

**STATE OF TEXAS
CHILDREN'S HEALTH INSURANCE
PROGRAM
CHIP RATE SETTING
STATE FISCAL YEAR 2024**

Prepared for:

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I. Introduction

Rudd and Wisdom, Inc. has been retained by the Texas Health and Human Services Commission (HHSC) to develop the state fiscal year 2024 (FY2024, September 1, 2023 through August 31, 2024) premium rates for health plans participating in the Texas Children's Health Insurance Program (CHIP). This report presents the rating methodology and assumptions used in developing the premium rates.

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

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

Rudd and Wisdom has provided actuarial services to the Texas Medicaid program for over 35 years. We have participated in the state's Medicaid managed care rating process since its inception in 1993 and in developing premium rates for CHIP plans since that program's inception in 2000. This year, as in previous years, we have worked closely with HHSC in developing the FY2024 CHIP premium rates.

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

- Monthly enrollment by age group for each health plan. This includes historical enrollment since September 2019 and a projection of future enrollment through August 2024. These projections were prepared by HHS Forecasting staff.
- Detailed MCO encounter data for FY2022. The encounter data is a dataset that includes detail claim information for every claim incurred during FY2022 and paid through November 30, 2022. The dataset includes but is not limited to (1) individual member information – date of birth, risk group, health plan; (2) provider information – type of provider, NPI, bill type, taxonomy code; (3) procedure information – diagnosis, procedure code, claim modifier; and (4) payment information – paid amount, billed amount. This information is used to identify the providers and services which will receive or have received reimbursement changes in order to determine the cost impact of such changes.
- Claim lag reports by age group for each health plan for the period September 2019 through February 2023. These reports were provided by the health plans and include monthly paid claims by month of service. These reports summarize the detail encounter data.
- Financial Statistical Reports (FSR) for each MCO participating in the CHIP program for FY2019, FY2020, FY2021, FY2022 and the first six months of FY2023. The FSR contains detailed information regarding monthly enrollment, revenue, incurred claims and administrative expenses as reported by the health plan. These reports are prepared by the

health plans and are audited by an external audit organization. A health plan that participates in multiple programs and/or service areas submits a separate FSR for each individual service area and program combination.

- Reports from the EQRO summarizing their analysis of the health plan's encounter claims data.
- Reports from the health plans providing information on high volume claimants during the experience period.
- Current (FY2023) premium rates for each health plan.
- The number of maternity deliveries by health plan and risk group for the period September 2019 through February 2023.
- Information from both HHSC and the health plans regarding recent changes in covered services and provider reimbursement under the State Medicaid and CHIP programs.
- Information from the health plans regarding current and projected payment rates for certain capitated services, such as behavioral health and vision.
 - Subcapitated services make up approximately 2.5% of total medical cost and are most commonly vision and behavioral health arrangements. Information about these arrangements was provided by the health plans and verified with the audited FSRs. These items were reviewed for reasonableness by comparing the reported expense amounts from the various health plans to those arrangements of other health plans.
- FY2022 acuity risk adjustment analysis provided by the EQRO for each participating health plan.
- Information from the health plans regarding current and projected reinsurance premium rates.
- Information provided by HHSC regarding FY2022 CHIP health plan claims cost by type of service for certain services. This information was obtained from the encounter database.
- Information provided by HHSC regarding the expected impact of FY2022, FY2023 and FY2024 Medicaid provider reimbursement rate changes.

All data requested by the actuary was provided by HHSC and the participating MCOs. Although the above data was reviewed for reasonableness, Rudd and Wisdom did not audit the data. Further discussion of the base data development and review is included in Section II.

II. Base Period Data

The actuarial model used to derive the FY2024 CHIP plan premium rates relies primarily on historical health plan experience. The base period was defined as FY2022 (September 1, 2021 through August 31, 2022). Estimates of the base period included an evaluation of incurred but unpaid claims (IBNR). Given that there are six months of runout beyond the base period the IBNR estimates are immaterial. The IBNR estimate is based on claims paid through February 2023 and represents the following percentage of claims by type of service:

- Medical - 0.25%
- Prescription Drugs - 0.0%

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

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

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

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

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

Below is an excerpt from their data certification report:

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

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

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

After accumulating all of the information to be used in the rate setting process, a comparison of the various sources of claims data was performed to check for consistency. The comparison includes (i) the claim lag reports provided by the MCOs in the supplemental data request, (ii) the claim amounts reported in the FSRs and (iii) the claim amounts included in the encounter data files. The three data sources are compared to ensure consistent results such that the three are considered interchangeable in aggregate. The use of these multiple data sources allows for a dynamic, flexible rating model that is not constrained to the data limitations of a single source.

Based on the review of the data by the EQRO, HHSC and Rudd and Wisdom, we have concluded that all data sources are consistent, complete and accurate. It is our opinion that the data collected for the rate development is of high quality and we have no concerns over the availability or applicability to the FY2024 rate development. The accumulation of data sources noted above have been assigned full credibility. Given the history of managed care data available for the CHIP program, the rate development is based exclusively on managed care data.

III. Overview of the Rate Setting Methodology

This report details the development of the medical and prescription drug components of the CHIP premium rate. The two components are developed separately but follow similar methodologies in their calculations. Information regarding the CHIP Dental program can be found in the report titled “State of Texas Medicaid and CHIP Managed Care Dental Rate Setting FY2024”.

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

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

Premium rates were determined for the following age groups:

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

The services used in the analysis include the following:

- Inpatient Hospital
- Outpatient Hospital
- Physician Services
- Other Professional Services
- Lab, X-ray and Radiology Services
- Medical Supplies
- Behavioral Health Services
- EPSDT Medical Services
- Family Planning and Genetics Services
- Hearing Services
- Home Health Services
- Emergency Room Services
- Ambulance Services
- Vision Services
- Prescription Drugs
- COVID-19 related expenses for testing, treatments and vaccines

Services specifically excluded from the analysis include:

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

We projected the FY2024 cost for each individual health plan by estimating their base period average claims cost and then applying trend along with various programmatic, reimbursement, benefit and policy-related adjustment factors. These adjustment factors are described in Section IV. We added capitation expenses for services capitated by the health plan (such as vision and behavioral health), a reasonable provision for administrative expenses, a net cost of reinsurance, taxes and risk margin in order to project the total FY2024 cost under the plan. Attachment 2 presents a description and an example of the experience analysis for a sample health plan. These projected total cost rates were determined separately for each risk group for each health plan. The results of this analysis were then combined for all health plans in a service area in order to develop a set of community rates for each service area.

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

HHSC utilized the combination of two rating methodologies in setting the FY2024 CHIP premium rates – individual plan experience rating and community rating. The individual plan experience rating method is described above and documented in Attachment 2. The community rates are developed by a weighted average of the projected FY2024 cost for each health plan in the service area (from the individual plan experience rating method). The weights used in this formula are the projected FY2024 number of members enrolled in each health plan by age group. Attachment 3 presents the summary community rating exhibit for each service area along with a description of the analysis.

The projected FY2024 average total per-capita cost in a service area is called the unadjusted premium rate. This rate includes provision for all health care and administrative services to be provided by the health plan. This rate is then separated into two components – (i) non-maternity related expenses and (ii) maternity expenses. The premium rate for non-maternity expenses is called the adjusted premium rate. These are the monthly rates paid to the health plan. The amount paid for maternity expenses is called the Delivery Supplemental Payment (DSP). Additional information regarding DSP is included in Attachment 7.

The base community rate in each service area was adjusted to reflect the health status, or acuity, of the population enrolled in each health plan. The purpose of acuity risk adjustment is to recognize the anticipated cost differential between multiple health plans in a service area by analyzing the health status of their respective memberships. Additional information regarding risk adjustment is included in Section IV below under Risk Adjustment and in Attachment 6.

The FY2024 CHIP health plan premium rates were then defined as the following: the minimum of (a) 108% of the rate developed using the individual experience of the plan and (b) community rate with risk adjustment. The enrollment for children under age one, Perinate Newborn 198%-202% and Perinate Mother 198%-202% risk groups was so small that credible rates could not be set by area. As a result, the rates for these risk groups were calculated on a statewide basis. By limiting the final premium rates to no greater than 108% of the rate developed using the individual experience of the plan, the CHIP rates continue to incentivize the efficient provision of services while preventing a relatively low-cost plan from benefiting excessively from the higher community average premium rates. The 108% minimum impacts nine of the thirty-two health plan/SDA options in the CHIP program. This methodology prevents a lower cost health plan from being excessively profitable as a result of a significantly different cost structure in comparison to their competition.

IV. Adjustment Factors

This section contains a description of the adjustment factors used in the FY2024 CHIP rate setting process.

Trend Factors - Medical

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

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

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

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

Trend Factors - Pharmacy

The rating methodology uses assumed pharmacy trend factors to adjust the base period claims cost to the rating period (FY2024). The trend rate assumptions were developed by the actuary based on an analysis of recent pharmacy claims experience under the CHIP program. The trend rate assumption is the same for all CHIP risk groups and service areas.

Attachment 4 – Exhibit B presents the derivation of the pharmacy trend assumption. The trend analysis resulted in an annual trend assumption of 7.0%.

Provider Reimbursement Adjustments

Medicaid provider reimbursement changes were recognized for the following: inpatient hospital, potentially preventable readmissions (PPR), potentially preventable complications (PPC), outpatient behavioral health, vaccine administration, private duty nursing, ground ambulance, rural hospital outpatient services, birth and women's health related surgeries and evaluation and management services.

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

Related Party Adjustments

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

Potentially Preventable Readmission Quality Improvement

Effective September 1, 2019, HHSC began utilizing an adjustment to the base period data that analyzes inefficiencies and potentially preventable expenses that unnecessarily increase managed care costs. This analysis was performed using the 3M™ PPR methodology which is a computerized algorithm to identify readmissions with a plausible clinical relationship to the care rendered during or immediately following a prior hospital admission. An expected reduction of PPR events of 10% has been applied for FY2024. Exhibit C of Attachment 5 presents a summary of the derivation of these adjustment factors.

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

Federally Qualified Health Center (FQHC) Wrap Payment Removal

Effective March 1, 2018, MCOs were no longer required to reimburse FQHCs the full encounter rate. The MCOs are expected to reimburse FQHCs at a rate that is comparable to the reimbursement of all other non-FQHC providers providing similar services. Subsequently, the FQHC will be reimbursed up to their full encounter rate outside of the capitation rate. The base period data includes the full reimbursement rate paid to the FQHCs. As a result, this adjustment is necessary to remove the FQHC wrap payment portion from the base period data. The rating adjustment was calculated by collecting the FQHC wrap payments paid by the MCOs during the base period. Exhibit O of Attachment 5 presents a summary of the derivation of these adjustment factors.

Removal of Invalid Clinician Administered Drugs (CADs)

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

Risk Adjustment

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

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

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

Public Health Emergency and COVID-19 Related Expenses

COVID-19 and the associated PHE have had an unprecedented impact on the historical enrollment and claims data beginning March 2020 and continuing through the FY2022 base period. During the FY2020 through FY2023 rating periods, HHSC addressed the additional risk associated with the PHE with multiple approaches including paying COVID-19 related expenditures on a non-risk basis, adjusting the base period used in rate development and revising the experience rebate structure.

With the expiration of the PHE on May 11, 2023 and the commencement of the PHE unwinding process, Medicaid programs are expected to eventually return to enrollment and average cost patterns that are in line with historical pre-PHE norms and CHIP program enrollment is expected to increase from members transitioning over from Medicaid. In our opinion, the pre-PHE base period, March 2019 through February 2020, which was used for the FY2022 and FY2023 rate developments is outdated for use in developing FY2024 rates. As a result, the base period has been updated to FY2022, which aligns with managed care regulations.

Effective September 1, 2023, all COVID-19 related expenses for testing, treatments and vaccines will be covered under the capitation rate with no further non-risk payments. Given the historical

information available regarding COVID-19 and the stabilization of the monthly cost patterns, we believe the FY2022 base period data is a reasonable basis for projecting future expenses. The FY2022 base period includes claims experience for all COVID-19 related expense and no further adjustment is needed to account for the carve-in of COVID-19 related expenses. While we cannot predict future COVID-19 outbreaks or variants just like we cannot predict higher or lower than average flu seasons, we believe the FY2022 data demonstrates sufficient consistency to be an appropriate basis for rate development.

Medicaid enrollment grew significantly due to the continuous enrollment provision during the PHE included in the Families First Coronavirus Response Act (FFCRA). The PHE has had an opposite effect on the CHIP program enrollment. During the FY2022 base period, average CHIP enrollment was about 70% less than the period prior to the PHE. The impact of the PHE unwinding process on the CHIP program was studied; however, an adjustment has not been applied due to the following reasons.

- The PHE did not have a material impact on the CHIP perinate risk groups. The CHIP perinate risk groups’ enrollment has been relatively stable and not expected to have a material change from the PHE unwinding process.
- In order to determine if the PHE had a material impact on the traditional CHIP risk groups, the pre-PHE pmpm for the period March 2019 through February 2020 was trended forward to FY2022 to determine the projected FY2022 experience using pre-PHE data and compared to the actual pmpm for the FY2022 base period. The result is presented in table below.

	<u>Medical</u>	<u>Rx</u>	<u>Total</u>
PMPM - Traditional CHIP (Exclude Perinate)			
3/19-2/20 Actual	88.69	23.55	112.24
Annual Trend Assumption	5.3%	7.0%	
FY2022 - Projected	100.92	27.89	128.81
FY2022 - Actual	98.35	28.03	126.37

The projected FY2022 pmpm using pre-PHE data is similar to the actual FY2022 pmpm for the traditional CHIP risk groups.

- Unlike the Medicaid programs where we’re able to estimate the disenrollment from the unwinding process, we’re not able to determine how many of the members to be disenrolled from Medicaid will transition to CHIP and their acuity level compared to the base period experience.

As a result, no other adjustment was made other than updating the base period to reflect more recent experience. We are assuming that the members who will transition to CHIP from the unwinding process will have an average cost profile similar to those in the base period experience.

Given the adjustments to the base period, utilizing FY2022 data, and transitioning COVID-19 services into the capitation rate, HHSC will revert the experience rebate structure to its original structure.

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

V. Administrative Fees, Taxes and Risk Margin

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

The administrative fee amounts were determined based on a review of the administrative expenses of the health plan as reported in their audited Financial Statistical Reports (FSRs). The table below summarizes the reported administrative expenses for the past six fiscal years for the CHIP program. The table includes actual reported expenses along with estimated inflation adjusted expenses.

	Administrative Expense PMPM		
	Actual	Average Annual ECI	Inflation Adjusted
FY2017	13.06	3.50%	16.61
FY2018	13.44	3.60%	16.62
FY2019	17.78	3.80%	21.42
FY2020	17.24	4.10%	20.24
FY2021	20.13	4.10%	22.71
FY2022	28.06	3.60%	30.11
Average			
FY17-FY22			21.29
FY17-FY20			18.73

The actual administrative expenses reported by year were adjusted for inflation by applying the annual growth in the Employee Cost Index (ECI) as reported by the US Bureau of Labor and Statistics. Based on this analysis the expected range of administrative costs for FY2024 was deemed to be \$18-21.

Based on the administrative fee formula included in the rate development, the average administrative expense included in the FY2024 premium rate is \$19.71 which is in line with the range of historical average cost. The FY2022 average administrative cost appears to be an outlier and is attributable to the significant enrollment reduction for the CHIP program. As the PHE ends, and enrollment increases to pre-PHE levels, it is expected that per capita administrative cost will decrease from the FY2022 amount.

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

the fixed component of the medical administrative expense formula breaks down into two categories:

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

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

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

VI. CHIP Dental

This report details the development of the medical and prescription drug component of the premium. Information regarding the CHIP Dental program can be found in the report titled “State of Texas Medicaid and CHIP Managed Care Dental Rate Setting FY2024”.

VII. Summary

The chart below presents the results of the FY2024 CHIP rating analysis and includes all components of the premium – medical and prescription drug.

Health Plan	CHIP - Medical & Prescription Drug Rates				
	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	DSP
FY2024 CHIP Premium Rates pmpm					
Aetna - Bexar	865.94	126.13	96.30	107.56	3,100.00
Amerigroup - Bexar	865.94	102.98	124.48	137.33	3,100.00
CFHP - Bexar	865.94	164.15	131.21	130.33	3,100.00
Superior - Bexar	865.94	208.79	172.45	112.59	3,100.00
Amerigroup - Dallas	865.94	167.12	163.83	210.54	3,100.00
Molina - Dallas	865.94	73.75	146.37	115.33	3,100.00
Parkland - Dallas	865.94	275.48	220.96	223.21	3,100.00
El Paso Health - El Paso	865.94	142.28	150.67	145.60	3,100.00
Superior - El Paso	865.94	206.68	173.61	139.32	3,100.00
Amerigroup - Harris	865.94	139.48	143.18	169.03	3,100.00
CHC - Harris	865.94	198.53	149.38	225.88	3,100.00
Molina - Harris	865.94	53.65	47.29	72.04	3,100.00
TCHP - Harris	865.94	229.81	167.70	291.36	3,100.00
United - Harris	865.94	287.11	113.48	216.83	3,100.00
Amerigroup - Jefferson	865.94	211.98	130.97	3,370.42	3,100.00
CHC - Jefferson	865.94	226.42	221.31	283.48	3,100.00
Molina - Jefferson	865.94	47.24	67.27	54.22	3,100.00
TCHP - Jefferson	865.94	186.77	208.67	197.64	3,100.00
United - Jefferson	865.94	191.32	152.85	213.35	3,100.00
Firstcare - Lubbock	865.94	125.52	105.85	261.77	3,100.00
Superior - Lubbock	865.94	190.08	118.92	105.50	3,100.00
Driscoll - Nueces	865.94	232.40	230.55	268.19	3,100.00
Superior - Nueces	865.94	208.00	189.55	198.70	3,100.00
United - Nueces	865.94	59.51	108.14	100.82	3,100.00
Aetna - Tarrant	865.94	221.71	166.85	160.58	3,100.00
Amerigroup - Tarrant	865.94	213.63	141.86	178.54	3,100.00
Cook - Tarrant	865.94	267.34	166.69	199.70	3,100.00
BCBS - Travis	865.94	111.84	104.08	155.45	3,100.00
DCHP - Travis	865.94	139.02	136.93	205.11	3,100.00
Superior - Travis	865.94	123.78	134.73	249.55	3,100.00
Molina - RSA	865.94	87.12	131.19	122.82	3,100.00
Superior - RSA	865.94	161.42	127.66	152.19	3,100.00

CHIP Perinate - Medical & Prescription Drug Rates				
Health Plan	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2024 CHIP Perinate Premium Rates pmpm				
Aetna - Bexar	1,527.05	416.36	401.17	3,100.00
Amerigroup - Bexar	1,527.05	464.85	401.17	3,100.00
CFHP - Bexar	1,527.05	448.30	401.17	3,100.00
Superior - Bexar	1,527.05	457.93	401.17	3,100.00
Amerigroup - Dallas	1,527.05	435.54	401.17	3,100.00
Molina - Dallas	1,527.05	420.05	401.17	3,100.00
Parkland - Dallas	1,527.05	441.02	401.17	3,100.00
El Paso Health - El Paso	1,527.05	367.07	401.17	3,100.00
Superior - El Paso	1,527.05	403.51	401.17	3,100.00
Amerigroup - Harris	1,527.05	430.52	401.17	3,100.00
CHC - Harris	1,527.05	605.55	401.17	3,100.00
Molina - Harris	1,527.05	603.00	401.17	3,100.00
TCHP - Harris	1,527.05	606.98	401.17	3,100.00
United - Harris	1,527.05	587.82	401.17	3,100.00
Amerigroup - Jefferson	1,527.05	638.04	401.17	3,100.00
CHC - Jefferson	1,527.05	593.40	401.17	3,100.00
Molina - Jefferson	1,527.05	678.30	401.17	3,100.00
TCHP - Jefferson	1,527.05	750.52	401.17	3,100.00
United - Jefferson	1,527.05	606.39	401.17	3,100.00
Firstcare - Lubbock	1,527.05	437.77	401.17	3,100.00
Superior - Lubbock	1,527.05	422.38	401.17	3,100.00
Driscoll - Nueces	1,527.05	541.32	401.17	3,100.00
Superior - Nueces	1,527.05	493.00	401.17	3,100.00
United - Nueces	1,527.05	275.13	401.17	3,100.00
Aetna - Tarrant	1,527.05	394.48	401.17	3,100.00
Amerigroup - Tarrant	1,527.05	419.45	401.17	3,100.00
Cook - Tarrant	1,527.05	410.22	401.17	3,100.00
BCBS - Travis	1,527.05	470.62	401.17	3,100.00
DCHP - Travis	1,527.05	522.37	401.17	3,100.00
Superior - Travis	1,527.05	475.24	401.17	3,100.00
Molina - RSA	1,527.05	428.97	401.17	3,100.00
Superior - RSA	1,527.05	457.87	401.17	3,100.00

The chart below presents the results of the FY2024 CHIP Dental rating analysis.

CHIP Dental Rates				
Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18
FY2024 Dental Premium Rates pmpm				
Dentaquest	2.63	19.00	23.09	20.98
MCNA	2.63	19.00	23.09	20.98
United	3.42	16.77	22.53	20.28

Attachment 1 presents additional information regarding the FY2024 CHIP medical and pharmacy rates including a comparison to current (FY2023) rates. This report details the development of the medical and prescription drug component of the premium. Information regarding the CHIP Dental program can be found in the report titled “State of Texas Medicaid and CHIP Managed Care Dental Rate Setting FY2024”.

Attachment 9 presents the required rating index summarizing the applicable sections from the 2023-2024 Medicaid Managed Care Rate Development Guide.

VIII. Actuarial Certification of FY2024 CHIP HMO Premium Rates

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

Rudd and Wisdom has been retained by the Texas Health and Human Services Commission (HHSC) to assist in the development of the CHIP premium rate for the period September 1, 2023 through August 31, 2024 and to provide the actuarial certification required under Centers for Medicare and Medicaid Services (CMS) requirements 42 CFR 438.4.

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

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

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

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

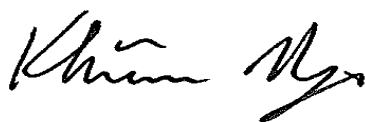
Please note that actual health plan contractor experience will differ from these projections. Rudd and Wisdom has developed these rates on behalf of the State to demonstrate compliance with the CMS requirements under 42 CFR 438.3(c), 438.3(e), 438.4, 438.5, 438.6 and 438.7. Any health plan contracting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



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



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



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



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

IX. Attachments

Attachment 1 – Summary of FY2024 CHIP Medical and Pharmacy Rating Analysis

Attachment 2 – Individual Health Plan Experience Analysis

Attachment 3 – Community Experience Analysis

Attachment 4 – Trend Analysis

Attachment 5 – Provider Reimbursement and Benefit Adjustment Factors

Attachment 6 – Acuity Risk Adjustment

Attachment 7 – Delivery Supplemental Payment

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

Attachment 9 – Index for 2023-2024 Medicaid Managed Care Rate Development Guide

Attachment 1

Summary of FY2024 CHIP Medical and Pharmacy Rating Analysis

Exhibit A presents summary information regarding the FY2024 CHIP health plan rates. Included on the exhibit are current (FY2023) premium rates, split between medical, prescription drug, and delivery supplemental payment (DSP) components; FY2024 premium rates, split between medical, prescription drug and DSP components; and a comparison of FY2023 and FY2024 premium rates.

Exhibit B presents a comparison of the projected expenditures under the current (FY2023) premium rates and the FY2024 premium rates. The projection is split by medical (includes DSP), pharmacy and dental.

The primary cost driver behind the rate change is updating of the base period to FY2022 to reflect recent program experience.

FY2024 CHIP Rating Summary

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

FY2024 CHIP Rating Summary

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

FY2024 CHIP Rating Summary

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

FY2024 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2024 Medical Premium Rates pmpm								
Aetna - Bexar	842.82	120.03	64.82	75.18	1,524.89	385.66	355.72	3,100.00
Amerigroup - Bexar	842.82	98.00	83.79	95.98	1,524.89	430.58	355.72	3,100.00
CFHP - Bexar	842.82	156.22	88.32	91.09	1,524.89	415.25	355.72	3,100.00
Superior - Bexar	842.82	198.70	116.08	78.69	1,524.89	424.17	355.72	3,100.00
Amerigroup - Dallas	842.82	151.13	131.57	153.31	1,524.89	415.06	355.72	3,100.00
Molina - Dallas	842.82	66.69	117.55	83.98	1,524.89	400.30	355.72	3,100.00
Parkland - Dallas	842.82	249.12	177.45	162.53	1,524.89	420.28	355.72	3,100.00
El Paso Health - El Paso	842.82	135.61	128.28	128.88	1,524.89	334.36	355.72	3,100.00
Superior - El Paso	842.82	196.99	147.81	123.32	1,524.89	367.55	355.72	3,100.00
Amerigroup - Harris	842.82	132.94	103.88	145.94	1,524.89	388.05	355.72	3,100.00
CHC - Harris	842.82	183.99	121.82	177.82	1,524.89	554.66	355.72	3,100.00
Molina - Harris	842.82	50.45	36.89	63.31	1,524.89	566.74	355.72	3,100.00
TCHP - Harris	842.82	212.98	136.76	229.37	1,524.89	555.97	355.72	3,100.00
United - Harris	842.82	266.08	92.54	170.70	1,524.89	538.42	355.72	3,100.00
Amerigroup - Jefferson	842.82	197.71	86.87	3,133.06	1,524.89	589.20	355.72	3,100.00
CHC - Jefferson	842.82	211.18	146.80	263.52	1,524.89	547.98	355.72	3,100.00
Molina - Jefferson	842.82	43.44	38.56	44.24	1,524.89	648.02	355.72	3,100.00
TCHP - Jefferson	842.82	172.77	153.90	161.19	1,524.89	693.07	355.72	3,100.00
United - Jefferson	842.82	179.84	116.94	159.30	1,524.89	549.98	355.72	3,100.00
Firstcare - Lubbock	842.82	118.70	78.91	125.23	1,524.89	397.85	355.72	3,100.00
Superior - Lubbock	842.82	181.33	90.01	77.28	1,524.89	376.51	355.72	3,100.00
Driscoll - Nueces	842.82	220.88	185.38	207.49	1,524.89	498.55	355.72	3,100.00
Superior - Nueces	842.82	200.47	148.51	121.74	1,524.89	462.87	355.72	3,100.00
United - Nueces	842.82	47.53	102.05	84.97	1,524.89	266.09	355.72	3,100.00
Aetna - Tarrant	842.82	192.97	136.48	127.68	1,524.89	355.63	355.72	3,100.00
Amerigroup - Tarrant	842.82	185.94	116.04	141.96	1,524.89	378.14	355.72	3,100.00
Cook - Tarrant	842.82	232.69	136.35	158.79	1,524.89	369.82	355.72	3,100.00
BCBS - Travis	842.82	105.78	71.68	115.70	1,524.89	452.04	355.72	3,100.00
DCHP - Travis	842.82	131.21	98.29	120.49	1,524.89	506.89	355.72	3,100.00
Superior - Travis	842.82	117.07	92.79	185.74	1,524.89	456.48	355.72	3,100.00
Molina - RSA	842.82	80.97	91.99	85.45	1,524.89	390.20	355.72	3,100.00
Superior - RSA	842.82	150.03	89.52	105.88	1,524.89	416.49	355.72	3,100.00

FY2024 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2024 Prescription Drug Premium Rates pmpm								
Aetna - Bexar	23.12	6.10	31.48	32.38	2.16	30.70	45.45	
Amerigroup - Bexar	23.12	4.98	40.69	41.35	2.16	34.27	45.45	
CFHP - Bexar	23.12	7.93	42.89	39.24	2.16	33.05	45.45	
Superior - Bexar	23.12	10.09	56.37	33.90	2.16	33.76	45.45	
Amerigroup - Dallas	23.12	15.99	32.26	57.23	2.16	20.48	45.45	
Molina - Dallas	23.12	7.06	28.82	31.35	2.16	19.75	45.45	
Parkland - Dallas	23.12	26.36	43.51	60.68	2.16	20.74	45.45	
El Paso Health - El Paso	23.12	6.67	22.39	16.72	2.16	32.71	45.45	
Superior - El Paso	23.12	9.69	25.80	16.00	2.16	35.96	45.45	
Amerigroup - Harris	23.12	6.54	39.30	23.09	2.16	42.47	45.45	
CHC - Harris	23.12	14.54	27.56	48.06	2.16	50.89	45.45	
Molina - Harris	23.12	3.20	10.40	8.73	2.16	36.26	45.45	
TCHP - Harris	23.12	16.83	30.94	61.99	2.16	51.01	45.45	
United - Harris	23.12	21.03	20.94	46.13	2.16	49.40	45.45	
Amerigroup - Jefferson	23.12	14.27	44.10	237.36	2.16	48.84	45.45	
CHC - Jefferson	23.12	15.24	74.51	19.96	2.16	45.42	45.45	
Molina - Jefferson	23.12	3.80	28.71	9.98	2.16	30.28	45.45	
TCHP - Jefferson	23.12	14.00	54.77	36.45	2.16	57.45	45.45	
United - Jefferson	23.12	11.48	35.91	54.05	2.16	56.41	45.45	
Firstcare - Lubbock	23.12	6.82	26.94	136.54	2.16	39.92	45.45	
Superior - Lubbock	23.12	8.75	28.91	28.22	2.16	45.87	45.45	
Driscoll - Nueces	23.12	11.52	45.17	60.70	2.16	42.77	45.45	
Superior - Nueces	23.12	7.53	41.04	76.96	2.16	30.13	45.45	
United - Nueces	23.12	11.98	6.09	15.85	2.16	9.04	45.45	
Aetna - Tarrant	23.12	28.74	30.37	32.90	2.16	38.85	45.45	
Amerigroup - Tarrant	23.12	27.69	25.82	36.58	2.16	41.31	45.45	
Cook - Tarrant	23.12	34.65	30.34	40.91	2.16	40.40	45.45	
BCBS - Travis	23.12	6.06	32.40	39.75	2.16	18.58	45.45	
DCHP - Travis	23.12	7.81	38.64	84.62	2.16	15.48	45.45	
Superior - Travis	23.12	6.71	41.94	63.81	2.16	18.76	45.45	
Molina - RSA	23.12	6.15	39.20	37.37	2.16	38.77	45.45	
Superior - RSA	23.12	11.39	38.14	46.31	2.16	41.38	45.45	

FY2024 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2024 Total Premium Rates pmpm								
Aetna - Bexar	865.94	126.13	96.30	107.56	1,527.05	416.36	401.17	3,100.00
Amerigroup - Bexar	865.94	102.98	124.48	137.33	1,527.05	464.85	401.17	3,100.00
CFHP - Bexar	865.94	164.15	131.21	130.33	1,527.05	448.30	401.17	3,100.00
Superior - Bexar	865.94	208.79	172.45	112.59	1,527.05	457.93	401.17	3,100.00
Amerigroup - Dallas	865.94	167.12	163.83	210.54	1,527.05	435.54	401.17	3,100.00
Molina - Dallas	865.94	73.75	146.37	115.33	1,527.05	420.05	401.17	3,100.00
Parkland - Dallas	865.94	275.48	220.96	223.21	1,527.05	441.02	401.17	3,100.00
El Paso Health - El Paso	865.94	142.28	150.67	145.60	1,527.05	367.07	401.17	3,100.00
Superior - El Paso	865.94	206.68	173.61	139.32	1,527.05	403.51	401.17	3,100.00
Amerigroup - Harris	865.94	139.48	143.18	169.03	1,527.05	430.52	401.17	3,100.00
CHC - Harris	865.94	198.53	149.38	225.88	1,527.05	605.55	401.17	3,100.00
Molina - Harris	865.94	53.65	47.29	72.04	1,527.05	603.00	401.17	3,100.00
TCHP - Harris	865.94	229.81	167.70	291.36	1,527.05	606.98	401.17	3,100.00
United - Harris	865.94	287.11	113.48	216.83	1,527.05	587.82	401.17	3,100.00
Amerigroup - Jefferson	865.94	211.98	130.97	3,370.42	1,527.05	638.04	401.17	3,100.00
CHC - Jefferson	865.94	226.42	221.31	283.48	1,527.05	593.40	401.17	3,100.00
Molina - Jefferson	865.94	47.24	67.27	54.22	1,527.05	678.30	401.17	3,100.00
TCHP - Jefferson	865.94	186.77	208.67	197.64	1,527.05	750.52	401.17	3,100.00
United - Jefferson	865.94	191.32	152.85	213.35	1,527.05	606.39	401.17	3,100.00
Firstcare - Lubbock	865.94	125.52	105.85	261.77	1,527.05	437.77	401.17	3,100.00
Superior - Lubbock	865.94	190.08	118.92	105.50	1,527.05	422.38	401.17	3,100.00
Driscoll - Nueces	865.94	232.40	230.55	268.19	1,527.05	541.32	401.17	3,100.00
Superior - Nueces	865.94	208.00	189.55	198.70	1,527.05	493.00	401.17	3,100.00
United - Nueces	865.94	59.51	108.14	100.82	1,527.05	275.13	401.17	3,100.00
Aetna - Tarrant	865.94	221.71	166.85	160.58	1,527.05	394.48	401.17	3,100.00
Amerigroup - Tarrant	865.94	213.63	141.86	178.54	1,527.05	419.45	401.17	3,100.00
Cook - Tarrant	865.94	267.34	166.69	199.70	1,527.05	410.22	401.17	3,100.00
BCBS - Travis	865.94	111.84	104.08	155.45	1,527.05	470.62	401.17	3,100.00
DCHP - Travis	865.94	139.02	136.93	205.11	1,527.05	522.37	401.17	3,100.00
Superior - Travis	865.94	123.78	134.73	249.55	1,527.05	475.24	401.17	3,100.00
Molina - RSA	865.94	87.12	131.19	122.82	1,527.05	428.97	401.17	3,100.00
Superior - RSA	865.94	161.42	127.66	152.19	1,527.05	457.87	401.17	3,100.00

FY2024 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2024 Medical Premium Rate Change								
Aetna - Bexar	41.1%	-2.6%	-16.6%	-24.0%	341.6%	-1.0%	28.2%	0.0%
Amerigroup - Bexar	41.1%	-16.8%	0.5%	60.5%	341.6%	33.1%	28.2%	0.0%
CFHP - Bexar	41.1%	10.5%	-15.3%	-15.0%	341.6%	-6.5%	28.2%	0.0%
Superior - Bexar	41.1%	10.2%	14.3%	-20.3%	341.6%	1.5%	28.2%	0.0%
Amerigroup - Dallas	41.1%	-13.7%	12.2%	17.1%	341.6%	8.2%	28.2%	0.0%
Molina - Dallas	41.1%	-59.1%	14.6%	-26.1%	341.6%	10.4%	28.2%	0.0%
Parkland - Dallas	41.1%	31.7%	47.3%	28.8%	341.6%	9.9%	28.2%	0.0%
El Paso Health - El Paso	41.1%	6.5%	38.3%	22.1%	341.6%	-13.6%	28.2%	0.0%
Superior - El Paso	41.1%	53.5%	65.7%	19.4%	341.6%	0.0%	28.2%	0.0%
Amerigroup - Harris	41.1%	-8.2%	0.5%	8.2%	341.6%	-8.0%	28.2%	0.0%
CHC - Harris	41.1%	-2.2%	4.0%	7.6%	341.6%	9.6%	28.2%	0.0%
Molina - Harris	41.1%	-63.2%	-54.5%	-40.2%	341.6%	21.6%	28.2%	0.0%
TCHP - Harris	41.1%	12.1%	3.1%	16.4%	341.6%	6.4%	28.2%	0.0%
United - Harris	41.1%	20.2%	-21.3%	5.9%	341.6%	10.8%	28.2%	0.0%
Amerigroup - Jefferson	41.1%	80.0%	-34.7%	446.7%	341.6%	16.8%	28.2%	0.0%
CHC - Jefferson	41.1%	31.0%	26.4%	-31.6%	341.6%	0.2%	28.2%	0.0%
Molina - Jefferson	41.1%	-30.4%	-42.8%	-72.0%	341.6%	17.5%	28.2%	0.0%
TCHP - Jefferson	41.1%	9.7%	16.5%	-75.9%	341.6%	34.2%	28.2%	0.0%
United - Jefferson	41.1%	14.1%	-3.5%	-52.3%	341.6%	-6.9%	28.2%	0.0%
Firstcare - Lubbock	41.1%	-9.2%	-8.8%	35.9%	341.6%	2.9%	28.2%	0.0%
Superior - Lubbock	41.1%	29.3%	2.0%	-19.7%	341.6%	-2.7%	28.2%	0.0%
Driscoll - Nueces	41.1%	20.4%	13.4%	10.5%	341.6%	3.1%	28.2%	0.0%
Superior - Nueces	41.1%	-1.6%	22.5%	-64.0%	341.6%	25.5%	28.2%	0.0%
United - Nueces	41.1%	-24.4%	73.0%	-8.5%	341.6%	-20.8%	28.2%	0.0%
Aetna - Tarrant	41.1%	9.7%	46.0%	20.0%	341.6%	22.5%	28.2%	0.0%
Amerigroup - Tarrant	41.1%	10.2%	31.3%	-8.6%	341.6%	8.1%	28.2%	0.0%
Cook - Tarrant	41.1%	44.0%	21.6%	4.8%	341.6%	6.2%	28.2%	0.0%
BCBS - Travis	41.1%	-45.4%	-14.0%	2.6%	341.6%	11.3%	28.2%	0.0%
DCHP - Travis	41.1%	-11.5%	13.4%	19.0%	341.6%	24.7%	28.2%	0.0%
Superior - Travis	41.1%	-10.1%	9.8%	51.8%	341.6%	11.8%	28.2%	0.0%
Molina - RSA	41.1%	-32.6%	8.6%	-22.3%	341.6%	1.9%	28.2%	0.0%
Superior - RSA	41.1%	17.8%	13.1%	0.4%	341.6%	5.5%	28.2%	0.0%

FY2024 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2024 Prescription Drug Premium Rate Change								
Aetna - Bexar	160.9%	-57.4%	20.5%	-6.7%	-61.0%	-51.5%	-28.6%	
Amerigroup - Bexar	160.9%	-73.5%	-35.3%	-17.2%	-61.0%	-51.5%	-28.6%	
CFHP - Bexar	160.9%	-51.8%	22.3%	4.3%	-61.0%	-54.2%	-28.6%	
Superior - Bexar	160.9%	-51.9%	65.1%	-2.2%	-61.0%	-50.2%	-28.6%	
Amerigroup - Dallas	160.9%	4.2%	4.3%	39.9%	-61.0%	-39.4%	-28.6%	
Molina - Dallas	160.9%	-50.6%	6.5%	-11.8%	-61.0%	-38.2%	-28.6%	
Parkland - Dallas	160.9%	59.1%	37.0%	53.8%	-61.0%	-38.4%	-28.6%	
El Paso Health - El Paso	160.9%	-42.6%	-34.3%	-52.8%	-61.0%	-57.6%	-28.6%	
Superior - El Paso	160.9%	-12.6%	-10.1%	-44.2%	-61.0%	-56.6%	-28.6%	
Amerigroup - Harris	160.9%	-48.8%	9.5%	-42.7%	-61.0%	-46.0%	-28.6%	
CHC - Harris	160.9%	-19.8%	-8.1%	40.1%	-61.0%	-38.9%	-28.6%	
Molina - Harris	160.9%	-75.8%	-50.0%	-60.3%	-61.0%	-52.8%	-28.6%	
TCHP - Harris	160.9%	-8.1%	-9.0%	51.6%	-61.0%	-40.7%	-28.6%	
United - Harris	160.9%	34.0%	-30.2%	-5.5%	-61.0%	-27.1%	-28.6%	
Amerigroup - Jefferson	160.9%	56.6%	20.6%	714.3%	-61.0%	-34.0%	-28.6%	
CHC - Jefferson	160.9%	21.5%	21.9%	-52.5%	-61.0%	-47.0%	-28.6%	
Molina - Jefferson	160.9%	-68.0%	10.2%	7.3%	-61.0%	-46.9%	-28.6%	
TCHP - Jefferson	160.9%	7.1%	50.9%	7.2%	-61.0%	-24.2%	-28.6%	
United - Jefferson	160.9%	-30.9%	-14.7%	39.1%	-61.0%	-39.0%	-28.6%	
Firstcare - Lubbock	160.9%	-42.7%	-29.3%	199.6%	-61.0%	-18.6%	-28.6%	
Superior - Lubbock	160.9%	-0.5%	-19.6%	-37.4%	-61.0%	-1.5%	-28.6%	
Driscoll - Nueces	160.9%	-22.4%	-18.2%	18.0%	-61.0%	-52.7%	-28.6%	
Superior - Nueces	160.9%	-45.0%	-21.9%	-6.7%	-61.0%	-54.7%	-28.6%	
United - Nueces	160.9%	7.2%	-64.7%	-71.2%	-61.0%	-86.3%	-28.6%	
Aetna - Tarrant	160.9%	68.0%	31.4%	30.1%	-61.0%	-63.2%	-28.6%	
Amerigroup - Tarrant	160.9%	71.7%	-7.1%	-29.0%	-61.0%	-60.9%	-28.6%	
Cook - Tarrant	160.9%	124.4%	-14.0%	-18.5%	-61.0%	-61.6%	-28.6%	
BCBS - Travis	160.9%	-58.1%	-13.1%	7.6%	-61.0%	-41.0%	-28.6%	
DCHP - Travis	160.9%	-35.9%	3.1%	68.8%	-61.0%	-36.8%	-28.6%	
Superior - Travis	160.9%	-31.0%	10.9%	59.2%	-61.0%	-40.8%	-28.6%	
Molina - RSA	160.9%	-67.5%	9.5%	7.1%	-61.0%	-50.6%	-28.6%	
Superior - RSA	160.9%	-43.3%	14.1%	38.4%	-61.0%	-48.9%	-28.6%	

FY2024 CHIP Rating Summary

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborns 198%-202%	Perinate <198%	Perinate 198%-202%	DSP
FY2024 Total Premium Rate Change								
Aetna - Bexar	42.9%	-8.3%	-7.3%	-19.5%	335.3%	-8.1%	17.6%	0.0%
Amerigroup - Bexar	42.9%	-24.6%	-14.9%	25.2%	335.3%	18.0%	17.6%	0.0%
CFHP - Bexar	42.9%	4.0%	-5.8%	-10.0%	335.3%	-13.1%	17.6%	0.0%
Superior - Bexar	42.9%	3.7%	27.0%	-15.6%	335.3%	-5.7%	17.6%	0.0%
Amerigroup - Dallas	42.9%	-12.3%	10.5%	22.6%	335.3%	4.3%	17.6%	0.0%
Molina - Dallas	42.9%	-58.4%	12.9%	-22.7%	335.3%	6.5%	17.6%	0.0%
Parkland - Dallas	42.9%	33.9%	45.2%	34.7%	335.3%	6.0%	17.6%	0.0%
El Paso Health - El Paso	42.9%	2.4%	18.8%	3.3%	335.3%	-20.9%	17.6%	0.0%
Superior - El Paso	42.9%	48.2%	47.3%	5.6%	335.3%	-10.4%	17.6%	0.0%
Amerigroup - Harris	42.9%	-11.5%	2.8%	-3.5%	335.3%	-14.0%	17.6%	0.0%
CHC - Harris	42.9%	-3.7%	1.5%	13.2%	335.3%	2.8%	17.6%	0.0%
Molina - Harris	42.9%	-64.3%	-53.6%	-43.6%	335.3%	11.1%	17.6%	0.0%
TCHP - Harris	42.9%	10.3%	0.6%	22.5%	335.3%	-0.3%	17.6%	0.0%
United - Harris	42.9%	21.1%	-23.1%	3.2%	335.3%	6.1%	17.6%	0.0%
Amerigroup - Jefferson	42.9%	78.2%	-22.8%	459.6%	335.3%	10.3%	17.6%	0.0%
CHC - Jefferson	42.9%	30.3%	24.9%	-33.7%	335.3%	-6.2%	17.6%	0.0%
Molina - Jefferson	42.9%	-36.4%	-28.0%	-67.6%	335.3%	11.4%	17.6%	0.0%
TCHP - Jefferson	42.9%	9.5%	23.9%	-71.9%	335.3%	26.7%	17.6%	0.0%
United - Jefferson	42.9%	9.8%	-6.4%	-42.8%	335.3%	-11.3%	17.6%	0.0%
Firstcare - Lubbock	42.9%	-12.0%	-15.1%	90.1%	335.3%	0.5%	17.6%	0.0%
Superior - Lubbock	42.9%	27.5%	-4.2%	-25.3%	335.3%	-2.5%	17.6%	0.0%
Driscoll - Nueces	42.9%	17.2%	5.4%	12.1%	335.3%	-5.7%	17.6%	0.0%
Superior - Nueces	42.9%	-4.4%	9.1%	-52.8%	335.3%	13.2%	17.6%	0.0%
United - Nueces	42.9%	-19.7%	41.8%	-31.8%	335.3%	-31.6%	17.6%	0.0%
Aetna - Tarrant	42.9%	14.9%	43.1%	21.9%	335.3%	-0.3%	17.6%	0.0%
Amerigroup - Tarrant	42.9%	15.6%	22.1%	-13.7%	335.3%	-7.9%	17.6%	0.0%
Cook - Tarrant	42.9%	51.0%	13.1%	-1.0%	335.3%	-9.5%	17.6%	0.0%
BCBS - Travis	42.9%	-46.3%	-13.7%	3.8%	335.3%	7.5%	17.6%	0.0%
DCHP - Travis	42.9%	-13.3%	10.3%	35.5%	335.3%	21.2%	17.6%	0.0%
Superior - Travis	42.9%	-11.6%	10.2%	53.6%	335.3%	8.0%	17.6%	0.0%
Molina - RSA	42.9%	-37.3%	8.9%	-15.2%	335.3%	-7.0%	17.6%	0.0%
Superior - RSA	42.9%	9.4%	13.4%	9.6%	335.3%	-3.8%	17.6%	0.0%

FY2024 CHIP Rating Summary
Projected Expenditures

	Projected PMPM		Projected FY2024 Premium		% Rate Change
	<u>FY2023 Rates</u>	<u>FY2024 Rates</u>	<u>FY2023 Rates</u>	<u>FY2024 Rates</u>	
Medical (1)	150.55	164.67	591,356,507	646,799,701	9.4%
Pharmacy	34.45	33.95	135,310,278	133,356,573	-1.4%
Dental (2)	23.04	21.76	82,714,494	78,111,933	-5.6%
Total			809,381,279	858,268,207	6.0%

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

Attachment 2

Individual Health Plan Experience Analysis

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

Exhibit A. This exhibit shows monthly enrollment and earned premium by age group for the period September 2019 through February 2023. This information was provided by HHSC.

Exhibit B. This exhibit shows a sample of a claim lag report. This report includes claim amounts by payment month and month of service. We analyzed claims experience for each plan by age group for the period September 2019 through February 2023.

Exhibit C. This exhibit shows the calculation of estimated monthly incurred claims. The exhibit includes the following information: (i) monthly enrollment, (ii) claim amounts incurred in that month and paid through February 28, 2023, (iii) estimated proportion of that month's incurred claims paid through February 28, 2023 (completion factor), (iv) estimated incurred claims, (v) estimated incurred claims pmpm and (vi) the ratio of this month's incurred claims pmpm to the same statistic from one year ago (trend factor). The assumed completion factors and estimated incurred claims were derived based on the actual historical claims payment pattern of the health plan.

Exhibit D. This exhibit is a summary of the sample health plan's projected FY2024 cost based on the plan's actual experience. The top of the exhibit shows summary base period enrollment, premium and claims experience. Annual trend assumptions are used to project the average base period claims cost to FY2024. Following that are several adjustments for benefit and provider reimbursement changes.

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

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

At the bottom of Exhibit D is a summary of the projected FY2024 cost based on the above assumptions. A similar analysis was performed for prescription drug services.

Month	Number of Members				Total Members	Premium	Premium pmpm
	<1	1-5	6-14	15-18			
Sep-19	124	5,188	15,901	5,132	26,345	1,912,339	72.59
Oct-19	114	4,896	15,278	4,918	25,206	1,827,852	72.52
Nov-19	104	4,410	14,441	4,721	23,676	1,719,029	72.61
Dec-19	98	4,151	13,842	4,541	22,632	1,643,508	72.62
Jan-20	84	3,945	13,248	4,363	21,640	1,569,212	72.51
Feb-20	80	3,778	12,940	4,286	21,084	1,529,380	72.54
Mar-20	85	3,602	12,610	4,236	20,533	1,493,965	72.76
Apr-20	72	3,458	12,326	4,107	19,963	1,448,064	72.54
May-20	68	3,360	12,063	4,013	19,504	1,413,847	72.49
Jun-20	57	3,315	11,940	3,987	19,299	1,396,455	72.36
Jul-20	54	3,298	11,968	4,010	19,330	1,398,322	72.34
Aug-20	48	3,276	11,957	4,033	19,314	1,396,413	72.30
Sep-20	52	3,228	11,979	4,045	19,304	1,497,835	77.59
Oct-20	44	3,134	11,888	3,989	19,055	1,473,875	77.35
Nov-20	45	3,062	11,636	3,994	18,737	1,453,300	77.56
Dec-20	46	3,004	11,658	3,966	18,674	1,446,630	77.47
Jan-21	43	2,927	11,618	3,986	18,574	1,438,250	77.43
Feb-21	42	2,904	11,562	3,948	18,456	1,428,000	77.37
Mar-21	45	2,878	11,497	3,941	18,361	1,422,305	77.46
Apr-21	45	2,910	11,557	3,950	18,463	1,430,030	77.46
May-21	45	2,927	11,645	3,985	18,603	1,440,864	77.45
Jun-21	46	2,950	11,747	4,021	18,764	1,453,372	77.46
Jul-21	46	2,982	11,862	4,058	18,949	1,467,683	77.45
Aug-21	47	3,013	11,992	4,103	19,155	1,483,648	77.45
Sep-21	46	3,002	11,971	4,090	19,109	1,449,030	75.83
Oct-21	45	2,991	11,950	4,077	19,063	1,444,963	75.80
Nov-21	44	2,980	11,929	4,064	19,017	1,440,896	75.77
Dec-21	43	2,969	11,908	4,051	18,971	1,436,829	75.74
Jan-22	42	2,958	11,887	4,038	18,925	1,432,762	75.71
Feb-22	41	2,947	11,866	4,025	18,879	1,428,695	75.67
Mar-22	40	2,936	11,845	4,012	18,833	1,424,628	75.64
Apr-22	44	2,964	11,847	4,040	18,895	1,431,973	75.79
May-22	44	2,994	11,965	4,080	19,083	1,446,064	75.78
Jun-22	43	3,024	12,085	4,121	19,273	1,459,960	75.75
Jul-22	43	3,039	12,145	4,142	19,369	1,467,176	75.75
Aug-22	47	3,059	12,226	4,170	19,502	1,478,560	75.82
Sep-22	47	3,065	12,252	4,179	19,543	1,561,595	79.91
Oct-22	47	3,068	12,264	4,183	19,562	1,563,110	79.91
Nov-22	47	3,075	12,292	4,193	19,607	1,566,706	79.91
Dec-22	45	3,078	12,304	4,197	19,624	1,567,980	79.90
Jan-23	48	3,081	12,316	4,201	19,646	1,569,858	79.91
Feb-23	46	3,084	12,328	4,205	19,663	1,571,132	79.90
FY2020	988	46,677	158,514	52,347	258,526	18,748,386	72.52
FY2021	547	35,920	140,641	47,987	225,095	17,435,792	77.46
FY2022	520	35,865	143,623	48,913	228,922	17,341,535	75.75
Base Period	520	35,865	143,623	48,913	228,922	17,341,535	75.75

Sample Health Plan
CHIP Incurred Claims Summary Lag Report

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

Sample Health Plan
 Estimated Claims Experience

Month	Ages 6-14						Ages 15-18					
	Members	Inc & Pd Claims	Compl Factor	Est. Inc. Claims	Est. Inc. pmpm	Trend Factor	Members	Inc & Pd Claims	Compl Factor	Est. Inc. Claims	Est. Inc. pmpm	Trend Factor
Sep-19	15,901	558,351	1.000	558,351	35.11		5,132	197,614	1.000	197,614	38.51	
Oct-19	15,278	654,945	1.000	654,945	42.87		4,918	219,280	1.000	219,280	44.59	
Nov-19	14,441	512,126	1.000	512,126	35.46		4,721	145,363	1.000	145,363	30.79	
Dec-19	13,842	481,758	1.000	481,758	34.80		4,541	173,388	1.000	173,388	38.18	
Jan-20	13,248	524,336	1.000	524,336	39.58		4,363	152,657	1.000	152,657	34.99	
Feb-20	12,940	488,266	1.000	488,266	37.73		4,286	162,354	1.000	162,354	37.88	
Mar-20	12,610	530,040	1.000	530,040	42.03		4,236	194,139	1.000	194,139	45.83	
Apr-20	12,326	517,116	1.000	517,116	41.95		4,107	157,314	1.000	157,314	38.30	
May-20	12,063	546,601	1.000	546,601	45.31		4,013	124,140	1.000	124,140	30.93	
Jun-20	11,940	626,076	1.000	626,076	52.44		3,987	109,522	1.000	109,522	27.47	
Jul-20	11,968	543,697	1.000	543,697	45.43		4,010	164,529	1.000	164,529	41.03	
Aug-20	11,957	545,204	1.000	545,204	45.60		4,033	148,171	1.000	148,171	36.74	
Sep-20	11,979	883,569	1.000	883,569	73.76	2.101	4,045	121,542	1.000	121,542	30.05	0.780
Oct-20	11,888	726,038	1.000	726,038	61.07	1.425	3,989	136,479	1.000	136,479	34.21	0.767
Nov-20	11,636	689,010	1.000	689,010	59.21	1.670	3,994	131,288	1.000	131,288	32.87	1.068
Dec-20	11,658	631,106	1.000	631,106	54.14	1.555	3,966	112,702	1.000	112,702	28.42	0.744
Jan-21	11,618	673,253	1.000	673,253	57.95	1.464	3,986	156,610	1.000	156,610	39.29	1.123
Feb-21	11,562	920,872	1.000	920,872	79.65	2.111	3,948	174,974	1.000	174,974	44.32	1.170
Mar-21	11,497	905,576	1.000	905,576	78.77	1.874	3,941	123,638	1.000	123,638	31.37	0.685
Apr-21	11,557	721,089	1.000	721,089	62.40	1.487	3,950	133,668	1.000	133,668	33.84	0.883
May-21	11,645	807,072	1.000	807,072	69.30	1.529	3,985	107,791	1.000	107,791	27.05	0.874
Jun-21	11,747	688,476	1.000	688,476	58.61	1.118	4,021	157,910	1.000	157,910	39.27	1.430
Jul-21	11,862	608,947	1.000	608,947	51.33	1.130	4,058	160,277	1.000	160,277	39.50	0.963
Aug-21	11,992	569,289	1.000	569,289	47.47	1.041	4,103	172,673	1.000	172,673	42.08	1.145
Sep-21	11,971	663,520	1.000	663,520	55.43	0.751	4,090	138,374	1.000	138,374	33.83	1.126
Oct-21	11,950	598,716	1.000	598,716	50.10	0.820	4,077	150,967	1.000	150,967	37.02	1.082
Nov-21	11,929	660,770	1.000	660,770	55.39	0.935	4,064	149,593	1.000	149,593	36.81	1.120
Dec-21	11,908	573,589	1.000	573,589	48.17	0.890	4,051	143,090	1.000	143,090	35.32	1.243
Jan-22	11,887	635,506	1.000	635,506	53.46	0.923	4,038	184,225	1.000	184,225	45.62	1.161
Feb-22	11,866	521,422	1.000	521,422	43.94	0.552	4,025	166,286	1.000	166,286	41.31	0.932
Mar-22	11,845	753,968	1.000	753,968	63.65	0.808	4,012	168,218	1.000	168,218	41.92	1.336
Apr-22	11,847	789,166	1.000	789,166	66.61	1.068	4,040	181,051	1.000	181,051	44.81	1.324
May-22	11,965	530,716	1.000	530,716	44.36	0.640	4,080	182,148	1.000	182,148	44.64	1.651
Jun-22	12,085	493,401	1.000	493,401	40.83	0.697	4,121	227,718	1.000	227,718	55.26	1.407
Jul-22	12,145	603,945	1.000	603,945	49.73	0.969	4,142	154,049	1.000	154,049	37.19	0.942
Aug-22	12,226	734,285	1.000	734,285	60.06	1.265	4,170	282,268	0.998	282,833	67.83	1.612
Sep-22	12,252	601,308	1.000	601,308	49.08	0.885	4,179	186,424	0.996	187,173	44.79	1.324
Oct-22	12,264	574,896	0.999	575,471	46.92	0.937	4,183	167,963	0.992	169,318	40.48	1.093

Sample Health Plan
 Estimated Claims Experience

Month	Ages 6-14						Ages 15-18					
	Members	Inc & Pd Claims	Compl Factor	Est. Inc. Claims	Est. Inc. pmpm	Trend Factor	Members	Inc & Pd Claims	Compl Factor	Est. Inc. Claims	Est. Inc. pmpm	Trend Factor
Nov-22	12,292	568,615	0.998	569,754	46.35	0.837	4,193	160,190	0.988	162,135	38.67	1.051
Dec-22	12,304	527,662	0.992	531,917	43.23	0.897	4,197	140,761	0.980	143,634	34.22	0.969
Jan-23	12,316	480,186	0.956	502,287	40.78	0.763	4,201	120,835	0.930	129,930	30.93	0.678
Feb-23	12,328	37,308	0.758	49,220	3.99	0.091	4,205	117,532	0.650	180,819	43.00	1.041
FY2020	158,514			6,528,516	41.19		52,347			1,948,470	37.22	
FY2021	140,641			8,824,296	62.74	1.523	47,987			1,689,551	35.21	0.946
FY2022	143,623			7,559,003	52.63	0.839	48,913			2,128,554	43.52	1.236
Base Period	143,623			7,559,003	52.63		48,913			2,128,554	43.52	

Sample Health Plan
 Experienced Based Renewal Rating
 Projection Period: FY2024 (9/1/2023 - 8/31/2024)

	<1		1-5		6-14		15-18		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Estimated Experience (9/1/2021 - 8/31/2022)										
Member Months	520		35,865		143,623		48,913		228,922	
Premium Revenue	221,417	425.65	3,075,099	85.74	8,653,311	60.25	5,391,708	110.23	17,341,535	75.75
Adjusted Premium (Current Rates)	62,813	120.75	3,057,884	85.26	10,768,883	74.98	4,400,236	89.96	18,289,816	79.90
Estimated Incurred Claims	48,251	92.76	2,254,965	62.87	7,559,003	52.63	2,128,554	43.52	11,990,773	52.38
Projected FY2024 Member Months	335		27,561		119,625		44,598		192,119	
Projected FY2024 Premium Current Rates	40,451	120.75	2,349,851	85.26	8,969,483	74.98	2,776,226	62.25	14,136,010	73.58
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %			
Provider Reimbursement Change	1.0198		1.0019		1.0063		1.0083			
Other Reimbursement Change	1.0000		1.0007		1.0077		1.0161			
Inpatient Reimbursement Change	1.0000		1.0006		1.0000		0.9974			
Other Adjustments	1.0000		0.9449		0.9280		0.9263			
PHE Adjustment	1.0000		1.0000		1.0000		1.0000			
Projected Incurred Claims	35,137	104.89	1,821,310	66.08	6,569,088	54.91	2,036,871	45.67	10,462,405	54.46
Capitation Expenses										
Vision		1.00		1.00		1.00		1.00		
Behavioral Health		2.50		2.50		2.50		2.50		
Other		0.50		0.50		0.50		0.50		
Total	1,340	4.00	110,244	4.00	478,500	4.00	178,392	4.00	768,476	4.00
Reinsurance Expenses										
Gross Premium		1.25		1.25		1.25		1.25		
Projected Reinsurance Recoveries		0.75		0.75		0.75		0.75		
Net Reinsurance Cost	168	0.50	13,781	0.50	59,813	0.50	22,299	0.50	96,060	0.50

Sample Health Plan
 Experienced Based Renewal Rating
 Projection Period: FY2024 (9/1/2023 - 8/31/2024)

	<1		1-5		6-14		15-18		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Administrative Expenses										
Fixed Amount	3,015	9.00	248,049	9.00	1,076,625	9.00	401,382	9.00	1,729,071	9.00
Percentage of Premium	5.25 %	6.80	5.25 %	4.57	5.25 %	3.93	5.25 %	3.40	5.25 %	3.90
Risk Margin	1.50 %	1.94	1.50 %	1.31	1.50 %	1.12	1.50 %	0.97	1.50 %	1.12
Premium Tax	1.75 %	2.27	1.75 %	1.52	1.75 %	1.31	1.75 %	1.13	1.75 %	1.30
Maintenance Tax	24	0.0725	1,998	0.0725	8,673	0.0725	3,233	0.0725	13,929	0.0725
Projected Total Cost	43,370	129.46	2,399,324	87.06	8,953,768	74.85	2,887,625	64.75	14,284,088	74.35
Experience Rate Increase		7.2%		2.1%		-0.2%		4.0%		1.0%

Attachment 3

Community Experience Analysis - Medical

The following exhibits present a summary of the experience analysis performed for each service area. HHSC utilizes an adjusted community rating methodology in setting the CHIP premium rates. The base community rates by age group vary by service area but are the same for each health plan in a service area. The community rates are developed by a weighted average of the projected FY2024 cost for each health plan in the service area. The weights used in this formula are the projected number of FY2024 members enrolled in each health plan.

Below is a brief description of each of the exhibits contained in the attachment. The exhibits present the derivation of the FY2024 CHIP medical community premium rates for the following service areas:

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

These exhibits show projected FY2024 experience for each of the service areas. These amounts were derived by summing amounts from each individual health plan in the service area. The experience analysis for individual HMOs is described in Attachment 2. The top of the exhibit shows summary base period enrollment, premium and claims experience. Trend assumptions are used to project the average base period claims cost to FY2024. Following that are several adjustments to the base period claims cost to account for benefit and provider reimbursement changes.

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

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

At the bottom of the exhibit is a summary of the projected FY2024 cost based on these assumptions. Cost projections are presented both with and without the inclusion of maternity expenses.

Community Experience Analysis – Pharmacy

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

Below is a brief description of the exhibits contained in this attachment. The exhibits present the derivation of the FY2024 CHIP pharmacy community capitation rates for the following service areas:

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

These exhibits present projected FY2024 experience for each service area and risk group. These amounts were derived by summing amounts from each individual health plan in the service area. The experience analysis for individual health plans is described in Attachment 2. The top portion of the exhibit shows summary base period experience and projected FY2024 enrollment and incurred claims experience.

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

The bottom of the exhibit shows a summary of the projected FY2024 cost based on these assumptions.

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	17		13,291		56,860		22,578	
Estimated Incurred Claims								
Professional	3,083	181.33	1,059,651	79.73	2,213,479	38.93	701,417	31.07
Emergency Room	1,280	75.30	57,096	4.30	160,723	2.83	91,554	4.06
Outpatient Facility	13	0.78	159,057	11.97	693,888	12.20	249,448	11.05
Inpatient Facility	0	0.00	118,073	8.88	298,727	5.25	152,322	6.75
Others	0	0.00	384,174	28.90	692,878	12.19	225,010	9.97
Total	4,376	257.41	1,778,050	133.78	4,059,695	71.40	1,419,751	62.88
Projected FY2024 Member Months	39		61,109		168,384		59,900	
Projected FY2024 Premiums								
@Current Rates	23,254	597.31	9,427,068	154.27	16,880,101	100.25	6,154,982	102.75
@Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Changes		1.0396		1.0122		1.0180		1.0218
Other Reimbursement Changes		1.0000		1.0007		1.0077		1.0161
Inpatient Reimbursement Changes		1.0000		1.0006		1.0000		0.9974
FQHC & Other Adjustments		1.0000		0.9449		0.9280		0.9263
PHE Adjustment		1.0000		1.0000		1.0000		1.0000
Projected Incurred Claims	11,552	296.72	8,680,758	142.05	12,689,703	75.36	4,006,095	66.88
Capitation & Other Expenses/Refunds								
Total	74	1.90	135,923	2.22	403,006	2.39	149,461	2.50
Reinsurance Expenses								
Net Reinsurance Cost	8	0.21	14,865	0.24	45,643	0.27	17,485	0.29
Administrative Expenses								
Fixed Amount	350	9.00	549,980	9.00	1,515,456	9.00	539,102	9.00
Percentage of Premium	5.25 %	17.67	5.25 %	8.81	5.25 %	5.00	5.25 %	4.52
Risk Margin	1.50 %	5.05	1.50 %	2.52	1.50 %	1.43	1.50 %	1.29
Premium Tax	1.75 %	5.89	1.75 %	2.94	1.75 %	1.67	1.75 %	1.51
Maintenance Tax	3	0.073	4,430	0.073	12,208	0.073	4,343	0.073
Projected Total Cost	13,101	336.51	10,257,876	167.86	16,028,432	95.19	5,154,629	86.05
Adjusted Total Cost	13,101	336.51	10,257,876	167.86	16,028,432	95.19	5,154,629	86.05
Experience Rate Increase		-43.7 %		8.8 %		-5.0 %		-16.3 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	32		17,006		199		109,983	
Estimated Incurred Claims								
Professional	4,460	139.37	5,063,203	297.73	39,679	199.39		
Emergency Room	42	1.31	14,477	0.85	437	2.20		
Outpatient Facility	302	9.44	1,269,855	74.67	2,989	15.02		
Inpatient Facility	4,647	145.20	16,085	0.95	6,269	31.50		
Others	68	2.13	312,147	18.36	1,886	9.48		
Total	9,519	297.46	6,675,767	392.55	51,260	257.59	13,998,417	127.28
Projected FY2024 Member Months	129		15,478		309		305,348	
Projected FY2024 Premiums								
@Current Rates	44,541	345.28	6,328,201	408.85	85,723	277.42	38,943,871	127.54
@Current DSP Rates	0	0.00	0	0.00	28,862	93.40	28,862	0.09
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Changes		1.0222		1.0125		1.0078		
Other Reimbursement Changes		1.0000		0.9998		1.0000		
Inpatient Reimbursement Changes		1.0067		1.0000		1.0069		
FQHC & Other Adjustments		0.8442		0.8660		0.8913		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	35,711	276.83	5,705,752	368.64	77,114	249.56	31,206,684	102.20
Capitation & Other Expenses/Refunds								
Total	-375	-2.91	-7,286	-0.47	-156	-0.50	680,646	2.23
Reinsurance Expenses								
Net Reinsurance Cost	0	0.00	0	0.00	0	0.00	78,002	0.26
Administrative Expenses								
Fixed Amount	1,742	13.50	208,953	13.50	4,172	13.50	2,819,755	9.23
Percentage of Premium	5.25 %	16.50	5.25 %	21.90	5.25 %	15.07	5.25 %	6.54
Risk Margin	1.50 %	4.71	1.50 %	6.26	1.50 %	4.31	1.50 %	1.87
Premium Tax	1.75 %	5.50	1.75 %	7.30	1.75 %	5.02	1.75 %	2.18
Maintenance Tax	9	0.073	1,122	0.073	22	0.073	22,138	0.073
Projected Total Cost	40,531	314.20	6,457,422	417.20	88,691	287.03	38,040,682	124.58
Adjusted Total Cost	40,531	314.20	6,457,422	417.20	59,829	193.62	38,011,820	124.49
Experience Rate Increase		-9.0 %		2.0 %		-30.2 %		-2.4 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	31		26,953		117,583		47,011	
Estimated Incurred Claims								
Professional	7,615	245.65	1,041,603	38.65	2,755,043	23.43	1,002,054	21.32
Emergency Room	1,266	40.83	357,230	13.25	1,219,717	10.37	581,801	12.38
Outpatient Facility	77,662	2,505.21	1,001,111	37.14	3,330,730	28.33	1,332,869	28.35
Inpatient Facility	26,545	856.28	441,752	16.39	3,116,890	26.51	1,096,695	23.33
Others	752	24.27	727,639	27.00	1,755,791	14.93	1,025,954	21.82
Total	113,840	3,672.24	3,569,335	132.43	12,178,171	103.57	5,039,373	107.20
Projected FY2024 Member Months	67		122,592		346,285		120,231	
Projected FY2024 Premiums								
@Current Rates	40,279	597.31	22,015,406	179.58	40,685,541	117.49	15,400,658	128.09
@Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Changes		1.0266		1.0092		1.0103		1.0114
Other Reimbursement Changes		1.0000		1.0003		1.0025		1.0053
Inpatient Reimbursement Changes		1.0000		1.0000		0.9997		0.9979
FQHC & Other Adjustments		0.7279		0.9909		0.9927		0.9917
PHE Adjustment		1.0000		1.0000		1.0000		1.0000
Projected Incurred Claims	205,194	3,042.92	18,005,979	146.88	39,971,923	115.43	14,379,469	119.60
Capitation & Other Expenses/Refunds								
Total	756	11.21	1,289,188	10.52	3,674,718	10.61	1,277,666	10.63
Reinsurance Expenses								
Net Reinsurance Cost	0	0.00	4,317	0.04	10,573	0.03	3,582	0.03
Administrative Expenses								
Fixed Amount	607	9.00	1,103,327	9.00	3,116,566	9.00	1,082,075	9.00
Percentage of Premium	5.25 %	175.76	5.25 %	9.55	5.25 %	7.75	5.25 %	7.99
Risk Margin	1.50 %	50.22	1.50 %	2.73	1.50 %	2.22	1.50 %	2.28
Premium Tax	1.75 %	58.59	1.75 %	3.18	1.75 %	2.58	1.75 %	2.66
Maintenance Tax	5	0.073	8,888	0.073	25,106	0.073	8,717	0.073
Projected Total Cost	225,751	3,347.76	22,307,868	181.97	51,146,323	147.70	18,307,661	152.27
Adjusted Total Cost	225,751	3,347.76	22,307,868	181.97	51,146,323	147.70	18,307,661	152.27
Experience Rate Increase		460.5 %		1.3 %		25.7 %		18.9 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	128		67,429		644		259,779	
Estimated Incurred Claims								
Professional	22,390	174.92	12,311,702	182.59	77,984	121.09		
Emergency Room	69	0.54	250,326	3.71	684	1.06		
Outpatient Facility	195	1.52	8,519,805	126.35	17,099	26.55		
Inpatient Facility	5,205	40.67	266,872	3.96	43,027	66.81		
Others	2,545	19.88	1,818,197	26.96	15,162	23.54		
Total	30,403	237.53	23,166,902	343.57	153,956	239.06	44,251,981	170.34
Projected FY2024 Member Months	306		64,450		682		654,613	
Projected FY2024 Premiums								
@Current Rates	105,656	345.28	24,303,409	377.09	189,200	277.42	102,740,148	156.95
@Current DSP Rates	0	0.00	0	0.00	119,788	175.64	119,788	0.18
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Changes		1.0172		1.0177		1.0100		
Other Reimbursement Changes		1.0000		0.9999		1.0000		
Inpatient Reimbursement Changes		0.9980		1.0002		0.9994		
FQHC & Other Adjustments		0.9106		0.9640		0.9069		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	71,978	235.22	23,273,299	361.11	159,882	234.43	96,067,726	146.75
Capitation & Other Expenses/Refunds								
Total	766	2.50	157,576	2.44	1,680	2.46	6,402,350	9.78
Reinsurance Expenses								
Net Reinsurance Cost	25	0.08	9,002	0.14	105	0.15	27,604	0.04
Administrative Expenses								
Fixed Amount	4,131	13.50	870,075	13.50	9,207	13.50	6,185,988	9.45
Percentage of Premium	5.25 %	14.42	5.25 %	21.65	5.25 %	14.38	5.25 %	9.53
Risk Margin	1.50 %	4.12	1.50 %	6.18	1.50 %	4.11	1.50 %	2.72
Premium Tax	1.75 %	4.81	1.75 %	7.22	1.75 %	4.79	1.75 %	3.18
Maintenance Tax	22	0.073	4,673	0.073	49	0.073	47,459	0.073
Projected Total Cost	84,069	274.73	26,573,360	412.31	186,801	273.90	118,831,834	181.53
Adjusted Total Cost	84,069	274.73	26,573,360	412.31	67,013	98.26	118,712,045	181.35
Experience Rate Increase		-20.4 %		9.3 %		-64.6 %		15.5 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	9		5,614		26,681		11,908	
Estimated Incurred Claims								
Professional	237	26.32	380,330	67.75	1,189,318	44.58	485,729	40.79
Emergency Room	0	0.00	21,145	3.77	88,484	3.32	46,399	3.90
Outpatient Facility	0	0.00	60,687	10.81	803,879	30.13	120,304	10.10
Inpatient Facility	0	0.00	132,003	23.51	221,408	8.30	276,425	23.21
Others	0	0.00	21,295	3.79	105,812	3.97	74,236	6.23
Total	237	26.32	615,460	109.63	2,408,902	90.29	1,003,094	84.24
Projected FY2024 Member Months	31		25,304		75,637		29,889	
Projected FY2024 Premiums								
@Current Rates	18,241	597.31	3,231,163	127.69	6,928,734	91.60	3,134,071	104.86
@Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Changes		1.1371		1.0128		1.0168		1.0183
Other Reimbursement Changes		1.0000		1.0020		1.0058		1.0102
Inpatient Reimbursement Changes		1.0000		0.9997		0.9998		0.9954
FQHC & Other Adjustments		1.0000		0.9953		0.9888		0.9869
PHE Adjustment		1.0000		1.0000		1.0000		1.0000
Projected Incurred Claims	1,013	33.18	3,105,892	122.74	7,655,875	101.22	2,821,100	94.39
Capitation & Other Expenses/Refunds								
Total	492	16.11	300,551	11.88	939,483	12.42	375,151	12.55
Reinsurance Expenses								
Net Reinsurance Cost	14	0.47	8,163	0.32	25,798	0.34	10,327	0.35
Administrative Expenses								
Fixed Amount	275	9.00	227,740	9.00	680,735	9.00	269,001	9.00
Percentage of Premium	5.25 %	3.38	5.25 %	8.26	5.25 %	7.06	5.25 %	6.68
Risk Margin	1.50 %	0.96	1.50 %	2.36	1.50 %	2.02	1.50 %	1.91
Premium Tax	1.75 %	1.13	1.75 %	2.75	1.75 %	2.35	1.75 %	2.23
Maintenance Tax	2	0.073	1,835	0.073	5,484	0.073	2,167	0.073
Projected Total Cost	1,964	64.30	3,982,711	157.39	10,171,995	134.48	3,800,815	127.16
Adjusted Total Cost	1,964	64.30	3,982,711	157.39	10,171,995	134.48	3,800,815	127.16
Experience Rate Increase		-89.2 %		23.3 %		46.8 %		21.3 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	8		5,905		68		50,193	
Estimated Incurred Claims								
Professional	799	99.91	1,347,493	228.20	16,251	238.99		
Emergency Room	0	0.00	21,153	3.58	0	0.00		
Outpatient Facility	0	0.00	305,368	51.71	2,889	42.49		
Inpatient Facility	348	43.55	0	0.00	0	0.00		
Others	0	0.00	258	0.04	0	0.00		
Total	1,148	143.47	1,674,272	283.53	19,140	281.47	5,722,253	114.01
Projected FY2024 Member Months	62		6,913		120		137,956	
Projected FY2024 Premiums								
@Current Rates	21,407	345.28	2,611,040	377.70	33,290	277.42	15,977,947	115.82
@Current DSP Rates	0	0.00	0	0.00	19,393	161.61	19,393	0.14
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Changes		1.0432		1.0167		1.0071		
Other Reimbursement Changes		1.0000		0.9988		1.0000		
Inpatient Reimbursement Changes		1.0057		1.0000		1.0000		
FQHC & Other Adjustments		1.0000		0.9935		1.0000		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	9,997	161.24	2,118,394	306.44	36,439	303.66	15,748,711	114.16
Capitation & Other Expenses/Refunds								
Total	75	1.21	3,388	0.49	27	0.22	1,619,166	11.74
Reinsurance Expenses								
Net Reinsurance Cost	10	0.16	1,770	0.26	35	0.29	46,118	0.33
Administrative Expenses								
Fixed Amount	837	13.50	93,326	13.50	1,620	13.50	1,273,534	9.23
Percentage of Premium	5.25 %	10.11	5.25 %	18.40	5.25 %	18.23	5.25 %	7.78
Risk Margin	1.50 %	2.89	1.50 %	5.26	1.50 %	5.21	1.50 %	2.22
Premium Tax	1.75 %	3.37	1.75 %	6.13	1.75 %	6.08	1.75 %	2.59
Maintenance Tax	4	0.073	501	0.073	9	0.073	10,002	0.073
Projected Total Cost	11,938	192.55	2,423,364	350.55	41,672	347.26	20,434,459	148.12
Adjusted Total Cost	11,938	192.55	2,423,364	350.55	22,279	185.66	20,415,066	147.98
Experience Rate Increase		-44.2 %		-7.2 %		-33.1 %		27.8 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	67		42,756		183,199		74,068	
Estimated Incurred Claims								
Professional	8,551	127.62	3,319,763	77.64	6,968,057	38.04	3,278,557	44.26
Emergency Room	23,587	352.05	948,837	22.19	2,519,038	13.75	1,574,446	21.26
Outpatient Facility	291	4.34	1,149,543	26.89	4,425,867	24.16	2,993,482	40.42
Inpatient Facility	0	0.00	1,334,940	31.22	3,196,857	17.45	3,290,080	44.42
Others	90	1.34	345,356	8.08	1,626,524	8.88	1,113,910	15.04
Total	32,518	485.35	7,098,440	166.02	18,736,344	102.27	12,250,475	165.39
Projected FY2024 Member Months	171		189,962		527,606		192,064	
Projected FY2024 Premiums								
@Current Rates	102,297	597.31	35,917,546	189.08	65,954,764	125.01	34,568,982	179.99
@Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Changes		1.0150		1.0124		1.0150		1.0110
Other Reimbursement Changes		1.0000		1.0007		1.0031		1.0052
Inpatient Reimbursement Changes		1.0000		0.9989		0.9983		0.9979
FQHC & Other Adjustments		0.9349		0.9515		0.9350		0.9544
PHE Adjustment		1.0000		1.0000		1.0000		1.0000
Projected Incurred Claims	87,458	510.67	33,673,137	177.26	56,860,510	107.77	34,090,522	177.50
Capitation & Other Expenses/Refunds								
Total	150	0.88	135,048	0.71	440,412	0.83	159,382	0.83
Reinsurance Expenses								
Net Reinsurance Cost	16	0.10	21,425	0.11	58,660	0.11	20,763	0.11
Administrative Expenses								
Fixed Amount	1,541	9.00	1,709,662	9.00	4,748,450	9.00	1,728,572	9.00
Percentage of Premium	5.25 %	29.88	5.25 %	10.74	5.25 %	6.76	5.25 %	10.76
Risk Margin	1.50 %	8.54	1.50 %	3.07	1.50 %	1.93	1.50 %	3.07
Premium Tax	1.75 %	9.96	1.75 %	3.58	1.75 %	2.25	1.75 %	3.59
Maintenance Tax	12	0.073	13,772	0.073	38,251	0.073	13,925	0.073
Projected Total Cost	97,463	569.09	38,855,786	204.54	67,919,435	128.73	39,358,648	204.93
Adjusted Total Cost	97,463	569.09	38,855,786	204.54	67,919,435	128.73	39,358,648	204.93
Experience Rate Increase		-4.7 %		8.2 %		3.0 %		13.9 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	202		112,199		865		413,356	
Estimated Incurred Claims								
Professional	144,137	713.55	41,407,883	369.06	260,133	300.73		
Emergency Room	10,725	53.10	1,823,996	16.26	23,617	27.30		
Outpatient Facility	3,400	16.83	9,311,152	82.99	47,956	55.44		
Inpatient Facility	117,452	581.45	33,527	0.30	370,394	428.20		
Others	27	0.13	3,073,190	27.39	9,583	11.08		
Total	275,742	1,365.06	55,649,749	495.99	711,682	822.75	94,754,950	229.23
Projected FY2024 Member Months	584		112,730		1,212		1,024,329	
Projected FY2024 Premiums								
@Current Rates	201,644	345.28	55,045,415	488.29	336,233	277.42	192,126,880	187.56
@Current DSP Rates	0	0.00	0	0.00	345,663	285.20	345,663	0.34
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Changes		1.0265		1.0108		1.0054		
Other Reimbursement Changes		1.0000		0.9998		0.9997		
Inpatient Reimbursement Changes		1.0010		1.0000		1.0050		
FQHC & Other Adjustments		0.9584		0.9021		0.9590		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	841,000	1,440.07	54,603,498	484.37	1,034,815	853.81	181,190,939	176.89
Capitation & Other Expenses/Refunds								
Total	-127	-0.22	-31,541	-0.28	-375	-0.31	702,947	0.69
Reinsurance Expenses								
Net Reinsurance Cost	84	0.14	17,069	0.15	179	0.15	118,196	0.12
Administrative Expenses								
Fixed Amount	7,884	13.50	1,521,855	13.50	16,362	13.50	9,734,327	9.50
Percentage of Premium	5.25 %	83.40	5.25 %	28.56	5.25 %	49.76	5.25 %	10.74
Risk Margin	1.50 %	23.83	1.50 %	8.16	1.50 %	14.22	1.50 %	3.07
Premium Tax	1.75 %	27.80	1.75 %	9.52	1.75 %	16.59	1.75 %	3.58
Maintenance Tax	42	0.073	8,173	0.073	88	0.073	74,264	0.073
Projected Total Cost	927,741	1,588.60	61,332,299	544.06	1,148,709	947.78	209,640,080	204.66
Adjusted Total Cost	927,741	1,588.60	61,332,299	544.06	803,046	662.58	209,294,417	204.32
Experience Rate Increase		360.1 %		11.4 %		138.8 %		8.9 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	5		3,296		15,498		6,005	
Estimated Incurred Claims								
Professional	0	0.00	219,836	66.70	536,661	34.63	263,166	43.82
Emergency Room	0	0.00	38,995	11.83	328,136	21.17	73,519	12.24
Outpatient Facility	0	0.00	110,829	33.63	235,581	15.20	83,638	13.93
Inpatient Facility	0	0.00	69,065	20.95	424,994	27.42	1,781,627	296.69
Others	0	0.00	7,963	2.42	149,659	9.66	63,335	10.55
Total	0	0.00	446,688	135.52	1,675,031	108.08	2,265,285	377.23
Projected FY2024 Member Months	9		14,399		41,997		14,565	
Projected FY2024 Premiums								
@Current Rates	5,312	597.31	2,192,363	152.26	5,193,015	123.65	7,299,514	501.15
@Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Changes		1.0000		1.0140		1.0169		1.0068
Other Reimbursement Changes		1.0000		1.0014		1.0034		1.0020
Inpatient Reimbursement Changes		1.0000		0.9986		0.9868		0.9959
FQHC & Other Adjustments		1.0000		0.9538		0.9599		0.9884
PHE Adjustment		1.0000		1.0000		1.0000		1.0000
Projected Incurred Claims	0	0.00	2,092,646	145.33	4,864,690	115.83	6,050,019	415.37
Capitation & Other Expenses/Refunds								
Total	14	1.62	27,019	1.88	82,804	1.97	28,219	1.94
Reinsurance Expenses								
Net Reinsurance Cost	1	0.06	1,545	0.11	4,651	0.11	1,419	0.10
Administrative Expenses								
Fixed Amount	80	9.00	129,589	9.00	377,976	9.00	131,089	9.00
Percentage of Premium	5.25 %	0.62	5.25 %	8.97	5.25 %	7.29	5.25 %	24.47
Risk Margin	1.50 %	0.18	1.50 %	2.56	1.50 %	2.08	1.50 %	6.99
Premium Tax	1.75 %	0.21	1.75 %	2.99	1.75 %	2.43	1.75 %	8.16
Maintenance Tax	1	0.073	1,044	0.073	3,045	0.073	1,056	0.073
Projected Total Cost	105	11.76	2,461,031	170.92	5,828,597	138.79	6,788,854	466.09
Adjusted Total Cost	105	11.76	2,461,031	170.92	5,828,597	138.79	6,788,854	466.09
Experience Rate Increase		-98.0 %		12.3 %		12.2 %		-7.0 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	25		6,424		82		31,335	
Estimated Incurred Claims								
Professional	56,421	2,256.84	1,780,489	277.16	25,583	311.99		
Emergency Room	0	0.00	135,704	21.12	1,247	15.21		
Outpatient Facility	2	0.07	1,023,003	159.25	8,681	105.87		
Inpatient Facility	2,376	95.02	484	0.08	26,667	325.21		
Others	0	0.00	127,370	19.83	722	8.80		
Total	58,798	2,351.93	3,067,050	477.44	62,900	767.08	7,575,753	241.77
Projected FY2024 Member Months	44		5,431		103		76,549	
Projected FY2024 Premiums								
@Current Rates	15,279	345.28	2,920,375	537.72	28,574	277.42	17,654,432	230.63
@Current DSP Rates	0	0.00	0	0.00	39,553	384.01	39,553	0.52
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Changes		1.0230		1.0124		1.0096		
Other Reimbursement Changes		1.0000		0.9993		0.9988		
Inpatient Reimbursement Changes		0.9967		1.0000		0.9921		
FQHC & Other Adjustments		1.0000		0.9549		0.9513		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	113,673	2,568.89	2,683,482	494.10	80,546	782.00	15,885,057	207.52
Capitation & Other Expenses/Refunds								
Total	114	2.57	79,973	14.73	95	0.92	218,238	2.85
Reinsurance Expenses								
Net Reinsurance Cost	6	0.13	811	0.15	11	0.11	8,442	0.11
Administrative Expenses								
Fixed Amount	597	13.50	73,319	13.50	1,391	13.50	714,040	9.33
Percentage of Premium	5.25 %	148.33	5.25 %	29.98	5.25 %	45.71	5.25 %	12.62
Risk Margin	1.50 %	42.38	1.50 %	8.57	1.50 %	13.06	1.50 %	3.60
Premium Tax	1.75 %	49.44	1.75 %	9.99	1.75 %	15.24	1.75 %	4.21
Maintenance Tax	3	0.073	394	0.073	7	0.073	5,550	0.073
Projected Total Cost	125,020	2,825.32	3,101,615	571.09	89,672	870.60	18,394,893	240.30
Adjusted Total Cost	125,020	2,825.32	3,101,615	571.09	50,119	486.59	18,355,340	239.79
Experience Rate Increase		718.3 %		6.2 %		75.4 %		4.0 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	2		3,814		15,824		6,411	
Estimated Incurred Claims								
Professional	21	10.38	178,168	46.71	502,919	31.78	195,972	30.57
Emergency Room	0	0.00	24,484	6.42	72,779	4.60	35,147	5.48
Outpatient Facility	0	0.00	115,624	30.32	201,484	12.73	106,285	16.58
Inpatient Facility	0	0.00	51,759	13.57	99,663	6.30	41,786	6.52
Others	0	0.00	64,320	16.86	104,281	6.59	53,365	8.32
Total	21	10.38	434,354	113.88	981,126	62.00	432,555	67.47
Projected FY2024 Member Months	10		17,806		49,394		17,399	
Projected FY2024 Premiums								
@Current Rates	6,230	597.31	2,413,964	135.57	4,317,667	87.41	1,639,786	94.25
@Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Changes		1.0000		1.0210		1.0294		1.0291
Other Reimbursement Changes		1.0000		1.0000		1.0039		1.0110
Inpatient Reimbursement Changes		1.0000		1.0065		1.0016		1.0004
FQHC & Other Adjustments		1.0000		0.9747		0.9587		0.9522
PHE Adjustment		1.0000		1.0000		1.0000		1.0000
Projected Incurred Claims	120	11.51	2,252,201	126.48	3,369,741	68.22	1,290,024	74.14
Capitation & Other Expenses/Refunds								
Total	21	2.04	-375	-0.02	4,879	0.10	553	0.03
Reinsurance Expenses								
Net Reinsurance Cost	4	0.38	3,437	0.19	9,431	0.19	3,276	0.19
Administrative Expenses								
Fixed Amount	94	9.00	160,257	9.00	444,548	9.00	156,592	9.00
Percentage of Premium	5.25 %	1.32	5.25 %	7.79	5.25 %	4.45	5.25 %	4.79
Risk Margin	1.50 %	0.38	1.50 %	2.23	1.50 %	1.27	1.50 %	1.37
Premium Tax	1.75 %	0.44	1.75 %	2.60	1.75 %	1.48	1.75 %	1.60
Maintenance Tax	1	0.073	1,291	0.073	3,581	0.073	1,261	0.073
Projected Total Cost	262	25.15	2,641,323	148.34	4,188,174	84.79	1,586,564	91.19
Adjusted Total Cost	262	25.15	2,641,323	148.34	4,188,174	84.79	1,586,564	91.19
Experience Rate Increase		-95.8 %		9.4 %		-3.0 %		-3.2 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	14		3,444		56		29,565	
Estimated Incurred Claims								
Professional	1,704	121.75	830,077	241.02	9,855	175.99		
Emergency Room	0	0.00	25,154	7.30	0	0.00		
Outpatient Facility	123	8.77	290,059	84.22	2,474	44.18		
Inpatient Facility	2,674	190.98	16,168	4.69	5,427	96.92		
Others	0	0.00	22,441	6.52	2,150	38.38		
Total	4,501	321.50	1,183,899	343.76	19,907	355.47	3,056,361	103.38
Projected FY2024 Member Months	47		3,886		78		88,621	
Projected FY2024 Premiums								
@Current Rates	16,228	345.28	1,502,892	386.75	21,639	277.42	9,918,406	111.92
@Current DSP Rates	0	0.00	0	0.00	26,229	336.27	26,229	0.30
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Changes		1.0171		1.0373		1.0193		
Other Reimbursement Changes		1.0000		0.9996		1.0000		
Inpatient Reimbursement Changes		1.0695		0.9994		1.0049		
FQHC & Other Adjustments		1.0000		0.8863		1.0000		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	17,608	374.63	1,314,294	338.21	30,423	390.04	8,274,411	93.37
Capitation & Other Expenses/Refunds								
Total	-50	-1.07	-6,861	-1.77	-739	-9.47	-2,572	-0.03
Reinsurance Expenses								
Net Reinsurance Cost	5	0.11	627	0.16	16	0.20	16,796	0.19
Administrative Expenses								
Fixed Amount	635	13.50	52,461	13.50	1,053	13.50	815,639	9.20
Percentage of Premium	5.25 %	22.22	5.25 %	20.09	5.25 %	22.63	5.25 %	5.90
Risk Margin	1.50 %	6.35	1.50 %	5.74	1.50 %	6.46	1.50 %	1.69
Premium Tax	1.75 %	7.41	1.75 %	6.70	1.75 %	7.54	1.75 %	1.97
Maintenance Tax	3	0.073	282	0.073	6	0.073	6,425	0.073
Projected Total Cost	19,891	423.21	1,487,217	382.71	33,616	430.98	9,957,047	112.36
Adjusted Total Cost	19,891	423.21	1,487,217	382.71	7,387	94.71	9,930,818	112.06
Experience Rate Increase		22.6 %		-1.0 %		-65.9 %		0.1 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	3		3,446		15,674		6,683	
Estimated Incurred Claims								
Professional	34	11.28	225,318	65.39	546,620	34.87	223,354	33.42
Emergency Room	0	0.00	13,987	4.06	134,812	8.60	53,114	7.95
Outpatient Facility	0	0.00	124,127	36.02	565,062	36.05	282,750	42.31
Inpatient Facility	0	0.00	6,335	1.84	155,341	9.91	59,702	8.93
Others	0	0.00	48,553	14.09	154,958	9.89	99,746	14.93
Total	34	11.28	418,319	121.39	1,556,793	99.32	718,665	107.54
Projected FY2024 Member Months	5		15,921		45,657		17,298	
Projected FY2024 Premiums								
@Current Rates	2,731	597.31	2,938,911	184.59	7,034,228	154.07	3,612,196	208.82
@Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Changes		1.0000		1.0148		1.0179		1.0230
Other Reimbursement Changes		1.0000		1.0007		1.0070		1.0071
Inpatient Reimbursement Changes		1.0000		1.0047		0.9940		0.9965
FQHC & Other Adjustments		1.0000		0.9884		0.9801		0.9806
PHE Adjustment		1.0000		1.0000		1.0000		1.0000
Projected Incurred Claims	57	12.51	2,161,078	135.74	5,021,324	109.98	2,076,375	120.04
Capitation & Other Expenses/Refunds								
Total	174	38.04	848,128	53.27	2,326,787	50.96	877,347	50.72
Reinsurance Expenses								
Net Reinsurance Cost	2	0.45	6,527	0.41	18,567	0.41	7,021	0.41
Administrative Expenses								
Fixed Amount	41	9.00	143,290	9.00	410,914	9.00	155,682	9.00
Percentage of Premium	5.25 %	3.45	5.25 %	11.39	5.25 %	9.78	5.25 %	10.34
Risk Margin	1.50 %	0.98	1.50 %	3.25	1.50 %	2.79	1.50 %	2.95
Premium Tax	1.75 %	1.15	1.75 %	3.80	1.75 %	3.26	1.75 %	3.45
Maintenance Tax	0	0.073	1,154	0.073	3,310	0.073	1,254	0.073
Projected Total Cost	300	65.65	3,453,745	216.93	8,503,719	186.25	3,407,299	196.98
Adjusted Total Cost	300	65.65	3,453,745	216.93	8,503,719	186.25	3,407,299	196.98
Experience Rate Increase		-89.0 %		17.5 %		20.9 %		-5.7 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	12		2,186		70		28,074	
Estimated Incurred Claims								
Professional	203	16.93	638,208	291.95	9,803	140.04		
Emergency Room	0	0.00	26,279	12.02	350	5.00		
Outpatient Facility	0	0.00	68,594	31.38	575	8.21		
Inpatient Facility	0	0.00	20,659	9.45	0	0.00		
Others	0	0.00	30,617	14.01	29	0.42		
Total	203	16.93	784,357	358.81	10,757	153.68	3,489,128	124.28
Projected FY2024 Member Months	51		2,417		82		81,431	
Projected FY2024 Premiums								
@Current Rates	17,609	345.28	1,050,311	434.55	22,748	277.42	14,678,735	180.26
@Current DSP Rates	0	0.00	0	0.00	16,561	201.97	16,561	0.20
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Changes		1.1271		1.0222		1.0369		
Other Reimbursement Changes		1.0000		0.9984		1.0000		
Inpatient Reimbursement Changes		1.0000		1.0018		1.0000		
FQHC & Other Adjustments		1.0000		0.9888		1.0000		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	1,042	20.44	939,160	388.56	13,997	170.70	10,213,035	125.42
Capitation & Other Expenses/Refunds								
Total	1,147	22.49	83,520	34.56	2,108	25.71	4,139,210	50.83
Reinsurance Expenses								
Net Reinsurance Cost	10	0.20	740	0.31	19	0.23	32,886	0.40
Administrative Expenses								
Fixed Amount	689	13.50	32,630	13.50	1,107	13.50	744,352	9.14
Percentage of Premium	5.25 %	3.25	5.25 %	25.07	5.25 %	12.06	5.25 %	10.66
Risk Margin	1.50 %	0.93	1.50 %	7.16	1.50 %	3.45	1.50 %	3.05
Premium Tax	1.75 %	1.08	1.75 %	8.36	1.75 %	4.02	1.75 %	3.55
Maintenance Tax	4	0.073	175	0.073	6	0.073	5,904	0.073
Projected Total Cost	3,160	61.97	1,154,344	477.59	18,838	229.73	16,541,405	203.13
Adjusted Total Cost	3,160	61.97	1,154,344	477.59	2,277	27.77	16,524,844	202.93
Experience Rate Increase		-82.1 %		9.9 %		-90.0 %		12.6 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	67		37,171		156,320		65,883	
Estimated Incurred Claims								
Professional	34,721	518.22	2,439,368	65.63	5,948,418	38.05	2,378,578	36.10
Emergency Room	1,372	20.48	246,770	6.64	765,872	4.90	546,024	8.29
Outpatient Facility	2,786	41.58	546,305	14.70	1,860,467	11.90	930,024	14.12
Inpatient Facility	6,887	102.79	300,815	8.09	1,277,777	8.17	861,536	13.08
Others	6,516	97.26	585,902	15.76	1,038,227	6.64	487,091	7.39
Total	52,282	780.33	4,119,160	110.82	10,890,761	69.67	5,203,252	78.98
Projected FY2024 Member Months	155		164,777		445,069		165,089	
Projected FY2024 Premiums								
@Current Rates	92,456	597.31	20,774,032	126.07	35,726,855	80.27	17,575,747	106.46
@Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Changes		1.0302		1.0158		1.0233		1.0246
Other Reimbursement Changes		1.0000		1.0012		1.0072		1.0076
Inpatient Reimbursement Changes		1.0010		0.9993		1.0001		1.0003
FQHC & Other Adjustments		0.9770		0.9450		0.9346		0.9362
PHE Adjustment		1.0000		1.0000		1.0000		1.0000
Projected Incurred Claims	134,938	871.76	19,445,462	118.01	33,121,288	74.42	13,977,119	84.66
Capitation & Other Expenses/Refunds								
Total	-141	-0.91	-214,324	-1.30	-541,971	-1.22	-189,750	-1.15
Reinsurance Expenses								
Net Reinsurance Cost	23	0.15	13,983	0.08	42,458	0.10	17,382	0.11
Administrative Expenses								
Fixed Amount	1,393	9.00	1,482,992	9.00	4,005,623	9.00	1,485,797	9.00
Percentage of Premium	5.25 %	50.50	5.25 %	7.22	5.25 %	4.73	5.25 %	5.32
Risk Margin	1.50 %	14.43	1.50 %	2.06	1.50 %	1.35	1.50 %	1.52
Premium Tax	1.75 %	16.83	1.75 %	2.41	1.75 %	1.58	1.75 %	1.77
Maintenance Tax	11	0.073	11,946	0.073	32,268	0.073	11,969	0.073
Projected Total Cost	148,879	961.83	22,666,732	137.56	40,065,208	90.02	16,724,061	101.30
Adjusted Total Cost	148,879	961.83	22,666,732	137.56	40,065,208	90.02	16,724,061	101.30
Experience Rate Increase		61.0 %		9.1 %		12.1 %		-4.8 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	105		59,459		584		319,589	
Estimated Incurred Claims								
Professional	38,969	371.13	19,430,110	326.78	145,715	249.51		
Emergency Room	1,635	15.57	365,331	6.14	14,281	24.45		
Outpatient Facility	266	2.53	2,206,877	37.12	23,460	40.17		
Inpatient Facility	209,579	1,995.99	78,671	1.32	74,238	127.12		
Others	783	7.45	294,789	4.96	1,882	3.22		
Total	251,232	2,392.68	22,375,777	376.32	259,576	444.48	43,152,041	135.02
Projected FY2024 Member Months	404		66,476		825		842,794	
Projected FY2024 Premiums								
@Current Rates	139,381	345.28	25,929,558	390.06	228,793	277.42	100,466,822	119.21
@Current DSP Rates	0	0.00	0	0.00	195,158	236.64	195,158	0.23
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Changes		1.0052		1.0181		1.0136		
Other Reimbursement Changes		1.0000		0.9997		0.9996		
Inpatient Reimbursement Changes		1.0265		1.0007		1.0190		
FQHC & Other Adjustments		0.9846		0.8733		0.9260		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	1,051,147	2,603.94	23,834,864	358.55	375,409	455.20	91,940,228	109.09
Capitation & Other Expenses/Refunds								
Total	-401	-0.99	-54,882	-0.83	-441	-0.54	-1,001,910	-1.19
Reinsurance Expenses								
Net Reinsurance Cost	66	0.16	12,479	0.19	193	0.23	86,584	0.10
Administrative Expenses								
Fixed Amount	5,450	13.50	897,426	13.50	11,134	13.50	7,889,814	9.36
Percentage of Premium	5.25 %	150.14	5.25 %	21.31	5.25 %	26.88	5.25 %	6.74
Risk Margin	1.50 %	42.90	1.50 %	6.09	1.50 %	7.68	1.50 %	1.93
Premium Tax	1.75 %	50.05	1.75 %	7.10	1.75 %	8.96	1.75 %	2.25
Maintenance Tax	29	0.073	4,820	0.073	60	0.073	61,103	0.073
Projected Total Cost	1,154,417	2,859.76	26,988,750	405.99	422,245	511.99	108,170,293	128.35
Adjusted Total Cost	1,154,417	2,859.76	26,988,750	405.99	227,087	275.35	107,975,135	128.12
Experience Rate Increase		728.2 %		4.1 %		-0.7 %		7.5 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	33		20,661		85,439		31,621	
Estimated Incurred Claims								
Professional	4,090	123.94	1,016,548	49.20	2,192,018	25.66	728,213	23.03
Emergency Room	1,750	53.04	374,261	18.11	1,117,833	13.08	531,482	16.81
Outpatient Facility	2,484	75.28	534,623	25.88	1,367,639	16.01	1,097,565	34.71
Inpatient Facility	1,450	43.93	1,147,842	55.56	2,046,844	23.96	272,607	8.62
Others	10	0.29	291,132	14.09	1,487,871	17.41	865,410	27.37
Total	9,784	296.48	3,364,407	162.84	8,212,205	96.12	3,495,277	110.54
Projected FY2024 Member Months	83		92,947		248,673		83,220	
Projected FY2024 Premiums								
@Current Rates	49,858	597.31	15,510,059	166.87	24,970,346	100.41	12,162,147	146.14
@Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Changes		1.0464		1.0074		1.0121		1.0114
Other Reimbursement Changes		1.0000		1.0004		1.0049		1.0100
Inpatient Reimbursement Changes		1.0000		0.9993		0.9977		0.9981
FQHC & Other Adjustments		1.0000		0.9984		0.9973		0.9972
PHE Adjustment		1.0000		1.0000		1.0000		1.0000
Projected Incurred Claims	28,713	343.99	16,874,553	181.55	26,820,286	107.85	10,370,245	124.61
Capitation & Other Expenses/Refunds								
Total	4	0.05	69,963	0.75	233,840	0.94	95,049	1.14
Reinsurance Expenses								
Net Reinsurance Cost	14	0.17	17,006	0.18	45,584	0.18	14,949	0.18
Administrative Expenses								
Fixed Amount	751	9.00	836,522	9.00	2,238,054	9.00	748,984	9.00
Percentage of Premium	5.25 %	20.27	5.25 %	10.99	5.25 %	6.77	5.25 %	7.75
Risk Margin	1.50 %	5.79	1.50 %	3.14	1.50 %	1.94	1.50 %	2.21
Premium Tax	1.75 %	6.76	1.75 %	3.66	1.75 %	2.26	1.75 %	2.58
Maintenance Tax	6	0.073	6,739	0.073	18,029	0.073	6,033	0.073
Projected Total Cost	32,228	386.10	19,458,780	209.35	32,082,834	129.02	12,278,974	147.55
Adjusted Total Cost	32,228	386.10	19,458,780	209.35	32,082,834	129.02	12,278,974	147.55
Experience Rate Increase		-35.4 %		25.5 %		28.5 %		1.0 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	78		29,877		366		168,075	
Estimated Incurred Claims								
Professional	5,731	73.48	6,749,044	225.89	82,956	226.66		
Emergency Room	2,077	26.63	5,763	0.19	3,418	9.34		
Outpatient Facility	67	0.86	1,810,986	60.61	17,163	46.89		
Inpatient Facility	6,328	81.13	145,195	4.86	41,482	113.34		
Others	334	4.28	783,032	26.21	5,754	15.72		
Total	14,537	186.38	9,494,019	317.77	150,774	411.95	24,741,002	147.20
Projected FY2024 Member Months	250		31,095		533		456,801	
Projected FY2024 Premiums								
@Current Rates	86,320	345.28	10,294,661	331.07	147,865	277.42	63,221,255	138.40
@Current DSP Rates	0	0.00	0	0.00	106,535	199.88	106,535	0.23
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Changes		1.0228		1.0187		1.0123		
Other Reimbursement Changes		1.0000		0.9999		0.9983		
Inpatient Reimbursement Changes		0.9955		1.0007		0.9976		
FQHC & Other Adjustments		1.0000		0.9356		0.9726		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	50,821	203.29	10,094,293	324.63	230,637	432.72	64,469,549	141.13
Capitation & Other Expenses/Refunds								
Total	-325	-1.30	-18,540	-0.60	-445	-0.83	379,546	0.83
Reinsurance Expenses								
Net Reinsurance Cost	41	0.16	3,129	0.10	62	0.12	80,785	0.18
Administrative Expenses								
Fixed Amount	3,375	13.50	419,783	13.50	7,196	13.50	4,254,664	9.31
Percentage of Premium	5.25 %	12.38	5.25 %	19.38	5.25 %	25.57	5.25 %	8.69
Risk Margin	1.50 %	3.54	1.50 %	5.54	1.50 %	7.30	1.50 %	2.48
Premium Tax	1.75 %	4.13	1.75 %	6.46	1.75 %	8.52	1.75 %	2.90
Maintenance Tax	18	0.073	2,254	0.073	39	0.073	33,118	0.073
Projected Total Cost	58,940	235.76	11,476,414	369.08	259,550	486.96	75,647,719	165.60
Adjusted Total Cost	58,940	235.76	11,476,414	369.08	153,015	287.08	75,541,184	165.37
Experience Rate Increase		-31.7 %		11.5 %		3.5 %		19.5 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	20		12,261		48,683		17,800	
Estimated Incurred Claims								
Professional	1,740	86.98	752,925	61.41	1,934,924	39.75	866,854	48.70
Emergency Room	0	0.00	56,578	4.61	152,430	3.13	63,919	3.59
Outpatient Facility	0	0.00	215,941	17.61	457,382	9.40	708,078	39.78
Inpatient Facility	0	0.00	143,533	11.71	578,938	11.89	347,166	19.50
Others	0	0.00	232,939	19.00	437,546	8.99	164,264	9.23
Total	1,740	86.98	1,401,915	114.34	3,561,219	73.15	2,150,280	120.80
Projected FY2024 Member Months	53		52,890		138,271		45,491	
Projected FY2024 Premiums								
@Current Rates	31,617	597.31	8,109,524	153.33	11,738,924	84.90	5,167,846	113.60
@Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Changes		1.0341		1.0089		1.0114		1.0091
Other Reimbursement Changes		1.0000		1.0007		1.0051		1.0073
Inpatient Reimbursement Changes		1.0000		1.0019		1.0037		1.0029
FQHC & Other Adjustments		0.7630		0.8687		0.8529		0.9097
PHE Adjustment		1.0000		1.0000		1.0000		1.0000
Projected Incurred Claims	4,028	76.10	5,892,014	111.40	9,759,621	70.58	5,650,679	124.22
Capitation & Other Expenses/Refunds								
Total	270	5.09	179,699	3.40	441,631	3.19	141,534	3.11
Reinsurance Expenses								
Net Reinsurance Cost	13	0.25	8,839	0.17	21,719	0.16	7,011	0.15
Administrative Expenses								
Fixed Amount	476	9.00	476,013	9.00	1,244,436	9.00	409,420	9.00
Percentage of Premium	5.25 %	5.19	5.25 %	7.12	5.25 %	4.76	5.25 %	7.84
Risk Margin	1.50 %	1.48	1.50 %	2.03	1.50 %	1.36	1.50 %	2.24
Premium Tax	1.75 %	1.73	1.75 %	2.37	1.75 %	1.59	1.75 %	2.61
Maintenance Tax	4	0.073	3,835	0.073	10,025	0.073	3,298	0.073
Projected Total Cost	5,236	98.92	7,169,836	135.56	12,543,641	90.72	6,789,008	149.24
Adjusted Total Cost	5,236	98.92	7,169,836	135.56	12,543,641	90.72	6,789,008	149.24
Experience Rate Increase		-83.4 %		-11.6 %		6.9 %		31.4 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	50		23,972		207		102,993	
Estimated Incurred Claims								
Professional	31,444	628.87	13,161,641	549.04	91,464	441.85		
Emergency Room	3,005	60.09	110,319	4.60	1,098	5.30		
Outpatient Facility	0	0.00	390,456	16.29	1,587	7.67		
Inpatient Facility	156,633	3,132.65	603,611	25.18	30,703	148.33		
Others	403	8.06	38,713	1.61	0	0.00		
Total	191,484	3,829.67	14,304,740	596.73	124,852	603.15	21,736,230	211.05
Projected FY2024 Member Months	141		22,319		281		259,446	
Projected FY2024 Premiums								
@Current Rates	48,684	345.28	9,088,924	407.23	77,955	277.42	34,263,475	132.06
@Current DSP Rates	0	0.00	0	0.00	48,627	173.05	48,627	0.19
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Changes		1.0007		1.0079		1.0066		
Other Reimbursement Changes		1.0000		0.9999		1.0000		
Inpatient Reimbursement Changes		1.0444		1.0005		1.0072		
FQHC & Other Adjustments		0.9817		0.6085		0.7694		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	593,510	4,209.29	8,753,227	392.19	141,626	504.01	30,794,705	118.69
Capitation & Other Expenses/Refunds								
Total	605	4.29	23,859	1.07	356	1.27	787,954	3.04
Reinsurance Expenses								
Net Reinsurance Cost	17	0.12	2,813	0.13	53	0.19	40,466	0.16
Administrative Expenses								
Fixed Amount	1,904	13.50	301,307	13.50	3,794	13.50	2,437,348	9.39
Percentage of Premium	5.25 %	242.55	5.25 %	23.35	5.25 %	29.78	5.25 %	7.54
Risk Margin	1.50 %	69.30	1.50 %	6.67	1.50 %	8.51	1.50 %	2.15
Premium Tax	1.75 %	80.85	1.75 %	7.78	1.75 %	9.93	1.75 %	2.51
Maintenance Tax	10	0.073	1,618	0.073	20	0.073	18,810	0.073
Projected Total Cost	651,416	4,619.97	9,926,584	444.76	159,398	567.25	37,245,117	143.56
Adjusted Total Cost	651,416	4,619.97	9,926,584	444.76	110,770	394.20	37,196,490	143.37
Experience Rate Increase		1238 %		9.2 %		42.1 %		8.6 %

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	254		169,263		721,761		289,968	
Estimated Incurred Claims								
Professional	57,712	227.21	10,620,137	62.74	24,740,081	34.28	10,111,777	34.87
Emergency Room	29,984	118.05	2,137,646	12.63	6,553,581	9.08	3,607,928	12.44
Outpatient Facility	74,347	292.71	4,025,768	23.78	13,964,767	19.35	7,933,331	27.36
Inpatient Facility	31,511	124.06	3,745,594	22.13	11,431,247	15.84	8,089,119	27.90
Others	6,905	27.19	2,720,307	16.07	7,580,381	10.50	4,191,139	14.45
Total	200,460	789.21	23,249,452	137.36	64,270,056	89.05	33,933,294	117.02
Projected FY2024 Member Months	623		757,708		2,086,973		745,146	
Projected FY2024 Premiums								
@Current Rates	372,273	597.31	122,530,038	161.71	219,430,176	105.14	106,715,930	143.21
@Current DSP Rates	0	0.00	0	0.00	0	0.00	0	0.00
Annual Trend Assumptions	5.3 %		5.3 %		5.3 %		5.3 %	
Provider Reimbursement Changes		1.0270		1.0118		1.0155		1.0139
Other Reimbursement Changes		1.0000		1.0007		1.0045		1.0068
Inpatient Reimbursement Changes		1.0002		0.9998		0.9989		0.9984
FQHC & Other Adjustments		0.8444		0.9603		0.9531		0.9612
PHE Adjustment		1.0000		1.0000		1.0000		1.0000
Projected Incurred Claims	473,075	759.04	112,183,722	148.06	200,134,961	95.90	94,711,646	127.10
Capitation & Other Expenses/Refunds								
Total	1,814	2.91	2,770,821	3.66	8,005,589	3.84	2,914,611	3.91
Reinsurance Expenses								
Net Reinsurance Cost	96	0.15	100,107	0.13	283,084	0.14	103,215	0.14
Administrative Expenses								
Fixed Amount	5,609	9.00	6,819,372	9.00	18,782,757	9.00	6,706,314	9.00
Percentage of Premium	5.25 %	44.25	5.25 %	9.23	5.25 %	6.25	5.25 %	8.05
Risk Margin	1.50 %	12.64	1.50 %	2.64	1.50 %	1.79	1.50 %	2.30
Premium Tax	1.75 %	14.75	1.75 %	3.08	1.75 %	2.08	1.75 %	2.68
Maintenance Tax	45	0.073	54,934	0.073	151,306	0.073	54,023	0.073
Projected Total Cost	525,288	842.82	133,255,689	175.87	248,478,357	119.06	114,196,513	153.25
Adjusted Total Cost	525,288	842.82	133,255,689	175.87	248,478,357	119.06	114,196,513	153.25
Experience Rate Increase		41.1 %		8.8 %		13.2 %		7.0 %

	Newborn 198%+		Perinate <198%		Perinate 198%+		Total	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period - FY2022								
Member Months	654		327,901		3,141		1,512,942	
Estimated Incurred Claims								
Professional	277,983	425.05	102,674,887	313.13	777,276	247.46		
Emergency Room	17,099	26.14	2,771,315	8.45	46,919	14.94		
Outpatient Facility	4,268	6.53	24,746,939	75.47	126,648	40.32		
Inpatient Facility	536,164	819.82	1,134,561	3.46	611,337	194.63		
Others	3,776	5.77	6,393,212	19.50	35,227	11.22		
Total	839,290	1,283.32	137,720,914	420.01	1,597,408	508.57	261,810,874	173.05
Projected FY2024 Member Months	2,018		331,195		4,225		3,927,888	
Projected FY2024 Premiums								
@Current Rates	696,750	345.28	139,074,785	419.92	1,172,021	277.42	589,991,973	150.21
@Current DSP Rates	0	0.00	0	0.00	946,369	224.01	946,369	0.24
Annual Trend Assumptions	3.5 %		3.5 %		3.5 %			
Provider Reimbursement Changes		1.0127		1.0140		1.0086		
Other Reimbursement Changes		1.0000		0.9998		0.9996		
Inpatient Reimbursement Changes		1.0195		1.0003		1.0059		
FQHC & Other Adjustments		0.9729		0.8823		0.9344		
PHE Adjustment		1.0000		1.0000		1.0000		
Projected Incurred Claims	2,786,487	1,380.87	133,320,263	402.54	2,180,890	516.22	545,791,044	138.95
Capitation & Other Expenses/Refunds								
Total	1,429	0.71	229,205	0.69	2,108	0.50	13,925,576	3.55
Reinsurance Expenses								
Net Reinsurance Cost	264	0.13	48,440	0.15	672	0.16	535,878	0.14
Administrative Expenses								
Fixed Amount	27,242	13.50	4,471,133	13.50	57,034	13.50	36,869,460	9.39
Percentage of Premium	5.25 %	80.06	5.25 %	23.92	5.25 %	30.44	5.25 %	8.73
Risk Margin	1.50 %	22.87	1.50 %	6.84	1.50 %	8.70	1.50 %	2.49
Premium Tax	1.75 %	26.69	1.75 %	7.97	1.75 %	10.15	1.75 %	2.91
Maintenance Tax	146	0.073	24,012	0.073	306	0.073	284,772	0.073
Projected Total Cost	3,077,123	1,524.89	150,921,368	455.69	2,449,191	579.73	652,903,530	166.22
Adjusted Total Cost	3,077,123	1,524.89	150,921,368	455.69	1,502,822	355.72	651,957,160	165.98
Experience Rate Increase		341.6 %		8.5 %		28.2 %		10.5 %

FY2024 CHIP Pharmacy Rating
Bexar

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2022)								
Member Months	17		13,291		56,860		22,578	
Experience Period Cost								
Estimated Incurred Claims	399	23.46	80,045	6.02	2,168,462	38.14	690,811	30.60
Other Costs/Refunds	0	0.01	-2,821	-0.21	-7,873	-0.14	-2,379	-0.11
Total Cost	399	23.47	77,224	5.81	2,160,589	38.00	688,431	30.49
Projected FY2024 Member Months	39		61,109		168,384		59,900	
Projected FY2024 Premiums								
@ Current Rate	345	8.86	1,105,429	18.09	5,836,197	34.66	2,202,176	36.76
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		0.9995		0.9913		0.9815	
Adjustment 2 - Makena	1.0000		1.0000		1.0000		1.0000	
Projected FY2024 Incurred Claims	1,046	26.87	406,302	6.65	7,261,707	43.13	2,052,396	34.26
Administrative Expenses	62	1.60	97,774	1.60	269,414	1.60	95,840	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	1,145	29.42	521,009	8.53	7,784,105	46.23	2,220,400	37.07
Percentage Rate Increase		232.1 %		-52.9 %		33.4 %		0.8 %

FY2024 CHIP Pharmacy Rating
Bexar

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2022)								
Member Months	32		17,006		199		109,983	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	787,785	46.32	4,736	23.80	3,732,237	33.93
Other Costs/Refunds	-15	-0.47	-7,686	-0.45	-31	-0.16	-20,806	-0.19
Total Cost	-15	-0.47	780,099	45.87	4,705	23.64	3,711,431	33.75
Projected FY2024 Member Months	129		15,478		309		305,348	
Projected FY2024 Premiums								
@ Current Rate	715	5.54	1,071,664	69.24	19,677	63.68	10,236,203	33.52
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		0.9262		0.7320			
Adjustment 2 - Makena	1.0000		0.6276		1.0000			
Projected FY2024 Incurred Claims	-69	-0.54	472,517	30.53	6,122	19.81	10,200,021	33.40
Administrative Expenses	206	1.60	24,765	1.60	494	1.60	488,557	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	142	1.10	513,987	33.21	6,839	22.13	11,047,626	36.18
Percentage Rate Increase		-80.2 %		-52.0 %		-65.2 %		7.9 %

FY2024 CHIP Pharmacy Rating
Dallas

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2022)								
Member Months	31		26,953		117,583		47,011	
Experience Period Cost								
Estimated Incurred Claims	1,686	54.40	390,508	14.49	3,445,931	29.31	2,221,826	47.26
Other Costs/Refunds	3	0.09	10,424	0.39	47,423	0.40	19,354	0.41
Total Cost	1,689	54.49	400,932	14.88	3,493,354	29.71	2,241,180	47.67
Projected FY2024 Member Months	67		122,592		346,285		120,231	
Projected FY2024 Premiums								
@ Current Rate	597	8.86	1,928,011	15.73	10,733,766	31.00	4,814,274	40.04
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		1.0000		0.9830		0.9783	
Adjustment 2 - Makena	1.0000		1.0000		1.0000		1.0000	
Projected FY2024 Incurred Claims	4,207	62.39	2,087,818	17.03	11,578,516	33.44	6,419,953	53.40
Administrative Expenses	108	1.60	196,147	1.60	554,056	1.60	192,369	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	4,460	66.14	2,360,687	19.26	12,540,126	36.21	6,834,441	56.84
Percentage Rate Increase		646.5 %		22.4 %		16.8 %		42.0 %

FY2024 CHIP Pharmacy Rating
Dallas

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2022)								
Member Months	128		67,429		644		259,779	
Experience Period Cost								
Estimated Incurred Claims	23	0.18	1,439,458	21.35	26,026	40.41	7,525,458	28.97
Other Costs/Refunds	30	0.23	5,259	0.08	23	0.04	82,515	0.32
Total Cost	53	0.41	1,444,716	21.43	26,049	40.45	7,607,973	29.29
Projected FY2024 Member Months	306		64,450		682		654,613	
Projected FY2024 Premiums								
@ Current Rate	1,695	5.54	2,140,314	33.21	43,430	63.68	19,662,088	30.04
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		0.9227		0.8625			
Adjustment 2 - Makena	1.0000		0.7990		1.0000			
Projected FY2024 Incurred Claims	145	0.47	1,165,557	18.08	27,240	39.94	21,283,437	32.51
Administrative Expenses	490	1.60	103,120	1.60	1,091	1.60	1,047,381	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	656	2.14	1,311,295	20.35	29,283	42.94	23,080,948	35.26
Percentage Rate Increase		-61.3 %		-38.7 %		-32.6 %		17.4 %

FY2024 CHIP Pharmacy Rating
El Paso

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2022)								
Member Months	9		5,614		26,681		11,908	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	29,684	5.29	503,101	18.86	155,240	13.04
Other Costs/Refunds	-1	-0.13	-781	-0.14	-2,633	-0.10	-1,189	-0.10
Total Cost	-1	-0.13	28,903	5.15	500,468	18.76	154,051	12.94
Projected FY2024 Member Months	31		25,304		75,637		29,889	
Projected FY2024 Premiums								
@ Current Rate	271	8.86	289,443	11.44	2,447,105	32.35	995,831	33.32
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		1.0000		0.9832		0.9696	
Adjustment 2 - Makena	1.0000		1.0000		1.0000		1.0000	
Projected FY2024 Incurred Claims	-5	-0.15	149,156	5.89	1,597,054	21.11	429,237	14.36
Administrative Expenses	49	1.60	40,487	1.60	121,020	1.60	47,822	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	46	1.50	196,013	7.75	1,775,786	23.48	493,085	16.50
Percentage Rate Increase		-83.1 %		-32.3 %		-27.4 %		-50.5 %

FY2024 CHIP Pharmacy Rating
El Paso

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2022)								
Member Months	8		5,905		68		50,193	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	229,184	38.81	1,818	26.73	919,027	18.31
Other Costs/Refunds	-3	-0.34	-3,204	-0.54	-42	-0.62	-7,852	-0.16
Total Cost	-3	-0.34	225,981	38.27	1,776	26.11	911,175	18.15
Projected FY2024 Member Months	62		6,913		120		137,956	
Projected FY2024 Premiums								
@ Current Rate	343	5.54	552,388	79.91	7,642	63.68	4,293,022	31.12
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		0.9380		1.0000			
Adjustment 2 - Makena	1.0000		0.7684		1.0000			
Projected FY2024 Incurred Claims	-24	-0.39	218,311	31.58	3,588	29.90	2,397,317	17.38
Administrative Expenses	99	1.60	11,061	1.60	192	1.60	220,730	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	77	1.25	237,077	34.29	3,907	32.56	2,705,991	19.61
Percentage Rate Increase		-77.5 %		-57.1 %		-48.9 %		-37.0 %

FY2024 CHIP Pharmacy Rating
Harris

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2022)								
Member Months	67		42,756		183,199		74,068	
Experience Period Cost								
Estimated Incurred Claims	1,583	23.63	543,968	12.72	4,363,480	23.82	3,472,313	46.88
Other Costs/Refunds	-15	-0.22	-12,592	-0.29	-51,535	-0.28	-19,311	-0.26
Total Cost	1,568	23.40	531,376	12.43	4,311,946	23.54	3,453,002	46.62
Projected FY2024 Member Months	171		189,962		527,606		192,064	
Projected FY2024 Premiums								
@ Current Rate	1,517	8.86	3,354,063	17.66	17,239,508	32.67	7,623,158	39.69
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		0.9869		0.9863		0.9739	
Adjustment 2 - Makena	1.0000		1.0000		1.0000		1.0000	
Projected FY2024 Incurred Claims	4,589	26.80	2,667,553	14.04	14,022,846	26.58	9,983,737	51.98
Administrative Expenses	274	1.60	303,940	1.60	844,169	1.60	307,302	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	5,026	29.35	3,071,310	16.17	15,366,424	29.12	10,636,733	55.38
Percentage Rate Increase		231.3 %		-8.4 %		-10.9 %		39.5 %

FY2024 CHIP Pharmacy Rating
Harris

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2022)								
Member Months	202		112,199		865		413,356	
Experience Period Cost								
Estimated Incurred Claims	50	0.25	6,350,499	56.60	31,873	36.85	14,763,766	35.72
Other Costs/Refunds	-93	-0.46	-43,579	-0.39	-372	-0.43	-127,498	-0.31
Total Cost	-44	-0.22	6,306,920	56.21	31,501	36.42	14,636,269	35.41
Projected FY2024 Member Months	584		112,730		1,212		1,024,329	
Projected FY2024 Premiums								
@ Current Rate	3,235	5.54	9,005,973	79.89	77,180	63.68	37,304,635	36.42
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		0.9603		0.9705			
Adjustment 2 - Makena	1.0000		0.7556		1.0000			
Projected FY2024 Incurred Claims	-144	-0.25	5,264,223	46.70	49,042	40.46	31,991,846	31.23
Administrative Expenses	934	1.60	180,368	1.60	1,939	1.60	1,638,926	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	817	1.40	5,627,484	49.92	52,694	43.48	34,760,488	33.93
Percentage Rate Increase		-74.8 %		-37.5 %		-31.7 %		-6.8 %

FY2024 CHIP Pharmacy Rating
Jefferson

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2022)								
Member Months	5		3,296		15,498		6,005	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	30,924	9.38	922,322	59.51	182,758	30.43
Other Costs/Refunds	-1	-0.16	-1,165	-0.35	-5,781	-0.37	-1,962	-0.33
Total Cost	-1	-0.16	29,759	9.03	916,541	59.14	180,796	30.11
Projected FY2024 Member Months	9		14,399		41,997		14,565	
Projected FY2024 Premiums								
@ Current Rate	79	8.86	192,775	13.39	1,798,167	42.82	522,208	35.85
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		1.0000		0.9830		0.9447	
Adjustment 2 - Makena	1.0000		1.0000		1.0000		1.0000	
Projected FY2024 Incurred Claims	-2	-0.18	148,842	10.34	2,795,237	66.56	474,308	32.56
Administrative Expenses	14	1.60	23,038	1.60	67,196	1.60	23,305	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	13	1.46	177,653	12.34	2,958,587	70.45	514,329	35.31
Percentage Rate Increase		-83.5 %		-7.8 %		64.5 %		-1.5 %

FY2024 CHIP Pharmacy Rating
Jefferson

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2022)								
Member Months	25		6,424		82		31,335	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	352,873	54.93	4,982	60.76	1,493,859	47.67
Other Costs/Refunds	-5	-0.21	-2,293	-0.36	-13	-0.16	-11,220	-0.36
Total Cost	-5	-0.21	350,580	54.57	4,969	60.60	1,482,639	47.32
Projected FY2024 Member Months	44		5,431		103		76,549	
Projected FY2024 Premiums								
@ Current Rate	245	5.54	423,534	77.98	6,559	63.68	2,943,567	38.45
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		0.9419		1.0000			
Adjustment 2 - Makena	1.0000		0.7510		0.5913			
Projected FY2024 Incurred Claims	-10	-0.23	240,035	44.20	4,225	41.02	3,662,635	47.85
Administrative Expenses	71	1.60	8,690	1.60	165	1.60	122,478	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	62	1.41	257,079	47.34	4,538	44.05	3,912,261	51.11
Percentage Rate Increase		-74.5 %		-39.3 %		-30.8 %		32.9 %

FY2024 CHIP Pharmacy Rating
Lubbock

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2022)								
Member Months	2		3,814		15,824		6,411	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	22,698	5.95	377,917	23.88	536,369	83.66
Other Costs/Refunds	0	-0.24	-549	-0.14	-2,260	-0.14	-906	-0.14
Total Cost	0	-0.24	22,149	5.81	375,658	23.74	535,463	83.52
Projected FY2024 Member Months	10		17,806		49,394		17,399	
Projected FY2024 Premiums								
@ Current Rate	92	8.86	183,927	10.33	1,827,228	36.99	788,641	45.33
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		1.0000		0.9715		0.9892	
Adjustment 2 - Makena	1.0000		1.0000		1.0000		1.0000	
Projected FY2024 Incurred Claims	-3	-0.28	118,390	6.65	1,304,254	26.41	1,645,819	94.59
Administrative Expenses	17	1.60	28,490	1.60	79,031	1.60	27,839	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	14	1.36	151,814	8.53	1,429,752	28.95	1,729,879	99.42
Percentage Rate Increase		-84.6 %		-17.5 %		-21.8 %		119.3 %

FY2024 CHIP Pharmacy Rating
Lubbock

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2022)								
Member Months	14		3,444		56		29,565	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	116,259	33.76	2,526	45.11	1,055,770	35.71
Other Costs/Refunds	-2	-0.11	-494	-0.14	-9	-0.17	-4,221	-0.14
Total Cost	-2	-0.11	115,765	33.61	2,517	44.94	1,051,549	35.57
Projected FY2024 Member Months	47		3,886		78		88,621	
Projected FY2024 Premiums								
@ Current Rate	260	5.54	184,941	47.59	4,967	63.68	2,990,057	33.74
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		0.9925		0.6676			
Adjustment 2 - Makena	1.0000		0.9308		1.0000			
Projected FY2024 Incurred Claims	-6	-0.13	138,157	35.55	2,679	34.35	3,209,290	36.21
Administrative Expenses	75	1.60	6,218	1.60	125	1.60	141,794	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	72	1.52	149,224	38.40	2,898	37.15	3,463,653	39.08
Percentage Rate Increase		-72.5 %		-19.3 %		-41.7 %		15.8 %

FY2024 CHIP Pharmacy Rating
Nueces

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2022)								
Member Months	3		3,446		15,674		6,683	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	29,211	8.48	587,514	37.48	330,653	49.48
Other Costs/Refunds	-1	-0.32	-1,090	-0.32	-4,918	-0.31	-2,089	-0.31
Total Cost	-1	-0.32	28,121	8.16	582,596	37.17	328,564	49.16
Projected FY2024 Member Months	5		15,921		45,657		17,298	
Projected FY2024 Premiums								
@ Current Rate	41	8.86	232,368	14.60	2,458,909	53.86	976,794	56.47
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		1.0000		0.9942		0.9620	
Adjustment 2 - Makena	1.0000		1.0000		1.0000		1.0000	
Projected FY2024 Incurred Claims	-2	-0.37	148,751	9.34	1,931,691	42.31	936,673	54.15
Administrative Expenses	7	1.60	25,474	1.60	73,051	1.60	27,677	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	6	1.27	180,077	11.31	2,072,085	45.38	996,744	57.62
Percentage Rate Increase		-85.6 %		-22.5 %		-15.7 %		2.0 %

FY2024 CHIP Pharmacy Rating
Nueces

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2022)								
Member Months	12		2,186		70		28,074	
Experience Period Cost								
Estimated Incurred Claims	3	0.24	158,335	72.43	117	1.67	1,105,832	39.39
Other Costs/Refunds	-2	-0.20	-565	-0.26	-15	-0.21	-8,679	-0.31
Total Cost	0	0.04	157,770	72.17	102	1.46	1,097,153	39.08
Projected FY2024 Member Months	51		2,417		82		81,431	
Projected FY2024 Premiums								
@ Current Rate	283	5.54	195,968	81.08	5,222	63.68	3,869,584	47.52
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		0.9712		1.0000			
Adjustment 2 - Makena	1.0000		0.4740		1.0000			
Projected FY2024 Incurred Claims	2	0.04	91,940	38.04	137	1.67	3,109,192	38.18
Administrative Expenses	82	1.60	3,867	1.60	131	1.60	130,289	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	87	1.70	99,025	40.97	277	3.38	3,348,301	41.12
Percentage Rate Increase		-69.4 %		-49.5 %		-94.7 %		-13.5 %

FY2024 CHIP Pharmacy Rating
RSA

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2022)								
Member Months	67		37,171		156,320		65,883	
Experience Period Cost								
Estimated Incurred Claims	711	10.61	284,935	7.67	4,946,442	31.64	2,464,737	37.41
Other Costs/Refunds	-8	-0.12	-3,609	-0.10	-15,702	-0.10	-6,826	-0.10
Total Cost	703	10.50	281,326	7.57	4,930,740	31.54	2,457,912	37.31
Projected FY2024 Member Months	155		164,777		445,069		165,089	
Projected FY2024 Premiums								
@ Current Rate	1,371	8.86	3,277,800	19.89	15,096,308	33.92	5,576,748	33.78
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		0.9818		0.9833		0.9661	
Adjustment 2 - Makena	1.0000		1.0000		1.0000		1.0000	
Projected FY2024 Incurred Claims	1,860	12.02	1,401,821	8.51	15,804,426	35.51	6,812,389	41.27
Administrative Expenses	248	1.60	263,643	1.60	712,111	1.60	264,142	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	2,178	14.07	1,721,410	10.45	17,071,356	38.36	7,314,244	44.30
Percentage Rate Increase		58.8 %		-47.5 %		13.1 %		31.2 %

FY2024 CHIP Pharmacy Rating
RSA

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2022)								
Member Months	105		59,459		584		319,589	
Experience Period Cost								
Estimated Incurred Claims	168	1.60	3,089,511	51.96	17,686	30.28	10,804,190	33.81
Other Costs/Refunds	-37	-0.35	-23,399	-0.39	-277	-0.47	-49,856	-0.16
Total Cost	131	1.25	3,066,112	51.57	17,410	29.81	10,754,334	33.65
Projected FY2024 Member Months	404		66,476		825		842,794	
Projected FY2024 Premiums								
@ Current Rate	2,236	5.54	5,315,116	79.96	52,518	63.68	29,322,098	34.79
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		0.9437		0.9693			
Adjustment 2 - Makena	1.0000		0.6718		1.0000			
Projected FY2024 Incurred Claims	578	1.43	2,488,151	37.43	27,284	33.08	26,536,510	31.49
Administrative Expenses	646	1.60	106,362	1.60	1,320	1.60	1,348,470	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	1,265	3.13	2,681,667	40.34	29,564	35.85	28,821,685	34.20
Percentage Rate Increase		-43.4 %		-49.5 %		-43.7 %		-1.7 %

FY2024 CHIP Pharmacy Rating
Tarrant

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2022)								
Member Months	33		20,661		85,439		31,621	
Experience Period Cost								
Estimated Incurred Claims	433	13.11	513,563	24.86	1,999,499	23.40	1,019,213	32.23
Other Costs/Refunds	0	-0.01	2,549	0.12	12,797	0.15	5,348	0.17
Total Cost	432	13.10	516,112	24.98	2,012,296	23.55	1,024,561	32.40
Projected FY2024 Member Months	83		92,947		248,673		83,220	
Projected FY2024 Premiums								
@ Current Rate	740	8.86	1,488,366	16.01	7,592,151	30.53	3,905,490	46.93
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		0.9987		0.9708		0.9484	
Adjustment 2 - Makena	1.0000		1.0000		1.0000		1.0000	
Projected FY2024 Incurred Claims	1,252	15.00	2,654,791	28.56	6,509,700	26.18	2,927,868	35.18
Administrative Expenses	134	1.60	148,715	1.60	397,876	1.60	133,153	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	1,432	17.16	2,897,680	31.18	7,139,613	28.71	3,163,846	38.02
Percentage Rate Increase		93.6 %		94.7 %		-6.0 %		-19.0 %

FY2024 CHIP Pharmacy Rating
Tarrant

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2022)								
Member Months	78		29,877		366		168,075	
Experience Period Cost								
Estimated Incurred Claims	106	1.36	1,765,766	59.10	15,663	42.79	5,314,243	31.62
Other Costs/Refunds	11	0.14	-5,718	-0.19	67	0.18	15,053	0.09
Total Cost	117	1.50	1,760,048	58.91	15,730	42.98	5,329,296	31.71
Projected FY2024 Member Months	250		31,095		533		456,801	
Projected FY2024 Premiums								
@ Current Rate	1,385	5.54	3,281,816	105.54	33,941	63.68	16,303,889	35.69
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		0.9524		0.9350			
Adjustment 2 - Makena	1.0000		0.5824		1.0000			
Projected FY2024 Incurred Claims	430	1.72	1,163,286	37.41	24,522	46.01	13,281,848	29.08
Administrative Expenses	400	1.60	49,752	1.60	853	1.60	730,882	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	858	3.43	1,253,786	40.32	26,227	49.21	14,483,442	31.71
Percentage Rate Increase		-38.1 %		-61.8 %		-22.7 %		-11.2 %

FY2024 CHIP Pharmacy Rating
Travis

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2022)								
Member Months	20		12,261		48,683		17,800	
Experience Period Cost								
Estimated Incurred Claims	0	0.00	64,174	5.23	1,656,462	34.03	766,528	43.06
Other Costs/Refunds	0	-0.01	-778	-0.06	-3,426	-0.07	-1,299	-0.07
Total Cost	0	-0.01	63,396	5.17	1,653,036	33.96	765,230	42.99
Projected FY2024 Member Months	53		52,890		138,271		45,491	
Projected FY2024 Premiums								
@ Current Rate	469	8.86	625,047	11.82	5,196,761	37.58	1,930,499	42.44
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		1.0000		0.9793		0.9753	
Adjustment 2 - Makena	1.0000		1.0000		1.0000		1.0000	
Projected FY2024 Incurred Claims	0	-0.01	313,096	5.92	5,264,029	38.07	2,183,753	48.00
Administrative Expenses	85	1.60	84,625	1.60	221,233	1.60	72,786	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	87	1.65	411,081	7.77	5,669,522	41.00	2,332,340	51.27
Percentage Rate Increase		-81.4 %		-34.2 %		9.1 %		20.8 %

FY2024 CHIP Pharmacy Rating
Travis

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2022)								
Member Months	50		23,972		207		102,993	
Experience Period Cost								
Estimated Incurred Claims	27	0.53	446,285	18.62	21,990	106.23	2,955,466	28.70
Other Costs/Refunds	-2	-0.05	-1,485	-0.06	-14	-0.07	-7,004	-0.07
Total Cost	24	0.49	444,800	18.55	21,977	106.17	2,948,462	28.63
Projected FY2024 Member Months	141		22,319		281		259,446	
Projected FY2024 Premiums								
@ Current Rate	781	5.54	665,270	29.81	17,894	63.68	8,436,721	32.52
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		0.8533		1.0000			
Adjustment 2 - Makena	1.0000		0.8874		1.0000			
Projected FY2024 Incurred Claims	78	0.56	359,024	16.09	34,156	121.55	8,154,137	31.43
Administrative Expenses	226	1.60	35,710	1.60	450	1.60	415,114	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	314	2.23	407,995	18.28	35,768	127.29	8,857,107	34.14
Percentage Rate Increase		-59.8 %		-38.7 %		99.9 %		5.0 %

FY2024 CHIP Pharmacy Rating
Statewide

	<1		1-5		6-14		15-18	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
Experience Period (FY2022)								
Member Months	254		169,263		721,761		289,968	
Experience Period Cost								
Estimated Incurred Claims	4,632	18.24	1,992,870	11.77	20,944,459	29.02	11,861,436	40.91
Other Costs/Refunds	-25	-0.10	-10,186	-0.06	-32,429	-0.04	-11,226	-0.04
Total Cost	4,607	18.14	1,982,684	11.71	20,912,030	28.97	11,850,210	40.87
Projected FY2024 Member Months	623		757,708		2,086,973		745,146	
Projected FY2024 Premiums								
@ Current Rate	5,522	8.86	12,677,229	16.73	70,226,100	33.65	29,335,820	39.37
Annual Trend Assumption	7.0 %		7.0 %		7.0 %		7.0 %	
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		0.9936		0.9833		0.9714	
Adjustment 2 - Makena	1.0000		1.0000		1.0000		1.0000	
Projected FY2024 Incurred Claims	12,943	20.77	10,096,520	13.33	68,069,460	32.62	33,866,135	45.45
Administrative Expenses	997	1.60	1,212,333	1.60	3,339,157	1.60	1,192,234	1.60
Risk Margin	1.50 %		1.50 %		1.50 %		1.50 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	14,408	23.12	11,688,737	15.43	73,807,356	35.37	36,236,039	48.63
Percentage Rate Increase		160.9 %		-7.8 %		5.1 %		23.5 %

FY2024 CHIP Pharmacy Rating
Statewide

	<u>Newborn <198%</u>		<u>Perinate <198%</u>		<u>Perinate 198%-202%</u>		<u>Total</u>	
	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>	<u>Amount</u>	<u>pmpm</u>
Experience Period (FY2022)								
Member Months	654		327,901		3,141		1,512,942	
Experience Period Cost								
Estimated Incurred Claims	413	0.63	14,903,957	45.45	126,639	40.32	49,834,406	32.94
Other Costs/Refunds	-136	-0.21	-85,264	-0.26	-727	-0.23	-139,992	-0.09
Total Cost	277	0.42	14,818,694	45.19	125,912	40.09	49,694,415	32.85
Projected FY2024 Member Months	2,018		331,195		4,225		3,927,888	
Projected FY2024 Premiums								
@ Current Rate	11,179	5.54	22,836,985	68.95	269,030	63.68	135,361,865	34.46
Annual Trend Assumption	7.0 %		7.0 %		7.0 %			
Provider Reimbursement Adjustments								
Adjustment 1 - Insulin Price Adj.	1.0000		0.9471		0.9382			
Adjustment 2 - Makena	1.0000		0.7148		0.9839			
Projected FY2024 Incurred Claims	979	0.49	11,601,201	35.03	178,996	42.37	123,826,233	31.52
Administrative Expenses	3,229	1.60	529,912	1.60	6,760	1.60	6,284,621	1.60
Risk Margin	1.50 %		1.50 %		1.50 %			
Premium Tax	1.75 %		1.75 %		1.75 %			
Projected Total Cost	4,349	2.16	12,538,618	37.86	191,995	45.45	134,481,503	34.24
Percentage Rate Increase		-61.1 %		-45.1 %		-28.6 %		-0.7 %

Attachment 4

Trend Analysis – Medical

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

The trend analysis included a review of health plan claims experience data through February 2023. The historical claims cost and trend experience was reviewed separately by service area and risk group. The service area trends were then combined into a statewide average using a weighted average formula with estimated incurred claims as the weights. CHIP experience after February 2020 has been excluded from the trend analysis due to the significant increase in average cost caused by the COVID-19 pandemic and the corresponding PHE declaration. These patterns are not expected to continue into the future and therefore the trends for this time period are not assigned any credibility. All historical trends have been calculated as the average cost per member per month during a specified time period (monthly, quarterly or annually) compared to the same time period from the prior year. For example, the FY2019 trend has been calculated as the change in average cost per member per month during the period September 1, 2018 through August 31, 2019 (FY2019) compared to the average cost per member per month during the period September 1, 2017 through August 31, 2018 (FY2018). The experience trends for all time periods were adjusted to remove the impact of various provider reimbursement changes and other revisions that have impacted the cost of the program.

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

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

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

Trend Analysis – Pharmacy

The rating methodology uses assumed pharmacy trend factors to adjust the base period (FY2022) claims cost to the rating period (FY2024). The trend rate assumptions were developed by the actuary based on an analysis of recent pharmacy claims experience for CHIP clients. The trend rate assumption is the same for all risk groups and service areas.

The trend analysis included a review of CHIP utilization and cost experience data paid through March 2023. Incurred monthly utilization (days supply per member) and cost per service (plan payments per days supply) statistics were developed through February 2023. From this experience, the average annual utilization and cost per service were determined for each of the

seven 12-month periods ending February 2023.

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

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

The CHIP pharmacy trend assumptions were developed using the following formula. The utilization and cost per service trend assumptions were set equal to one-sixth of the experience trend rate for the 12-month period ending February 2018 plus two-sixths of the experience trend rate for the 12-month period ending February 2019 plus three-sixths of the experience trend rate for the 12-month period ending February 2020. The final cost trend assumptions were then determined by combining the assumed utilization and cost per service trends into a single trend assumption.

Attachment 4 Exhibit B includes a summary of the CHIP pharmacy trend analysis and the derivation of the trend assumptions used in the rating analysis. The trend analysis resulted in a pharmacy annual trend rate assumption of 7.0%.

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

FY2024 CHIP Rating
Trend Analysis
Medical

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

Notes:

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

FY2024 CHIP Rating
Trend Analysis
Pharmacy

	Age <1	Age 1-5	Age 6-14	Age 15-18	CHIP Perinatal	Total	Case-Mix Adjusted
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Annual Trend in Days Supply per Member per Month

All Drugs

3/2013-2/2014	-7.0 %	-2.3 %	-0.3 %	2.0 %	-2.7 %	-0.3 %	-0.5 %
3/2014-2/2015	42.9 %	4.4 %	0.8 %	-1.3 %	12.9 %	3.2 %	2.5 %
3/2015-2/2016	24.3 %	-2.1 %	-0.7 %	-0.2 %	12.2 %	1.4 %	0.9 %
3/2016-2/2017	-31.1 %	-10.5 %	-3.5 %	-1.9 %	13.8 %	-2.5 %	-1.7 %
3/2017-2/2018	14.6 %	3.5 %	3.4 %	5.2 %	0.8 %	2.2 %	3.3 %
3/2018-2/2019	-14.4 %	-0.3 %	-1.8 %	2.9 %	2.7 %	-0.2 %	0.1 %
3/2019-2/2020	2.7 %	2.1 %	2.0 %	3.6 %	-0.8 %	2.1 %	1.8 %
3/2020-2/2021	-49.6 %	-36.0 %	-19.9 %	-6.4 %	4.6 %	-15.0 %	-15.4 %
3/2021-2/2022	183.8 %	28.6 %	9.0 %	6.7 %	-11.9 %	15.6 %	6.3 %
3/2022-2/2023	-46.9 %	26.0 %	15.4 %	13.8 %	2.2 %	28.0 %	14.1 %
Use	0.1 %	2.6 %	1.9 %	4.9 %	1.4 %	2.9 %	2.5 %

Annual Trend in Incurred Claims per Days Supply

All Drugs

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

Annual Trend in Incurred Claims per Member per Month

All Drugs

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

Attachment 5

Provider Reimbursement and Benefit Revisions Adjustment

This attachment presents information regarding rating adjustments for the various provider reimbursement and benefit revisions that became effective (or will become effective) after the beginning of the base period used in rate setting and before the end of FY2024.

All adjustments have been calculated through an analysis of MCO encounter data repriced using the old and new reimbursement terms and the impact determined as the relative change in cost. For each adjustment, the applicable FY2022 encounter data was repriced using the FFS reimbursement in place during this base period, the FFS reimbursement that will be in place during FY2024 and the applicable percentage change determined. Although the MCOs are not required to change their reimbursement levels based on changes implemented by HHSC, the Medicaid fee schedule serves as a primary negotiating tool for both MCOs and providers in Texas. Many MCO/provider reimbursement contracts are directly tied to the Medicaid FFS fee schedule through established percentages (e.g. 100%, 102%, 95% etc.) As a result, MCO reimbursement has historically changed in conjunction with Medicaid FFS fee schedule changes, both increases and decreases. Furthermore, it is common for provider reimbursement contracts that are directly tied to the Medicaid fee schedule (i.e. set at a percentage of Medicaid) to automatically adjust when the Medicaid fee schedule changes with no further need for recontracting. The correlation between managed care reimbursement and FFS fee schedules has been consistently observed throughout the history of the Texas managed care programs and is reiterated through discussions with the MCOs.

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

Hospital Reimbursement Adjustments

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

Exhibit B – As a result of annual evaluations, several hospitals have had their Standard Dollar Amount (SDA) revised between the base period and FY2024. In addition, increases will be applied to the SDA applicable to rural hospital deliveries effective September 1, 2023.

Exhibit C – Effective September 1, 2019, HHSC began utilizing an adjustment to the base period data that analyzes inefficiencies and potentially preventable expenses that unnecessarily increase managed care costs. This analysis was performed using the 3M™ PPR methodology which is a computerized algorithm to identify readmissions with a plausible clinical relationship to the care rendered during or immediately following a prior hospital admission. An expected reduction of PPR events of 10% has been applied for FY2024. The 10% PPR adjustment is intended to be an incremental step in improving the quality and efficiency of the managed care programs. This assumption will be monitored as actual experience develops and reassessed in future rating periods.

Exhibit D – Beginning May 1, 2013, HHSC implemented revisions to hospital reimbursement to account for Potentially Preventable Readmissions (PPR). The reimbursement reductions amount to 1-2% depending on a hospital's performance during the evaluation period and can change from

one fiscal year to the next. A new PPR reduction list will become effective September 1, 2023. As a result, the adjustment factors shown in Exhibit D represent the restoration of those reductions that were in place during the base period net of those reductions that will be in place during FY2024.

Exhibit E – Effective March 1, 2014, HHSC implemented revisions to hospital reimbursement to account for Potentially Preventable Complications (PPC). The reimbursement reductions amount to 2-2.5% depending on a hospital's performance during the evaluation period and can change from one fiscal year to the next. A new PPC reduction list will become effective September 1, 2023. As a result, the adjustment factors shown in Exhibit E represent the restoration of those reductions that were in place during the base period net of those reductions that will be in place during FY2024.

Provider Reimbursement Adjustments

Exhibit F – Effective March 1, 2022, HHSC made revisions to the reimbursement for outpatient behavioral health services.

Exhibit G – Effective September 1, 2022, HHSC made revisions to the reimbursement for vaccine administration.

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

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

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

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

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

Other Reimbursement Adjustments

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

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

FOHC and Other Adjustments

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

Pharmacy Adjustments

Exhibit Q – The three pharmaceutical manufacturers Eli Lilly, Novo Nordisk and Sanofi have publicly announced that the list price for certain insulins will be reduced by approximately 70% no later than January 1, 2024.

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

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

Attachment 3 Rating Adjustment Heading

Attachment 5 Exhibits

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

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

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

Please note that the incurred claims reported on Attachment 5 are developed from the FY2022 detail encounter data which only includes claims paid through November 2022. As a result, the incurred claims reported on Attachment 3 vary slightly from Attachment 5 amounts for several reasons including: (i) Attachment 3 incurred claims include claims paid through February 2023, (ii) Attachment 3 incurred claims include a small amount of IBNR where applicable and (iii) certain subcapitated expenses provided by affiliated providers are included in Attachment 3 incurred claims but not available in the detailed encounter data files. As noted on pages 1-4 of this report, multiple data sources were used in the rate development process with each being checked for consistency. The detail encounter data is necessary for the adjustment factors detailed in this attachment as it is the only data source that provides information at the claim level allowing for the repricing of claims under varying reimbursement levels.

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

FY2024 CHIP Rating
 Inpatient Hospital Reimbursement Change
 Limit Reimbursement to Related Parties

	< 1	1-5	6-14	15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Provider Reimbursement Reduction (1)								
Parkland - Dallas	0	0	0	0	-697	-2,522	-477	-3,696
Driscoll - Nueces	0	0	-9,219	-3,803	0	0	0	-13,022
All Other	0	0	0	0	0	0	0	0
Total	0	0	-9,219	-3,803	-697	-2,522	-477	-16,718
FY2022 Total Claims Paid (2)								
Parkland - Dallas	2,639	1,434,711	5,264,445	1,579,555	32,670	8,121,957	54,861	16,490,839
Driscoll - Nueces	0	330,762	1,235,398	621,219	212	492,948	5,518	2,686,057
All Other	76,252	20,239,754	55,817,318	29,483,382	657,668	124,953,309	1,364,510	232,592,193
Total	78,891	22,005,227	62,317,161	31,684,155	690,549	133,568,215	1,424,890	251,769,089
Adjustment Factor by Plan (3)								
Parkland - Dallas	0.00 %	0.00 %	0.00 %	0.00 %	-2.13 %	-0.03 %	-0.87 %	-0.02 %
Driscoll - Nueces	0.00 %	0.00 %	-0.75 %	-0.61 %	0.00 %	0.00 %	0.00 %	-0.48 %
All Others	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Total	0.00 %	0.00 %	-0.01 %	-0.01 %	-0.10 %	0.00 %	-0.03 %	-0.01 %
Adjustment Factor by SDA (4)								
Bexar	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
Dallas	0.00 %	0.00 %	0.00 %	0.00 %	-0.07 %	-0.01 %	0.10 %	
El Paso	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
Harris	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
Jefferson	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
Lubbock	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
Nueces	0.00 %	0.00 %	-0.61 %	-0.52 %	0.00 %	0.00 %	0.00 %	
RSA	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
Tarrant	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	
Travis	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	

Footnotes

- (1) Equals the cost impact from limiting reimbursement to a related party to 100% of Medicaid.
 (2) Equals FY2022 health plan fee-for-service claims for all services (from Encounter database).
 (3) Cost impact divided by FY2022 Total Incurred Claims.
 (4) Adjustment factor applied by service delivery area.

FY2024 CHIP Rating
 Inpatient Hospital Reimbursement Change
 Hospital Reimbursement Changes - Standard Dollar Amount

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	-77	-318	-165	3	34	536	14
Dallas	0	64	1,011	-278	46	6,158	183	7,185
El Paso	0	-163	-454	-316	0	0	0	-933
Harris	0	-20	-93	479	-4	43	2,065	2,469
Jefferson	0	17	-437	-640	-6	-20	-46	-1,133
Lubbock	0	1,768	204	163	313	-719	24	1,752
Nueces	0	1,726	2,881	3,161	0	1,543	0	9,311
RSA	-9	-133	-1,575	7,022	31	15,238	3,578	24,152
Tarrant	0	-2,408	-3,804	-871	-191	5,717	-227	-1,785
Travis	0	-69	-231	-51	40	-1,005	30	-1,286
Total	-9	704	-2,815	8,504	232	26,989	6,142	39,746
FY2022 Total Claims Paid (2)								
Bexar	3,167	1,490,284	4,105,766	1,448,036	6,856	6,529,288	62,158	13,645,556
Dallas	3,609	3,315,609	11,153,531	4,760,788	56,117	22,870,843	217,762	42,378,260
El Paso	532	596,954	2,351,961	978,816	1,140	1,652,348	14,026	5,595,777
Harris	26,000	6,934,879	18,409,989	10,839,781	259,812	52,710,213	611,799	89,792,474
Jefferson	0	416,872	1,610,360	2,022,606	15,501	3,048,428	70,603	7,184,368
Lubbock	0	410,208	960,324	406,071	4,699	1,160,694	19,490	2,961,486
Nueces	0	395,442	1,541,983	704,760	212	783,109	9,409	3,434,915
RSA	40,811	3,740,629	10,424,922	5,095,523	230,664	21,801,857	214,935	41,549,341
Tarrant	3,975	3,341,295	8,210,317	3,335,203	20,633	9,323,318	95,073	24,329,814
Travis	796	1,363,054	3,548,008	2,092,572	94,915	13,688,116	109,637	20,897,097
Total	78,891	22,005,227	62,317,161	31,684,155	690,549	133,568,215	1,424,890	251,769,089
Rate Adjustment (3)								
Bexar	0.00 %	-0.01 %	-0.01 %	-0.01 %	0.04 %	0.00 %	0.86 %	0.00 %
Dallas	0.00 %	0.00 %	0.01 %	-0.01 %	0.08 %	0.03 %	0.08 %	0.02 %
El Paso	0.00 %	-0.03 %	-0.02 %	-0.03 %	0.00 %	0.00 %	0.00 %	-0.02 %
Harris	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.34 %	0.00 %
Jefferson	0.00 %	0.00 %	-0.03 %	-0.03 %	-0.04 %	0.00 %	-0.07 %	-0.02 %
Lubbock	0.00 %	0.43 %	0.02 %	0.04 %	6.67 %	-0.06 %	0.12 %	0.06 %
Nueces	0.00 %	0.44 %	0.19 %	0.45 %	0.00 %	0.20 %	0.00 %	0.27 %
RSA	-0.02 %	0.00 %	-0.02 %	0.14 %	0.01 %	0.07 %	1.66 %	0.06 %
Tarrant	0.00 %	-0.07 %	-0.05 %	-0.03 %	-0.93 %	0.06 %	-0.24 %	-0.01 %
Travis	0.00 %	-0.01 %	-0.01 %	0.00 %	0.04 %	-0.01 %	0.03 %	-0.01 %
Total	-0.01 %	0.00 %	0.00 %	0.03 %	0.03 %	0.02 %	0.43 %	0.02 %

Footnotes

- (1) Equals the cost impact from reimbursement changes for inpatient SDA changes effective 9/1/2022 and 9/1/2023.
 (2) Equals FY2022 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Equals Cost Impact divided by FY2022 Total Incurred Claims.

FY2024 CHIP Rating
 Inpatient Hospital Reimbursement Change
 Potentially Preventable Readmission (PPR) Quality Improvement Reduction

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	0	-5,484	-4,365	0	0	0	-9,849
Dallas	0	0	-5,730	-9,978	0	-156	0	-15,864
El Paso	0	0	0	-3,969	0	0	0	-3,969
Harris	0	0	-5,844	-2,856	0	0	0	-8,700
Jefferson	0	0	-18,197	0	0	0	0	-18,197
Lubbock	0	0	0	0	0	0	0	0
Nueces	0	0	-249	-1,035	0	0	0	-1,284
RSA	0	-408	-1,396	-4,145	0	0	0	-5,949
Tarrant	0	0	-11,502	-3,597	0	-934	0	-16,033
Travis	0	-416	-1,492	-2,699	0	0	0	-4,608
Total	0	-824	-49,895	-32,644	0	-1,090	0	-84,452
FY2022 Total Claims Paid (2)								
Bexar	3,167	1,490,284	4,105,766	1,448,036	6,856	6,529,288	62,158	13,645,556
Dallas	3,609	3,315,609	11,153,531	4,760,788	56,117	22,870,843	217,762	42,378,260
El Paso	532	596,954	2,351,961	978,816	1,140	1,652,348	14,026	5,595,777
Harris	26,000	6,934,879	18,409,989	10,839,781	259,812	52,710,213	611,799	89,792,474
Jefferson	0	416,872	1,610,360	2,022,606	15,501	3,048,428	70,603	7,184,368
Lubbock	0	410,208	960,324	406,071	4,699	1,160,694	19,490	2,961,486
Nueces	0	395,442	1,541,983	704,760	212	783,109	9,409	3,434,915
RSA	40,811	3,740,629	10,424,922	5,095,523	230,664	21,801,857	214,935	41,549,341
Tarrant	3,975	3,341,295	8,210,317	3,335,203	20,633	9,323,318	95,073	24,329,814
Travis	796	1,363,054	3,548,008	2,092,572	94,915	13,688,116	109,637	20,897,097
Total	78,891	22,005,227	62,317,161	31,684,155	690,549	133,568,215	1,424,890	251,769,089
Rate Adjustment (3)								
Bexar	0.00 %	0.00 %	-0.13 %	-0.30 %	0.00 %	0.00 %	0.00 %	-0.07 %
Dallas	0.00 %	0.00 %	-0.05 %	-0.21 %	0.00 %	0.00 %	0.00 %	-0.04 %
El Paso	0.00 %	0.00 %	0.00 %	-0.41 %	0.00 %	0.00 %	0.00 %	-0.07 %
Harris	0.00 %	0.00 %	-0.03 %	-0.03 %	0.00 %	0.00 %	0.00 %	-0.01 %
Jefferson	0.00 %	0.00 %	-1.13 %	0.00 %	0.00 %	0.00 %	0.00 %	-0.25 %
Lubbock	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Nueces	0.00 %	0.00 %	-0.02 %	-0.15 %	0.00 %	0.00 %	0.00 %	-0.04 %
RSA	0.00 %	-0.01 %	-0.01 %	-0.08 %	0.00 %	0.00 %	0.00 %	-0.01 %
Tarrant	0.00 %	0.00 %	-0.14 %	-0.11 %	0.00 %	-0.01 %	0.00 %	-0.07 %
Travis	0.00 %	-0.03 %	-0.04 %	-0.13 %	0.00 %	0.00 %	0.00 %	-0.02 %
Total	0.00 %	0.00 %	-0.08 %	-0.10 %	0.00 %	0.00 %	0.00 %	-0.03 %

Footnotes

- (1) Equals the cost impact from a 10% reduction in PPR events.
 (2) Equals FY2022 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Equals Cost Impact divided by FY2022 Total Incurred Claims.

FY2024 CHIP Rating
 Inpatient Hospital Reimbursement Change
 Potentially Preventable Readmission (PPR) Adjustment

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	-47	342	-424	0	98	-37	-68
Dallas	0	0	1,000	327	-52	-85	-377	814
El Paso	0	-18	0	-160	0	0	0	-177
Harris	0	596	1,826	3,658	310	-300	310	6,401
Jefferson	0	65	0	0	44	-3	287	394
Lubbock	0	0	83	-146	0	-17	0	-80
Nueces	0	129	-132	52	0	-161	0	-112
RSA	50	710	425	-513	2,060	218	330	3,280
Tarrant	0	0	-1,414	-1,382	39	-105	11	-2,852
Travis	0	46	141	473	1,834	4,993	380	7,867
Total	50	1,481	2,272	1,886	4,236	4,638	904	15,466
FY2022 Total Claims Paid (2)								
Bexar	3,167	1,490,284	4,105,766	1,448,036	6,856	6,529,288	62,158	13,645,556
Dallas	3,609	3,315,609	11,153,531	4,760,788	56,117	22,870,843	217,762	42,378,260
El Paso	532	596,954	2,351,961	978,816	1,140	1,652,348	14,026	5,595,777
Harris	26,000	6,934,879	18,409,989	10,839,781	259,812	52,710,213	611,799	89,792,474
Jefferson	0	416,872	1,610,360	2,022,606	15,501	3,048,428	70,603	7,184,368
Lubbock	0	410,208	960,324	406,071	4,699	1,160,694	19,490	2,961,486
Nueces	0	395,442	1,541,983	704,760	212	783,109	9,409	3,434,915
RSA	40,811	3,740,629	10,424,922	5,095,523	230,664	21,801,857	214,935	41,549,341
Tarrant	3,975	3,341,295	8,210,317	3,335,203	20,633	9,323,318	95,073	24,329,814
Travis	796	1,363,054	3,548,008	2,092,572	94,915	13,688,116	109,637	20,897,097
Total	78,891	22,005,227	62,317,161	31,684,155	690,549	133,568,215	1,424,890	251,769,089
Rate Adjustment (3)								
Bexar	0.00 %	0.00 %	0.01 %	-0.03 %	0.00 %	0.00 %	-0.06 %	0.00 %
Dallas	0.00 %	0.00 %	0.01 %	0.01 %	-0.09 %	0.00 %	-0.17 %	0.00 %
El Paso	0.00 %	0.00 %	0.00 %	-0.02 %	0.00 %	0.00 %	0.00 %	0.00 %
Harris	0.00 %	0.01 %	0.01 %	0.03 %	0.12 %	0.00 %	0.05 %	0.01 %
Jefferson	0.00 %	0.02 %	0.00 %	0.00 %	0.29 %	0.00 %	0.41 %	0.01 %
Lubbock	0.00 %	0.00 %	0.01 %	-0.04 %	0.00 %	0.00 %	0.00 %	0.00 %
Nueces	0.00 %	0.03 %	-0.01 %	0.01 %	0.00 %	-0.02 %	0.00 %	0.00 %
RSA	0.12 %	0.02 %	0.00 %	-0.01 %	0.89 %	0.00 %	0.15 %	0.01 %
Tarrant	0.00 %	0.00 %	-0.02 %	-0.04 %	0.19 %	0.00 %	0.01 %	-0.01 %
Travis	0.00 %	0.00 %	0.00 %	0.02 %	1.93 %	0.04 %	0.35 %	0.04 %
Total	0.06 %	0.01 %	0.00 %	0.01 %	0.61 %	0.00 %	0.06 %	0.01 %

Footnotes

- (1) Equals the net cost/savings resulting from PPR reductions that will become effective 9/1/2023 versus those effective during FY2022.
 (2) Equals FY2022 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Equals Cost Impact divided by FY2022 Total Incurred Claims.

FY2024 CHIP Rating
 Inpatient Hospital Reimbursement Change
 Potentially Preventable Complication (PPC) Adjustment

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	1,092	5,181	1,166	43	217	-67	7,633
Dallas	0	0	-495	182	-66	198	-160	-340
El Paso	0	0	0	20	7	0	0	26
Harris	0	-8,563	-27,663	-22,765	-48	62	659	-58,318
Jefferson	0	-682	-2,603	-7,604	-90	-52	-800	-11,831
Lubbock	0	883	1,288	162	12	-8	72	2,410
Nueces	0	0	-2,266	-991	0	-24	0	-3,282
RSA	0	-3,016	4,609	-945	3,987	565	186	5,387
Tarrant	0	0	-1,814	-334	61	1,709	-6	-385
Travis	0	3,133	14,969	8,468	2,293	2,058	374	31,295
Total	0	-7,153	-8,794	-22,642	6,199	4,726	258	-27,406
FY2022 Total Claims Paid (2)								
Bexar	3,167	1,490,284	4,105,766	1,448,036	6,856	6,529,288	62,158	13,645,556
Dallas	3,609	3,315,609	11,153,531	4,760,788	56,117	22,870,843	217,762	42,378,260
El Paso	532	596,954	2,351,961	978,816	1,140	1,652,348	14,026	5,595,777
Harris	26,000	6,934,879	18,409,989	10,839,781	259,812	52,710,213	611,799	89,792,474
Jefferson	0	416,872	1,610,360	2,022,606	15,501	3,048,428	70,603	7,184,368
Lubbock	0	410,208	960,324	406,071	4,699	1,160,694	19,490	2,961,486
Nueces	0	395,442	1,541,983	704,760	212	783,109	9,409	3,434,915
RSA	40,811	3,740,629	10,424,922	5,095,523	230,664	21,801,857	214,935	41,549,341
Tarrant	3,975	3,341,295	8,210,317	3,335,203	20,633	9,323,318	95,073	24,329,814
Travis	796	1,363,054	3,548,008	2,092,572	94,915	13,688,116	109,637	20,897,097
Total	78,891	22,005,227	62,317,161	31,684,155	690,549	133,568,215	1,424,890	251,769,089
Rate Adjustment (3)								
Bexar	0.00 %	0.07 %	0.13 %	0.08 %	0.63 %	0.00 %	-0.11 %	0.06 %
Dallas	0.00 %	0.00 %	0.00 %	0.00 %	-0.12 %	0.00 %	-0.07 %	0.00 %
El Paso	0.00 %	0.00 %	0.00 %	0.00 %	0.57 %	0.00 %	0.00 %	0.00 %
Harris	0.00 %	-0.12 %	-0.15 %	-0.21 %	-0.02 %	0.00 %	0.11 %	-0.06 %
Jefferson	0.00 %	-0.16 %	-0.16 %	-0.38 %	-0.58 %	0.00 %	-1.13 %	-0.16 %
Lubbock	0.00 %	0.22 %	0.13 %	0.04 %	0.26 %	0.00 %	0.37 %	0.08 %
Nueces	0.00 %	0.00 %	-0.15 %	-0.14 %	0.00 %	0.00 %	0.00 %	-0.10 %
RSA	0.00 %	-0.08 %	0.04 %	-0.02 %	1.73 %	0.00 %	0.09 %	0.01 %
Tarrant	0.00 %	0.00 %	-0.02 %	-0.01 %	0.29 %	0.02 %	-0.01 %	0.00 %
Travis	0.00 %	0.23 %	0.42 %	0.40 %	2.42 %	0.02 %	0.34 %	0.15 %
Total	0.00 %	-0.03 %	-0.01 %	-0.07 %	0.90 %	0.00 %	0.02 %	-0.01 %

Footnotes

- (1) Equals the net cost/savings resulting from PPC reductions that will become effective 9/1/2023 versus those effective during FY2022.
 (2) Equals FY2022 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Equals Cost Impact divided by FY2022 Total Incurred Claims.

FY2024 CHIP Rating
 Provider Reimbursement Change
 Outpatient BH Reimbursement Change

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	363	13,546	6,916	0	0	0	20,824
Dallas	0	679	6,534	7,528	0	0	0	14,741
El Paso	0	45	4,976	2,299	0	0	0	7,319
Harris	0	1,123	13,328	11,417	0	22	0	25,891
Jefferson	0	362	1,315	760	0	0	0	2,437
Lubbock	0	50	1,458	2,075	0	0	0	3,583
Nueces	0	146	3,336	1,940	0	0	0	5,422
RSA	0	1,517	29,204	15,585	0	0	0	46,307
Tarrant	0	700	13,684	7,159	0	0	0	21,542
Travis	0	307	5,643	5,276	0	0	0	11,227
Total	0	5,293	93,022	60,955	0	22	0	159,293
FY2022 Total Claims Paid (2)								
Bexar	3,167	1,490,284	4,105,766	1,448,036	6,856	6,529,288	62,158	13,645,556
Dallas	3,609	3,315,609	11,153,531	4,760,788	56,117	22,870,843	217,762	42,378,260
El Paso	532	596,954	2,351,961	978,816	1,140	1,652,348	14,026	5,595,777
Harris	26,000	6,934,879	18,409,989	10,839,781	259,812	52,710,213	611,799	89,792,474
Jefferson	0	416,872	1,610,360	2,022,606	15,501	3,048,428	70,603	7,184,368
Lubbock	0	410,208	960,324	406,071	4,699	1,160,694	19,490	2,961,486
Nueces	0	395,442	1,541,983	704,760	212	783,109	9,409	3,434,915
RSA	40,811	3,740,629	10,424,922	5,095,523	230,664	21,801,857	214,935	41,549,341
Tarrant	3,975	3,341,295	8,210,317	3,335,203	20,633	9,323,318	95,073	24,329,814
Travis	796	1,363,054	3,548,008	2,092,572	94,915	13,688,116	109,637	20,897,097
Total	78,891	22,005,227	62,317,161	31,684,155	690,549	133,568,215	1,424,890	251,769,089
Rate Adjustment (3)								
Bexar	0.00 %	0.02 %	0.33 %	0.48 %	0.00 %	0.00 %	0.00 %	0.15 %
Dallas	0.00 %	0.02 %	0.06 %	0.16 %	0.00 %	0.00 %	0.00 %	0.03 %
El Paso	0.00 %	0.01 %	0.21 %	0.23 %	0.00 %	0.00 %	0.00 %	0.13 %
Harris	0.00 %	0.02 %	0.07 %	0.11 %	0.00 %	0.00 %	0.00 %	0.03 %
Jefferson	0.00 %	0.09 %	0.08 %	0.04 %	0.00 %	0.00 %	0.00 %	0.03 %
Lubbock	0.00 %	0.01 %	0.15 %	0.51 %	0.00 %	0.00 %	0.00 %	0.12 %
Nueces	0.00 %	0.04 %	0.22 %	0.28 %	0.00 %	0.00 %	0.00 %	0.16 %
RSA	0.00 %	0.04 %	0.28 %	0.31 %	0.00 %	0.00 %	0.00 %	0.11 %
Tarrant	0.00 %	0.02 %	0.17 %	0.21 %	0.00 %	0.00 %	0.00 %	0.09 %
Travis	0.00 %	0.02 %	0.16 %	0.25 %	0.00 %	0.00 %	0.00 %	0.05 %
Total	0.00 %	0.02 %	0.15 %	0.19 %	0.00 %	0.00 %	0.00 %	0.06 %

Footnotes

- (1) Equals the cost impact from reimbursement changes for outpatient behavioral health services effective 3/1/2022.
- (2) Equals FY2022 health plan fee-for-service claims for all services (ICHP provided encounter data).
- (3) Equals Cost Impact divided by FY2022 Total Incurred Claims.

FY2024 CHIP Rating
 Provider Reimbursement Change
 Vaccine Administration Reimbursement Change

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	63	2,488	12,157	5,098	55	7,342	85	27,288
Dallas	27	4,658	26,823	13,021	130	98,001	467	143,128
El Paso	51	1,593	9,508	4,445	0	2,901	6	18,504
Harris	145	12,250	53,392	25,798	239	21,119	69	113,011
Jefferson	0	399	2,861	1,506	34	2,823	22	7,645
Lubbock	0	677	2,479	807	17	1,974	9	5,962
Nueces	0	1,133	4,719	2,569	17	1,129	13	9,579
RSA	178	5,670	26,086	13,981	110	9,895	90	56,010
Tarrant	91	4,728	18,609	7,395	91	32,326	241	63,482
Travis	13	2,115	7,200	2,934	6	1,770	18	14,056
Total	567	35,712	163,835	77,553	699	179,280	1,019	458,665
FY2022 Total Claims Paid (2)								
Bexar	3,167	1,490,284	4,105,766	1,448,036	6,856	6,529,288	62,158	13,645,556
Dallas	3,609	3,315,609	11,153,531	4,760,788	56,117	22,870,843	217,762	42,378,260
El Paso	532	596,954	2,351,961	978,816	1,140	1,652,348	14,026	5,595,777
Harris	26,000	6,934,879	18,409,989	10,839,781	259,812	52,710,213	611,799	89,792,474
Jefferson	0	416,872	1,610,360	2,022,606	15,501	3,048,428	70,603	7,184,368
Lubbock	0	410,208	960,324	406,071	4,699	1,160,694	19,490	2,961,486
Nueces	0	395,442	1,541,983	704,760	212	783,109	9,409	3,434,915
RSA	40,811	3,740,629	10,424,922	5,095,523	230,664	21,801,857	214,935	41,549,341
Tarrant	3,975	3,341,295	8,210,317	3,335,203	20,633	9,323,318	95,073	24,329,814
Travis	796	1,363,054	3,548,008	2,092,572	94,915	13,688,116	109,637	20,897,097
Total	78,891	22,005,227	62,317,161	31,684,155	690,549	133,568,215	1,424,890	251,769,089
Rate Adjustment (3)								
Bexar	1.98 %	0.17 %	0.30 %	0.35 %	0.81 %	0.11 %	0.14 %	0.20 %
Dallas	0.76 %	0.14 %	0.24 %	0.27 %	0.23 %	0.43 %	0.21 %	0.34 %
El Paso	9.59 %	0.27 %	0.40 %	0.45 %	0.00 %	0.18 %	0.04 %	0.33 %
Harris	0.56 %	0.18 %	0.29 %	0.24 %	0.09 %	0.04 %	0.01 %	0.13 %
Jefferson	0.00 %	0.10 %	0.18 %	0.07 %	0.22 %	0.09 %	0.03 %	0.11 %
Lubbock	0.00 %	0.17 %	0.26 %	0.20 %	0.37 %	0.17 %	0.04 %	0.20 %
Nueces	0.00 %	0.29 %	0.31 %	0.36 %	7.86 %	0.14 %	0.13 %	0.28 %
RSA	0.44 %	0.15 %	0.25 %	0.27 %	0.05 %	0.05 %	0.04 %	0.13 %
Tarrant	2.28 %	0.14 %	0.23 %	0.22 %	0.44 %	0.35 %	0.25 %	0.26 %
Travis	1.60 %	0.16 %	0.20 %	0.14 %	0.01 %	0.01 %	0.02 %	0.07 %
Total	0.72 %	0.16 %	0.26 %	0.24 %	0.10 %	0.13 %	0.07 %	0.18 %

Footnotes

- (1) Equals the cost impact resulting from the vaccine administration reimbursement changes effective 9/1/2022.
 (2) Equals FY2022 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Equals Cost Impact divided by FY2022 Total Incurred Claims.

FY2024 CHIP Rating
 Provider Reimbursement Change
 Ground Ambulance Reimbursement Change

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	165	303	480	0	218	0	1,166
Dallas	0	208	1,376	2,929	0	493	15	5,022
El Paso	0	39	128	67	0	64	0	298
Harris	0	706	1,148	1,289	0	1,315	0	4,458
Jefferson	0	261	352	602	0	165	0	1,380
Lubbock	0	0	275	147	0	345	0	767
Nueces	0	0	612	1,277	0	16	0	1,905
RSA	32	528	1,917	4,166	0	3,071	62	9,775
Tarrant	0	522	1,029	1,466	13	208	0	3,238
Travis	0	332	212	349	0	309	0	1,202
Total	32	2,761	7,352	12,773	13	6,205	77	29,212
FY2022 Total Claims Paid (2)								
Bexar	3,167	1,490,284	4,105,766	1,448,036	6,856	6,529,288	62,158	13,645,556
Dallas	3,609	3,315,609	11,153,531	4,760,788	56,117	22,870,843	217,762	42,378,260
El Paso	532	596,954	2,351,961	978,816	1,140	1,652,348	14,026	5,595,777
Harris	26,000	6,934,879	18,409,989	10,839,781	259,812	52,710,213	611,799	89,792,474
Jefferson	0	416,872	1,610,360	2,022,606	15,501	3,048,428	70,603	7,184,368
Lubbock	0	410,208	960,324	406,071	4,699	1,160,694	19,490	2,961,486
Nueces	0	395,442	1,541,983	704,760	212	783,109	9,409	3,434,915
RSA	40,811	3,740,629	10,424,922	5,095,523	230,664	21,801,857	214,935	41,549,341
Tarrant	3,975	3,341,295	8,210,317	3,335,203	20,633	9,323,318	95,073	24,329,814
Travis	796	1,363,054	3,548,008	2,092,572	94,915	13,688,116	109,637	20,897,097
Total	78,891	22,005,227	62,317,161	31,684,155	690,549	133,568,215	1,424,890	251,769,089
Rate Adjustment (3)								
Bexar	0.00 %	0.01 %	0.01 %	0.03 %	0.00 %	0.00 %	0.00 %	0.01 %
Dallas	0.00 %	0.01 %	0.01 %	0.06 %	0.00 %	0.00 %	0.01 %	0.01 %
El Paso	0.00 %	0.01 %	0.01 %	0.01 %	0.00 %	0.00 %	0.00 %	0.01 %
Harris	0.00 %	0.01 %	0.01 %	0.01 %	0.00 %	0.00 %	0.00 %	0.00 %
Jefferson	0.00 %	0.06 %	0.02 %	0.03 %	0.00 %	0.01 %	0.00 %	0.02 %
Lubbock	0.00 %	0.00 %	0.03 %	0.04 %	0.00 %	0.03 %	0.00 %	0.03 %
Nueces	0.00 %	0.00 %	0.04 %	0.18 %	0.00 %	0.00 %	0.00 %	0.06 %
RSA	0.08 %	0.01 %	0.02 %	0.08 %	0.00 %	0.01 %	0.03 %	0.02 %
Tarrant	0.00 %	0.02 %	0.01 %	0.04 %	0.06 %	0.00 %	0.00 %	0.01 %
Travis	0.00 %	0.02 %	0.01 %	0.02 %	0.00 %	0.00 %	0.00 %	0.01 %
Total	0.04 %	0.01 %	0.01 %	0.04 %	0.00 %	0.00 %	0.01 %	0.01 %

Footnotes

- (1) Equals the cost impact from reimbursement increase for ground ambulances effective 9/1/2023.
- (2) Equals FY2022 health plan fee-for-service claims for all services (ICHP provided encounter data).
- (3) Equals Cost Impact divided by FY2022 Total Incurred Claims.

FY2024 CHIP Rating
 Provider Reimbursement Change
 PDN Reimbursement Change

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	3,101	434	0	0	0	0	3,535
Dallas	0	1,784	4,488	0	0	0	0	6,272
El Paso	0	0	0	0	0	0	0	0
Harris	0	3,816	0	0	0	0	0	3,816
Jefferson	0	0	0	0	0	0	0	0
Lubbock	0	0	178	0	0	0	0	178
Nueces	0	233	0	0	0	0	0	233
RSA	0	0	527	0	0	0	0	527
Tarrant	0	102	1,884	0	0	0	0	1,986
Travis	0	0	336	0	0	0	0	336
Total	0	9,036	7,847	0	0	0	0	16,883
FY2022 Total Claims Paid (2)								
Bexar	3,167	1,490,284	4,105,766	1,448,036	6,856	6,529,288	62,158	13,645,556
Dallas	3,609	3,315,609	11,153,531	4,760,788	56,117	22,870,843	217,762	42,378,260
El Paso	532	596,954	2,351,961	978,816	1,140	1,652,348	14,026	5,595,777
Harris	26,000	6,934,879	18,409,989	10,839,781	259,812	52,710,213	611,799	89,792,474
Jefferson	0	416,872	1,610,360	2,022,606	15,501	3,048,428	70,603	7,184,368
Lubbock	0	410,208	960,324	406,071	4,699	1,160,694	19,490	2,961,486
Nueces	0	395,442	1,541,983	704,760	212	783,109	9,409	3,434,915
RSA	40,811	3,740,629	10,424,922	5,095,523	230,664	21,801,857	214,935	41,549,341
Tarrant	3,975	3,341,295	8,210,317	3,335,203	20,633	9,323,318	95,073	24,329,814
Travis	796	1,363,054	3,548,008	2,092,572	94,915	13,688,116	109,637	20,897,097
Total	78,891	22,005,227	62,317,161	31,684,155	690,549	133,568,215	1,424,890	251,769,089
Rate Adjustment (3)								
Bexar	0.00 %	0.21 %	0.01 %	0.00 %	0.00 %	0.00 %	0.00 %	0.03 %
Dallas	0.00 %	0.05 %	0.04 %	0.00 %	0.00 %	0.00 %	0.00 %	0.01 %
El Paso	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Harris	0.00 %	0.06 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Jefferson	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Lubbock	0.00 %	0.00 %	0.02 %	0.00 %	0.00 %	0.00 %	0.00 %	0.01 %
Nueces	0.00 %	0.06 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.01 %
RSA	0.00 %	0.00 %	0.01 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Tarrant	0.00 %	0.00 %	0.02 %	0.00 %	0.00 %	0.00 %	0.00 %	0.01 %
Travis	0.00 %	0.00 %	0.01 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Total	0.00 %	0.04 %	0.01 %	0.00 %	0.00 %	0.00 %	0.00 %	0.01 %

Footnotes

- (1) Equals the cost impact from reimbursement increase for private duty nursing effective 9/1/2023.
- (2) Equals FY2022 health plan fee-for-service claims for all services (ICHP provided encounter data).
- (3) Equals Cost Impact divided by FY2022 Total Incurred Claims.

FY2024 CHIP Rating
 Provider Reimbursement Change
 Rural Outpatient Hospital Reimbursement Change

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	85	5,871	4,503	0	374	5	10,838
Dallas	0	240	1,133	613	0	1,111	0	3,097
El Paso	0	0	-2	0	0	8	0	6
Harris	0	995	3,639	1,047	0	4,076	265	10,022
Jefferson	0	682	7,527	6,058	0	1,586	176	16,028
Lubbock	0	4,305	13,304	4,626	11	25,565	233	48,043
Nueces	0	561	5,247	4,475	0	5,402	245	15,930
RSA	0	15,311	65,555	41,076	53	96,513	1,262	219,770
Tarrant	0	-132	1,419	460	0	-13	-20	1,715
Travis	0	-745	-1,273	-596	0	-1,685	39	-4,259
Total	0	21,302	102,420	62,261	63	132,938	2,205	321,189
FY2022 Total Claims Paid (2)								
Bexar	3,167	1,490,284	4,105,766	1,448,036	6,856	6,529,288	62,158	13,645,556
Dallas	3,609	3,315,609	11,153,531	4,760,788	56,117	22,870,843	217,762	42,378,260
El Paso	532	596,954	2,351,961	978,816	1,140	1,652,348	14,026	5,595,777
Harris	26,000	6,934,879	18,409,989	10,839,781	259,812	52,710,213	611,799	89,792,474
Jefferson	0	416,872	1,610,360	2,022,606	15,501	3,048,428	70,603	7,184,368
Lubbock	0	410,208	960,324	406,071	4,699	1,160,694	19,490	2,961,486
Nueces	0	395,442	1,541,983	704,760	212	783,109	9,409	3,434,915
RSA	40,811	3,740,629	10,424,922	5,095,523	230,664	21,801,857	214,935	41,549,341
Tarrant	3,975	3,341,295	8,210,317	3,335,203	20,633	9,323,318	95,073	24,329,814
Travis	796	1,363,054	3,548,008	2,092,572	94,915	13,688,116	109,637	20,897,097
Total	78,891	22,005,227	62,317,161	31,684,155	690,549	133,568,215	1,424,890	251,769,089
Rate Adjustment (3)								
Bexar	0.00 %	0.01 %	0.14 %	0.31 %	0.00 %	0.01 %	0.01 %	0.08 %
Dallas	0.00 %	0.01 %	0.01 %	0.01 %	0.00 %	0.00 %	0.00 %	0.01 %
El Paso	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Harris	0.00 %	0.01 %	0.02 %	0.01 %	0.00 %	0.01 %	0.04 %	0.01 %
Jefferson	0.00 %	0.16 %	0.47 %	0.30 %	0.00 %	0.05 %	0.25 %	0.22 %
Lubbock	0.00 %	1.05 %	1.39 %	1.14 %	0.23 %	2.20 %	1.19 %	1.62 %
Nueces	0.00 %	0.14 %	0.34 %	0.63 %	0.00 %	0.69 %	2.60 %	0.46 %
RSA	0.00 %	0.41 %	0.63 %	0.81 %	0.02 %	0.44 %	0.59 %	0.53 %
Tarrant	0.00 %	0.00 %	0.02 %	0.01 %	0.00 %	0.00 %	-0.02 %	0.01 %
Travis	0.00 %	-0.05 %	-0.04 %	-0.03 %	0.00 %	-0.01 %	0.04 %	-0.02 %
Total	0.00 %	0.10 %	0.16 %	0.20 %	0.01 %	0.10 %	0.15 %	0.13 %

Footnotes

- (1) Equals the cost impact from changes to outpatient rural hospital reimbursement effective 9/1/2023.
 (2) Equals FY2022 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Equals Cost Impact divided by FY2022 Total Incurred Claims.

FY2024 CHIP Rating
 Provider Reimbursement Change
 Birth and Women's Health Related Surgeries Reimbursement Change

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	0	30	70	0	71,100	382	71,582
Dallas	0	0	44	239	0	292,523	1,605	294,411
El Paso	0	0	0	34	0	24,022	94	24,150
Harris	0	0	163	209	0	523,683	2,909	526,964
Jefferson	0	0	0	0	0	31,258	481	31,738
Lubbock	0	0	0	34	0	14,471	134	14,640
Nueces	0	0	0	52	0	10,525	88	10,665
RSA	0	0	81	96	0	271,964	1,469	273,610
Tarrant	0	0	14	121	0	137,509	926	138,571
Travis	0	0	0	44	0	106,267	640	106,951
Total	0	0	333	900	0	1,483,322	8,727	1,493,282
FY2022 Total Claims Paid (2)								
Bexar	3,167	1,490,284	4,105,766	1,448,036	6,856	6,529,288	62,158	13,645,556
Dallas	3,609	3,315,609	11,153,531	4,760,788	56,117	22,870,843	217,762	42,378,260
El Paso	532	596,954	2,351,961	978,816	1,140	1,652,348	14,026	5,595,777
Harris	26,000	6,934,879	18,409,989	10,839,781	259,812	52,710,213	611,799	89,792,474
Jefferson	0	416,872	1,610,360	2,022,606	15,501	3,048,428	70,603	7,184,368
Lubbock	0	410,208	960,324	406,071	4,699	1,160,694	19,490	2,961,486
Nueces	0	395,442	1,541,983	704,760	212	783,109	9,409	3,434,915
RSA	40,811	3,740,629	10,424,922	5,095,523	230,664	21,801,857	214,935	41,549,341
Tarrant	3,975	3,341,295	8,210,317	3,335,203	20,633	9,323,318	95,073	24,329,814
Travis	796	1,363,054	3,548,008	2,092,572	94,915	13,688,116	109,637	20,897,097
Total	78,891	22,005,227	62,317,161	31,684,155	690,549	133,568,215	1,424,890	251,769,089
Rate Adjustment (3)								
Bexar	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	1.09 %	0.61 %	0.52 %
Dallas	0.00 %	0.00 %	0.00 %	0.01 %	0.00 %	1.28 %	0.74 %	0.69 %
El Paso	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	1.45 %	0.67 %	0.43 %
Harris	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.99 %	0.48 %	0.59 %
Jefferson	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	1.03 %	0.68 %	0.44 %
Lubbock	0.00 %	0.00 %	0.00 %	0.01 %	0.00 %	1.25 %	0.69 %	0.49 %
Nueces	0.00 %	0.00 %	0.00 %	0.01 %	0.00 %	1.34 %	0.93 %	0.31 %
RSA	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	1.25 %	0.68 %	0.66 %
Tarrant	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	1.47 %	0.97 %	0.57 %
Travis	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.78 %	0.58 %	0.51 %
Total	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	1.11 %	0.61 %	0.59 %

Footnotes

- (1) Equals the cost impact from changes to birth and women's health related surgery reimbursement effective 9/1/2023.
 (2) Equals FY2022 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Equals Cost Impact divided by FY2022 Total Incurred Claims.

FY2024 CHIP Rating
 Provider Reimbursement Change
 E&M Reimbursement Change

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	61	11,945	41,179	14,368	96	2,733	11	70,394
Dallas	68	22,875	75,239	30,043	834	11,619	79	140,757
El Paso	20	5,921	24,703	11,063	49	732	0	42,487
Harris	243	66,887	204,715	79,547	6,646	18,502	80	376,620
Jefferson	0	4,138	14,905	4,936	323	1,689	0	25,991
Lubbock	0	3,520	10,178	3,986	52	514	0	18,251
Nueces	0	3,715	13,451	5,765	10	292	0	23,234
RSA	1,017	36,069	116,824	49,307	1,027	11,988	29	216,262
Tarrant	92	18,605	62,004	22,018	366	3,645	27	106,758
Travis	14	10,033	28,212	11,068	57	1,430	23	50,836
Total	1,516	183,709	591,410	232,101	9,460	53,145	250	1,071,590
FY2022 Total Claims Paid (2)								
Bexar	3,167	1,490,284	4,105,766	1,448,036	6,856	6,529,288	62,158	13,645,556
Dallas	3,609	3,315,609	11,153,531	4,760,788	56,117	22,870,843	217,762	42,378,260
El Paso	532	596,954	2,351,961	978,816	1,140	1,652,348	14,026	5,595,777
Harris	26,000	6,934,879	18,409,989	10,839,781	259,812	52,710,213	611,799	89,792,474
Jefferson	0	416,872	1,610,360	2,022,606	15,501	3,048,428	70,603	7,184,368
Lubbock	0	410,208	960,324	406,071	4,699	1,160,694	19,490	2,961,486
Nueces	0	395,442	1,541,983	704,760	212	783,109	9,409	3,434,915
RSA	40,811	3,740,629	10,424,922	5,095,523	230,664	21,801,857	214,935	41,549,341
Tarrant	3,975	3,341,295	8,210,317	3,335,203	20,633	9,323,318	95,073	24,329,814
Travis	796	1,363,054	3,548,008	2,092,572	94,915	13,688,116	109,637	20,897,097
Total	78,891	22,005,227	62,317,161	31,684,155	690,549	133,568,215	1,424,890	251,769,089
Rate Adjustment (3)								
Bexar	1.94 %	0.80 %	1.00 %	0.99 %	1.40 %	0.04 %	0.02 %	0.52 %
Dallas	1.89 %	0.69 %	0.67 %	0.63 %	1.49 %	0.05 %	0.04 %	0.33 %
El Paso	3.76 %	0.99 %	1.05 %	1.13 %	4.32 %	0.04 %	0.00 %	0.76 %
Harris	0.93 %	0.96 %	1.11 %	0.73 %	2.56 %	0.04 %	0.01 %	0.42 %
Jefferson	0.00 %	0.99 %	0.93 %	0.24 %	2.08 %	0.06 %	0.00 %	0.36 %
Lubbock	0.00 %	0.86 %	1.06 %	0.98 %	1.10 %	0.04 %	0.00 %	0.62 %
Nueces	0.00 %	0.94 %	0.87 %	0.82 %	4.50 %	0.04 %	0.00 %	0.68 %
RSA	2.49 %	0.96 %	1.12 %	0.97 %	0.45 %	0.05 %	0.01 %	0.52 %
Tarrant	2.31 %	0.56 %	0.76 %	0.66 %	1.77 %	0.04 %	0.03 %	0.44 %
Travis	1.78 %	0.74 %	0.80 %	0.53 %	0.06 %	0.01 %	0.02 %	0.24 %
Total	1.92 %	0.83 %	0.95 %	0.73 %	1.37 %	0.04 %	0.02 %	0.43 %

Footnotes

- (1) Equals the cost impact from changes to evaluation and management reimbursement effective 9/1/2023.
- (2) Equals FY2022 health plan fee-for-service claims for all services (ICHP provided encounter data).
- (3) Equals Cost Impact divided by FY2022 Total Incurred Claims.

FY2024 CHIP Rating
 Other Reimbursement Change
 Remove Invalid Clinician Administered Drug (CAD) Encounters

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	-29	-503	-7	0	-1,343	0	-1,881
Dallas	0	-812	-1,197	-458	0	-1,693	0	-4,161
El Paso	0	0	-2	-42	0	-2,012	0	-2,056
Harris	0	-550	-678	-128	0	-11,445	-180	-12,982
Jefferson	0	-19	-302	-47	0	-2,160	-85	-2,614
Lubbock	0	0	-16	-9	0	-507	0	-532
Nueces	0	-8	-18	-15	0	-1,251	0	-1,291
RSA	0	-38	-202	-257	0	-7,404	-84	-7,985
Tarrant	0	-40	-420	-100	0	-1,369	-158	-2,087
Travis	0	-6	-84	-213	0	-1,863	0	-2,166
Total	0	-1,501	-3,422	-1,276	0	-31,048	-507	-37,755
FY2022 Total Claims Paid (2)								
Bexar	3,167	1,490,284	4,105,766	1,448,036	6,856	6,529,288	62,158	13,645,556
Dallas	3,609	3,315,609	11,153,531	4,760,788	56,117	22,870,843	217,762	42,378,260
El Paso	532	596,954	2,351,961	978,816	1,140	1,652,348	14,026	5,595,777
Harris	26,000	6,934,879	18,409,989	10,839,781	259,812	52,710,213	611,799	89,792,474
Jefferson	0	416,872	1,610,360	2,022,606	15,501	3,048,428	70,603	7,184,368
Lubbock	0	410,208	960,324	406,071	4,699	1,160,694	19,490	2,961,486
Nueces	0	395,442	1,541,983	704,760	212	783,109	9,409	3,434,915
RSA	40,811	3,740,629	10,424,922	5,095,523	230,664	21,801,857	214,935	41,549,341
Tarrant	3,975	3,341,295	8,210,317	3,335,203	20,633	9,323,318	95,073	24,329,814
Travis	796	1,363,054	3,548,008	2,092,572	94,915	13,688,116	109,637	20,897,097
Total	78,891	22,005,227	62,317,161	31,684,155	690,549	133,568,215	1,424,890	251,769,089
Rate Adjustment (3)								
Bexar	0.00 %	0.00 %	-0.01 %	0.00 %	0.00 %	-0.02 %	0.00 %	-0.01 %
Dallas	0.00 %	-0.02 %	-0.01 %	-0.01 %	0.00 %	-0.01 %	0.00 %	-0.01 %
El Paso	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-0.12 %	0.00 %	-0.04 %
Harris	0.00 %	-0.01 %	0.00 %	0.00 %	0.00 %	-0.02 %	-0.03 %	-0.01 %
Jefferson	0.00 %	0.00 %	-0.02 %	0.00 %	0.00 %	-0.07 %	-0.12 %	-0.04 %
Lubbock	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-0.04 %	0.00 %	-0.02 %
Nueces	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-0.16 %	0.00 %	-0.04 %
RSA	0.00 %	0.00 %	0.00 %	-0.01 %	0.00 %	-0.03 %	-0.04 %	-0.02 %
Tarrant	0.00 %	0.00 %	-0.01 %	0.00 %	0.00 %	-0.01 %	-0.17 %	-0.01 %
Travis	0.00 %	0.00 %	0.00 %	-0.01 %	0.00 %	-0.01 %	0.00 %	-0.01 %
Total	0.00 %	-0.01 %	-0.01 %	0.00 %	0.00 %	-0.02 %	-0.04 %	-0.01 %

Footnotes

- (1) Equals the cost impact from removing invalid CAD encounters.
 (2) Equals FY2022 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Equals Cost Impact divided by FY2022 Total Incurred Claims.

FY2024 CHIP Rating
 Other Reimbursement Change
 Remove Mental Health CHIP Copayment

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	1,100	32,198	23,368	0	0	0	56,666
Dallas	0	1,565	28,900	25,705	0	0	0	56,170
El Paso	0	1,170	13,690	9,975	0	0	0	24,835
Harris	0	5,270	57,305	56,370	0	0	0	118,945
Jefferson	0	595	5,835	4,140	0	0	0	10,570
Lubbock	0	20	3,790	4,460	0	0	0	8,270
Nueces	0	295	10,720	5,015	0	0	0	16,030
RSA	0	4,610	74,695	39,257	0	0	0	118,562
Tarrant	0	1,370	41,075	33,205	0	0	0	75,650
Travis	0	900	18,265	15,470	0	0	0	34,635
Total	0	16,895	286,473	216,965	0	0	0	520,333
FY2022 Total Claims Paid (2)								
Bexar	3,167	1,490,284	4,105,766	1,448,036	6,856	6,529,288	62,158	13,645,556
Dallas	3,609	3,315,609	11,153,531	4,760,788	56,117	22,870,843	217,762	42,378,260
El Paso	532	596,954	2,351,961	978,816	1,140	1,652,348	14,026	5,595,777
Harris	26,000	6,934,879	18,409,989	10,839,781	259,812	52,710,213	611,799	89,792,474
Jefferson	0	416,872	1,610,360	2,022,606	15,501	3,048,428	70,603	7,184,368
Lubbock	0	410,208	960,324	406,071	4,699	1,160,694	19,490	2,961,486
Nueces	0	395,442	1,541,983	704,760	212	783,109	9,409	3,434,915
RSA	40,811	3,740,629	10,424,922	5,095,523	230,664	21,801,857	214,935	41,549,341
Tarrant	3,975	3,341,295	8,210,317	3,335,203	20,633	9,323,318	95,073	24,329,814
Travis	796	1,363,054	3,548,008	2,092,572	94,915	13,688,116	109,637	20,897,097
Total	78,891	22,005,227	62,317,161	31,684,155	690,549	133,568,215	1,424,890	251,769,089
Rate Adjustment (3)								
Bexar	0.00 %	0.07 %	0.78 %	1.61 %	0.00 %	0.00 %	0.00 %	0.42 %
Dallas	0.00 %	0.05 %	0.26 %	0.54 %	0.00 %	0.00 %	0.00 %	0.13 %
El Paso	0.00 %	0.20 %	0.58 %	1.02 %	0.00 %	0.00 %	0.00 %	0.44 %
Harris	0.00 %	0.08 %	0.31 %	0.52 %	0.00 %	0.00 %	0.00 %	0.13 %
Jefferson	0.00 %	0.14 %	0.36 %	0.20 %	0.00 %	0.00 %	0.00 %	0.15 %
Lubbock	0.00 %	0.00 %	0.39 %	1.10 %	0.00 %	0.00 %	0.00 %	0.28 %
Nueces	0.00 %	0.07 %	0.70 %	0.71 %	0.00 %	0.00 %	0.00 %	0.47 %
RSA	0.00 %	0.12 %	0.72 %	0.77 %	0.00 %	0.00 %	0.00 %	0.29 %
Tarrant	0.00 %	0.04 %	0.50 %	1.00 %	0.00 %	0.00 %	0.00 %	0.31 %
Travis	0.00 %	0.07 %	0.51 %	0.74 %	0.00 %	0.00 %	0.00 %	0.17 %
Total	0.00 %	0.08 %	0.46 %	0.68 %	0.00 %	0.00 %	0.00 %	0.21 %

Footnotes:

- (1) Equals the cost impact from removing member copay for MH services effective July 1, 2022.
 (2) Equals FY2022 health plan fee-for-service claims for all services (ICHP provided encounter data).
 (3) Equals Cost Impact divided by FY2022 Total Incurred Claims.

FY2024 CHIP Rating
 Other Adjustments
 FQHC Wrap Payment Carve Out

	Age <1	Age 1-5	Age 6-14	Age 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
FQHC Wrap Payment Carve Out (1)								
Bexar	0	-82,137	-295,787	-106,763	-1,068	-875,025	-6,758	-1,367,539
Dallas	-982	-30,318	-81,305	-39,426	-5,014	-823,637	-20,277	-1,000,959
El Paso	0	-2,820	-26,252	-12,836	0	-10,687	0	-52,595
Harris	-1,693	-336,244	-1,196,653	-494,568	-10,802	-5,161,098	-25,062	-7,226,120
Jefferson	0	-19,258	-64,495	-23,433	0	-137,371	-3,440	-247,997
Lubbock	0	-10,375	-39,653	-19,421	0	-131,954	0	-201,404
Nueces	0	-4,591	-30,703	-13,690	0	-8,791	0	-57,775
RSA	-938	-205,700	-681,985	-325,083	-3,556	-2,763,212	-15,910	-3,996,384
Tarrant	0	-5,290	-22,111	-9,373	0	-600,531	-2,601	-639,906
Travis	-189	-178,999	-521,977	-188,986	-1,733	-5,359,178	-25,281	-6,276,344
Total	-3,801	-875,732	-2,960,923	-1,233,578	-22,174	-15,871,485	-99,330	-21,067,023
FY2022 Total Claims Paid (2)								
Bexar	3,167	1,490,284	4,105,766	1,448,036	6,856	6,529,288	62,158	13,645,556
Dallas	3,609	3,315,609	11,153,531	4,760,788	56,117	22,870,843	217,762	42,378,260
El Paso	532	596,954	2,351,961	978,816	1,140	1,652,348	14,026	5,595,777
Harris	26,000	6,934,879	18,409,989	10,839,781	259,812	52,710,213	611,799	89,792,474
Jefferson	0	416,872	1,610,360	2,022,606	15,501	3,048,428	70,603	7,184,368
Lubbock	0	410,208	960,324	406,071	4,699	1,160,694	19,490	2,961,486
Nueces	0	395,442	1,541,983	704,760	212	783,109	9,409	3,434,915
RSA	40,811	3,740,629	10,424,922	5,095,523	230,664	21,801,857	214,935	41,549,341
Tarrant	3,975	3,341,295	8,210,317	3,335,203	20,633	9,323,318	95,073	24,329,814
Travis	796	1,363,054	3,548,008	2,092,572	94,915	13,688,116	109,637	20,897,097
Total	78,891	22,005,227	62,317,161	31,684,155	690,549	133,568,215	1,424,890	251,769,089
Rate Adjustment (3)								
Bexar	0.00 %	-5.51 %	-7.20 %	-7.37 %	-15.58 %	-13.40 %	-10.87 %	-10.02 %
Dallas	-27.21 %	-0.91 %	-0.73 %	-0.83 %	-8.94 %	-3.60 %	-9.31 %	-2.36 %
El Paso	0.00 %	-0.47 %	-1.12 %	-1.31 %	0.00 %	-0.65 %	0.00 %	-0.94 %
Harris	-6.51 %	-4.85 %	-6.50 %	-4.56 %	-4.16 %	-9.79 %	-4.10 %	-8.05 %
Jefferson	0.00 %	-4.62 %	-4.01 %	-1.16 %	0.00 %	-4.51 %	-4.87 %	-3.45 %
Lubbock	0.00 %	-2.53 %	-4.13 %	-4.78 %	0.00 %	-11.37 %	0.00 %	-6.80 %
Nueces	0.00 %	-1.16 %	-1.99 %	-1.94 %	0.00 %	-1.12 %	0.00 %	-1.68 %
RSA	-2.30 %	-5.50 %	-6.54 %	-6.38 %	-1.54 %	-12.67 %	-7.40 %	-9.62 %
Tarrant	0.00 %	-0.16 %	-0.27 %	-0.28 %	0.00 %	-6.44 %	-2.74 %	-2.63 %
Travis	-23.70 %	-13.13 %	-14.71 %	-9.03 %	-1.83 %	-39.15 %	-23.06 %	-30.03 %
Total	-4.82 %	-3.98 %	-4.75 %	-3.89 %	-3.21 %	-11.88 %	-6.97 %	-8.37 %

Footnotes

- (1) Equals the cost impact from removing FQHC wrap payments from the capitation rate effective 9/1/2017.
- (2) Equals FY2022 health plan fee-for-service claims for all services (ICHP provided encounter data).
- (3) Equals Cost Impact divided by FY2022 Total Incurred Claims.

FY2024 CHIP Rating
 Summary of All Reimbursement Adjustments

	<u>< 1</u>	<u>1-5</u>	<u>6-14</u>	<u>15-18</u>	<u>Newborn 198%-202%</u>	<u>Perinate <198%</u>	<u>Perinate 198%-202%</u>
Medical - Inpatient Reimbursement Change Factor (1)							
Bexar	1.0000	1.0006	1.0000	0.9974	1.0067	1.0000	1.0069
Dallas	1.0000	1.0000	0.9997	0.9979	0.9980	1.0002	0.9994
El Paso	1.0000	0.9997	0.9998	0.9954	1.0057	1.0000	1.0000
Harris	1.0000	0.9989	0.9983	0.9979	1.0010	1.0000	1.0050
Jefferson	1.0000	0.9986	0.9868	0.9959	0.9967	1.0000	0.9921
Lubbock	1.0000	1.0065	1.0016	1.0004	1.0695	0.9994	1.0049
Nueces	1.0000	1.0047	0.9940	0.9965	1.0000	1.0018	1.0000
RSA	1.0010	0.9993	1.0001	1.0003	1.0265	1.0007	1.0190
Tarrant	1.0000	0.9993	0.9977	0.9981	0.9955	1.0007	0.9976
Travis	1.0000	1.0019	1.0037	1.0029	1.0444	1.0005	1.0072
Medical - Provider Reimbursement Change Factor (1)							
Bexar	1.0396	1.0122	1.0180	1.0218	1.0222	1.0125	1.0078
Dallas	1.0266	1.0092	1.0103	1.0114	1.0172	1.0177	1.0100
El Paso	1.1371	1.0128	1.0168	1.0183	1.0432	1.0167	1.0071
Harris	1.0150	1.0124	1.0150	1.0110	1.0265	1.0108	1.0054
Jefferson	1.0000	1.0140	1.0169	1.0068	1.0230	1.0124	1.0096
Lubbock	1.0000	1.0210	1.0294	1.0291	1.0171	1.0373	1.0193
Nueces	1.0000	1.0148	1.0179	1.0230	1.1271	1.0222	1.0369
RSA	1.0302	1.0158	1.0233	1.0246	1.0052	1.0181	1.0136
Tarrant	1.0464	1.0074	1.0121	1.0114	1.0228	1.0187	1.0123
Travis	1.0341	1.0089	1.0114	1.0091	1.0007	1.0079	1.0066
Medical - Other Reimbursement Change Factor (2)							
Bexar	1.0000	1.0007	1.0077	1.0161	1.0000	0.9998	1.0000
Dallas	1.0000	1.0003	1.0025	1.0053	1.0000	0.9999	1.0000
El Paso	1.0000	1.0020	1.0058	1.0102	1.0000	0.9988	1.0000
Harris	1.0000	1.0007	1.0031	1.0052	1.0000	0.9998	0.9997
Jefferson	1.0000	1.0014	1.0034	1.0020	1.0000	0.9993	0.9988
Lubbock	1.0000	1.0000	1.0039	1.0110	1.0000	0.9996	1.0000
Nueces	1.0000	1.0007	1.0070	1.0071	1.0000	0.9984	1.0000
RSA	1.0000	1.0012	1.0072	1.0076	1.0000	0.9997	0.9996
Tarrant	1.0000	1.0004	1.0049	1.0100	1.0000	0.9999	0.9983
Travis	1.0000	1.0007	1.0051	1.0073	1.0000	0.9999	1.0000
Medical - Other Adjustments (4)							
Bexar	1.0000	0.9449	0.9280	0.9263	0.8442	0.8660	0.8913
Dallas	0.7279	0.9909	0.9927	0.9917	0.9106	0.9640	0.9069
El Paso	1.0000	0.9953	0.9888	0.9869	1.0000	0.9935	1.0000
Harris	0.9349	0.9515	0.9350	0.9544	0.9584	0.9021	0.9590
Jefferson	1.0000	0.9538	0.9599	0.9884	1.0000	0.9549	0.9513
Lubbock	1.0000	0.9747	0.9587	0.9522	1.0000	0.8863	1.0000
Nueces	1.0000	0.9884	0.9801	0.9806	1.0000	0.9888	1.0000
RSA	0.9770	0.9450	0.9346	0.9362	0.9846	0.8733	0.9260
Tarrant	1.0000	0.9984	0.9973	0.9972	1.0000	0.9356	0.9726
Travis	0.7630	0.8687	0.8529	0.9097	0.9817	0.6085	0.7694

<u>< 1</u>	<u>1-5</u>	<u>6-14</u>	<u>15-18</u>	<u>Newborn 198%-202%</u>	<u>Perinate <198%</u>	<u>Perinate 198%-202%</u>
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Footnotes:

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

- (2) The Provider Reimbursement Change Factor consolidates the following adjustments
 - Exhibit F - Outpatient BH Reimbursement Change
 - Exhibit G - Vaccine Administration Reimbursement Change
 - Exhibit H - Ground Ambulance Reimbursement Change
 - Exhibit I - PDN Reimbursement Change
 - Exhibit J - Rural Outpatient Hospital Reimbursement Change
 - Exhibit K - Birth and Women's Health Related Surgeries Reimbursement Change
 - Exhibit L - E&M Reimbursement Change

- (3) The Other Reimbursement Change Factor consolidates the following adjustments
 - Exhibit M - Remove Invalid Clinician Administered Drug (CAD) Encounters
 - Exhibit N - Remove Mental Health CHIP Copayment

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

FY2024 CHIP Rating
 Pharmacy Rating Adjustment
 Insulin Reimbursement Change Adjustment

	< 1	1-5	6-14	15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%	Total
Impact of Adjustment (1)								
Bexar	0	-38	-18,185	-13,192	0	-57,166	-1,270	-89,850
Dallas	0	0	-58,109	-48,027	0	-111,476	-3,675	-221,287
El Paso	0	0	-8,478	-4,721	0	-14,230	0	-27,430
Harris	0	-7,210	-59,367	-91,671	0	-252,851	-931	-412,030
Jefferson	0	0	-15,738	-9,891	0	-20,389	0	-46,019
Lubbock	0	0	-10,765	-5,600	0	-866	-863	-18,093
Nueces	0	0	-3,344	-12,419	0	-4,435	0	-20,198
RSA	0	-5,191	-82,280	-83,606	0	-173,231	-525	-344,834
Tarrant	0	-684	-58,058	-52,410	0	-83,731	-964	-195,847
Travis	0	0	-33,565	-19,628	0	-65,117	0	-118,311
Total	0	-13,122	-347,890	-341,165	0	-783,493	-8,227	-1,493,898
FY2022 Total Incurred Claims (2)								
Bexar	673	79,565	2,096,994	714,919	0	774,467	4,738	3,671,355
Dallas	2,266	382,915	3,415,762	2,208,311	21	1,443,027	26,728	7,479,030
El Paso	0	29,627	504,480	155,197	0	229,508	1,984	920,797
Harris	1,171	551,393	4,346,242	3,513,542	53	6,362,882	31,506	14,806,789
Jefferson	0	30,962	926,476	178,814	0	350,673	5,229	1,492,154
Lubbock	0	22,717	377,886	520,642	0	115,380	2,595	1,039,219
Nueces	0	29,499	580,962	326,999	3	154,136	92	1,091,691
RSA	836	285,500	4,928,475	2,468,860	172	3,079,537	17,111	10,780,490
Tarrant	562	511,780	1,988,256	1,014,912	97	1,758,831	14,833	5,289,270
Travis	0	64,115	1,620,028	795,700	37	443,731	18,702	2,942,313
Total	5,508	1,988,072	20,785,561	11,897,896	382	14,712,170	123,518	49,513,108
Rate Adjustment (3)								
Bexar	0.00 %	-0.05 %	-0.87 %	-1.85 %	0.00 %	-7.38 %	-26.80 %	-2.45 %
Dallas	0.00 %	0.00 %	-1.70 %	-2.17 %	0.00 %	-7.73 %	-13.75 %	-2.96 %
El Paso	0.00 %	0.00 %	-1.68 %	-3.04 %	0.00 %	-6.20 %	0.00 %	-2.98 %
Harris	0.00 %	-1.31 %	-1.37 %	-2.61 %	0.00 %	-3.97 %	-2.95 %	-2.78 %
Jefferson	0.00 %	0.00 %	-1.70 %	-5.53 %	0.00 %	-5.81 %	0.00 %	-3.08 %
Lubbock	0.00 %	0.00 %	-2.85 %	-1.08 %	0.00 %	-0.75 %	-33.24 %	-1.74 %
Nueces	0.00 %	0.00 %	-0.58 %	-3.80 %	0.00 %	-2.88 %	0.00 %	-1.85 %
RSA	0.00 %	-1.82 %	-1.67 %	-3.39 %	0.00 %	-5.63 %	-3.07 %	-3.20 %
Tarrant	0.00 %	-0.13 %	-2.92 %	-5.16 %	0.00 %	-4.76 %	-6.50 %	-3.70 %
Travis	0.00 %	0.00 %	-2.07 %	-2.47 %	0.00 %	-14.67 %	0.00 %	-4.02 %
Total	0.00 %	-0.66 %	-1.67 %	-2.87 %	0.00 %	-5.33 %	-6.66 %	-3.02 %

Footnotes:

- (1) Equals the cost impact from price reduction for insulins.
 (2) Equals FY2022 managed care pharmacy incurred claims.
 (3) Equals cost impact divided by FY2022 pharmacy incurred claims.

FY2024 CHIP Rating
 Pharmacy Rating Adjustment
 Makena Non-Formulary Adjustment

	<u>< 1</u>	<u>1-5</u>	<u>6-14</u>	<u>15-18</u>	<u>Newborn 198%-202%</u>	<u>Perinate <198%</u>	<u>Perinate 198%-202%</u>	<u>Total</u>
Impact of Adjustment (1)								
Bexar	0	0	0	0	0	-288,433	0	-288,433
Dallas	0	0	0	0	0	-290,112	0	-290,112
El Paso	0	0	0	0	0	-53,155	0	-53,155
Harris	0	0	0	0	0	-1,554,877	0	-1,554,877
Jefferson	0	0	0	0	0	-87,312	-2,137	-89,449
Lubbock	0	0	0	0	0	-7,982	0	-7,982
Nueces	0	0	0	0	0	-81,076	0	-81,076
RSA	0	0	0	0	0	-1,010,722	0	-1,010,722
Tarrant	0	0	0	0	0	-734,512	0	-734,512
Travis	0	0	0	0	0	-49,945	0	-49,945
Total	0	0	0	0	0	-4,158,126	-2,137	-4,160,263
FY2022 Total Incurred Claims (2)								
Bexar	673	79,565	2,096,994	714,919	0	774,467	4,738	3,671,355
Dallas	2,266	382,915	3,415,762	2,208,311	21	1,443,027	26,728	7,479,030
El Paso	0	29,627	504,480	155,197	0	229,508	1,984	920,797
Harris	1,171	551,393	4,346,242	3,513,542	53	6,362,882	31,506	14,806,789
Jefferson	0	30,962	926,476	178,814	0	350,673	5,229	1,492,154
Lubbock	0	22,717	377,886	520,642	0	115,380	2,595	1,039,219
Nueces	0	29,499	580,962	326,999	3	154,136	92	1,091,691
RSA	836	285,500	4,928,475	2,468,860	172	3,079,537	17,111	10,780,490
Tarrant	562	511,780	1,988,256	1,014,912	97	1,758,831	14,833	5,289,270
Travis	0	64,115	1,620,028	795,700	37	443,731	18,702	2,942,313
Total	5,508	1,988,072	20,785,561	11,897,896	382	14,712,170	123,518	49,513,108
Rate Adjustment (3)								
Bexar	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-37.24 %	0.00 %	-7.86 %
Dallas	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-20.10 %	0.00 %	-3.88 %
El Paso	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-23.16 %	0.00 %	-5.77 %
Harris	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-24.44 %	0.00 %	-10.50 %
Jefferson	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-24.90 %	-40.87 %	-5.99 %
Lubbock	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-6.92 %	0.00 %	-0.77 %
Nueces	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-52.60 %	0.00 %	-7.43 %
RSA	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-32.82 %	0.00 %	-9.38 %
Tarrant	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-41.76 %	0.00 %	-13.89 %
Travis	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-11.26 %	0.00 %	-1.70 %
Total	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	-28.26 %	-1.73 %	-8.40 %

Footnotes:

(1) Equals the cost impact from removing Makena from the formulary effective April 7, 2023.

(2) Equals FY2022 managed care pharmacy incurred claims.

(3) Equals cost impact divided by FY2022 pharmacy incurred claims.

Attachment 6

Acuity Risk Adjustment

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

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

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

The risk adjustment factors determined by ICHP for the Under Age 1, Newborn 198%-202% and Perinate 198%-202% risk groups were not applied in developing the FY2024 premium rates due to the small size and the resulting variation in acuity scores.

TEXAS CHIP						
SDA/Health Plan	Number of Enrollees	Percent Affected	Actual PMPM Expenditures Based on Paid Amounts	Predicted PMPM Payment	Case Mix	Spend Ratio
CDPS						
Age 1-5	14,178	100.00	156.29	156.29	1.00	1.00
Bexar	1,117	100.00	134.46	139.83	1.00	0.96
Aetna - Bexar	201	17.99	71.68	103.88	0.74	0.69
Amerigroup - Bexar	40	3.58	106.03	84.81	0.61	1.25
CFHP - Bexar	501	44.85	145.00	135.19	0.97	1.07
Superior - Bexar	375	33.57	156.57	171.96	1.23	0.91
Dallas	2,234	100.00	165.71	169.40	1.00	0.98
Amerigroup - Dallas	1,158	51.84	150.05	142.98	0.84	1.05
Molina - Dallas	238	10.65	77.89	63.10	0.37	1.23
Parkland - Dallas	838	37.51	211.73	235.69	1.39	0.90
El Paso	463	100.00	124.64	167.08	1.00	0.75
El Paso Health - El Paso	315	68.03	146.15	146.12	0.87	1.00
Superior - El Paso	148	31.97	78.29	212.25	1.27	0.37
Harris	3,676	100.00	172.50	141.90	1.00	1.22
Amerigroup - Harris	198	5.39	88.54	91.25	0.64	0.97
CHC - Harris	880	23.94	187.30	126.71	0.89	1.48
Molina - Harris	42	1.14	39.00	86.01	0.61	0.45
TCHP - Harris	2,201	59.87	180.01	146.67	1.03	1.23
United - Harris	355	9.66	147.60	183.25	1.29	0.81
Jefferson	278	100.00	142.14	126.04	1.00	1.13
Amerigroup - Jefferson	13	4.68	45.31	145.31	1.15	0.31
CHC - Jefferson	57	20.50	152.06	155.21	1.23	0.98
Molina - Jefferson	8	2.88	21.93	41.00	0.33	0.53
TCHP - Jefferson	138	49.64	140.39	121.38	0.96	1.16
United - Jefferson	62	22.30	170.30	115.74	0.92	1.47
Lubbock	297	100.00	136.26	203.55	1.00	0.67
Firstcare - Lubbock	147	49.49	117.09	163.32	0.80	0.72
Superior - Lubbock	150	50.51	155.57	244.08	1.20	0.64
Nueces	268	100.00	126.51	94.79	1.00	1.33
Driscoll - Nueces	217	80.97	134.22	94.58	1.00	1.42
Superior - Nueces	38	14.18	111.66	78.59	0.83	1.42
United - Nueces	13	4.85	44.70	145.91	1.54	0.31
RSA	3,115	100.00	119.07	163.84	1.00	0.73
Molina - RSA	696	22.34	76.27	98.77	0.60	0.77
Superior - RSA	2,419	77.66	131.68	183.01	1.12	0.72
Tarrant	1,743	100.00	228.24	176.40	1.00	1.29
Aetna - Tarrant	396	22.72	155.68	162.44	0.92	0.96
Amerigroup - Tarrant	537	30.81	158.03	156.52	0.89	1.01
Cook - Tarrant	810	46.47	307.76	195.87	1.11	1.57
Travis	987	100.00	128.06	146.07	1.00	0.88
BCBS - Travis	275	27.86	139.28	111.33	0.76	1.25
DCHP - Travis	385	39.01	124.06	191.01	1.31	0.65
Superior - Travis	327	33.13	123.43	123.22	0.84	1.00

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

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

TEXAS CHIP						
SDA/Health Plan	Number of Enrollees	Percent Affected	Actual PMPM Expenditures Based on Paid Amounts	Predicted PMPM Payment	Case Mix	Spend Ratio
CDPS						
Age 6-14	69,254	100.00	120.86	120.86	1.00	1.00
Bexar	5,417	100.00	111.10	126.97	1.00	0.88
Aetna - Bexar	764	14.10	68.07	88.50	0.70	0.77
Amerigroup - Bexar	167	3.08	205.72	114.40	0.90	1.80
CFHP - Bexar	2,861	52.82	99.26	120.59	0.95	0.82
Superior - Bexar	1,625	30.00	143.74	158.49	1.25	0.91
Dallas	11,300	100.00	131.88	124.70	1.00	1.06
Amerigroup - Dallas	6,402	56.65	106.16	111.66	0.90	0.95
Molina - Dallas	897	7.94	92.37	99.77	0.80	0.93
Parkland - Dallas	4,001	35.41	180.98	150.60	1.21	1.20
El Paso	2,510	100.00	90.44	117.87	1.00	0.77
El Paso Health - El Paso	1,747	69.60	81.62	112.77	0.96	0.72
Superior - El Paso	763	30.40	111.38	129.94	1.10	0.86
Harris	17,702	100.00	129.60	115.21	1.00	1.12
Amerigroup - Harris	1,045	5.90	102.73	120.91	1.05	0.85
CHC - Harris	4,288	24.22	174.90	109.01	0.95	1.60
Molina - Harris	211	1.19	32.90	54.25	0.47	0.61
TCHP - Harris	10,748	60.72	122.90	122.38	1.06	1.00
United - Harris	1,410	7.97	74.72	82.81	0.72	0.90
Jefferson	1,489	100.00	185.74	136.34	1.00	1.36
Amerigroup - Jefferson	50	3.36	49.58	83.58	0.61	0.59
CHC - Jefferson	337	22.63	266.31	141.23	1.04	1.89
Molina - Jefferson	50	3.36	49.80	50.67	0.37	0.98
TCHP - Jefferson	747	50.17	193.62	167.07	1.23	1.16
United - Jefferson	305	20.48	120.77	76.87	0.56	1.57
Lubbock	1,543	100.00	90.35	113.59	1.00	0.80
Firstcare - Lubbock	762	49.38	92.03	105.77	0.93	0.87
Superior - Lubbock	781	50.62	88.70	121.21	1.07	0.73
Nueces	1,483	100.00	146.50	141.63	1.00	1.03
Driscoll - Nueces	1,182	79.70	148.95	142.21	1.00	1.05
Superior - Nueces	238	16.05	152.61	158.74	1.12	0.96
United - Nueces	63	4.25	75.67	62.53	0.44	1.21
RSA	14,948	100.00	102.38	118.03	1.00	0.87
Molina - RSA	3,472	23.23	101.74	120.51	1.02	0.84
Superior - RSA	11,476	76.77	102.58	117.27	0.99	0.87
Tarrant	8,193	100.00	129.79	127.70	1.00	1.02
Aetna - Tarrant	1,602	19.55	133.21	134.81	1.06	0.99
Amerigroup - Tarrant	2,855	34.85	122.10	114.61	0.90	1.07
Cook - Tarrant	3,736	45.60	134.21	134.67	1.05	1.00
Travis	4,669	100.00	114.15	115.51	1.00	0.99
BCBS - Travis	1,195	25.59	101.85	90.85	0.79	1.12
DCHP - Travis	1,693	36.26	107.14	130.20	1.13	0.82
Superior - Travis	1,781	38.15	129.04	117.61	1.02	1.10

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

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

TEXAS CHIP						
SDA/Health Plan	Number of Enrollees	Percent Affected	Actual PMPM Expenditures Based on Paid Amounts	Predicted PMPM Payment	Case Mix	Spend Ratio
CDPS						
Age 15-18	33,879	100.00	156.65	156.65	1.00	1.00
Bexar	2,615	100.00	107.52	130.80	1.00	0.82
Aetna - Bexar	274	10.48	142.90	114.17	0.87	1.25
Amerigroup - Bexar	71	2.72	75.50	145.76	1.11	0.52
CFHP - Bexar	1,524	58.28	100.49	138.32	1.06	0.73
Superior - Bexar	746	28.53	112.53	119.49	0.91	0.94
Dallas	5,563	100.00	162.70	150.42	1.00	1.08
Amerigroup - Dallas	3,160	56.80	176.30	152.61	1.01	1.16
Molina - Dallas	457	8.21	87.08	83.60	0.56	1.04
Parkland - Dallas	1,946	34.98	157.74	161.79	1.08	0.97
El Paso	1,378	100.00	138.34	152.98	1.00	0.90
El Paso Health - El Paso	960	69.67	95.37	154.92	1.01	0.62
Superior - El Paso	418	30.33	243.73	148.23	0.97	1.64
Harris	8,737	100.00	192.83	155.72	1.00	1.24
Amerigroup - Harris	601	6.88	123.62	125.59	0.81	0.98
CHC - Harris	2,050	23.46	215.54	134.47	0.86	1.60
Molina - Harris	155	1.77	49.40	68.15	0.44	0.72
TCHP - Harris	5,166	59.13	204.75	173.46	1.11	1.18
United - Harris	765	8.76	128.28	129.09	0.83	0.99
Jefferson	706	100.00	362.76	173.14	1.00	2.10
Amerigroup - Jefferson	35	4.96	5546.23	1223.85	7.07	4.53
CHC - Jefferson	147	20.82	88.35	102.94	0.59	0.86
Molina - Jefferson	31	4.39	29.36	68.62	0.40	0.43
TCHP - Jefferson	335	47.45	133.26	136.49	0.79	0.98
United - Jefferson	158	22.38	121.47	123.73	0.71	0.98
Lubbock	751	100.00	145.17	179.53	1.00	0.81
Firstcare - Lubbock	344	45.81	234.90	251.25	1.40	0.93
Superior - Lubbock	407	54.19	69.67	119.19	0.66	0.58
Nueces	756	100.00	166.44	152.72	1.00	1.09
Driscoll - Nueces	608	80.42	174.48	161.37	1.06	1.08
Superior - Nueces	118	15.61	158.68	129.10	0.85	1.23
United - Nueces	30	3.97	21.56	59.23	0.39	0.36
RSA	7,629	100.00	118.36	168.18	1.00	0.70
Molina - RSA	1,921	25.18	126.40	142.78	0.85	0.89
Superior - RSA	5,708	74.82	115.59	176.92	1.05	0.65
Tarrant	3,672	100.00	138.67	136.58	1.00	1.02
Aetna - Tarrant	620	16.88	140.76	118.29	0.87	1.19
Amerigroup - Tarrant	1,363	37.12	131.84	131.52	0.96	1.00
Cook - Tarrant	1,689	46.00	143.42	147.10	1.08	0.98
Travis	2,072	100.00	166.52	192.01	1.00	0.87
BCBS - Travis	466	22.49	112.37	152.37	0.79	0.74
DCHP - Travis	773	37.31	150.51	159.20	0.83	0.95
Superior - Travis	833	40.20	211.45	244.60	1.27	0.86

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

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

TEXAS CHIP						
SDA/Health Plan	Number of Enrollees	Percent Affected	Actual PMPM Expenditures Based on Paid Amounts	Predicted PMPM Payment	Case Mix	Spend Ratio
CDPS						
Perinatal <= 198% FPL	44,246	100.00	431.84	431.84	1.00	1.00
Bexar	2,286	100.00	413.52	436.17	1.00	0.95
Aetna - Bexar	253	11.07	341.02	402.78	0.92	0.85
Amerigroup - Bexar	329	14.39	358.95	449.70	1.03	0.80
CFHP - Bexar	816	35.70	446.08	433.69	0.99	1.03
Superior - Bexar	888	38.85	424.49	443.01	1.02	0.96
Dallas	9,107	100.00	332.16	442.59	1.00	0.75
Amerigroup - Dallas	3,609	39.63	322.67	444.79	1.00	0.73
Molina - Dallas	2,369	26.01	314.79	428.98	0.97	0.73
Parkland - Dallas	3,129	34.36	356.27	450.38	1.02	0.79
El Paso	780	100.00	309.25	421.01	1.00	0.73
El Paso Health - El Paso	432	55.38	317.13	403.28	0.96	0.79
Superior - El Paso	348	44.62	299.34	443.31	1.05	0.68
Harris	15,142	100.00	506.17	430.12	1.00	1.18
Amerigroup - Harris	2,136	14.11	438.38	408.21	0.95	1.07
CHC - Harris	4,301	28.40	541.80	437.27	1.02	1.24
Molina - Harris	1,621	10.71	495.87	423.60	0.98	1.17
TCHP - Harris	4,791	31.64	519.05	438.30	1.02	1.18
United - Harris	2,293	15.14	482.12	424.46	0.99	1.14
Jefferson	876	100.00	503.26	416.16	1.00	1.21
Amerigroup - Jefferson	130	14.84	463.81	429.37	1.03	1.08
CHC - Jefferson	238	27.17	522.63	399.33	0.96	1.31
Molina - Jefferson	113	12.90	523.22	412.36	0.99	1.27
TCHP - Jefferson	273	31.16	511.05	432.86	1.04	1.18
United - Jefferson	122	13.93	472.96	399.58	0.96	1.18
Lubbock	462	100.00	354.49	424.94	1.00	0.83
Firstcare - Lubbock	201	43.51	374.65	440.99	1.04	0.85
Superior - Lubbock	261	56.49	338.72	412.38	0.97	0.82
Nueces	295	100.00	420.44	412.31	1.00	1.02
Driscoll - Nueces	188	63.73	448.74	429.17	1.04	1.05
Superior - Nueces	81	27.46	395.54	384.38	0.93	1.03
United - Nueces	26	8.81	293.89	379.54	0.92	0.77
RSA	7,916	100.00	400.04	418.13	1.00	0.96
Molina - RSA	2,945	37.20	400.46	401.15	0.96	1.00
Superior - RSA	4,971	62.80	399.79	428.18	1.02	0.93
Tarrant	4,051	100.00	355.52	450.94	1.00	0.79
Aetna - Tarrant	1,188	29.33	325.38	434.14	0.96	0.75
Amerigroup - Tarrant	1,809	44.66	388.24	461.63	1.02	0.84
Cook - Tarrant	1,054	26.02	333.00	451.47	1.00	0.74
Travis	3,331	100.00	580.99	425.34	1.00	1.37
BCBS - Travis	1,227	36.84	631.51	432.02	1.02	1.46
DCHP - Travis	812	24.38	574.34	397.90	0.94	1.44
Superior - Travis	1,292	38.79	536.33	436.27	1.03	1.23

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

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

FY2024 CHIP Rating Summary
Adjusted Acuity Scores

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%
Raw Unadjusted Acuity Scores (1)							
Aetna - Bexar	1.000	0.743	0.697	0.873	1.000	0.923	1.000
Amerigroup - Bexar	1.000	0.607	0.901	1.114	1.000	1.031	1.000
CFHP - Bexar	1.000	0.967	0.950	1.058	1.000	0.994	1.000
Superior - Bexar	1.000	1.230	1.248	0.914	1.000	1.016	1.000
Amerigroup - Dallas	1.000	0.844	0.895	1.015	1.000	1.005	1.000
Molina - Dallas	1.000	0.372	0.800	0.556	1.000	0.969	1.000
Parkland - Dallas	1.000	1.391	1.208	1.076	1.000	1.018	1.000
El Paso Health - El Paso	1.000	0.875	0.957	1.013	1.000	0.958	1.000
Superior - El Paso	1.000	1.270	1.102	0.969	1.000	1.053	1.000
Amerigroup - Harris	1.000	0.643	1.049	0.806	1.000	0.949	1.000
CHC - Harris	1.000	0.893	0.946	0.864	1.000	1.017	1.000
Molina - Harris	1.000	0.606	0.471	0.438	1.000	0.985	1.000
TCHP - Harris	1.000	1.034	1.062	1.114	1.000	1.019	1.000
United - Harris	1.000	1.291	0.719	0.829	1.000	0.987	1.000
Amerigroup - Jefferson	1.000	1.153	0.613	7.069	1.000	1.032	1.000
CHC - Jefferson	1.000	1.231	1.036	0.595	1.000	0.960	1.000
Molina - Jefferson	1.000	0.325	0.372	0.396	1.000	0.991	1.000
TCHP - Jefferson	1.000	0.963	1.225	0.788	1.000	1.040	1.000
United - Jefferson	1.000	0.918	0.564	0.715	1.000	0.960	1.000
Firstcare - Lubbock	1.000	0.802	0.931	1.399	1.000	1.038	1.000
Superior - Lubbock	1.000	1.199	1.067	0.664	1.000	0.970	1.000
United - Nueces	1.000	1.539	0.442	0.388	1.000	0.921	1.000
Driscoll - Nueces	1.000	0.998	1.004	1.057	1.000	1.041	1.000
Superior - Nueces	1.000	0.829	1.121	0.845	1.000	0.932	1.000
Aetna - Tarrant	1.000	0.921	1.056	0.866	1.000	0.963	1.000
Amerigroup - Tarrant	1.000	0.887	0.898	0.963	1.000	1.024	1.000
Cook - Tarrant	1.000	1.110	1.055	1.077	1.000	1.001	1.000
BCBS - Travis	1.000	0.762	0.786	0.794	1.000	1.016	1.000
DCHP - Travis	1.000	1.308	1.127	0.829	1.000	0.935	1.000
Superior - Travis	1.000	0.844	1.018	1.274	1.000	1.026	1.000
Molina - RSA	1.000	0.603	1.021	0.849	1.000	0.959	1.000
Superior - RSA	1.000	1.117	0.994	1.052	1.000	1.024	1.000

FY2024 CHIP Rating Summary
Adjusted Acuity Scores

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%
Budget Neutrality Adjustment Factor (2)							
Aetna - Bexar	1.000	0.963	0.977	1.001	1.000	1.001	1.000
Amerigroup - Bexar	1.000	0.963	0.977	1.001	1.000	1.001	1.000
CFHP - Bexar	1.000	0.963	0.977	1.001	1.000	1.001	1.000
Superior - Bexar	1.000	0.963	0.977	1.001	1.000	1.001	1.000
Amerigroup - Dallas	1.000	0.984	0.995	0.992	1.000	1.002	1.000
Molina - Dallas	1.000	0.984	0.995	0.992	1.000	1.002	1.000
Parkland - Dallas	1.000	0.984	0.995	0.992	1.000	1.002	1.000
El Paso Health - El Paso	1.000	0.985	0.997	1.001	1.000	0.996	1.000
Superior - El Paso	1.000	0.985	0.997	1.001	1.000	0.996	1.000
Amerigroup - Harris	1.000	1.007	1.000	1.005	1.000	1.003	1.000
CHC - Harris	1.000	1.007	1.000	1.005	1.000	1.003	1.000
Molina - Harris	1.000	1.007	1.000	1.005	1.000	1.003	1.000
TCHP - Harris	1.000	1.007	1.000	1.005	1.000	1.003	1.000
United - Harris	1.000	1.007	1.000	1.005	1.000	1.003	1.000
Amerigroup - Jefferson	1.000	1.003	1.021	0.951	1.000	1.000	1.000
CHC - Jefferson	1.000	1.003	1.021	0.951	1.000	1.000	1.000
Molina - Jefferson	1.000	1.003	1.021	0.951	1.000	1.000	1.000
TCHP - Jefferson	1.000	1.003	1.021	0.951	1.000	1.000	1.000
United - Jefferson	1.000	1.003	1.021	0.951	1.000	1.000	1.000
Firstcare - Lubbock	1.000	0.997	0.999	0.981	1.000	1.002	1.000
Superior - Lubbock	1.000	0.997	0.999	0.981	1.000	1.002	1.000
United - Nueces	1.000	1.020	0.991	0.997	1.000	1.003	1.000
Driscoll - Nueces	1.000	1.020	0.991	0.997	1.000	1.003	1.000
Superior - Nueces	1.000	1.020	0.991	0.997	1.000	1.003	1.000
Aetna - Tarrant	1.000	1.001	1.002	0.999	1.000	1.001	1.000
Amerigroup - Tarrant	1.000	1.001	1.002	0.999	1.000	1.001	1.000
Cook - Tarrant	1.000	1.001	1.002	0.999	1.000	1.001	1.000
BCBS - Travis	1.000	1.024	1.005	0.977	1.000	1.001	1.000
DCHP - Travis	1.000	1.024	1.005	0.977	1.000	1.001	1.000
Superior - Travis	1.000	1.024	1.005	0.977	1.000	1.001	1.000
Molina - RSA	1.000	0.976	1.001	0.994	1.000	1.002	1.000
Superior - RSA	1.000	0.976	1.001	0.994	1.000	1.002	1.000

FY2024 CHIP Rating Summary
Adjusted Acuity Scores

Health Plan	Under Age 1	Ages 1-5	Ages 6-14	Ages 15-18	Newborn 198%-202%	Perinate <198%	Perinate 198%-202%
Budget Neutral Acuity Scores (3)							
Aetna - Bexar	1.000	0.715	0.681	0.874	1.000	0.924	1.000
Amerigroup - Bexar	1.000	0.584	0.880	1.115	1.000	1.032	1.000
CFHP - Bexar	1.000	0.931	0.928	1.058	1.000	0.995	1.000
Superior - Bexar	1.000	1.184	1.219	0.914	1.000	1.017	1.000
Amerigroup - Dallas	1.000	0.831	0.891	1.007	1.000	1.007	1.000
Molina - Dallas	1.000	0.367	0.796	0.552	1.000	0.971	1.000
Parkland - Dallas	1.000	1.369	1.201	1.067	1.000	1.019	1.000
El Paso Health - El Paso	1.000	0.862	0.954	1.014	1.000	0.954	1.000
Superior - El Paso	1.000	1.252	1.099	0.970	1.000	1.048	1.000
Amerigroup - Harris	1.000	0.648	1.050	0.810	1.000	0.952	1.000
CHC - Harris	1.000	0.900	0.946	0.868	1.000	1.019	1.000
Molina - Harris	1.000	0.611	0.471	0.440	1.000	0.988	1.000
TCHP - Harris	1.000	1.041	1.062	1.119	1.000	1.022	1.000
United - Harris	1.000	1.301	0.719	0.833	1.000	0.990	1.000
Amerigroup - Jefferson	1.000	1.157	0.626	6.722	1.000	1.032	1.000
CHC - Jefferson	1.000	1.236	1.058	0.565	1.000	0.960	1.000
Molina - Jefferson	1.000	0.326	0.380	0.377	1.000	0.991	1.000
TCHP - Jefferson	1.000	0.966	1.251	0.750	1.000	1.040	1.000
United - Jefferson	1.000	0.921	0.576	0.680	1.000	0.960	1.000
Firstcare - Lubbock	1.000	0.800	0.931	1.373	1.000	1.040	1.000
Superior - Lubbock	1.000	1.196	1.067	0.652	1.000	0.972	1.000
United - Nueces	1.000	1.571	0.438	0.387	1.000	0.923	1.000
Driscoll - Nueces	1.000	1.018	0.995	1.053	1.000	1.044	1.000
Superior - Nueces	1.000	0.846	1.111	0.843	1.000	0.935	1.000
Aetna - Tarrant	1.000	0.922	1.058	0.865	1.000	0.964	1.000
Amerigroup - Tarrant	1.000	0.888	0.899	0.962	1.000	1.025	1.000
Cook - Tarrant	1.000	1.111	1.057	1.076	1.000	1.002	1.000
BCBS - Travis	1.000	0.780	0.790	0.775	1.000	1.016	1.000
DCHP - Travis	1.000	1.339	1.132	0.810	1.000	0.936	1.000
Superior - Travis	1.000	0.864	1.023	1.245	1.000	1.026	1.000
Molina - RSA	1.000	0.589	1.022	0.844	1.000	0.961	1.000
Superior - RSA	1.000	1.091	0.994	1.045	1.000	1.026	1.000

Footnotes:

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

Attachment 7

Delivery Supplemental Payment

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

Attachment 8

Pay for Quality Program

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

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

At-Risk Measures

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

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

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

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

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

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

Bonus Pool Measures

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

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

The medical P4Q program assesses MCOs based on three categories:

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

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

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

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

Overall penalties are limited to 3% and bonuses are limited to 5%. However, historically the impact of the P4Q program on total premium has been immaterial. In 2018 the maximum loss any MCO experienced was less than 1.5% and the most earned by any MCO was less than 0.1%. In 2019, the maximum loss any MCO experienced was less than 0.7% and the most earned by any MCO

was less than 0.5%. As a result, we do not believe the P4Q program has a material impact on the premium rate development. As a result, it is confirmed that the total payment plus any bonus payments will not exceed 105 percent of the capitation payments.

Attachment 9

FY2024 CHIP Rate Certification Index

The index below includes the pages of this report that correspond to the applicable sections of the 2023-2024 Medicaid Managed Care Rate Development Guide, dated May 2023.

Section I. Medicaid Managed Care Rates

1. General Information

A. Rate Development Standards

- i. Rate ranges are not being utilized in this rate development.
- ii. Rates are for the period September 1, 2023 through August 31, 2024 (FY2024).
- iii.
 - (a) The certification letter is on page 19 of the report.
 - (b) The final capitation rates are shown on pages 16-17 of the report.
 - (c)
 - (i) See pages 1 through 7 of the report.
 - (ii) See pages 1 through 7 of the report.
 - (iii) See pages 1 through 7 of the report.
 - (iv) There have been no changes to program eligibility.
 - (v) See Attachment 8 pages 121 through 125 of the report.
 - (vi) Not applicable.
- iv. Acknowledged.
- v. Acknowledged.
- vi. Acknowledged.
- vii. Acknowledged.
- viii. Not applicable.
- ix. Not applicable.
- x. Acknowledged.

- xi. Acknowledged.
- xii. See pages 10 through 12 of the report.
- xiii. Acknowledged.

B. Appropriate Documentation

- i. The actuary is certifying capitation rates. See page 19 of the report.
- ii. Acknowledged.
- iii. Acknowledged.
- iv. Not applicable.
- v. Acknowledged.
- vi. Acknowledged. See page 19 of the report.
- vii. Not applicable.
- viii.
 - a) See Attachment 1 pages 21 through 31 of the report.
 - b) Not applicable. All rating adjustment factors have been included in the report.
 - c) FY2023 rates were not adjusted by a *de minimis* amount using the authority in 42 C.F.R 438.7(c)(3).
- ix. Not applicable. There are no known amendments at this time.
- x.
 - (a) Texas Medicaid Managed Care data has been studied for all programs, risk groups and service delivery areas through December 2022 to study the impact of COVID and the PHE.
 - (b) See pages 10 through 12 of the report.
 - (c) Effective September 1, 2023 all COVID-19 expenses for testing, treatment and vaccines will be covered in the capitation rates.
 - (d) See pages 10 through 12 of the report.

2. Data

A. Rate Development Standards

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

B. Appropriate Documentation

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

3. Projected Benefit Costs and Trends

A. Rate Development Standards

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

B. Appropriate Documentation

- i. See pages 15 through 16 and Attachment 1 pages 20 through 30 of the report.

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

(b) There have been no significant changes in the development of the benefit cost since the last certification.

(c) All recoupments and recoveries resulting from overpayments to providers have been netted out of the claim payments used in the rate development. MCOs are required to adjust encounter data to remove all overpayments and correct the submitted information. Any provider recoveries not adjusted for in the submitted encounter data are excluded from the base period as a negative add-on payment.
- iii. (a) See Attachment 4 pages 86 through 89 of the report.

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

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

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

(e) Not applicable.
- iv. Not applicable.
- v. Not applicable.
- vi. (a) Restorative enrollment can occur when an individual is deemed to have been CHIP eligible during a prior period. If the individual was eligible for and enrolled in CHIP managed care during the prior period, then the individual is retrospectively enrolled in the same managed care plan as their prior enrollment segment. The managed care plan is then retrospectively responsible for all CHIP expenses incurred during this retrospective period and is also paid a retrospective premium for this time period.

(b) All claims paid during retroactive enrollment periods are included in the base period data used to develop the FY2024 premium rate.

(c) All enrollment data during retroactive enrollment periods are included in the base period data used to develop the FY2024 premium rate.

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

vii. See Attachment 5 pages 90 through 111 of the report.

viii. See Attachment 5 pages 90 through 111 of the report.

4. Special Contract Provisions Related to Payment

A. Incentive Arrangements

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

(a) See Attachment 8 pages 121 through 125 of the report.

B. Withhold Arrangements

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

(a) See Attachment 8 pages 121 through 125 of the report.

(b) Acknowledged.

C. Risk-Sharing Arrangements

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

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

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

> 5% and ≤ 7%	60%	40%
> 7% and ≤ 9%	40%	60%
> 9% and ≤ 12%	20%	80%
> 12%	0%	100%

D. State Directed Payments

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

(a) Not applicable.

E. Pass-Through Payments

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

(a) Not applicable.

5. Projected Non-Benefit Costs

A. Rate Development Standards

i. Acknowledged.

ii. Acknowledged.

iii. Acknowledged.

iv. Acknowledged.

B. Appropriate Documentation

i. See pages 13 through 14 of the report.

ii. See pages 13 through 14 of the report.

iii. See pages 13 through 14 of the report.

6. Risk Adjustment

A. Rate Development Standards

- i. Acknowledged.
 - ii. Acknowledged.
- B. Appropriate Documentation
- i. See Attachment 6 pages 112 through 119 of the report.
 - ii. Not applicable, risk adjustment is only applied on a prospective basis.
 - iii. No material changes have been made to the risk adjustment model other than annual updates of the data since the last rating period. Risk adjustment has been applied in a budget neutral manner in accordance with 42 CFR 438.5(g).

7. Acuity Adjustments

- A. Rate Development Standards
- i. Acknowledged.
- B. Appropriate Documentation
- i. Not applicable.