Projected Incurred Claims - Rating Period	114,854	63.20	74,045	16.10	3,001	1.69	7,567	22.01
Administrative Expense - Formula								
Fixed Amount PMPM	318	0.175	805	0.175	311	0.175	60	0.175
Percent of Premium	34,011	22.0%	22,103	22.0%	978	22.0%	2,252	22.0%
Total	34,329	18.89	22,908	4.98	1,289	0.73	2,312	6.72
Risk Margin	2,705	1.75 %	1,758	1.75 %	78	1.75 %	179	1.75 %
Premium Tax	2,705	1.75 %	1,758	1.75 %	78	1.75 %	179	1.75 %
Projected Total Cost	154,594	85.07	100,469	21.84	4,446	2.50	10,238	29.77

STAR+PLUS
 Lubbock
 Rating Period - 6/ 1/2021 - 8/31/21
 NEMT Carve-In

	Total	
	amount	pmpm
FY2019 Experience Period		
Member Months	158,906	
Estimated Incurred Claims		
Demand Response >15 Miles	1,318,715	8.30
Demand Response <= 15 Miles	1,317,494	8.29
Mileage Reimbursement	170,756	1.07
Meals	-	-
Lodging	82	0.00
Airfare	23,090	0.15
All Others	-	-
Total	2,830,136	17.81
Projected Member Months - Rating Period	41,667	
Annual Trend Assumption		3.42%
Rating Adjustment Factors		
Seasonality Adjustment		
TNC Adjustment		
Mileage Reimbursement Adjustment		
Projected Incurred Claims - Rating Period	824,516	19.79
Administrative Expense - Formula		
Fixed Amount PMPM	7,292	0.175
Percent of Premium	245,634	22.0%
Total	252,926	6.07
Risk Margin	19,539	1.75 %
Premium Tax	19,539	1.75 %
Projected Total Cost	1,116,520	26.80

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Nueces

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Medicaid Only OCC		Medicaid Only HCBS		Medicaid Only Nursing Facility		Dual Eligible OCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	82,677		10,302		2,324		95,435	
Estimated Incurred Claims								
Demand Response >15 Miles	1,098,201	13.28	449,358	43.62	1,065	0.46	654,695	6.86
Demand Response <= 15 Miles	270,847	3.28	116,158	11.28	150	0.06	468,102	4.90
Mileage Reimbursement	116,211	1.41	50,550	4.91	-	-	73,275	0.77
Meals	-	-	-	-	-	-	-	-
Lodging	-	-	-	-	-	-	-	-
Airfare	-	-	-	-	-	-	-	-
All Others	20	0.00	-	-	-	-	5	0.00
Total	1,485,279	17.96	616,065	59.80	1,216	0.52	1,196,077	12.53
Projected Member Months - Rating Period	22,451		2,807		600		23,664	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0097		1.0209		1.1197		1.0120
TNC Adjustment		1.0011		1.0012		1.0003		1.0024
Mileage Reimbursement Adjustment		1.0009		1.0010		1.0000		1.0007
Projected Incurred Claims - Rating Period	441,992	19.69	186,056	66.27	381	0.63	326,094	13.78
Administrative Expense - Formula								
Fixed Amount PMPM	3,929	0.175	491	0.175	105	0.175	4,141	0.175
Percent of Premium	131,681	22.0%	55,088	22.0%	143	22.0%	97,519	22.0%
Total	135,610	6.04	55,579	19.80	248	0.41	101,660	4.30
Risk Margin	10,475	1.75 %	4,382	1.75 %	11	1.75 %	7,757	1.75 %
Premium Tax	10,475	1.75 %	4,382	1.75 %	11	1.75 %	7,757	1.75 %
Projected Total Cost	598,552	26.66	250,399	89.19	652	1.09	443,268	18.73

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Nueces

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Dual Eligible HCBS		Dual Eligible Nursing Facility		IDD >21		MBCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	27,704		22,286		5,745		2,391	
Estimated Incurred Claims								
Demand Response >15 Miles	462,318	16.69	2,101	0.09	13,069	2.27	38,095	15.93
Demand Response <= 15 Miles	386,207	13.94	78,360	3.52	299	0.05	4,529	1.89
Mileage Reimbursement	75,371	2.72	-	-	6,726	1.17	10,788	4.51
Meals	-	-	-	-	-	-	-	-
Lodging	-	-	-	-	-	-	-	-
Airfare	-	-	-	-	-	-	-	-
All Others	-	-	-	-	-	-	-	-
Total	923,895	33.35	80,461	3.61	20,094	3.50	53,412	22.34
Projected Member Months - Rating Period	6,909		5,511		1,405		673	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0136		1.0487		1.0181		0.9794
TNC Adjustment		1.0026		1.0061		1.0000		1.0005
Mileage Reimbursement Adjustment		1.0010		1.0000		1.0039		1.0024
Projected Incurred Claims - Rating Period	253,864	36.74	22,740	4.13	5,441	3.87	16,005	23.77
Administrative Expense - Formula								
Fixed Amount PMPM	1,209	0.175	964	0.175	246	0.175	118	0.175
Percent of Premium	75,324	22.0%	7,000	22.0%	1,679	22.0%	4,761	22.0%
Total	76,533	11.08	7,965	1.45	1,925	1.37	4,879	7.24
Risk Margin	5,992	1.75 %	557	1.75 %	134	1.75 %	379	1.75 %
Premium Tax	5,992	1.75 %	557	1.75 %	134	1.75 %	379	1.75 %
Projected Total Cost	342,380	49.56	31,818	5.77	7,633	5.43	21,642	32.14

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Nueces

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	<u>Total</u>	
	amount	pmpm
FY2019 Experience Period		
Member Months	248,864	
Estimated Incurred Claims		
Demand Response >15 Miles	2,718,902	10.93
Demand Response <= 15 Miles	1,324,652	5.32
Mileage Reimbursement	332,921	1.34
Meals	-	-
Lodging	-	-
Airfare	-	-
All Others	25	0.00
Total	4,376,499	17.59
Projected Member Months - Rating Period	64,021	
Annual Trend Assumption		3.42%
Rating Adjustment Factors		
Seasonality Adjustment		
TNC Adjustment		
Mileage Reimbursement Adjustment		
Projected Incurred Claims - Rating Period	1,252,573	19.56
Administrative Expense - Formula		
Fixed Amount PMPM	11,204	0.175
Percent of Premium	373,196	22.0%
Total	384,399	6.00
Risk Margin	29,686	1.75 %
Premium Tax	29,686	1.75 %
Projected Total Cost	1,696,344	26.50

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Tarrant
Rating Period - 6/ 1/2021 - 8/31/21
NEMT Carve-In

	Medicaid Only OCC		Medicaid Only HCBS		Medicaid Only Nursing Facility		Dual Eligible OCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	191,198		16,090		8,293		161,423	
Estimated Incurred Claims								
Demand Response >15 Miles	1,421,733	7.44	276,284	17.17	21,652	2.61	606,273	3.76
Demand Response <= 15 Miles	1,287,510	6.73	309,687	19.25	27,712	3.34	1,094,585	6.78
Mileage Reimbursement	100,336	0.52	12,444	0.77	51	0.01	70,592	0.44
Meals	-	-	-	-	-	-	-	-
Lodging	-	-	-	-	-	-	-	-
Airfare	6,940	0.04	925	0.06	-	-	-	-
All Others	67,832	0.35	16,283	1.01	253	0.03	115,672	0.72
Total	2,884,351	15.09	615,623	38.26	49,667	5.99	1,887,121	11.69
Projected Member Months - Rating Period	52,993		4,855		2,126		41,828	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0097		1.0209		1.1197		1.0120
TNC Adjustment		1.0028		1.0031		1.0035		1.0036
Mileage Reimbursement Adjustment		1.0004		1.0002		1.0000		1.0004
Projected Incurred Claims - Rating Period	877,101	16.55	206,074	42.45	15,496	7.29	538,144	12.87
Administrative Expense - Formula								
Fixed Amount PMPM	9,274	0.175	850	0.175	372	0.175	7,320	0.175
Percent of Premium	261,748	22.0%	61,105	22.0%	4,686	22.0%	161,077	22.0%
Total	271,022	5.11	61,955	12.76	5,058	2.38	168,397	4.03
Risk Margin	20,821	1.75 %	4,861	1.75 %	373	1.75 %	12,813	1.75 %
Premium Tax	20,821	1.75 %	4,861	1.75 %	373	1.75 %	12,813	1.75 %
Projected Total Cost	1,189,764	22.45	277,750	57.21	21,299	10.02	732,167	17.50

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Tarrant

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Dual Eligible HCBS		Dual Eligible Nursing Facility		IDD >21		MBCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	26,549		52,877		24,240		4,590	
Estimated Incurred Claims								
Demand Response >15 Miles	195,355	7.36	62,948	1.19	8,068	0.33	22,928	5.00
Demand Response <= 15 Miles	520,371	19.60	254,593	4.81	13,623	0.56	8,669	1.89
Mileage Reimbursement	16,884	0.64	198	0.00	4,666	0.19	4,154	0.91
Meals	-	-	-	-	-	-	-	-
Lodging	-	-	-	-	-	-	-	-
Airfare	-	-	-	-	-	-	-	-
All Others	55,490	2.09	25,307	0.48	-	-	-	-
Total	788,100	29.68	343,046	6.49	26,357	1.09	35,752	7.79
Projected Member Months - Rating Period	7,161		12,835		6,323		1,167	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0136		1.0487		1.0181		0.9794
TNC Adjustment		1.0041		1.0046		1.0033		1.0015
Mileage Reimbursement Adjustment		1.0003		1.0000		1.0021		1.0014
Projected Incurred Claims - Rating Period	234,406	32.73	95,018	7.40	7,623	1.21	9,672	8.29
Administrative Expense - Formula								
Fixed Amount PMPM	1,253	0.175	2,246	0.175	1,107	0.175	204	0.175
Percent of Premium	69,591	22.0%	28,722	22.0%	2,578	22.0%	2,917	22.0%
Total	70,844	9.89	30,968	2.41	3,684	0.58	3,121	2.67
Risk Margin	5,536	1.75 %	2,285	1.75 %	205	1.75 %	232	1.75 %
Premium Tax	5,536	1.75 %	2,285	1.75 %	205	1.75 %	232	1.75 %
Projected Total Cost	316,321	44.17	130,556	10.17	11,718	1.85	13,257	11.36

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Tarrant

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	<u>Total</u>	
	amount	pmpm
FY2019 Experience Period		
Member Months	485,260	
Estimated Incurred Claims		
Demand Response >15 Miles	2,615,240	5.39
Demand Response <= 15 Miles	3,516,750	7.25
Mileage Reimbursement	209,325	0.43
Meals	-	-
Lodging	-	-
Airfare	7,866	0.02
All Others	280,837	0.58
Total	6,630,017	13.66
Projected Member Months - Rating Period	129,288	
Annual Trend Assumption		3.42%
Rating Adjustment Factors		
Seasonality Adjustment		
TNC Adjustment		
Mileage Reimbursement Adjustment		
Projected Incurred Claims - Rating Period	1,983,534	15.34
Administrative Expense - Formula		
Fixed Amount PMPM	22,625	0.175
Percent of Premium	592,423	22.0%
Total	615,048	4.76
Risk Margin	47,125	1.75 %
Premium Tax	47,125	1.75 %
Projected Total Cost	2,692,832	20.83

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Travis

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Medicaid Only OCC		Medicaid Only HCBS		Medicaid Only Nursing Facility		Dual Eligible OCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	110,201		7,658		4,472		111,395	
Estimated Incurred Claims								
Demand Response >15 Miles	715,423	6.49	126,457	16.51	31,324	7.00	581,801	5.22
Demand Response <= 15 Miles	659,101	5.98	149,255	19.49	22,541	5.04	821,558	7.38
Mileage Reimbursement	62,742	0.57	16,471	2.15	-	-	55,963	0.50
Meals	-	-	-	-	-	-	-	-
Lodging	-	-	-	-	-	-	-	-
Airfare	-	-	-	-	-	-	-	-
All Others	2,666	0.02	4,630	0.60	-	-	49,887	0.45
Total	1,439,931	13.07	296,813	38.76	53,865	12.04	1,509,209	13.55
Projected Member Months - Rating Period	30,695		2,077		1,205		28,187	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0097		1.0209		1.1197		1.0120
TNC Adjustment		1.0029		1.0031		1.0026		1.0034
Mileage Reimbursement Adjustment		1.0005		1.0007		1.0000		1.0004
Projected Incurred Claims - Rating Period	440,122	14.34	89,364	43.02	17,649	14.65	420,195	14.91
Administrative Expense - Formula								
Fixed Amount PMPM	5,372	0.175	364	0.175	211	0.175	4,933	0.175
Percent of Premium	131,555	22.0%	26,497	22.0%	5,274	22.0%	125,541	22.0%
Total	136,927	4.46	26,860	12.93	5,485	4.55	130,474	4.63
Risk Margin	10,465	1.75 %	2,108	1.75 %	420	1.75 %	9,986	1.75 %
Premium Tax	10,465	1.75 %	2,108	1.75 %	420	1.75 %	9,986	1.75 %
Projected Total Cost	597,978	19.48	120,440	57.98	23,973	19.89	570,641	20.24

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Travis

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Dual Eligible HCBS		Dual Eligible Nursing Facility		IDD >21		MBCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	18,717		35,671		14,418		3,040	
Estimated Incurred Claims								
Demand Response >15 Miles	399,661	21.35	245,564	6.88	23,416	1.62	24,112	7.93
Demand Response <= 15 Miles	374,909	20.03	207,052	5.80	13,828	0.96	3,422	1.13
Mileage Reimbursement	40,134	2.14	45	0.00	4,916	0.34	7,179	2.36
Meals	-	-	-	-	-	-	-	-
Lodging	-	-	-	-	-	-	-	-
Airfare	-	-	-	-	-	-	-	-
All Others	25,483	1.36	7,280	0.20	-	-	-	-
Total	840,187	44.89	459,942	12.89	42,161	2.92	34,713	11.42
Projected Member Months - Rating Period	4,767		8,902		3,742		804	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0136		1.0487		1.0181		0.9794
TNC Adjustment		1.0028		1.0028		1.0021		1.0006
Mileage Reimbursement Adjustment		1.0006		1.0000		1.0014		1.0024
Projected Incurred Claims - Rating Period	235,712	49.45	130,748	14.69	12,110	3.24	9,767	12.15
Administrative Expense - Formula								
Fixed Amount PMPM	834	0.175	1,558	0.175	655	0.175	141	0.175
Percent of Premium	69,853	22.0%	39,070	22.0%	3,769	22.0%	2,926	22.0%
Total	70,687	14.83	40,628	4.56	4,424	1.18	3,066	3.81
Risk Margin	5,556	1.75 %	3,108	1.75 %	300	1.75 %	233	1.75 %
Premium Tax	5,556	1.75 %	3,108	1.75 %	300	1.75 %	233	1.75 %
Projected Total Cost	317,512	66.61	177,592	19.95	17,134	4.58	13,299	16.54

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Travis

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	<u>Total</u>	
	amount	pmpm
FY2019 Experience Period		
Member Months	305,572	
Estimated Incurred Claims		
Demand Response >15 Miles	2,147,758	7.03
Demand Response <= 15 Miles	2,251,667	7.37
Mileage Reimbursement	187,449	0.61
Meals	-	-
Lodging	-	-
Airfare	-	-
All Others	89,946	0.29
Total	4,676,821	15.31
Projected Member Months - Rating Period	80,379	
Annual Trend Assumption		3.42%
Rating Adjustment Factors		
Seasonality Adjustment		
TNC Adjustment		
Mileage Reimbursement Adjustment		
Projected Incurred Claims - Rating Period	1,355,667	16.87
Administrative Expense - Formula		
Fixed Amount PMPM	14,066	0.175
Percent of Premium	404,485	22.0%
Total	418,551	5.21
Risk Margin	32,175	1.75 %
Premium Tax	32,175	1.75 %
Projected Total Cost	1,838,569	22.87

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 Central
 Rating Period - 6/ 1/2021 - 8/31/21
 NEMT Carve-In

	Medicaid Only OCC		Medicaid Only HCBS		Medicaid Only Nursing Facility		Dual Eligible OCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	136,748		7,829		6,061		131,358	
Estimated Incurred Claims								
Demand Response >15 Miles	1,432,990	10.48	383,541	48.99	12,248	2.02	2,068,961	15.75
Demand Response <= 15 Miles	738,259	5.40	171,280	21.88	50,371	8.31	1,049,587	7.99
Mileage Reimbursement	169,428	1.24	38,428	4.91	-	-	152,586	1.16
Meals	-	-	-	-	-	-	-	-
Lodging	200	0.00	-	-	-	-	-	-
Airfare	-	-	-	-	-	-	-	-
All Others	286	0.00	-	-	-	-	-	-
Total	2,341,163	17.12	593,249	75.78	62,619	10.33	3,271,135	24.90
Projected Member Months - Rating Period	37,553		2,185		1,611		33,593	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0097		1.0209		1.1197		1.0120
TNC Adjustment		1.0020		1.0018		1.0050		1.0020
Mileage Reimbursement Adjustment		1.0008		1.0008		1.0000		1.0005
Projected Incurred Claims - Rating Period	705,100	18.78	183,528	84.01	20,285	12.59	919,269	27.36
Administrative Expense - Formula								
Fixed Amount PMPM	6,572	0.175	382	0.175	282	0.175	5,879	0.175
Percent of Premium	210,158	22.0%	54,309	22.0%	6,073	22.0%	273,198	22.0%
Total	216,730	5.77	54,692	25.03	6,355	3.95	279,077	8.31
Risk Margin	16,717	1.75 %	4,320	1.75 %	483	1.75 %	21,732	1.75 %
Premium Tax	16,717	1.75 %	4,320	1.75 %	483	1.75 %	21,732	1.75 %
Projected Total Cost	955,264	25.44	246,860	113.00	27,607	17.14	1,241,809	36.97

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Central

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Dual Eligible HCBS		Dual Eligible Nursing Facility		IDD >21		MBCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	15,861		50,421		10,277		2,067	
Estimated Incurred Claims								
Demand Response >15 Miles	579,939	36.56	228,553	4.53	14,383	1.40	29,479	14.26
Demand Response <= 15 Miles	316,408	19.95	164,759	3.27	8,333	0.81	1,921	0.93
Mileage Reimbursement	52,297	3.30	102	0.00	4,611	0.45	4,126	2.00
Meals	-	-	-	-	-	-	-	-
Lodging	-	-	-	-	-	-	-	-
Airfare	-	-	-	-	-	-	-	-
All Others	-	-	-	-	-	-	-	-
Total	948,644	59.81	393,414	7.80	27,327	2.66	35,526	17.19
Projected Member Months - Rating Period	3,911		12,358		2,556		518	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0136		1.0487		1.0181		0.9794
TNC Adjustment		1.0021		1.0026		1.0019		1.0003
Mileage Reimbursement Adjustment		1.0006		1.0000		1.0020		1.0014
Projected Incurred Claims - Rating Period	257,533	65.84	109,816	8.89	7,524	2.94	9,461	18.26
Administrative Expense - Formula								
Fixed Amount PMPM	685	0.175	2,163	0.175	447	0.175	91	0.175
Percent of Premium	76,252	22.0%	33,067	22.0%	2,354	22.0%	2,821	22.0%
Total	76,937	19.67	35,230	2.85	2,801	1.10	2,911	5.62
Risk Margin	6,066	1.75 %	2,630	1.75 %	187	1.75 %	224	1.75 %
Premium Tax	6,066	1.75 %	2,630	1.75 %	187	1.75 %	224	1.75 %
Projected Total Cost	346,600	88.61	150,306	12.16	10,699	4.19	12,821	24.75

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Central

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	<u>Total</u>	
	amount	pmpm
FY2019 Experience Period		
Member Months	360,622	
Estimated Incurred Claims		
Demand Response >15 Miles	4,750,094	13.17
Demand Response <= 15 Miles	2,500,920	6.94
Mileage Reimbursement	421,578	1.17
Meals	-	-
Lodging	200	0.00
Airfare	-	-
All Others	286	0.00
Total	7,673,077	21.28
Projected Member Months - Rating Period	94,285	
Annual Trend Assumption		3.42%
Rating Adjustment Factors		
Seasonality Adjustment		
TNC Adjustment		
Mileage Reimbursement Adjustment		
Projected Incurred Claims - Rating Period	2,212,515	23.47
Administrative Expense - Formula		
Fixed Amount PMPM	16,500	0.175
Percent of Premium	658,233	22.0%
Total	674,733	7.16
Risk Margin	52,359	1.75 %
Premium Tax	52,359	1.75 %
Projected Total Cost	2,991,967	31.73

STAR+PLUS
 Northeast
 Rating Period - 6/ 1/2021 - 8/31/21
 NEMT Carve-In

	Medicaid Only OCC		Medicaid Only HCBS		Medicaid Only Nursing Facility		Dual Eligible OCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	202,833		18,194		7,050		186,653	
Estimated Incurred Claims								
Demand Response >15 Miles	2,487,350	12.26	708,604	38.95	27,530	3.90	1,699,876	9.11
Demand Response <= 15 Miles	545,209	2.69	157,022	8.63	20,924	2.97	737,197	3.95
Mileage Reimbursement	355,606	1.75	83,627	4.60	-	-	268,641	1.44
Meals	1,125	0.01	-	-	-	-	450	0.00
Lodging	3,837	0.02	-	-	-	-	1,449	0.01
Airfare	-	-	-	-	-	-	-	-
All Others	239	0.00	6	0.00	-	-	6	0.00
Total	3,393,366	16.73	949,259	52.17	48,453	6.87	2,707,619	14.51
Projected Member Months - Rating Period	54,824		4,782		1,852		47,645	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0097		1.0209		1.1197		1.0120
TNC Adjustment		1.0010		1.0010		1.0027		1.0017
Mileage Reimbursement Adjustment		1.0012		1.0010		1.0000		1.0012
Projected Incurred Claims - Rating Period	1,005,308	18.34	276,424	57.81	15,482	8.36	759,794	15.95
Administrative Expense - Formula								
Fixed Amount PMPM	9,594	0.175	837	0.175	324	0.175	8,338	0.175
Percent of Premium	299,703	22.0%	81,876	22.0%	4,668	22.0%	226,831	22.0%
Total	309,297	5.64	82,712	17.30	4,992	2.69	235,169	4.94
Risk Margin	23,840	1.75 %	6,513	1.75 %	371	1.75 %	18,043	1.75 %
Premium Tax	23,840	1.75 %	6,513	1.75 %	371	1.75 %	18,043	1.75 %
Projected Total Cost	1,362,285	24.85	372,162	77.83	21,217	11.45	1,031,050	21.64

STAR+PLUS
 Northeast
 Rating Period - 6/ 1/2021 - 8/31/21
 NEMT Carve-In

	Dual Eligible HCBS		Dual Eligible Nursing Facility		IDD >21		MBCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	49,531		66,357		13,158		3,295	
Estimated Incurred Claims								
Demand Response >15 Miles	1,255,309	25.34	97,923	1.48	71,598	5.44	28,820	8.75
Demand Response <= 15 Miles	504,664	10.19	198,416	2.99	6,534	0.50	4,962	1.51
Mileage Reimbursement	137,461	2.78	186	0.00	12,124	0.92	15,991	4.85
Meals	-	-	-	-	-	-	-	-
Lodging	-	-	-	-	-	-	-	-
Airfare	-	-	-	-	-	-	-	-
All Others	3	0.00	-	-	-	-	-	-
Total	1,897,436	38.31	296,525	4.47	90,256	6.86	49,773	15.11
Projected Member Months - Rating Period	12,283		16,149		3,344		815	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0136		1.0487		1.0181		0.9794
TNC Adjustment		1.0017		1.0042		1.0005		1.0006
Mileage Reimbursement Adjustment		1.0008		1.0000		1.0016		1.0038
Projected Incurred Claims - Rating Period	517,882	42.16	82,313	5.10	25,348	7.58	13,120	16.09
Administrative Expense - Formula								
Fixed Amount PMPM	2,150	0.175	2,826	0.175	585	0.175	143	0.175
Percent of Premium	153,566	22.0%	25,142	22.0%	7,658	22.0%	3,916	22.0%
Total	155,716	12.68	27,968	1.73	8,243	2.47	4,059	4.98
Risk Margin	12,216	1.75 %	2,000	1.75 %	609	1.75 %	312	1.75 %
Premium Tax	12,216	1.75 %	2,000	1.75 %	609	1.75 %	312	1.75 %
Projected Total Cost	698,029	56.83	114,281	7.08	34,810	10.41	17,802	21.84

STAR+PLUS
 Northeast
 Rating Period - 6/ 1/2021 - 8/31/21
 NEMT Carve-In

	Total	
	amount	pmpm
FY2019 Experience Period		
Member Months	547,071	
Estimated Incurred Claims		
Demand Response >15 Miles	6,377,010	11.66
Demand Response <= 15 Miles	2,174,927	3.98
Mileage Reimbursement	873,636	1.60
Meals	1,575	0.00
Lodging	5,286	0.01
Airfare	-	-
All Others	253	0.00
Total	9,432,687	17.24
Projected Member Months - Rating Period	141,695	
Annual Trend Assumption		3.42%
Rating Adjustment Factors		
Seasonality Adjustment		
TNC Adjustment		
Mileage Reimbursement Adjustment		
Projected Incurred Claims - Rating Period	2,695,671	19.02
Administrative Expense - Formula		
Fixed Amount PMPM	24,797	0.175
Percent of Premium	803,360	22.0%
Total	828,156	5.84
Risk Margin	63,904	1.75 %
Premium Tax	63,904	1.75 %
Projected Total Cost	3,651,635	25.77

STAR+PLUS

West

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Medicaid Only OCC		Medicaid Only HCBS		Medicaid Only Nursing Facility		Dual Eligible OCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	134,538		9,731		5,916		187,447	
Estimated Incurred Claims								
Demand Response >15 Miles	954,694	7.10	246,980	25.38	3,763	0.64	1,723,377	9.19
Demand Response <= 15 Miles	480,073	3.57	162,663	16.72	32,503	5.49	963,294	5.14
Mileage Reimbursement	278,948	2.07	53,910	5.54	-	-	367,757	1.96
Meals	3,447	0.03	275	0.03	-	-	575	0.00
Lodging	9,418	0.07	631	0.06	-	-	4,395	0.02
Airfare	3,323	0.02	-	-	-	-	27,576	0.15
All Others	10,409	0.08	1,270	0.13	-	-	7,130	0.04
Total	1,740,311	12.94	465,729	47.86	36,266	6.13	3,094,104	16.51
Projected Member Months - Rating Period	36,415		2,873		1,534		46,240	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0097		1.0209		1.1197		1.0120
TNC Adjustment		1.0017		1.0022		1.0056		1.0019
Mileage Reimbursement Adjustment		1.0019		1.0014		1.0000		1.0014
Projected Incurred Claims - Rating Period	517,018	14.20	152,622	53.11	11,471	7.48	839,416	18.15
Administrative Expense - Formula								
Fixed Amount PMPM	6,373	0.175	503	0.175	268	0.175	8,092	0.175
Percent of Premium	154,558	22.0%	45,218	22.0%	3,467	22.0%	250,271	22.0%
Total	160,931	4.42	45,721	15.91	3,735	2.43	258,363	5.59
Risk Margin	12,294	1.75 %	3,597	1.75 %	276	1.75 %	19,908	1.75 %
Premium Tax	12,294	1.75 %	3,597	1.75 %	276	1.75 %	19,908	1.75 %
Projected Total Cost	702,538	19.29	205,536	71.53	15,757	10.27	1,137,594	24.60

STAR+PLUS

West

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	Dual Eligible HCBS		Dual Eligible Nursing Facility		IDD >21		MBCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	28,275		54,483		12,712		3,304	
Estimated Incurred Claims								
Demand Response >15 Miles	688,201	24.34	206,035	3.78	3,972	0.31	21,298	6.45
Demand Response <= 15 Miles	420,960	14.89	215,889	3.96	10,209	0.80	6,823	2.07
Mileage Reimbursement	164,563	5.82	965	0.02	13,673	1.08	12,722	3.85
Meals	1,675	0.06	-	-	550	0.04	-	-
Lodging	3,687	0.13	-	-	742	0.06	-	-
Airfare	1,166	0.04	-	-	-	-	-	-
All Others	3,562	0.13	-	-	-	-	-	-
Total	1,283,814	45.40	422,889	7.76	29,147	2.29	40,843	12.36
Projected Member Months - Rating Period	7,499		13,528		3,168		864	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0136		1.0487		1.0181		0.9794
TNC Adjustment		1.0020		1.0032		1.0022		1.0011
Mileage Reimbursement Adjustment		1.0015		1.0000		1.0055		1.0037
Projected Incurred Claims - Rating Period	375,131	50.02	119,655	8.84	8,072	2.55	11,385	13.18
Administrative Expense - Formula								
Fixed Amount PMPM	1,312	0.175	2,367	0.175	554	0.175	151	0.175
Percent of Premium	111,164	22.0%	36,034	22.0%	2,547	22.0%	3,407	22.0%
Total	112,477	15.00	38,401	2.84	3,102	0.98	3,558	4.12
Risk Margin	8,843	1.75 %	2,866	1.75 %	203	1.75 %	271	1.75 %
Premium Tax	8,843	1.75 %	2,866	1.75 %	203	1.75 %	271	1.75 %
Projected Total Cost	505,293	67.38	163,789	12.11	11,579	3.65	15,484	17.92

STAR+PLUS

West

Rating Period - 6/ 1/2021 - 8/31/21

NEMT Carve-In

	<u>Total</u>	
	amount	pmpm
FY2019 Experience Period		
Member Months	436,406	
Estimated Incurred Claims		
Demand Response >15 Miles	3,848,320	8.82
Demand Response <= 15 Miles	2,292,414	5.25
Mileage Reimbursement	892,538	2.05
Meals	6,522	0.01
Lodging	18,873	0.04
Airfare	32,066	0.07
All Others	22,371	0.05
Total	7,113,103	16.30
Projected Member Months - Rating Period	112,123	
Annual Trend Assumption		3.42%
Rating Adjustment Factors		
Seasonality Adjustment		
TNC Adjustment		
Mileage Reimbursement Adjustment		
Projected Incurred Claims - Rating Period	2,034,769	18.15
Administrative Expense - Formula		
Fixed Amount PMPM	19,622	0.175
Percent of Premium	606,666	22.0%
Total	626,287	5.59
Risk Margin	48,257	1.75 %
Premium Tax	48,257	1.75 %
Projected Total Cost	2,757,571	24.59

STAR+PLUS
 Statewide
 Rating Period - 6/ 1/2021 - 8/31/21
 NEMT Carve-In

	Medicaid Only OCC		Medicaid Only HCBS		Medicaid Only Nursing Facility		Dual Eligible OCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	2,268,665		217,179		70,576		2,527,080	
Estimated Incurred Claims								
Demand Response >15 Miles	15,195,507	6.70	4,173,025	19.21	170,118	2.41	12,988,506	5.14
Demand Response <= 15 Miles	10,300,753	4.54	3,183,751	14.66	266,667	3.78	13,028,312	5.16
Mileage Reimbursement	1,873,388	0.83	525,523	2.42	723	0.01	2,129,851	0.84
Meals	5,700	0.00	274	0.00	-	-	1,126	0.00
Lodging	20,990	0.01	628	0.00	-	-	5,992	0.00
Airfare	72,578	0.03	14,522	0.07	-	-	48,857	0.02
All Others	442,495	0.20	96,609	0.44	3,322	0.05	333,964	0.13
Total	27,911,412	12.30	7,994,331	36.81	440,830	6.25	28,536,607	11.29
Projected Member Months - Rating Period	624,567		62,906		18,495		637,894	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0097		1.0209		1.1197		1.0120
TNC Adjustment		1.0023		1.0025		1.0038		1.0029
Mileage Reimbursement Adjustment		1.0008		1.0008		1.0000		1.0009
Projected Incurred Claims - Rating Period	8,429,647	13.50	2,568,909	40.84	140,640	7.60	7,925,228	12.42
Administrative Expense - Formula								
Fixed Amount PMPM	109,299	0.175	11,009	0.175	3,237	0.175	111,631	0.175
Percent of Premium	2,521,568	22.0%	761,855	22.0%	42,487	22.0%	2,373,301	22.0%
Total	2,630,867	4.21	772,863	12.29	45,724	2.47	2,484,932	3.90
Risk Margin	200,579	1.75 %	60,602	1.75 %	3,380	1.75 %	188,785	1.75 %
Premium Tax	200,579	1.75 %	60,602	1.75 %	3,380	1.75 %	188,785	1.75 %
Projected Total Cost	11,461,672	18.35	3,462,976	55.05	193,122	10.44	10,787,731	16.91

STAR+PLUS
 Statewide
 Rating Period - 6/ 1/2021 - 8/31/21
 NEMT Carve-In

	Dual Eligible HCBS		Dual Eligible Nursing Facility		IDD >21		MBCC	
	amount	pmpm	amount	pmpm	amount	pmpm	amount	pmpm
FY2019 Experience Period								
Member Months	470,583		520,111		202,682		52,365	
Estimated Incurred Claims								
Demand Response >15 Miles	6,201,881	13.18	1,075,794	2.07	202,667	1.00	328,006	6.26
Demand Response <= 15 Miles	6,991,166	14.86	2,009,718	3.86	91,223	0.45	98,287	1.88
Mileage Reimbursement	1,106,496	2.35	2,398	0.00	114,117	0.56	137,279	2.62
Meals	1,943	0.00	-	-	548	0.00	235	0.00
Lodging	4,256	0.01	-	-	739	0.00	1,430	0.03
Airfare	25,059	0.05	-	-	11,609	0.06	1,403	0.03
All Others	121,126	0.26	33,405	0.06	1,841	0.01	3,836	0.07
Total	14,451,928	30.71	3,121,315	6.00	422,744	2.09	570,476	10.89
Projected Member Months - Rating Period	122,200		127,781		52,062		13,478	
Annual Trend Assumption		3.42%		3.42%		3.42%		3.42%
Rating Adjustment Factors								
Seasonality Adjustment		1.0136		1.0487		1.0181		0.9794
TNC Adjustment		1.0030		1.0040		1.0014		1.0011
Mileage Reimbursement Adjustment		1.0009		1.0000		1.0032		1.0029
Projected Incurred Claims - Rating Period	4,136,406	33.85	874,559	6.84	120,292	2.31	156,382	11.60
Administrative Expense - Formula								
Fixed Amount PMPM	21,385	0.175	22,362	0.175	9,111	0.175	2,359	0.175
Percent of Premium	1,227,804	22.0%	264,863	22.0%	38,213	22.0%	46,876	22.0%
Total	1,249,189	10.22	287,224	2.25	47,324	0.91	49,235	3.65
Risk Margin	97,666	1.75 %	21,069	1.75 %	3,040	1.75 %	3,729	1.75 %
Premium Tax	97,666	1.75 %	21,069	1.75 %	3,040	1.75 %	3,729	1.75 %
Projected Total Cost	5,580,928	45.67	1,203,921	9.42	173,695	3.34	213,075	15.81

STAR+PLUS
 Statewide
 Rating Period - 6/ 1/2021 - 8/31/21
 NEMT Carve-In

	<u>Total</u>	
	amount	pmpm
FY2019 Experience Period		
Member Months	6,329,241	
Estimated Incurred Claims		
Demand Response >15 Miles	40,335,505	6.37
Demand Response <= 15 Miles	35,969,878	5.68
Mileage Reimbursement	5,889,776	0.93
Meals	9,825	0.00
Lodging	34,035	0.01
Airfare	174,028	0.03
All Others	1,036,597	0.16
Total	83,449,644	13.18
Projected Member Months - Rating Period	1,659,384	
Annual Trend Assumption		3.42%
Rating Adjustment Factors		
Seasonality Adjustment		
TNC Adjustment		
Mileage Reimbursement Adjustment		
Projected Incurred Claims - Rating Period	24,352,062	14.68
Administrative Expense - Formula		
Fixed Amount PMPM	290,392	0.175
Percent of Premium	7,276,966	22.0%
Total	7,567,359	4.56
Risk Margin	578,850	1.75 %
Premium Tax	578,850	1.75 %
Projected Total Cost	33,077,120	19.93

MTP FY2021 Rating
Trend Analysis
All Risk Groups

	MTO 2	MTO 3	MTO 5	MTO 6	MTO 7	MTO 8	MTO 9	MTO 11	MTO 12	MTO 13	Total
CY2017 Trend Development											
Member Months											
CY2016	2,833,440	838,759	2,654,574	510,954	3,794,088	4,445,510	405,326	672,681	10,227,409	12,582,847	38,965,588
CY2017	2,793,997	836,212	2,668,133	502,420	3,785,224	4,415,931	412,206	676,874	10,059,563	12,682,572	38,833,132
Incurred Claims - Adjusted for Reimbursement Changes											
CY2016	5,234,111	2,403,683	9,267,658	1,054,751	14,035,452	8,120,845	1,285,024	2,459,066	19,596,440	16,516,754	79,973,784
CY2017	5,148,584	2,210,933	9,336,609	1,098,343	14,719,098	8,595,794	1,349,962	2,444,570	20,129,068	17,220,912	82,253,873
PMPM											
CY2016	1.85	2.87	3.49	2.06	3.70	1.83	3.17	3.66	1.92	1.31	2.05
CY2017	1.84	2.64	3.50	2.19	3.89	1.95	3.27	3.61	2.00	1.36	2.12
Trend Factor	0.998	0.923	1.002	1.059	1.051	1.066	1.033	0.988	1.044	1.034	1.032

CY2018 Trend Development

Member Months											
CY2017	2,793,997	836,212	2,668,133	502,420	3,785,224	4,415,931	412,206	676,874	10,059,563	12,682,572	38,833,132
CY2018	2,720,399	816,520	2,626,885	487,746	3,770,098	4,382,631	402,626	674,064	9,825,291	12,466,502	38,172,762
Incurred Claims - Adjusted for Reimbursement Changes											
CY2017	5,148,584	2,210,933	9,336,609	1,098,343	13,364,227	7,991,208	1,349,962	1,965,528	20,129,068	17,220,912	79,815,374
CY2018	5,305,146	2,057,871	9,287,511	1,064,435	13,951,422	8,311,223	1,385,960	1,937,430	18,717,468	18,494,886	80,513,353
PMPM											
CY2017	1.84	2.64	3.50	2.19	3.53	1.81	3.27	2.90	2.00	1.36	2.06
CY2018	1.95	2.52	3.54	2.18	3.70	1.90	3.44	2.87	1.91	1.48	2.11
Trend Factor	1.058	0.953	1.010	0.998	1.048	1.048	1.051	0.990	0.952	1.093	1.026

CY2019 Trend Development

Member Months											
CY2018	2,720,399	816,520	2,626,885	487,746	3,770,098	4,382,631	402,626	674,064	9,825,291	12,466,502	38,172,762
CY2019	2,606,636	791,652	2,552,815	472,300	3,699,389	4,283,068	389,542	660,043	9,552,175	12,144,382	37,152,002
Incurred Claims - Adjusted for Reimbursement Changes											
CY2018	5,305,146	2,057,871	9,287,511	1,064,435	12,440,079	8,311,223	1,385,960	1,937,430	18,717,468	18,494,886	79,002,010
CY2019	5,144,905	1,903,105	9,664,033	1,081,822	12,841,046	8,593,182	1,592,452	1,945,515	18,490,540	19,488,269	80,744,868
PMPM											
CY2018	1.95	2.52	3.54	2.18	3.30	1.90	3.44	2.87	1.91	1.48	2.07
CY2019	1.97	2.40	3.79	2.29	3.47	2.01	4.09	2.95	1.94	1.60	2.17
Trend Factor	1.012	0.954	1.071	1.050	1.052	1.058	1.188	1.026	1.016	1.082	1.050

(1) Notes:

Trend analysis only includes demand response services.

Experience for MTO 1, MTO 10 and MTO 4 are excluded from trend analysis. MTO 1 and MTO 10 switched organizations effective 9/1/2017. MTO 4 is FFS.

Average **1.036**

Bureau of Labor Statistics
CPI-All Urban Consumers (Current Series)
Original Data Value

Series Id: CUSR0000SAT
Seasonally Adjusted
Series Title: Transportation in U.S. city average, all urban
Area: U.S. city average
Item: Transportation
Base Period: 1982-84=100
Years: 2009 to 2019

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2009	168.403	171.424	169.449	170.090	172.235	180.667	180.915	183.729	185.329	187.793	191.243	191.517
2010	193.116	191.978	191.375	191.249	190.231	189.426	191.082	192.287	193.316	196.845	198.783	202.454
2011	204.232	205.704	209.591	213.032	214.499	212.957	213.661	214.651	215.455	214.682	215.149	213.784
2012	215.385	217.686	218.457	218.615	215.029	212.225	211.791	217.573	221.574	222.913	218.833	217.524
2013	218.092	223.274	218.985	214.905	214.010	215.380	216.562	217.901	216.898	216.682	217.170	218.715
2014	219.287	218.525	217.491	218.989	218.306	218.653	218.126	217.071	215.410	213.730	210.033	204.124
2015	194.852	197.087	199.119	198.636	202.277	203.860	204.166	202.609	197.162	196.445	196.644	194.728
2016	193.399	189.463	191.128	193.786	194.830	196.765	194.794	194.614	195.233	196.702	197.151	199.509
2017	202.404	201.582	200.416	200.552	198.346	198.101	197.313	200.197	204.390	202.926	205.823	206.595
2018	208.664	210.133	208.046	208.613	209.906	211.432	211.583	212.783	212.833	213.842	211.365	208.286
2019	205.439	206.719	209.303	211.987	211.243	210.135	211.136	210.216	209.752	210.734	211.119	212.571

Annual Inflation Trend

2010	14.7%	12.0%	12.9%	12.4%	10.4%	4.8%	5.6%	4.7%	4.3%	4.8%	3.9%	5.7%
2011	5.8%	7.1%	9.5%	11.4%	12.8%	12.4%	11.8%	11.6%	11.5%	9.1%	8.2%	5.6%
2012	5.5%	5.8%	4.2%	2.6%	0.2%	-0.3%	-0.9%	1.4%	2.8%	3.8%	1.7%	1.7%
2013	1.3%	2.6%	0.2%	-1.7%	-0.5%	1.5%	2.3%	0.2%	-2.1%	-2.8%	-0.8%	0.5%
2014	0.5%	-2.1%	-0.7%	1.9%	2.0%	1.5%	0.7%	-0.4%	-0.7%	-1.4%	-3.3%	-6.7%
2015	-11.1%	-9.8%	-8.4%	-9.3%	-7.3%	-6.8%	-6.4%	-6.7%	-8.5%	-8.1%	-6.4%	-4.6%
2016	-0.7%	-3.9%	-4.0%	-2.4%	-3.7%	-3.5%	-4.6%	-3.9%	-1.0%	0.1%	0.3%	2.5%
2017	4.7%	6.4%	4.9%	3.5%	1.8%	0.7%	1.3%	2.9%	4.7%	3.2%	4.4%	3.6%
2018	3.1%	4.2%	3.8%	4.0%	5.8%	6.7%	7.2%	6.3%	4.1%	5.4%	2.7%	0.8%
2019	-1.5%	-1.6%	0.6%	1.6%	0.6%	-0.6%	-0.2%	-1.2%	-1.4%	-1.5%	-0.1%	2.1%

Average Inflation Trend (1)	1.7%
Selected Utilization Trend (2)	1.5%
Total Annual Trend Assumption	3.2%

Notes:

- (1) Average CPI monthly year-over-year trend for the past 10 years
(2) Selected by the Actuary

MTP FY2021 Rating
Trend Analysis

	Annual Trend Assumption
Experience	3.6%
Industry (CPI)	3.2%
Selected	3.42%

Notes:

Experience trend developed based on average of CY17-CY19 demand response trends. See Exhibit G.

Industry trend developed using i) inflation trend based on CPI transportation trend for past 10 years
and ii) utilization trend of 1.5% selected by actuary. See worksheet Exhibit H.

Selected trend equals 50% weight for Experience trend and 50% weight for Industry trend.

FY2021 STAR+PLUS Rating - NEMT Carve-in
 NEMT Carve-in Rating Adjustments
 Mileage Reimbursement Adjustment

	Medicaid Only OCC	Medicaid Only HCBS	Medicaid Only Nursing Facility	Dual Eligible OCC	Dual Eligible HCBS	Dual Eligible Nursing Facility	IDD >21	MBCC	Total
Impact of Cost Adjustment (1)									
Bexar	438	262	-	533	475	-	57	6	1,771
Dallas	656	344	2	1,282	891	1	63	68	3,307
El Paso	624	123	-	432	273	-	42	14	1,509
Harris	2,131	401	-	2,580	682	-	159	105	6,058
Hidalgo	1,824	1,327	3	5,657	3,567	4	199	578	13,158
Jefferson	2,922	629	4	1,912	1,326	6	253	156	7,208
Lubbock	758	114	-	974	101	-	23	33	2,003
Nueces	1,363	593	-	860	884	-	79	127	3,905
Tarrant	1,177	146	1	828	198	2	55	49	2,455
Travis	736	193	-	656	471	1	58	84	2,199
MRSA Central	1,987	451	-	1,790	613	1	54	48	4,945
MRSA Northeast	4,171	981	-	3,151	1,612	2	142	188	10,248
MRSA West	3,272	632	-	4,314	1,930	11	160	149	10,470
Total	22,060	6,197	8	24,970	13,024	28	1,344	1,605	69,235
FY2019 Total Incurred Claims (2)									
Bexar	2,431,705	692,332	6,802	1,741,004	1,052,787	138,713	21,420	24,712	6,109,474
Dallas	3,366,572	1,233,723	66,274	2,790,533	1,544,886	246,827	46,229	51,725	9,346,769
El Paso	616,217	228,807	9,465	958,603	420,327	99,578	12,742	7,492	2,353,230
Harris	4,942,216	1,100,001	26,256	4,041,882	1,200,127	195,780	38,636	99,300	11,644,197
Hidalgo	827,054	579,628	4,067	2,736,336	2,423,759	88,989	24,005	81,920	6,765,758
Jefferson	1,843,539	502,013	21,686	1,371,300	789,752	87,625	35,434	24,789	4,676,138
Lubbock	707,143	162,618	54,020	1,215,686	387,613	263,713	10,669	28,673	2,830,136
Nueces	1,485,279	616,065	1,216	1,196,077	923,895	80,461	20,094	53,412	4,376,499
Tarrant	2,884,351	615,623	49,667	1,887,121	788,100	343,046	26,357	35,752	6,630,017
Travis	1,439,931	296,813	53,865	1,509,209	840,187	459,942	42,161	34,713	4,676,821
MRSA Central	2,341,163	593,249	62,619	3,271,135	948,644	393,414	27,327	35,526	7,673,077
MRSA Northeast	3,393,366	949,259	48,453	2,707,619	1,897,436	296,525	90,256	49,773	9,432,687
MRSA West	1,740,311	465,729	36,266	3,094,104	1,283,814	422,889	29,147	40,843	7,113,103
Total	28,018,847	8,035,861	440,656	28,520,608	14,501,327	3,117,500	424,475	568,630	83,627,904

FY2021 STAR+PLUS Rating - NEMT Carve-in
 NEMT Carve-in Rating Adjustments
 Mileage Reimbursement Adjustment

	Medicaid Only OCC	Medicaid Only HCBS	Medicaid Only Nursing Facility	Dual Eligible OCC	Dual Eligible HCBS	Dual Eligible Nursing Facility	IDD >21	MBCC	Total
Rate Adjustment Factor (3)									
Bexar	1.0002	1.0004	1.0000	1.0003	1.0005	1.0000	1.0026	1.0002	1.0003
Dallas	1.0002	1.0003	1.0000	1.0005	1.0006	1.0000	1.0014	1.0013	1.0004
El Paso	1.0010	1.0005	1.0000	1.0005	1.0006	1.0000	1.0033	1.0019	1.0006
Harris	1.0004	1.0004	1.0000	1.0006	1.0006	1.0000	1.0041	1.0011	1.0005
Hidalgo	1.0022	1.0023	1.0006	1.0021	1.0015	1.0000	1.0083	1.0071	1.0019
Jefferson	1.0016	1.0013	1.0002	1.0014	1.0017	1.0001	1.0072	1.0063	1.0015
Lubbock	1.0011	1.0007	1.0000	1.0008	1.0003	1.0000	1.0022	1.0012	1.0007
Nueces	1.0009	1.0010	1.0000	1.0007	1.0010	1.0000	1.0039	1.0024	1.0009
Tarrant	1.0004	1.0002	1.0000	1.0004	1.0003	1.0000	1.0021	1.0014	1.0004
Travis	1.0005	1.0007	1.0000	1.0004	1.0006	1.0000	1.0014	1.0024	1.0005
MRSA Central	1.0008	1.0008	1.0000	1.0005	1.0006	1.0000	1.0020	1.0014	1.0006
MRSA Northeast	1.0012	1.0010	1.0000	1.0012	1.0008	1.0000	1.0016	1.0038	1.0011
MRSA West	1.0019	1.0014	1.0000	1.0014	1.0015	1.0000	1.0055	1.0037	1.0015
Total	1.0008	1.0008	1.0000	1.0009	1.0009	1.0000	1.0032	1.0028	1.0008

Footnotes:

- (1) Cost impact from Individual Transportation Participants (ITP) Service mileage reimbursement change.
- (2) Equals total incurred NEMT claims during the FY2019 experience period.
- (3) 1+ Cost impact divided by FY2019 Total Incurred Claims.

FY2021 STAR+PLUS Rating - NEMT Carve-in
 NEMT Carve-in Rating Adjustments
 Seasonality Adjustment - Statewide Experience

Medicaid Only OCC					
Month	Members	Paid Amount	Trended to Midpt (1)	PMPM	Seasonality Factor
201809	190,648	2,230,059	2,264,697	11.88	0.96
201810	190,201	2,574,577	2,607,249	13.71	1.11
201811	189,682	2,206,542	2,228,291	11.75	0.95
201812	189,395	2,054,754	2,069,200	10.93	0.88
201901	188,646	2,401,742	2,411,859	12.79	1.04
201902	188,958	2,258,714	2,261,881	11.97	0.97
201903	188,442	2,300,543	2,297,322	12.19	0.99
201904	188,653	2,415,677	2,405,544	12.75	1.03
201905	188,736	2,437,740	2,420,721	12.83	1.04
201906	188,538	2,222,250	2,200,561	11.67	0.95
201907	188,414	2,435,352	2,404,833	12.76	1.03
201908	188,352	2,480,896	2,442,951	12.97	1.05
FY2019	2,268,665	28,018,847	28,015,110	12.35	1.00
Rating Period					
June-Aug	565,304		7,048,345	12.47	1.0097

(1) Trend paid amount to mid-point 3/1/2019 using annual trend assumption 3.42%.

FY2021 STAR+PLUS Rating - NEMT Carve-in
 NEMT Carve-in Rating Adjustments
 Seasonality Adjustment - Statewide Experience

Medicaid Only HCBS					
Month	Members	Paid Amount	Trended to Midpt (1)	PMPM	Seasonality Factor
201809	17,586	606,434	615,853	35.02	0.95
201810	17,691	701,574	710,477	40.16	1.09
201811	17,854	614,293	620,348	34.75	0.94
201812	17,979	574,691	578,731	32.19	0.87
201901	18,069	697,783	700,723	38.78	1.05
201902	18,085	635,932	636,823	35.21	0.95
201903	18,126	669,640	668,702	36.89	1.00
201904	18,191	702,541	699,594	38.46	1.04
201905	18,275	717,255	712,248	38.97	1.05
201906	18,381	650,214	643,867	35.03	0.95
201907	18,417	705,366	696,526	37.82	1.02
201908	18,525	760,139	748,513	40.41	1.09
FY2019	217,179	8,035,861	8,032,406	36.99	1.00
Rating Period					
June-Aug	55,323		2,088,907	37.76	1.0209

(1) Trend paid amount to mid-point 3/1/2019 using annual trend assumption 3.42%.

FY2021 STAR+PLUS Rating - NEMT Carve-in
 NEMT Carve-in Rating Adjustments
 Seasonality Adjustment - Statewide Experience

Medicaid Only Nursing Facility					
Month	Members	Paid Amount	Trended to Midpt (1)	PMPM	Seasonality Factor
201809	5,876	30,457	30,931	5.26	0.84
201810	5,878	36,074	36,532	6.22	1.00
201811	5,879	36,089	36,445	6.20	0.99
201812	5,882	33,400	33,635	5.72	0.92
201901	5,935	35,114	35,261	5.94	0.95
201902	5,890	32,029	32,074	5.45	0.87
201903	5,874	35,831	35,781	6.09	0.98
201904	5,841	37,302	37,145	6.36	1.02
201905	5,903	39,710	39,433	6.68	1.07
201906	5,940	38,177	37,804	6.36	1.02
201907	5,822	42,473	41,941	7.20	1.15
201908	5,856	43,999	43,326	7.40	1.19
FY2019	70,576	440,656	440,308	6.24	1.00
Rating Period					
June-Aug	17,618		123,071	6.99	1.1197

(1) Trend paid amount to mid-point 3/1/2019 using annual trend assumption 3.42%.

FY2021 STAR+PLUS Rating - NEMT Carve-in
 NEMT Carve-in Rating Adjustments
 Seasonality Adjustment - Statewide Experience

Month	Dual Eligible OCC				Seasonality Factor
	Members	Paid Amount	Trended to Midpt (1)	PMPM	
201809	210,866	2,258,981	2,294,068	10.88	0.96
201810	210,748	2,568,850	2,601,450	12.34	1.09
201811	212,343	2,315,880	2,338,706	11.01	0.98
201812	212,139	2,155,628	2,170,783	10.23	0.91
201901	209,218	2,417,532	2,427,716	11.60	1.03
201902	209,957	2,253,666	2,256,826	10.75	0.95
201903	210,051	2,346,876	2,343,590	11.16	0.99
201904	209,895	2,414,781	2,404,651	11.46	1.02
201905	210,237	2,483,254	2,465,918	11.73	1.04
201906	210,633	2,295,335	2,272,932	10.79	0.96
201907	210,801	2,492,402	2,461,169	11.68	1.03
201908	210,192	2,517,422	2,478,919	11.79	1.05
FY2019	2,527,080	28,520,608	28,516,729	11.28	1.00
Rating Period					
June-Aug	631,626		7,213,020	11.42	1.0120

(1) Trend paid amount to mid-point 3/1/2019 using annual trend assumption 3.42%.

FY2021 STAR+PLUS Rating - NEMT Carve-in
 NEMT Carve-in Rating Adjustments
 Seasonality Adjustment - Statewide Experience

Dual Eligible HCBS					
Month	Members	Paid Amount	Trended to Midpt (1)	PMPM	Seasonality Factor
201809	39,157	1,155,055	1,172,996	29.96	0.97
201810	39,250	1,291,879	1,308,274	33.33	1.08
201811	39,591	1,166,107	1,177,600	29.74	0.97
201812	39,556	1,110,155	1,117,960	28.26	0.92
201901	39,102	1,217,288	1,222,416	31.26	1.01
201902	39,224	1,148,705	1,150,315	29.33	0.95
201903	39,192	1,189,670	1,188,004	30.31	0.98
201904	39,118	1,256,164	1,250,895	31.98	1.04
201905	39,020	1,253,863	1,245,109	31.91	1.04
201906	39,035	1,162,369	1,151,024	29.49	0.96
201907	39,224	1,272,746	1,256,797	32.04	1.04
201908	39,114	1,277,327	1,257,791	32.16	1.04
FY2019	470,583	14,501,327	14,499,180	30.81	1.00
Rating Period					
June-Aug	117,373		3,665,611	31.23	1.0136

(1) Trend paid amount to mid-point 3/1/2019 using annual trend assumption 3.42%.

FY2021 STAR+PLUS Rating - NEMT Carve-in
 NEMT Carve-in Rating Adjustments
 Seasonality Adjustment - Statewide Experience

Dual Eligible Nursing Facility					
Month	Members	Paid Amount	Trended to Midpt (1)	PMPM	Seasonality Factor
201809	43,614	241,526	245,277	5.62	0.94
201810	43,803	263,096	266,435	6.08	1.02
201811	44,287	256,082	258,606	5.84	0.97
201812	44,369	250,614	252,376	5.69	0.95
201901	43,029	253,145	254,211	5.91	0.99
201902	42,985	236,244	236,576	5.50	0.92
201903	42,960	253,395	253,040	5.89	0.98
201904	42,670	259,229	258,142	6.05	1.01
201905	42,983	280,550	278,591	6.48	1.08
201906	42,937	246,488	244,083	5.68	0.95
201907	42,940	279,522	276,019	6.43	1.07
201908	43,534	297,609	293,057	6.73	1.12
FY2019	520,111	3,117,500	3,116,413	5.99	1.00
Rating Period					
June-Aug	129,411		813,159	6.28	1.0487

(1) Trend paid amount to mid-point 3/1/2019 using annual trend assumption 3.42%.

FY2021 STAR+PLUS Rating - NEMT Carve-in
 NEMT Carve-in Rating Adjustments
 Seasonality Adjustment - Statewide Experience

Month	Members	Paid Amount	IDD >21		Seasonality Factor
			Trended to Midpt (1)	PMPM	
201809	16,890	32,040	32,538	1.93	0.92
201810	16,930	37,667	38,145	2.25	1.08
201811	16,936	32,178	32,495	1.92	0.92
201812	16,942	34,173	34,414	2.03	0.97
201901	16,919	32,293	32,429	1.92	0.92
201902	16,939	36,247	36,298	2.14	1.02
201903	16,905	37,633	37,580	2.22	1.06
201904	16,903	36,149	35,997	2.13	1.02
201905	16,887	36,899	36,641	2.17	1.04
201906	16,856	32,350	32,035	1.90	0.91
201907	16,868	38,528	38,045	2.26	1.08
201908	16,907	38,319	37,733	2.23	1.07
FY2019	202,882	424,475	424,349	2.09	1.00
Rating Period June-Aug	50,631		107,813	2.13	1.0181

(1) Trend paid amount to mid-point 3/1/2019 using annual trend assumption 3.42%.

FY2021 STAR+PLUS Rating - NEMT Carve-in
 NEMT Carve-in Rating Adjustments
 Seasonality Adjustment - Statewide Experience

Month	MBCC				Seasonality Factor
	Members	Paid Amount	Trended to Midpt (1)	PMPM	
201809	4,350	48,160	48,908	11.24	1.04
201810	4,348	56,456	57,172	13.15	1.21
201811	4,354	41,431	41,840	9.61	0.88
201812	4,352	39,807	40,087	9.21	0.85
201901	4,327	50,953	51,168	11.83	1.09
201902	4,314	51,042	51,114	11.85	1.09
201903	4,324	43,059	42,999	9.94	0.92
201904	4,340	42,206	42,029	9.68	0.89
201905	4,428	53,027	52,657	11.89	1.10
201906	4,394	45,842	45,395	10.33	0.95
201907	4,407	44,443	43,886	9.96	0.92
201908	4,427	52,202	51,404	11.61	1.07
FY2019	52,365	568,630	568,658	10.86	1.00
Rating Period					
June-Aug	13,228		140,685	10.64	0.9794

(1) Trend paid amount to mid-point 3/1/2019 using annual trend assumption 3.42%.

FY2021 STAR+PLUS Rating - NEMT Carve-in
 NEMT Carve-in Rating Adjustments
 Seasonality Adjustment - Statewide Experience

Month	Members	Paid Amount	Total		Seasonality Factor
			Trended to Midpt (1)	PMPM	
201809	528,987	6,602,712	6,705,267	12.68	0.96
201810	528,849	7,530,173	7,625,734	14.42	1.09
201811	530,926	6,668,602	6,734,330	12.68	0.96
201812	530,614	6,253,223	6,297,186	11.87	0.90
201901	525,245	7,105,850	7,135,782	13.59	1.03
201902	526,352	6,652,580	6,661,908	12.66	0.96
201903	525,874	6,876,647	6,867,018	13.06	0.99
201904	525,611	7,164,048	7,133,997	13.57	1.03
201905	526,469	7,302,299	7,251,319	13.77	1.04
201906	526,714	6,693,026	6,627,700	12.58	0.95
201907	526,893	7,310,832	7,219,217	13.70	1.04
201908	526,907	7,467,914	7,353,694	13.96	1.06
FY2019	6,329,441	83,627,904	83,613,153	13.21	1.00
Rating Period					
June-Aug	1,580,514		21,200,611	13.41	1.0154

(1) Trend paid amount to mid-point 3/1/2019 using annual trend assumption 3.42%.

FY2021 STAR+PLUS Rating - NEMT Carve-in
 NEMT Carve-in Rating Adjustments
 Transportation Network Company (TNC) Adjustment

	<u>Medicaid Only OCC</u>	<u>Medicaid Only HCBS</u>	<u>Medicaid Only Nursing</u>	<u>Dual Eligible OCC</u>	<u>Dual Eligible HCBS</u>	<u>Dual Eligible Nursing</u>	<u>IDD >21</u>	<u>MBCC</u>	<u>Total</u>
Impact of Cost Adjustment (1)									
Bexar	10,090	2,639	34	7,656	4,639	795	62	38	25,954
Dallas	10,332	4,109	189	10,093	5,738	1,348	81	133	32,023
El Paso	2,446	1,033	52	4,392	1,917	614	8	23	10,486
Harris	11,784	3,184	136	14,002	4,133	1,010	50	136	34,434
Hidalgo	1,867	1,392	8	7,632	8,827	531	31	38	20,326
Jefferson	1,508	556	91	1,854	1,634	257	4	12	5,917
Lubbock	1,720	427	193	3,663	1,189	995	9	44	8,241
Nueces	1,692	726	0	2,924	2,413	488	1	28	8,274
Tarrant	8,048	1,935	174	6,842	3,252	1,591	86	54	21,982
Travis	4,121	933	141	5,133	2,345	1,294	88	22	14,077
MRSA Central	4,614	1,071	314	6,559	1,976	1,032	53	12	15,631
MRSA Northeast	3,408	983	130	4,608	3,155	1,239	42	30	13,596
MRSA West	3,002	1,018	204	6,021	2,629	1,351	64	44	14,333
Total	64,632	20,006	1,667	81,382	43,846	12,545	580	614	225,273
FY2019 Total Incurred Claims NEMT Service (2)									
Bexar	2,431,705	692,332	6,802	1,741,004	1,052,787	138,713	21,420	24,712	6,109,474
Dallas	3,366,572	1,233,723	66,274	2,790,533	1,544,886	246,827	46,229	51,725	9,346,769
El Paso	616,217	228,807	9,465	958,603	420,327	99,578	12,742	7,492	2,353,230
Harris	4,942,216	1,100,001	26,256	4,041,882	1,200,127	195,780	38,636	99,300	11,644,197
Hidalgo	827,054	579,628	4,067	2,736,336	2,423,759	88,989	24,005	81,920	6,765,758
Jefferson	1,843,539	502,013	21,686	1,371,300	789,752	87,625	35,434	24,789	4,676,138
Lubbock	707,143	162,618	54,020	1,215,686	387,613	263,713	10,669	28,673	2,830,136
Nueces	1,485,279	616,065	1,216	1,196,077	923,895	80,461	20,094	53,412	4,376,499
Tarrant	2,884,351	615,623	49,667	1,887,121	788,100	343,046	26,357	35,752	6,630,017
Travis	1,439,931	296,813	53,865	1,509,209	840,187	459,942	42,161	34,713	4,676,821
MRSA Central	2,341,163	593,249	62,619	3,271,135	948,644	393,414	27,327	35,526	7,673,077
MRSA Northeast	3,393,366	949,259	48,453	2,707,619	1,897,436	296,525	90,256	49,773	9,432,687
MRSA West	1,740,311	465,729	36,266	3,094,104	1,283,814	422,889	29,147	40,843	7,113,103
Total	28,018,847	8,035,861	440,656	28,520,608	14,501,327	3,117,500	424,475	568,630	83,627,904

FY2021 STAR+PLUS Rating - NEMT Carve-in
 NEMT Carve-in Rating Adjustments
 Transportation Network Company (TNC) Adjustment

	<u>Medicaid Only OCC</u>	<u>Medicaid Only HCBS</u>	<u>Medicaid Only Nursing</u>	<u>Dual Eligible OCC</u>	<u>Dual Eligible HCBS</u>	<u>Dual Eligible Nursing</u>	<u>IDD >21</u>	<u>MBCC</u>	<u>Total</u>
Rate Adjustment Factor (3)									
Bexar	1.0041	1.0038	1.0050	1.0044	1.0044	1.0057	1.0029	1.0016	1.0042
Dallas	1.0031	1.0033	1.0028	1.0036	1.0037	1.0055	1.0017	1.0026	1.0034
El Paso	1.0040	1.0045	1.0055	1.0046	1.0046	1.0062	1.0007	1.0031	1.0045
Harris	1.0024	1.0029	1.0052	1.0035	1.0034	1.0052	1.0013	1.0014	1.0030
Hidalgo	1.0023	1.0024	1.0021	1.0028	1.0036	1.0060	1.0013	1.0005	1.0030
Jefferson	1.0008	1.0011	1.0042	1.0014	1.0021	1.0029	1.0001	1.0005	1.0013
Lubbock	1.0024	1.0026	1.0036	1.0030	1.0031	1.0038	1.0008	1.0015	1.0029
Nueces	1.0011	1.0012	1.0003	1.0024	1.0026	1.0061	1.0000	1.0005	1.0019
Tarrant	1.0028	1.0031	1.0035	1.0036	1.0041	1.0046	1.0033	1.0015	1.0033
Travis	1.0029	1.0031	1.0026	1.0034	1.0028	1.0028	1.0021	1.0006	1.0030
MRSA Central	1.0020	1.0018	1.0050	1.0020	1.0021	1.0026	1.0019	1.0003	1.0020
MRSA Northeast	1.0010	1.0010	1.0027	1.0017	1.0017	1.0042	1.0005	1.0006	1.0014
MRSA West	1.0017	1.0022	1.0056	1.0019	1.0020	1.0032	1.0022	1.0011	1.0020
Total	1.0023	1.0025	1.0038	1.0029	1.0030	1.0040	1.0014	1.0011	1.0027

Footnotes:

- (1) Cost impact from TNC.
- (2) Equals total incurred NEMT claims during the FY2019 experience period.
- (3) 1+ Cost impact divided by FY2019 Total Incurred Claims.