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Commonwealth of Virginia Department Of Medical Assistance Services

Medallion II

Data Book and Capitation Rates Fiscal Year 2014

Amended June 2013

Submitted by:

PricewaterhouseCoopers LLP

Three Embarcadero Center

San Francisco, CA 94111

Mr. William J. Lessard, Jr.
Department of Medical Assistance Services
600 East Broad Street, Suite 1300
Richmond, VA 23219

June 24, 2013

Dear Bill:

Re: Amended FY 2014 Medallion II Data Book and Capitation Rates with Medicare PCP Enhanced Capitation Payment

The enclosed report provides a detailed description of the methodology used for calculating capitation rates for the Virginia Medicaid Medallion II program. The methods used for calculating these costs are consistent with Centers for Medicare and Medicaid Services requirements that the capitation rates be actuarially sound and appropriate for the population covered by the program.

Please call Sandra Hunt at 415/498-5365 or Susan Maerki at 415/498-5394 if you have any questions regarding these capitation rates.

The development of these rates was overseen by Sandra Hunt, Partner, Susan Maerki, Project Manager, and Peter Davidson, Lead Actuary.

Very Truly Yours,

PricewaterhouseCoopers

PricewaterhouseCoopers LLP

Actuarial Certification of Proposed nd Amended FY 2014 Medallion II Capitation Rates with Medicare PCP Enhanced Capitaion Payment
Commonwealth of Virginia Deartment of Medical Assistance Services

I, Peter B. Davidson, am associated with the firm PricewaterhouseCoopers. I am a Member of the American Academy of Actuaries and meet its qualification standards to certify as to the actuarial soundness of the fiscal year 2014 capitation rates developed for the Medicaid managed care program known as the Medallion II program under the Virginia Department of Medical Assistance Services (DMAS) Medicaid program. It is my opinion that all requirements of 42 CFR 438.6(c), with respect to the development of Medicaid managed care capitation rates, were satisfied in the development of the proposed capitation rates. I believe that the capitation rates are appropriate for the populations to be covered and the services to be furnished under the contract. The capitation rates are based soely on the projected costs for State Plan services. Detailed descriptions of the original methodology and assumptions used in the development of the capitation rates are contained in the capitation rate setting report. In the development of the proposed capitation rates, I relied on enrollment, encounter, and other data provided by the Virginia Department of Medical Assistance Services and the participating contracted health plans. I reviewed the data for reasonableness; however, I performed no independent verification nd take no responsibility as to the accuracy of these data. The proposed actuarially sound rates shown are a projection of future events. It may be expected that actual experience will vary from the values shown here. Actuarial methods, considerations, and analyses used in developing the proposed capitation rates conform to the appropriate Standards of Practice promulgated from time to time by the Actuarial Standards Board.

The capitation rates may not be appropriate for any specific health plan. Each health plan wil need to review the rates in relation to the benefits provided. The health plan should compare the rates with thir own experience, expenses, capital and surplus, and profit requirements prior to agreeing to contract with the State. The health plan may require rates above, equal to, or below the proposed capitation rates.

Peter B. Davidson

Peter B. Davidson, FSA
Member, American Academy of Actuaries

June 24, 2013

Date

Virginia Department of Medical Assistance Services
Crosswalk from CMS Rate Setting Checklist to 2014 Medallion II Report

Item		Location	Comments
AA.1.0	Overview of Rate setting Methodology	Entire Report	
AA.1.1	Actuarial Certification	Pages i-v	Section Actuarial Certification
AA.1.2	Projection of Expenditures	NA	Performed by DMAS Budget Department
AA.1.3	Procurement, Prior Approval and Rate setting	NA	State Set Rates
AA.1.5	Risk contracts	NA	Medallion II contract specifies that capitation is payment in full
AA.1.6	Limit on Payment to other providers	NA	DMAS limits payments
AA.1.7	Rate Modifications	NA	No modifications are anticipated during the time period. This excludes consideration of the Section 1202 PCP primary care payment.
AA.2.0	Base Year Utilization and Cost Data	Pages 4-11; Exh 1a-1c Page 21; Exh 1d-1e	Paid Claims Data including MCO Encounter and Fee-for-Service/PCCM
AA.2.1	Medicaid Eligibles under the Contract	Pages 2-3	Data submitted by participating MCOs matched to DMAS eligibility and capitation payment files
AA.2.2	Dual Eligibles	NA	Duals not eligible
AA.2.3	Spenddown	NA	Individuals on spend down are not eligible
AA.2.4	State Plan Services only	NA	Data submitted by participating MCOs is limited to State plan services
AA.2.5	Services that may be covered out of contract savings	NA	Data submitted by participating MCOs is limited to State plan services

Virginia Department of Medical Assistance Services
Crosswalk from CMS Rate Setting Checklist to 2014 Medallion II Report

Item		Location	Comments
AA.3.0	Adjustments to Base Year Data	Pages 12-18; Exh 2a-2i Pages 21-23; PCCM Exh 2a-2k Pages 25-27; Exh 6 Page 27-29; Exh 10	Program and Policy Adjustments and CDPS Risk Adjustment Medicare Enhanced PCP Supplemental Payment
AA.3.1	Benefit Differences	NA	
AA.3.2	Administrative Cost Allowance Calculations	Pages 17-18, MCO Exh 2i and PCCM Exh 2k	
AA.3.3	Special Populations' Adjustments	Pages 23-25, Exh 5b,5d Pages 29-33, FC/AA Exh II.1 to II,5	Adjustments for ALTC waiver population remaining in MCO and Medically Needy expansion population; Foster Care/Adoption Assistance expansion
AA.3.4	Eligibility Adjustments	NA	Eligibility adjustments are not needed due to use of encounter data
AA.3.5	DSH Payments	NA	DMAS pays DSH directly to facilities
AA.3.6	Third Party Liability	NA	Claims net of TPL, MCOs will collect TPL
AA.3.7	Co-payments, Coinsurance and Deductibles in Capitated Rates	NA	None required or collected
AA.3.8	Graduate Medical Education	NA	GME payments are made directly to providers
AA.3.9	FQHC and RHC Reimbursement	NA	DMAS pays cost settlement and prospective payment amounts directly to facilities
AA.3.10	Medical Cost / Trend Inflation	Pages 18-20, MCO Exh 3a-3d Pages 22, PCCM Exh 3a-3c	Trend Adjustment

Virginia Department of Medical Assistance Services
Crosswalk from CMS Rate Setting Checklist to 2014 Medallion II Report

Item		Location	Comments
AA.3.11	Utilization Adjustments	NA	Changes in utilization over time are accounted for in medical trend
AA.3.12	Utilization and Cost Assumptions	NA	Mandatory Program
AA.3.13	Post-Eligibility Treatment of Income	NA	Institutionalized individuals are excluded
AA.3.14	Incomplete Data Adjustment	Pages 18-20, MCO Exh 3a-3d Pages 22, PCCM Exh 3a-3c	Part of Trend Adjustment
AA.4.0	Establish Rate Category Groupings	Page 2	
AA.4.1	Age	Page 2	Rates vary by age
AA.4.2	Gender	Page 2	Rates vary by gender where material
AA.4.3	Locality / Region	Page 2	Rates vary by Rate Regions
AA.4.4	Eligibility Categories	Page 2	Rates vary by eligibility
AA.5.0	Data Smoothing	Page 11-12	Use two years of base data; rate cell blending and other high cost claims and ALTC redistribution
AA 5.1	Special Population and Assessment of the Data for Distortions	Pages 18-20, MCO Exh 3a-3d Pages 22, PCCM Exh 3a-3c Pages 11-12	Removal of high cost inpatient claims above $100,000 for trend evaluation; Other high cost claims and ALTC redistribution
AA.5.2	Cost-neutral data smoothing adjustment	Page 11-12	Use two years of base data; redistribution of inpatient hospital claims >$250,000
AA.5.3	Risk Adjustment	Pages 25-27; Exh 6 Exh 7a-7g	CDPS

Virginia Department of Medical Assistance Services
Crosswalk from CMS Rate Setting Checklist to 2013 Medallion II Report

Item		Location	Comments
AA.6.0	Stop Loss, Reinsurance or Risk Sharing arrangements	Page 27, Exh 8, Exh 9a-9g	DMAS will no longer require MCOs to obtain reinsurance, effective FY 2014. Reinsurance for Kalydeco cystic fibrosis drug.
AA.6.1	Commercial Reinsurance	NA	Responsibility of MCO
AA.6.2	Simple stop loss program	NA	DMAS does not provide
AA.6.3	Risk corridor program	NA	DMAS does not provide
AA.7.0	Incentive Arrangements	NA	No incentives are provided by DMAS to MCOs

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Virginia Medicaid Medallion II
Data Book and Proposed Capitation Rates
Fiscal Year 2014
For Rates Effective July 1, 2013
Prepared by PricewaterhouseCoopers LLP

Amended June 2013

I. Medallion II Rate Development

Introduction

PricewaterhouseCoopers LLP (PwC) has prepared a report describing the calculation of the State Fiscal Year 2014 capitation rates for the Virginia Medicaid Medallion II program.

Regulations issued by the Centers for Medicare and Medicaid Services (CMS) govern the development of capitation payments for Medicaid managed care programs. These regulations require that rates be "actuarially sound". While there are no definitive criteria for determining actuarial soundness for Medicaid managed care programs, CMS has issued a checklist that provides guidance. We have followed that checklist in developing the proposed rates shown here and have included a checklist review as an appendix to the actuarial certification. The final rates will be established through signed contracts with health plans, which will ensure that the plans concur that the rates paid will allow for contracting with sufficient numbers of providers to ensure appropriate access to health care and that they expect to remain financially sound throughout the contract period.

The general guidelines for developing actuarially sound payment rates encompass the following concepts:

- Data appropriate for the population to be covered by the managed care program should be used for the analysis;
- Payment rates should be sufficiently differentiated to reflect known variation in per capita costs related to age, gender, Medicaid eligibility category, and health status;
- Where rate cells have relatively small numbers of individuals, cost neutral data smoothing techniques should be used;
- Medicaid fee-for-service (FFS) payment rates per unit of service are an appropriate benchmark for developing capitation rates;
- Differences in expected utilization rates between fee-for-service and managed care programs should be accounted for;
- Appropriate levels of health plan administrative costs should be included in the rates;

- Programmatic changes in the Medicaid program between the data and contract period should be reflected in the rates; and
- A range of appropriate rates could emerge from the rate-setting process and an upper and lower bound may be developed.

These Medallion II rates are developed to be consistent with the concepts described above. The development of the rates is shown in the attached exhibits.

Capitation rate cells for Medallion II vary based on the following criteria:

- **Aid Category**. Members eligible for participation in these programs include: Low Income Families with Children (LIFC) and related groups and Aged, Blind, and Disabled (ABAD).
- **Demographics**. Capitation rates will be paid separately for the following age/gender groups: Under 1, 1-5, 6-14, 15-20 Female, 15-20 Male, 21-44 Female, 21-44 Male, and 45 and Over.
- **Region**. The state will be divided into seven rate regions: Northern Virginia, Other Metropolitan Statistical Area (MSA), Richmond and Charlottesville, Rural, Tidewater, Roanoke-Alleghany, and Far Southwest. As the result of an expansion effective January 1, 2012, the Roanoke-Alleghany region was carved out of a combination of cities and counties previously assigned to the Other MSA and Rural regions plus four new localities in the Alleghany area. Far Southwest is composed of the remaining 15 FIPS codes that had been Primary Case Care Management (PCCM), Fee-for-Service only. Of the 15 counties, three were previously assigned to Other MSA and 12 were assigned to the Rural region.

Medallion II program description

The Virginia Medallion II program provides health care coverage statewide to Medicaid members through a mandatory enrollment mechanism for designated eligibility categories. The primary exclusions are members who are dually eligible for Medicare and Medicaid, who have comprehensive private insurance as primary payer, who reside in nursing homes, and some members who are in a home and community based waiver. Medallion II members who have become eligible for home and community based waivers since 2007 are no longer disenrolled from Medallion II. Rather, they remain in the MCO for covered medical services and receive their waiver services through FFS.

Rates are developed separately by aid category, age/gender group, and region to allow for automatic adjustment to payments when enrollment changes. In that way, any variation in the mix of enrollment by rate cell is automatically reflected in the payment amounts to the health plans.

Managed care plans are responsible for nearly the full range of acute health services, with certain specific exceptions. Managed care plans are not responsible for the ingredient cost of immunizations, for school-based health services, for some behavioral health services, dental services, and for the Early Intervention (Part C) services.

Payments to managed care plans for Medallion II are subject to federal rules. As a Medicaid program, the state must comply with federal regulations set forth by CMS regarding payment levels. Specifically, payments to

managed care plans must be actuarially sound. To develop proposed capitation rates, we analyzed the health plan encounter data from the established plans in the Medallion II program. Individual health plan data were separately reviewed by rate category and region and then combined across health plans for each geographic region of the state. Adjustments were made to reflect modifications of payment arrangements under the Virginia Medicaid FFS program, which are assumed to be shadowed by the health plans in their provider arrangements, and payment rates were updated to reflect the contract period covered by these rates. Under the regulations, health plan administrative costs may be explicitly added to the payment amounts, and we have done so in this analysis. Finally, rates are adjusted for differences in health status among health plans within each geographic region.

A number of program changes were important for the FY 2014 rate development and required supplemental analysis.

- There was an MCO service area expansion effective January 2012, creating a new Roanoke-Alleghany region. Previously this had been a region with combined PCCM and Medallion II members served by one MCO. Rates for the Roanoke Alleghany expansion were developed by blending the historical experience of the PCCM program and MCO data, including MCO data for the last six months of the base period.

- There was an MCO service area expansion effective July 2012, creating a new region, Far Southwest. This area had not been served by any of the contracted MCOs. Rates for the Far Southwest expansion were developed based on the historical experience of the PCCM program. MCO data will be available for analyses starting with FY 2015 Medallion II rate development.

- There continues to be growth in Medicaid enrollment and the Medallion II managed care population over the past three years. We examined this growth in the context of age/gender rate mix changes and used that analysis in the analysis of trends for the LIFC Child, LIFC Adult, and ABAD.

- MCO members who become eligible to participate in home and community-based care waivers remain in Medallion II for access to acute care services. This population is referred to as the Acute and Long-Term Care (ALTC) population. These are higher cost members, and they are growing as a proportion of all MCO plan members. We annually examine this growth and make an adjustment for expected changes in mix in the ABAD rates.

- Effective November 1, 2011, a pilot managed care program for Foster Care began in Richmond City. These members were not previously enrolled in managed care. Effective FY 2014, this program will expand statewide to children in both Foster Care and Adoption Assistance programs. Expansions will be in the Tidewater region effective September 1, 2013 and the other regions will expand before the end of 2014.

- Effective September 1, 2012, DMAS began to shift non-spend down enrollees from the medically needy aid category not eligible for Medallion II to other aid categories eligible for Medallion II. This shift should be complete by December 2013. These are higher cost members.

Data book

In this section we describe the data available to PwC for developing the capitation rates and the process used for selecting the claims and the individuals that are ultimately included in the rate development process. Some adjustments that are made to the data in the early stages of the rate development process are also described in this section.

Rate setting data sources

A first step in developing capitation rates is to identify the data that will be used for the calculations. The CMS checklist call for use of data that is appropriate for the population to be covered by the program and no more than five years old. A number of sources of data may be considered appropriate including:

- FFS data for the population in the geographic areas to be covered by managed care program expansions;
- Health plan encounter data for the population in managed care;
- Health plan encounter data for other populations, with appropriate adjustments to reflect utilization patterns of Medicaid enrollees;
- For some components of the analysis, health plan financial data;
- For some components of the analysis, data from other Medicaid programs.

The historical data used to develop the draft FY 2014 base rates for the legacy areas includes health plan incurred claims and subcapitation payments for FY 2011 and FY 2012 (July 1, 2010 to June 30, 2012), with run-out through October 2012. Analysis for development of contract period trend included incurred claims from FY 2010 through December 2012 (for all service categories except inpatient hospital), with run-out through February 2013.

FFS and PCCM data for geographic areas included in the managed care expansions used similar time periods to develop the historical base data. This report uses incurred claims for FY 2011 and FY 2012 with run-out through December 2012. The FFS and PCCM data uses a shorter run-out period because the PCCM program was ended and all remaining PCCM enrollment was transitioned to Medallion II MCOs as of July 2012. Six months was considered sufficient to incorporate run-out for all major service categories with acceptably low IBNR factors.

Supplemental health plan data are used for certain portions of the analysis. Specifically, we incorporated health plan data related to:

- Capitation arrangements with subcontractors;
- Supplemental payments, such as physician incentives and case management fees, not already reflected in the encounter data;
- Prescription drug purchasing arrangements, including rebates;
- Health plan administrative costs; and
- Medical claims data sufficient to calculate diagnostic risk assessment factors.

Managed care expansions and changes in MCO service areas FY 2010 to FY 2012

There were managed care expansions in the Medallion II program during the base data period, FY 2011 to FY 2012 or during the prior year FY 2010, which is included for our evaluation of contract period trend.

- Effective January 1, 2012, there was an MCO expansion into the Roanoke-Alleghany area. A separate Roanoke-Alleghany rate setting region was established using a blend of managed care encounters and PCCM claims. A new MCO, MajestaCare, entered that market with this expansion. Six months of the expansion MCO data is included in the FY 2014 rate development for that region.

- There was a MCO expansion into the Far Southwest region effective July 1, 2012. The counties affected are shown in Exhibit 11. Medicaid members were converted from PCCM only to mandatory managed care for Medallion II and FAMIS eligible enrollees. This is outside the base period used for FY 2014 rate setting, and DMAS PCCM data is used for the base period. A year of MCO health plan data will be incorporated into the FY 2015 rate development.

- Foster Care Pilot in Richmond was effective September 1, 2011. Approximately 150 foster care children were enrolled in MCOs though a pilot in Richmond City. Separate rates were developed for the Foster Care Pilot for FY 2012 and FY 2013. The Foster Care managed care program will be expanded statewide for FY 2014.

There were changes in health plan service areas. Neither of these required adjustment to the historical data used in the FY 2014 rate setting process.

- One of the health plans withdrew from selected counties in September 2010. The members affected by these withdrawals were re-enrolled in other health plans, and therefore does not affect the historical encounter data used for rates or trend development.

- Two MCOs expanded their service area in early FY 2011. In both cases, these areas were already served by at least two other MCOs and therefore were already mandatory managed care. The exception was Warren County, which converted from PCCM/voluntary MCO to mandatory managed care effective September 2010.

- In 2012, Wellpoint, the parent company of Anthem, acquired Amerigroup. Prior to completing the acquisition, the Amerigroup Virginia business was sold to InTotal Health, a subsidiary of Inova Health Systems. This does not affect the historical encounter data used for rate setting or the CDPS scores. For the May rates, the InTotal Health name replaces the legacy Amerigroup name in the report exhibits.

- Additional health plans may be available during FY 2014. Any new plans will be paid the base capitation rates shown in Exhibit 5e for FY 2014.

Overview of health plan encounter data processing

We worked with health plan representatives to review and analyze the health plan encounter data. The member month count and claim matching process uses the DMAS capitation payment file rather than the DMAS eligibility file as the record of health plan membership and the length of eligibility. Consistent with DMAS operations and the health plan contract terms, a person is assumed to be eligible for the full month for which a capitation payment is made. The calculation of age for rate cell groupings uses the first of the month rather than the last of the month.

After initial cleaning to remove duplicate claims and claims incurred outside of the historical base data period, members and their associated claims may be dropped due to missing or invalid ID, assignment to an aid category that is not included in the Medallion II program, or claims that were incurred outside of the member eligibility period. We have also included all claims and eligibility periods for members with an overlapping Medicare-Medicaid or other comprehensive TPL segment if we also have a record of a capitation payment[1].

The FY 2014 newborn processing incorporates a new technical revision. DMAS policy provides three months for the mother and a health plan to submit the necessary documentation to obtain a permanent ID for an eligible newborn. There is also a separate reconciliation process where MCOs submit information on the number of newborns to retroactively be reimbursed for capitation payments due during the temporary eligibility period. Capitation payments for the newborn may not be reflected in the capitation payment file until at least a few months after the birth.

Beginning with rates for FY 2012, we made an adjustment to count member months for the period up until a newborn is assigned a permanent Medicaid identification number. This was based on checking the first nine digits of the newborn ID to match the mother ID, checking for the mother's eligibility, and then imputing up to three months of membership based on the first record of a newborn capitation payment made within four months of the birth. However, we learned that a newborn ID does not necessarily link to the mother's ID. In not identifying all newborns, the imputed member months were underestimated.

For FY 2014, we revised the process to look at the birth date on the capitation payment file to identify all newborns in the past three years who had a capitation payment within the first four months of birth. These newborn IDs were captured and then compared to the DMAS eligibility file to confirm the newborn eligibility before the first month of capitation payment. Up to three months of eligibility, the month of birth and the two months following can be added to the member month count.

Newborn claims that could not be matched to a newborn ID were first assigned based on the health plan encounter record information. As a final step, non-matched newborns and their claims are allocated based on each plan's matched newborn distribution by aid category and region.

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[1] Although the Medicare-Medicaid dual eligible population and those with other comprehensive insurance (Third Party Liability or TPL) are not supposed to be enrolled in the Medallion II program, the other coverage is not always known at the time of enrollment. Dual eligibles and members with TPL are disenrolled from the MCO when they are identified. Plans are responsible for claims payment and for collecting Medicare or third party payments as long as the person remains enrolled in a Medallion II plan.

Overall, the new methodology increases newborn member months by 5.9% for LIFC Under Age 1. Our previous methodology already captured all claims paid during the month of birth and the following two months; therefore the process for capturing the dollars assigned to the newborn rate cell do not change. The net impact of the change is to decrease the base PMPM by 5.5% for LIFC under Age 1.

Subcapitated service costs were added based on PMPM values or the claims information provided by the plans. The reported member months are those calculated by PwC from the DMAS capitation payment file, rather than those provided by the health plans. For plans that pay for mental health services on a capitated basis, mental health capitation payment were distributed between the ABAD and LIFC eligibility categories and mental health hospital inpatient and mental health professional services categories, based upon the distribution of mental health claims submitted by the health plans that provide complete FFS mental health claims data. This is consistent with the allocation method that has been used in the past five years of Medallion II rate setting.

As noted in past reports, we believe that the PMPM values appropriately represent the total cost of services provided to the health plan's enrolled membership. We did not always receive, nor have we tested, the unit/encounter counts for the capitated and subcontractor services.

PwC summarized the health plan encounter data by aid category, state fiscal year, region, demographic group, and service category. The claims included in the historical database include health plan paid amounts, which are net of any third party insurance payments and copayments.

In the summarization process, unit counts were determined for each service category. Table 1, Service Unit Definitions, describes the types of units that were counted for each detailed service category. In the table, "Units" indicates the actual unit counts that were recorded on each claim; in particular, the methodology for deriving unit counts for professional services may vary by data source and health plan. "Claims" or "Prescriptions" or "Record Counts" refers to a count of "1" for each claim record in the historical database. This count is used for services in which recorded units are not meaningful, such as for pharmacy where the units recorded are often the number of pills dispensed. "Admits" are used for inpatient units with the exception of inpatient psychiatric, and represent the number of inpatient admits that were paid by the program. The unit for inpatient psychiatric is "days".

Table 1
Service Unit Definitions

Service Category	Unit Count	Multiple Units
DME/Supplies	Record Counts	
FQHC/RHC	Units	Yes
Home Health Services	Claims	
Inpatient – Maternity	Admits	
Inpatient – Newborn	Admits	
Inpatient – Other	Admits	
Inpatient – Psych	Days	
Lab	Record Counts	
Outpatient – Emergency Room	Claims	
Outpatient – Other	Claims	
Pharmacy	Prescriptions	
Professional – Anesthesia	Record Counts	
Professional – Child EPSDT	Record Counts	
Professional – Evaluation & Management	Record Counts	
Professional – Maternity	Record Counts	
Professional – Other	Record Counts	
Professional – Psych	Record Counts	
Professional – Specialist	Record Counts	
Professional – Vision	Record Counts	
Radiology	Record Counts	
Transportation	Record Counts	

The claims and eligibility information used in this report includes data only for Medicaid members who are eligible for the managed care program based on their eligibility category and service use during the data period.

Review of the health plan encounter data

The base capitation rates for FY 2014 are developed using a combination of health plan encounter data and DMAS fee-for-service data. Review of the submitted health plan encounter data followed six major steps:

1. Edit of records for logical exclusions
2. Edit of records against DMAS capitation payment file
3. Summary of health plan FFS paid claims
4. Addition of capitated and subcontractor services
5. Verification of health plan data submission
6. Aggregation of data across all health plans

Two sets of edits were applied to each health plan's submitted data. The first level of edit tested for logical conditions for the historical data period. The logical condition tests and the processing decisions were:

- Claims that were duplicates, pended or rejected during claims processing were removed.
- Claims with dates of service outside the FY 2011 to FY 2012 period were removed.
- Claims with paid amounts of $0.00 were included if the service was provided under a health plan capitation contract. They were deleted if the service was paid under FFS payment arrangements, as they would contribute no value to the capitation rate development, but would have distorted unit counts.

The second level of edit compared the cleaned health plan encounter records files to the capitation invoice file provided by DMAS. The DMAS capitation invoice file, rather than the demographic information coded on the claim record, determined whether the claim record was retained. The processing determinations were:

- Claims matched to member capitation payments with missing or invalid demographic or geographic information were removed.
- Claims for members with capitation payments for other programs were removed.
- Claims matched to managed care capitation periods outside the FY 2011 to FY 2012 period were removed.
- Claims for members age 1 and older that were not eligible and/or were not enrolled in a health plan on the date of service were removed.
- Zero-paid claims for normal newborns and retroactive claims for children age 0-1 were retained, as these claims are largely associated with children born into the Medicaid program. These claims were subject to a separate newborn analysis to determine that they were correctly identified as Medicaid managed care members.

Each health plan's data was summarized by service type and the rate cell categories for aid category, age/gender, and geographic region. This summarization was done only for those services that were paid by the health plans on a FFS basis. The capitated and subcontractor service dollars and encounter information were added in a second step. Information was also provided to the health plans regarding record and payment totals for each separate record type (e.g., UB92, CMS 1500, pharmacy, and subcontractors) for validation purposes.

Individual reports were sent to the health plans for review and approval. The reports included a summary of the health plan encounter data, with all subcontractor adjustments, by rate cell, and region to be used in the base data.

Inclusion of health plan capitated and subcontractor services

The vast majority of the encounter records submitted by each of the health plans were paid under FFS arrangements. The records included both charged and paid amounts and could be readily analyzed. However, each health plan also had services that were paid, in part or in full, under capitation or subcontractor arrangements. For these services, health plans submitted data in a variety of forms. Each health plan provided a list of services that were provided under such arrangements and the cost of the services on a PMPM basis. The PMPM amount represented either the actual contractual PMPM paid, or the contractual total dollar payments divided by the covered member months for the time period.

The financial information may or may not have been accompanied by encounter data for those services. The reported value of the capitated and subcontractor services are incorporated into the historical data, but we cannot confirm that all encounters are reported and measures such as utilization rates and cost per unit for these services may not be accurate.

Behavioral and mental health capitated subcontractor services

Capitation payments for behavioral and mental health services were distributed differently than other reported capitated services. Health plans report mental health services both as FFS paid claims and as capitation amounts for contracted services. For the health plans that capitate psych services (CareNet and Optima), the subcapitated vendor mental health data is provided as either total payments or as an aggregate PMPM with limited detail by service type (inpatient vs. professional) or aid category (ABAD vs. LIFC). Approximately 40% of mental health payments are made by the plans under subcapitation arrangements.

To allocate the mental health capitation payments, we analyze mental health claims level detail provided by the four plans that do not capitate (Anthem, Virginia Premier, InTotal Health, and MajestaCare) by service type and aid category to determine a distribution to apply to the capitated mental health service payments.

Analysis of the MCO mental health encounter data shows substantial differences in the total PMPM and the distribution of inpatient and outpatient services between ABAD and LIFC. Overall, the historical encounter paid claims showed the ABAD mental health PMPM was approximately eight times the LIFC mental health PMPM, or $35.05 PMPM for ABAD compared to $4.42 PMPM for LIFC. For ABAD, the distribution of dollars was 74.4% inpatient and 25.6% professional while the LIFC distribution was 46.2% inpatient and 53.8% professional.[2]

These relative factors were applied to the mental health capitation payments to modify the health plan reports for the two health plans that subcapitate mental health services. The modified reports were then aggregated for the historical data.

[2] The analysis of FFS paid mental health claims also includes FAMIS members.

Regional historical costs

Capitation rates are developed based on the experience of each region, taking into account changes in regional definitions. The new Roanoke-Alleghany region effective January 1, 2012 is based on the FIPS localities included in the Medallion II contracts. The new Far Southwest region did not have any managed care plan operations, but those FIPS codes were assigned to DMAS MCO regions. The two new regions result in reductions to the number of FIPS county codes in Other MSA and Rural regions. For Roanoke-Alleghany, most of the new population was previously assigned to Other MSA, with about 6,000 members previously in Rural FIPS codes. The Far Southwest reassigns 15 FIPS codes, primarily formerly assigned to Rural, to the new region that was effective July 1, 2012. As a result of these additions, there are seven geographic regions for Medallion II rate setting. Assignment of counties and cities to each region is presented in Exhibit 12.

Data smoothing for ABAD rate cells

The historical data for some of the child rate cells for the ABAD population reflect small numbers of enrollees and exhibited inconsistent relative cost patterns across regions; therefore, the ABAD Age Under 1 category is developed as a single statewide rate cell. We also combine the historical data for Child 6-14, Female 15-20, and Male 15-20 within each region. The separate rate cells are retained for this report and for administrative purposes, but the historical data and all adjustments use the combined data and result in the same base capitation rate for these three ABAD categories across all regions. The historical data shows the separate age/gender rate cell information for each region. In the exhibits of adjusted and trended claims, the historical data for the two years are combined across regions, and Incurred But Not Reported (IBNR) factors, program and policy adjustments and trend are then applied.

Data smoothing for high cost inpatient claims

As part of the routine processing of the trend models, we examine inpatient hospital claims for high cost outliers. For the FY 2014 rate development we observed a higher proportion of high cost claims than in the past, particularly for LIFC Child and for FAMIS. Inpatient hospital claims data for the base period were summed separately for FY 2011 and FY 2012 by individual Medicaid member ID. The number of IDs and dollars above selected thresholds were examined. It was determined that a threshold of $250,000 of inpatient claims within a year was appropriate. This threshold impacted 0.1% of the LIFC Child IDs with an inpatient claim and 5.2% of the inpatient dollars. The impact on LIFC Adult and ABAD was smaller. For LIFC Adult, 0.3% of the inpatient dollars (0.01% of IDs) and for ABAD 2.1% of the inpatient dollars (0.2% of IDs) were redistributed. This redistribution is shown in a separate column as an adjustment to the inpatient hospital service categories in the Exhibits 4 for each rate cell calculation.

Separately, there was a single claim of more than $200,000 for an ALTC newborn that was associated with a total of 2 member months in the historical base period. Because calculation of the ALTC Under Age 1 rate cell is subject to substantial variability due to small numbers, we examined the statewide relativities of the ALTC rate cells in the FY 2013 rate development to determine the redistribution of this high cost claim. The redistribution incorporates the DMAS rate development data smoothing for the ABAD Age Under 1 rate across all regions and combines the historical data for Child 6-14, Female 15-20, and Male 15-20 within each region. This redistribution

and the rate cell relativities are shown in Exhibit 5c before the ALTC base rate is blended with the non-ALTC ABAD base rate.

Historical health plan encounter data

The resulting health plan historical claims and member month data were tabulated by service category for each rate cell and are shown in Exhibits 1a, 1b, and 1c. Because there are also expansions into areas that previously had either voluntary enrollment or no option for enrollment in managed care, the historical PCCM experience is captured in the PCCM data in Exhibits 1d and 1e. These Exhibits 1a to 1e are generally referred to as the "Data Book". These exhibits show unadjusted historical data, with the exception of the adjustments described above, and are the basis of all subsequent calculations described below. These exhibits show, for each fiscal year:

- Member months based on DMAS capitation payment or eligibility files;
- Total dollar value of claims (health plan encounter and PCCM data) and capitated services (health plan encounter data only); and
- Costs per member per month (PMPM).

For informational purposes, these exhibits also show for each fiscal year:

- Units;
- Units per 1,000; and
- Cost per unit.

FY 2014 Medallion II Capitation Rate Calculations

The capitation rates for fiscal year 2014 for each of the seven geographic regions, Northern Virginia, Other MSA, Richmond/Charlottesville, Rural, Tidewater, Roanoke-Alleghany, and Far Southwest, are calculated based on the historical data and adjusted to reflect changes in payment rates, covered services, and any other anticipated programmatic and policy changes. Each adjustment to the historical data is described in the following sections. The adjustments are applied to the historical data and the resulting capitation rates are calculated in Exhibits of Adjusted and Trended Claims (Exhibits 4a to 4e). The process and steps used to adjust both the historical health plan encounter data and the PCCM FFS paid data are similar, although the applied adjustment values may differ.

The steps used for calculating the capitation rates are as follows:

1. The combined FY 2011 to FY 2012 historical data for each rate cell and service category are brought forward to Exhibits 4a to 4e from the corresponding rate cell in Exhibits 1a to 1e. This information serves as the starting point for the capitation rate calculation. These include LIFC (1a) and ABAD without ALTC in (1b). We also present base data for the Medallion II ABAD ALTC population in (1c) and the Roanoke-Alleghany and Far Southwest expansion populations that are based on the PCCM data (Exhibits 1d and 1e). The LIFC PCCM base period expenditures are in 1d and the ABAD PCCM expenditures are in 1e.

2. A number of changes in covered services and payment levels have been mandated by the Virginia General Assembly. Each of these adjustments, as well as adjustments for other services not included in the source

data, is described in detail. Adjustments for the MCO base data are presented in MCO Exhibits 2a through 2h. Adjustments for the PCCM base data are presented in PCCM Exhibits 2a through 2j.

3. The claims data is adjusted to reflect the expected value of any IBNR claims and to update the data to the FY 2014 contract period. These adjustments are described below and are shown in Exhibits 3a to 3d. The resulting claims are shown in Exhibits 4a to 4e under the column "Completed & Trended Claims". Adjustments for the PCCM base data are presented in PCCM Exhibits 3a through 3c. The resulting claims are shown in the PCCM Exhibits 4a to 4c under the column "Completed & Trended Claims".

4. The adjusted claims costs from Step 3 are divided by the count of member months for each rate cell from the historical data to arrive at a PMPM cost by service category.

5. The PMPM costs are summarized by rate cell across all service categories to arrive at the total cost for each rate cell for medical services.

6. An adjustment is made to reflect average health plan administrative costs and a contribution to reserves, producing the regional average capitation rates. The derivation of these adjustments is included in the adjustments described in the following section and presented in Exhibit 2i and PCCM Exhibit 2k.

7. Adjusted and trended MCO and PCCM base rates are blended to develop the FY 2014 base rates.

8. Adjusted and trended Medically Needy, ALTC and Non-ALTC ABAD base rates are blended to develop the ABAD base rates.

9. MCO-specific capitation rates are calculated by applying adjustments to reflect variations in the health status of health plan enrollees based on the Chronic Illness and Disability Payment System (CDPS) risk assessment and risk adjustment model.

10. MCO-specific capitation rates are further adjusted by the Kalydeco reinsurance adjustment.

11. Plan specific Medicare Enhanced Capitation for Primary Care Provider supplemental payments for the period July 1, 2013 to December 31, 2013 are calculated and added to the MCO specific capitation rates adjusted by the Kalydeco reinsurance amount.

The next two sections describe the specific adjustments applied to the health plan encounter data and then to the PCCM paid data.

Historical health plan encounter data

The resulting health plan historical claims and member month data were tabulated for each of the rate cells within each region. Additionally, due to significant differences in costs and changes in population mix, the ABAD experience was segregated into cohorts who are non-ALTC members (shown in the ABAD exhibits) and those that are Acute and Long-Term Care members (shown in the ALTC exhibits) by service category for each rate cell. The

experience data are shown for LIFC in Exhibits 1a, for ABAD in Exhibits 1b, and for ABAD ALTC in 1c. The small number of LIFC ALTC is included in the LIFC base data in Exhibit 1a.

Base rate legislative and program adjustments applied to health plan encounter data

Pharmacy adjustment

The outpatient pharmacy adjustment is derived from an analysis of the health plan pharmacy payments, including unit cost and utilization rates, and takes into account discounts, rebates and administrative costs reported by the health plans.

We continue to observe annual increases in the proportion of generic prescriptions, although the change has slowed in recent years from a 2-4% annual increase down to 1-3% annual increase for the most recent period. In FY 2012 the proportion of generic scripts in the LIFC population was slightly more than 81% (79% LIFC Child and 86% LIFC Adult) and it was 79% in the ABAD population, including the ALTC population. The proportion of generic utilization in the Virginia Medicaid managed care program is similar to that observed as best practice in other state Medicaid managed care programs; therefore, no adjustment is made for further increases in the generic to brand name drug mix for FY 2014.

The adjustment was modified to apply discounts and rebates to the health plan drug ingredient cost PMPM and then to add dispensing and administrative fees to the adjusted ingredient cost PMPM.

The Federal Affordable Care Act (ACA) signed in March 2010 extended Medicaid FFS pharmacy rebates to Medicaid managed care plans. MCOs are required to submit pharmacy data to the State Medicaid agency, which will then submit the information to the pharmaceutical manufacturers to claim rebates directly. Because pharmaceutical companies are now paying rebates directly to the State Medicaid agency, pharmaceutical companies have modified the rebates currently provided MCOs. Managed care plans furnished information that confirmed that projected pharmacy rebates were reduced 50% in the time period after passage of the ACA. The difference in projected rebate between the FY 2013 and FY 2014 rate setting was 0.3%, or a weighted average of 2.3%. In prior years we applied a percent reduction in rebates. For the FY 2014 rate setting period, we apply a 0% reduction in rebates, keeping the effective pharmacy rebate at the MCO projected 2.3%, because we do not expect further material reduction in the pharmacy rebate.

Separate pharmacy adjustment factors were developed for the LIFC, ABAD, and ALTC aid categories, as shown in Exhibit 2a. The factors are reductions of -3.4% for LIFC, -3.1% for ABAD, and -3.0% for ALTC.

Exempt infant formula carveout adjustment

This adjustment removes the amount that the health plans pay for selected formulas after children up to age 19 have met the Women, Infants, and Children (WIC) benefit cap. The exempt formulas excluded for the adjustment are developed from a code list provided by DMAS and is applied to the DME/Supplies service line.

This adjustment is shown in Exhibit 2b and ranges from -0.2% to -1.6% for the relevant rate cell. It is applied to the full base period to DME/Supplies service lines in Exhibits 4a to 4c under the column labeled "Policy and Program Adjustments".

Hospital inpatient adjustments

The hospital inpatient base period incorporates a FY 2012 capital reimbursement rate reduction from 75% to 71% of cost (applied to FY 2011 of the base data). These are applied to the capital component estimated at 9.7%. There are no exemptions and all hospitals are included. These changes apply to both inpatient medical/surgical and inpatient psychiatric hospitals. There were no unit cost program adjustments applied in the FY 2011 and FY 2012 base period.

For the projection period, the hospital inpatient adjustment includes a 2.6% allowance for a cost per unit increase authorized by the Virginia General Assembly effective FY 2013. While there was no explicit unit cost increase for FY 2014, hospital reimbursement rates were rebased resulting in a weighted average cost per unit change of 4.7% for inpatient medical/surgical and -7.4% for inpatient psychiatric. Both years of unit cost changes are applied to the operating cost component. As a result of these adjustments, the contract period trend will be based solely on utilization.

For LIFC and ABAD inpatient medical/surgical, the positive adjustment is 6.4%. For inpatient psychiatric in acute care hospitals, the negative adjustment is 4.1%. The inpatient psychiatric factor is applied to mental health claims that are submitted with FFS payment detail and the allocated inpatient mental health subcapitation dollars, but exclude payments to freestanding psychiatric hospitals. Similar adjustment factors are calculated for the ALTC population. For inpatient medical/surgical, the ALTC positive adjustment is 6.4%. For inpatient psychiatric in acute care hospitals, the negative adjustment is 4.3%. These adjustment factors are shown in Exhibit 2c and applied to all hospital inpatient service categories in Exhibits 4a to 4c under the column labeled "Policy and Program Adjustments".

Freestanding inpatient psychiatric hospital rate adjustment

The freestanding psychiatric hospital adjustment incorporates a FY 2012 capital reimbursement rate reduction of 5.3% which applied to FY 2011 of the base data. These are applied to the capital component estimated at 3.9%.

The Inpatient psychiatric hospitals also receive the FY 2013 increase in unit cost of 2.6% that is applicable to the operating cost component. The FY 2014 unit cost adjustment is a negative 0.9%.

These adjustment factors are shown in Exhibit 2d and applied to inpatient psychiatric service categories in Exhibits 4a to 4c under the column labeled "Policy and Program Adjustments".

Hospital outpatient adjustment

The Virginia General Assembly reduced the cost basis for reimbursement of outpatient hospital services from 80% to 77% for FY 2011 (eventually this was limited only to the period from July 1, 2010 through September 30, 2010) and then to 76% for FY 2012, a decrease of 5.0% from the original 80% base. This is applied to all outpatient services except for triage fees paid in an Emergency Department. DMAS estimates that 6% of

outpatient hospital payments are for the triage fees. The impact of the triage exemption is calculated relative to the proportion of Emergency Room and Related outpatient payments, which varies by program and aid category. Because the reduction is incorporated in one year of the base data, the exemption produces a 2.2% reduction for LIFC, a 2.0% reduction for ABAD, and a 1.4% reduction for ALTC. A 2.4% to2.5% reduction is applied to the Outpatient-Other services line for all programs and aid categories. These adjustment factors are shown in Exhibit 2e and applied to all hospital inpatient service categories in Exhibits 4a to 4c under the column labeled "Policy and Program Adjustments".

Behavioral health utilization adjustment

Beginning in FY 2012, DMAS made significant changes to the process to authorize Community Mental Health Rehabilitation Services (CMHRS) for children that is expected to increase referrals for traditional behavioral health services that are provided by psychiatrists, psychologists, and other clinicians whose services are covered by the MCOs. The estimated annual cost is an increase of $900,000 for services to Medallion II and FAMIS children 6 to 21 applied to FY 2011 base year data. LIFC children are allocated 75.7% and ABAD children are allocated 16.2% of the total, based upon the current distribution and use of mental health services. This adjustment factor is shown in Exhibit 2f and added in Exhibit 4a and 4b under the column labeled "Policy and Program Adjustments".

Emergency transportation adjustment

The Virginia General Assembly increased Medicaid emergency transportation rates for FY 2013 to 40% of the applicable Virginia Medicare Ambulance Fee Schedule. Under existing contracting arrangements, the MCOs may pay more than the DMAS Medicaid ambulance schedule, and frequently pay more than 40% of Medicare. Using payments reported for FY 2011, DMAS estimated the cost for the MCOs to move all rates to at least 40% of the CY 2012 Medicare rates at $442,537 annually. This amount is distributed across all managed care programs (Medallion II and FAMIS/FAMIS MOMS) and is an increase of $0.05 PMPM. This value is calculated as a percent of the trended Emergency and Non Emergency payments for each aid category. This adjustment factor is shown in Exhibit 2g and added in Exhibit 4a and 4c under the column labeled "Policy and Program Adjustments".

Provider incentive adjustment

The Provider Incentive Payment Adjustment takes into consideration the various ways that health plans provide incentive payments to providers for coordinating care, ensuring access, or improving quality. Depending on the plan, incentive payments are paid through an increase in provider fee schedules, payment of case management fees, and/or provider incentive programs. To the extent that it has been used to increase professional fee schedules, the amount is already included in the claims and encounter data. Some plans reported the case management and incentive amounts as capitation payments. To avoid double counting, we did not include the value of the capitation amounts that plans reported as representing incentive payments in the base data. Their value has been incorporated into the Provider Incentive Payment Adjustment.

The estimated weighted average value of the case management and provider incentive programs paid outside of the encounter data is $2.18 PMPM, or 0.8% of the weighted average of the medical cost component of the LIFC and ABAD base rates. Because the ALTC base cost is approximately seven times higher, the $2.18 PMPM is 0.1%

of the ALTC base rate. The amount is slightly less in dollar value and percent than the provider incentive factor in the FY 2013 health plan base rates. This percentage is shown in Exhibit 2h and is presented as the dollar value of the percentage applicable to each rate cell in the line labeled Provider Incentive Payment in Exhibits 4a to 4c.

Plan administration adjustment

The CMS regulations require that administrative costs directly related to the provision of Medicaid State Plan approved services be incorporated into the rate setting process. Each health plan provided revenue and administrative cost data for calendar year 2012 as part of its submission to the Virginia Bureau of Insurance (BOI) on the required form entitled Analysis of Operations by Lines of Business, and as necessary, notes to interpret the financial figures. We also received the Underwriting and Investment Exhibit, Part 3, Analysis of Expenses.

The first step of the calculation of the administrative factor develops an administrative dollar PMPM. The administrative adjustment uses figures from these reports, adjusted to remove self-reported payment of state taxes and other disallowed costs as identified by DMAS in previous health plan audits. It is weighted by the calendar year member month distribution to arrive at an average administrative cost across all contracted health plans.

The average administrative dollar PMPM is apportioned across the eligibility groups enrolled in the Virginia Medicaid managed care programs - ABAD, ALTC, LIFC Child, LIFC Adult, FAMIS, FAMIS MOMS, and Foster Care/Adoption Assistance using the ratio of the adjusted and trended base medical expense PMPM for each aid category. The resulting CY 2012 administrative cost ranges from$11.69 PMPM for LIFC Child to $155.86 PMPM for ALTC and is the sum of lines 1 and 2 of the administrative adjustment exhibit.

Using the breakdown of administrative expenses from the BOI reports, the salary and all other general administrative components of the historical PMPM are separately trended to the FY 2014 contract period. The salary component is trended using the Bureau of Labor Statistics 2012 calendar year employment cost trend for total compensation, private industry, management, business and financial services. The non-salary administrative component and the Claims Adjustment Expense components are trended using the 2012 calendar year Consumer Price Index for All Urban Consumers (CPI-U). The trended administrative PMPM ranges from $12.00 for LIFC Child to $160.03 for ALTC.

To reflect an estimate of administrative activity rather than just differences in base costs, the administrative dollars PMPM were reallocated based on weighting by claims volume PMPM for each eligibility group on line 5b. This ranges from 1.45 average claims PMPM for LIFC Child to 11.35 average claims PMPM for the ALTC population, with an overall average of 2.26 claims across all program categories, including Medallion II, FAMIS and FAMIS MOMS. The reallocated administrative costs are compared to the weighted average of the medical component of the FY 2014 base rates to determine separate administrative allowances as a percentage of the base capitation rate.

This percentage is then increased by a 1.50% contribution to reserves. The allowance for a contribution to reserve is the same as in last year's rate setting. The trended value of the administrative factor is 10.0% for LIFC Child, 8.8% for LIFC Adult, 7.6% for ABAD and 6.7% for ALTC.

Effective January 1, 2014, health plans, including Medicaid Managed Care plans, will be subject to a health plan excise tax established under the Affordable Care Act. Formal Federal guidance on the calculation of the value of the tax has not yet been issued. A rate adjustment for the excise tax will be made effective January 1, 2014 and is not included in the administrative cost adjustment presented here.

The administrative factor adjustment is shown in Exhibit 2i. This administrative cost factor is applied to the total adjusted and trended claims amount for the appropriate rate payment category. This adjustment factor is applied in the final steps of the per capita cost calculations at the bottom of each rate cell worksheet in Exhibits 4a to 4c.

IBNR and trend applied to health plan encounter data

The base period data reflect experience in the Virginia Medallion II program during FY 2011 through FY 2012. These data must be adjusted to reflect the contract period of FY 2014 through the application of trend rates that reflect changes in payment levels and utilization rates between the data period and the contract period. In addition, the claims data are not 100% "complete" in that some cost information is not available in the claims databases provided. Incomplete data results from the time lag between when services are provided and claims are fully paid. The amount of incomplete claims is referred to as IBNR and can be estimated through actuarial models.

Trend and IBNR adjustment factors were developed using monthly historical health plan expenditures. The data were evaluated using a PwC model that estimates IBNR amounts using a variety of actuarially accepted methods, and estimates trend using a least-squares regression methodology. Trend and IBNR factors were developed separately for LIFC Under 21, LIFC 21 and Over, and ABAD and for the following service categories: Inpatient Medical/Surgical, Inpatient Psychiatric, Hospital Outpatient, Practitioner, Prescription Drug, and Other (Transportation, DME, Lab/X-Ray). We developed separate trend and IBNR for ALTC but because of the small population base and significant increases in the size of the population during the experience period, ALTC trend and INBR factors were developed based on All Services combined. The small population base also lead to the conclusion to set the ALTC All Services Trend using members in the EDCD waiver as described below.

Trend adjustments are applied to move the historical data from the midpoint of the data period (July 1, 2011) to the midpoint of the contract period (January 1, 2014), or 30 months Data period trend rates for these groups are developed from a regression analysis on the 24 months of historical Virginia health plan data with run-out through October 2012 used for these capitation rates. Contract period trend rates for the majority of the services are developed to reflect our best estimate of trend in the future and are based primarily on incurred claims from July 2009, the beginning of FY 2010, through December 2012 or 42 months with run out through February 2013. Inpatient hospital and inpatient psych are evaluated to October 2012, or 40 months with the same run out to February 2013. Due to the transition from Amerigroup to InTotal Health, the most recent data requested for contract period trend (November 2012 thru February 2013) was inconsistent with the earlier data. As a result, the Amerigroup/InTotal Health data was not included for contract period trend. We now have sufficient ALTC data and the contract period trend is developed using the same time period as used for the other aid categories.

Where we consider the historical trend experience by service category to be an unreliable indicator of future trend, we examine the overall rate of change, additional data provided by the plans, estimates of cost increases

provided by DMAS and other sources to derive recommended trend assumptions. However, due to the robustness of the data (both the population size and the long data period), development of trend for FY 2014 primarily relied on the regression analysis subject to the adjustments described below.

Analysis of changes in the age/gender distribution of the LIFC Child population indicated that the population has shifted to a less expensive mix over the experience period. We developed an estimate of the risk mix of the LIFC Child population each month during the data period based on Medallion II cost relativities for each rate cell applied to each month's enrollment distribution. The monthly risk mix factor was applied to normalize each monthly data point in the LIFC Child data and contract trend regression models.

The impact of LIFC Child mix changes was analyzed over the full time period review for the contract trend, from July 2009, the beginning of FY 2010, to February 2013. Over this analysis period the proportion of members in the highest cost rate cell, Age Under 1, decreased while the proportion of children in the largest low cost rate cells, Age 1-5 and Age 6-14, increased. We estimate the following changes in risk mix for LIFC Child:

- Inpatient hospital risk mix decreased approximately 16.8% from July 2009 to February 2013.
- Outpatient hospital risk mix decreased approximately 2.7% from July 2009 to February 2013.
- The risk mix for all other services decreased approximately 3.8% from July 2009 to February 2013.
- The risk mix for all services combined decreased approximately 6.8% from July 2009 to February 2013.

Although it is smaller than the LIFC Child values, we also include an age-gender adjustment for LIFC Adult and ABAD. For LIFC Adult, the risk mix for all services combined decreased 0.3% from July 2009 to February 2013. For ABAD, the adjustment for all services combined increased 2.5% from July 2009 to February 2013. The ABAD positive age-gender adjustment reduces the data and contract period trend values.

In addition to the age-gender adjustment, we continue to observe changes in the risk mix of the ABAD population. Specifically, the ALTC population, which has average costs that are two to three times higher than other ABAD enrollees, is a growing proportion of the ABAD population. Additionally, the ALTC populations under the Elderly and Disabled with Consumer Direction (EDCD) and the Intellectual Disabilities/Developmental Disabilities (ID/DD) waivers[3] have significantly different costs and the proportion of each waiver group within the ALTC population has changed over time. These mix changes are addressed by separately projecting the costs of the ALTC and ABAD populations and blending the results using the projected population distribution to produce a single ABAD capitation rate for each rate cell.

The ABAD trend development relied upon standard analysis of the cost and utilization data by service category. For ALTC, the EDCD and ID/DD populations were separately trended using All Services EDCD trend[4] to project each waiver PMPM costs to the contract period. Then, the separate EDCD and ID/DD costs projected to FY 2014 are re-weighted to the expected 82.6% EDCD and 17.4% ID/DD mix. While ALTC data period trend is positive,

[3] There are a few members in the AIDS and Alzheimer Waivers and a larger number of members in the Day Support Waiver (serving Intellectually Disabled members with a limited service package) that are also included in the ID/DD waiver category.
[4] The EDCD All Services trend was used because more than 80% of the ALTC members are in the EDCD waiver and the remaining population in the ID/DD waivers is not large enough to produce a credible trend.

the contract period trend using the three year model is negative and set to 0.0%. The re-weighting increases the proportion of the higher cost EDCD ALTC members, resulting in a slight 0.2% contract period trend.

IBNR completion factors are applied to the total claims in the first column of Exhibits 4a to 4c, and the dollar value of the IBNR completion factors are shown in the second column, labeled "Completion Factor Adjustment".

In the MCO trend Exhibits 3a to 3d, IBNR is presented in column one. We have also added information on the cumulative impact of the policy and program adjustments in Exhibits 2a to 2g and are summarized in column two. This is for information purposes and should be evaluated in conjunction with the IBNR and applied trend.

Utilization and cost trend are presented separately for the base period and as a combined trend for the contract period. Inpatient hospital med/surg trend was evaluated after capping claims at $100,000. We note an increase in high cost claims, relative to prior years, particularly for LIFC Child. In addition, the inpatient contract period trend reflects only the utilization change. The unit cost trend component is replaced by a factor to allow the value of the hospital inpatient unit cost adjustment in Exhibit 2c. The utilization component is evaluated separately. Positive utilization values flow through the model while negative utilization trend is set to 0.0%

The weighted average data period trend is 5.4% for the LIFC Child, 2.6% for LIFC Adult, 6.2% for ABAD, and 1.5% for ALTC. Except for hospital outpatient, the increases are primarily driven by unit cost trend. The increase in prescription drug unit cost is particularly notable after a number of years of modest increase. Since the data used in this data period analysis has run-out through October 2012, or four months past the end of the data reporting period, the resulting IBNR factors are generally small, with a weighted average range of 0.8% to 1.5%, except for Inpatient LIFC Child and ABAD. This higher IBNR is partially related to the higher proportion of high cost claims identified in the base period.

For the contract period, any negative service line trend supported by the analysis of the FY 2010 to FY 2012 trend is set to 0.0%, except for inpatient hospital. Inpatient hospital contract trend adjusts unit cost and utilization separately, as described previously. With these values, the contract period trend shows modest annual rates of increase. The weighted average annualized MCO contract period trend for LIFC Child is 3.3%, LIFC Adult is 2.4%, and ABAD is 4.0%. ALTC contract trend is positive at 0.2%. The applied trend factors are shown in Exhibit 3a for LIFC Child Under 21, Exhibit 3b for LIFC Adult 21 and Over, Exhibit 3c for ABAD, and Exhibit 3d for ALTC. These trend and IBNR factors are applied to the historical data in Exhibits 4a to 4c by applicable service category.

PCCM base capitation rates

There was a managed care expansion of the Medallion II program effective January 1, 2012 that created a new region, Roanoke-Alleghany. It includes cities and counties in the Other MSA and Rural regions that were not served by any of the MCOs, or that had voluntary managed care participation because there was only one MCO in the service area. In addition, localities in the Far Southwest were mandatorily enrolled in managed care effective July 1, 2012. Because we do not have complete MCO encounter data for these populations, we developed rates primarily using the PCCM FFS historical experience.

The Roanoke-Alleghany rates are developed using a blend of MCO members who reside in the designated Roanoke-Alleghany geographic areas and the PCCM data for the other counties in the region. Far Southwest has not had any managed care plans within the data period and that regional rate is developed from the PCCM historical base in those counties.

Rate development using the PCCM expansion population data is described in this section.

Historical PCCM data

The PCCM base costs for Roanoke-Alleghany and the new expansion region of Far Southwest are presented in Exhibits 1d (PCCM LIFC) and 1e (PCCM ABAD).

Base rate legislative and program adjustments applied to PCCM data

For the Medallion II Roanoke-Alleghany and Far Southwest populations that will be in the new regions, all policy and program adjustments are consistent with the current Medallion II populations. These are separately adjusted and trended based on values presented in PCCM Exhibit 2a through PCCM Exhibit 2k. These are summarized in the tables below and are applied to the base data in Exhibits 4d and 4e.

Many of the adjustments that are applied to the PCCM Roanoke-Alleghany rate development are also the same adjustments developed for the Medallion II rate setting. Complete descriptions of these adjustments can be found in the previous section. Adjustments that are different for the PCCM Roanoke-Alleghany and Far Southwest expansion population are described below.

Medallion II FY 2014 Adjustments Applied to PCCM Populations Roanoke-Alleghany and Far Southwest Expansion

Adjustment Name	PCCM Adjustment Exhibits	Notes
Pharmacy Adjustment	2a	PCCM Adjustment
Exempt Infant Formula Carveout	2b	Medallion II 2b
Hospital Inpatient	2c	Medallion II 2c
Freestanding Psychiatric Hospital	2d	Medallion II 2d
Hospital Outpatient	2e	Medallion II 2e
Behavioral Health Utilization Adjustment	2f	PCCM Adjustment
Non-Emergency Transportation	2g	Transportation Vendor rates
Emergency Transportation	2h	PCCM Adjustment
Managed Care Savings	2i	PCCM Assumptions
Provider Incentive	2j	PCCM Fee
Administrative Cost	2k	Medallion II 2i

The following adjustments were either not applicable to the Medallion II rate development or have been modified in the adjustments for PCCM Roanoke-Alleghany and Far Southwest.

PCCM pharmacy adjustment

PCCM pharmacy PMPM expenditures are higher than the average expenditure for the MCO population, reflecting higher utilization rates and higher proportion of brand rather than generic drug prescriptions. The managed care savings utilization reduction is based on the assumption that the MCOs manage the PCCM population to achieve the current MCO pharmacy utilization and brand generic drug mix over the next three years. A two year reduction estimate is applied for FY 21014 based on a comparison to Roanoke-Alleghany MCOs. Rebate, dispensing fee, and PBM administration components of the adjustment are based upon health plan reported data.

Pharmacy rebate, dispensing fees, and PBM administrative costs are added based on data reported by the MCOs. The calculations result in a reduction of 13.6% for LIFC Child, 6.6% for LIFC Adult, and 9.2% for ABAD. This is presented in PCCM Exhibit 2a and applied in Exhibits 4d and 4e in the column labeled "Policy and Program Adjustments".

Behavioral health utilization adjustment

Beginning in FY 2012, DMAS made significant changes to the process to authorize Community Mental Health Rehabilitation Services (CMHRS) for children that is expected to increase referrals for traditional behavioral health services that are provided by psychiatrists, psychologists, and other clinicians whose services are covered by the MCOs. The estimated annual cost is an increase of $173,000 for services to all children 6 to 21 covered under PCCM program. LIFC children are allocated 77.9% and ABAD children are allocated 22.1% of the total, based upon the current distribution and use of mental health services. This adjustment factor is shown in Exhibit 2f and added in Exhibits 4d and 4e under the column labeled "Policy and Program Adjustments".

PCCM non-emergency transportation adjustment

Non-emergency transportation services for FFS Medicaid beneficiaries are provided by an outside vendor and are not reflected in the base data. The adjustment uses the projected FY 2014 capitation payment to the transportation vendor for transportation regions that are included in Roanoke-Alleghany and Far Southwest. The amount removes the vendor administrative component. The value is shown in PCCM Exhibit 2g and is applied as a PMPM amount in the last column of Exhibits 4d and 4e under the column PMPM FY14.

PCCM emergency transportation adjustment

The Governor's budget proposes increasing Medicaid emergency transportation rates to 40% of the applicable Virginia Medicare Ambulance Fee Schedule. Using payments reported for FY 2011, DMAS estimated that current emergency transportation fee schedule at approximately 29% of the Medicare rates. Based on a comparison of historical payments and the estimated dollars to move to 40% of the CY 2012 Medicare ambulance fee schedule, DMAS calculated a 38.4% increase over current DMAS rates. The value is shown in PCCM Exhibit 2h and is applied in Exhibits 4d and 4e under the column labeled "Policy and Program Adjustments".

PCCM managed care savings adjustment

For both Roanoke-Alleghany and Far Southwest, a uniform -8.5% managed care savings adjustment is applied to all service lines, except pharmacy, which is separately adjusted in PCCM Exhibit 2a. MCOs are expected to develop their individual care management programs to bring costs more in line with the experience observed in other parts of the state.

PCCM provider incentive adjustment

The Provider Incentive Payment Adjustment is based upon the PCCM case management fee of $3.00 PMPM weighted by the proportion of members who do not use a FQHC or RHC for primary care and are paid the PCCM case management fee. The value of $1.81 PMPM represents 0.3% of the Roanoke-Alleghany and Far Southwest base medical PMPM after policy and program adjustments and the application of trend. The percentage is shown in PCCM Exhibit 2j and is applied as a PMPM amount in the last column of Exhibits 4d and 4e, under the column PMPM FY14.

IBNR and trend applied to PCCM data

The IBNR and trend adjustment for the PCCM rates uses the IBNR and data period trend developed for the historical PCCM population in Roanoke-Alleghany and Far Southwest. Contract period trend uses the values developed for the MCO population. Although the data period and contract period service category applied trends are the same for the Roanoke-Alleghany and Far Southwest PCCM populations, differences in the historical utilization and cost produce different weighted average data period, contract period and total trend factors for the two regions. The weighted averages are presented separately for Roanoke-Alleghany and for Far Southwest.

These are presented in PCCM Exhibits 3a to 3c and applied to the completed and adjusted claims for each rate cell in Exhibits 4d and 4e.

Base capitation rates

Rates are developed for the full FY 2014 year. DMAS expects to use a contract amendment for the period from July 1, 2013 to December 31, 2013 and from January 1 to June 30, 2014 that will include the Primary Care Provider increase to Medicare primary care physician rates. The Virginia proposed methodology for the PCP supplemental payment was approved in April 2013 and a draft of the adjustment is described later in this report. The rates effective July 1, 2013 have been trended to the midpoint of the full FY 2014 contract period (January 1, 2014) and therefore reflect rates that would be in effect absent the primary care physician fee increase.

Base capitation rate for Medically Needy

The medically needy (MN) group includes recipients who meet categorical requirements for Medicaid but whose income is in excess of financial requirements. It also includes recipients who are on spend down. The Medically Needy group has not been eligible for enrollment in Medallion II.

Last year, DMAS decided to move the non-spend down medically needy to Medallion II. Rather than move them as a single expansion, the MN MCO enrollment will be phased in at eligibility determination and redetermination. The phase in began September 1, 2012. At any one time, there are approximately 1,700 individuals in this MN

group and it is anticipated that all individuals will be moved out of the FFS Medically Needy aid codes and into the appropriate MCO aid category by December 2013.

Historical cost of the group of 1,700 individuals that met the current Medically Needy criteria (not covered for Medallion II) as of March 2012 but would be moved to a Medallion II covered aid category under the new criteria effective September 2012 were analyzed. The FY 2012 historical PMPM is significantly higher, almost double the PMPM cost of the ABAD base population and approximately 10% lower than the ALTC base cost. Given the size of the population and the significantly higher cost, there is an adjustment to the FY 2014 ABAD rates. Future rates will also be adjusted until the existing MN population is fully integrated into the base data used for rate development.

For FY 2014, base costs for FY 2012 are derived from the DMAS FFS data. Approximately 1,300 of the 1,735 individuals who have been identified as MN are over Age 45 and 93% are adults Age 21 and over.

A statewide rate is developed separately for the MN Child and Adult and all are designated as ABAD. The base data adjustments and trend use the PCCM values applied to the distribution of MN claims by category of service. A managed care savings adjustment of -8.5% is applied to the adjusted and trended base. The resulting PMPM is $826.37 for the Child rate cells and $1,847.75 for the Adult rate cells. These rates are shown in Exhibit 5b before blending with the non-ALTC ABAD adjusted and trended base rates.

Base capitation rates including blended MCO-PCCM, Medically Needy, and ABAD-ALTC

Development of the Roanoke-Alleghany regional rates requires blending the separately adjusted and trended MCO and PCCM rates from Exhibits 4a to 4e. They are weighted by the Roanoke-Alleghany historical member month distribution over the base period of FY 2011 to FY 2012. The results are presented as the blended Roanoke-Alleghany average in Exhibit 5a.

The Medically Needy ABAD rate is blended with the non-ALTC ABAD rate in Exhibit 5b. The ABAD base rates are taken from Exhibits 4a to 4e and are weighted by the health plan enrollment distribution as of 2013. The MN enrollment is assumed to be the monthly average of 1,571 MN individuals identified by DMAS who will be enrolled in MCOs in the FY 2014 time period. This assumes that an equal number of MN individuals are added each month to the 425 identified in the DMAS capitation payment file as of February 2012. Under this phase in, there would be 1080 MN enrolled as of June 2013 and all 1,735 would be enrolled as of December 2013. Adding the MN to the ABAD population increases the ABAD base rate by approximately 0.9%.

As discussed earlier in the section Data Smoothing for High Cost Inpatient Claims, the rates developed for the ALTC population are redistributed in Exhibit 5c using cell relativities derived from the FY 2103 ALTC rate development. There is no historical ALTC information for the Far Southwest region and it is assigned the average ALTC base rate values developed for the other regions.

The redistributed ALTC base capitation rates are combined with the blended MN-ABAD rates from Exhibit 5b to derive the overall ABAD base rates in Exhibit 5d.

During the FY 2011 to FY 2012 base period, ALTC increased from 2.5% to 3.9% of the ABAD population. By February 2013, ALTC was 4.4% of the ABAD population, excluding the expansion into Far Southwest. We estimate that ALTC will average 5.0% of this ABAD population in the next contract year. Although we do not have any Far Southwest ALTC population in the historical base period, we note that ALTC have been identified in the expansion area. As of February 2013, there were 43 ALTC members, or 0.4% of the Far SW ABAD population. This population has been increasing by 5 to 10 per month in the short period since the July 2012 expansion.

The separate projections for the established regions and the Far Southwest ALTC mix is used for the ABAD blended cell rates in Exhibit 5d.

The blended Roanoke-Alleghany and ABAD rates and the health plan base capitation rates for LIFC as presented in the adjusted and trended claims in Exhibits 4a are shown in Exhibit 5e. The Far Southwest adjusted and trended rates are added as an additional column in the Exhibit. The February 2013 PCCM Far Southwest member distribution shows a greater proportion of ABAD members as a percentage of total members (20.8% Far Southwest versus 11.6% in all other regions).

Comparison of FY 2013 and FY 2014 health plan base capitation rates

The FY 2014 rates are compared to the FY 2013 rates in Exhibit 5f. The weighted average year to year change is a 7.99% increase for ABAD, a 5.09% increase for LIFC and an overall increase of 6.27%. For the revised rates, total average PMPM have been calculated using February 2013 health plan eligible months as weights, which are shown in Exhibit 5g.

Health plan risk adjusted capitation rates

The Virginia Medallion II base capitation rates have been developed using health plan encounter and PCCM/FFS data. The development of the capitation rates included an analysis of differences in expected risk and implied cost using the Chronic Illness and Disability Payment System (CDPS). The risk calculation is performed at the regional level to match the methods used for developing the base capitation rates.

Background on the risk adjusted rates

The CDPS scores represent each health plan's regional risk assessment score relative to the average of all health plan risk assessment scores within each region. This method results in risk-adjusted rates by health plan that are budget neutral within each region. Each risk score that is greater than 1.0 results in an increase in payments for a given health plan that must be offset by a lower risk score and a reduction in payments to other health plan(s) within the region.

DMAS policy for development of the person-level risk scores uses all the diagnosis codes included on the health plan encounter data and any available FFS claims data and applies CDPS.

Virginia specific relative weights are used for the CDPS assessment. The March draft rates used CDPS model, Version 5.1 Med/Surg with RX Virginia specific weights developed from FY 2007 to FY2009 encounter data. This report updates that with CDPS model Version 5.3 Med/Surg with Rx Virginia specific weights developed from the FY 2010 to FY 2012 encounter data.

General overview of CDPS methodology

CDPS scores are developed using encounter claims records from both the FFS and managed care delivery systems. Each person enrolled in the Virginia Medicaid program that is either enrolled in a managed care plan, or who could be enrolled if a plan were operational in their area, receives a risk assessment score. The score is calculated based on all available data for the individual; if the individual changes health plan or delivery system, information from all relevant sources is combined to gain an overall risk profile.

The CDPS score for each person is based on his or her demographic and health status characteristics. Individuals with no health status information receive a base score derived from the demographic characteristics of the person. Because the CDPS model is additive, scores based only on demographic information are lower than scores that are adjusted for the presence of specified medical conditions. There are three separate models that classify individuals based on their eligibility category and age. Specifically, there are models for LIFC children, LIFC adults, and ABAD. The different models use largely the same risk status classification system, but the value attached to each characteristic varies among the models. There are also slight differences in the medical conditions included in the various models. For example, a larger percentage of the ABAD population has claims and an identifiable medical condition than does the LIFC population. Consequently, the base values for age and gender contribute less to the risk score for the ABAD population than for the LIFC population, and the value associated with the various medical conditions represents a larger contribution to the risk score.

A health plan score is calculated based on an aggregation of the individual scores for the plan's enrollees using claims for the second year of the data period and assigned to the health plan of enrollment indicated on the capitation payment file as of the most recent date known. Risk scores for a health plan are developed first at the rate cell level and then by summing the scores for all enrollees in the region and dividing by the number of eligible people. Average scores for each health plan are compared to the average score across all plans for the eligibility category in a region and a relative risk score is developed for each health plan.

CDPS analysis results

The draft FY 2014 analysis builds upon the CDPS Version 5.3 Med/Surg with Rx VA weight model to adjust base capitation rates for differences in health plan relative risk scores within region. The CDPS relative risk adjustment within a region is calculated to be cost neutral to the base rate for that region for the currently enrolled MCO members.

The CDPS relative risk scores that are applied to the FY 2014 base rates:

1. Use calculations based on the most recent year of both MCO and DMAS FFS data, FY 2012, with a minimum length of eligibility of three months;
2. Assign members based upon the last known eligibility status and health plan enrollment;
3. Use all available ICD-9 codes per record and pharmacy claims to identify each individual's health status;
4. Use Medicaid utilization in both fee-for-service and health plans to develop an individual's CDPS score; and

5. Adjust the CDPS calculation to consider the rate setting methodology and therefore takes into account variation in underlying per capita cost by region, eligibility category, and age/gender.

CDPS risk adjustment scores applied to the base rates are shown in Exhibit 6. These relative risk scores use health plan enrollment as of February 2013.

Health plan CDPS adjusted rates

The FY 2014 risk adjusted rates for each health plan are shown in Exhibits 7a to 7f. These rates are calculated by applying the health plan specific CDPS adjustment factor for each aid code within a region to the base capitation rates in Exhibit 5c for each geographic region.

Exhibit 7g displays the regional average capitation rates with the CDPS adjustment. These rates reflect both the current enrollment mix of each health plan as of February 2013 and the CDPS adjustment factors and are provided for information purposes only.

The capitation rates will be paid in the geographic regions in which each health plan currently contracts. The final base rates may be subject to negotiation between DMAS and each health plan and may result in rates that are greater than, equal to, or less than the proposed CDPS adjusted capitation rates.

Additional adjustments

Kalydeco reinsurance adjustment

DMAS proposes to reinsure the cost of the drug Kalydeco, which was approved by the FDA in 2012 for the treatment of children age 6 and older who test positive for a specific genetic mutation related to a rare form of cystic fibrosis. Approximately 4% of those with the disease have the gene. Some estimate that the drug could extend the average life span by 10 to 20 years beyond the current life expectancy which is in the mid-30s. The cost of the drug, a pill taken twice a day, is $357,700 per year. At present, four children in the Medallion II program with cystic fibrosis have tested positive for the mutation and currently receive the drug.

The annual cost of $1.4 million dollars is divided by the MCO enrolled population Age 6 and over as of February 2013 to derive an adjustment of $0.27 PMPM. This amount will be subtracted from the health plan capitation payment for those rate cells to fund a Kalydeco reinsurance pool as required by the CMS checklist.

This calculation is shown in Exhibit 8 and the health plan specific rates, as adjusted for removal of the Kalydeco reinsurance amount, are shown in Exhibits 9a to 9g.

Medicare primary care physician supplemental payment

Section 1902(a)(13)(C) of the Social Security Act (SSA), as amended by Section 1202 of the Affordable Care Act of 2010 (ACA), requires that state Medicaid programs incorporate increased payment to primary care providers for 2013 and 2014 into contracts with managed care organizations and the corresponding capitation payments.

States will receive 100% Federal Financial Participation (FFP) for the difference between the July 1, 2009 Medicaid state plan rates and the appropriate calendar year 2013 and 2014 Medicare rates for eligible primary care services for eligible primary care physicians. The minimum payment level applies to physicians that attest to

a specialty designation of family medicine, general internal medicine, or pediatric medicine or a subspecialty recognized by the American Board of Medical Specialties, the American Board of Physician Specialties, the American Osteopathic Association, or physicians that attest that 60 percent of their Medicaid claims for the prior year were for the E&M and vaccine administration codes specified in the regulation. This definition excludes physicians who practice in FQHCs and others, such as OB-GYN and Emergency Medicine specialists, who may also provide a high proportion of primary care.

As outlined in the law and implementing regulations, primary care services that qualify for increased payment designated in the Healthcare Common Procedure Coding System (HCPCS) are:

- Evaluation and Management (E&M) codes 99201 through 99499
- Vaccine administration codes 90460, 90461, 90471, 90472, 90473, 90474, or their successor codes
- Based upon clarifying discussions with CMS, only those HCPCS codes paid by DMAS in the FFS program, not the full range of codes identified in the implementing regulations, will be eligible for the enhanced payment.

Rules issued in the Federal Register, dated November 6, 2012, give states flexibility to implement the provision consistent with their managed care rate setting practices, the available data sources, and reasonable assumptions. DMAS submitted its proposed methodology for calculating supplemental primary care physician payments and for claiming the 100% FFP on March 8, 2013 and received approval of the proposal on April 16, 2013. The State Plan Amendment implementing the provision was approved on May 23, 2013.

Virginia elected to adopt Risk Model 1: Full Risk Prospective Capitation. DMAS will include the enhanced primary care payments prospectively in the Medallion II capitation rates, with no retroactive adjustments or financial reconciliation. The applicable CY 2013 Medicare fee schedule was developed by DMAS based on the primary care rate increase rule using the Virginia region specific non-facility payment rates for the eligible codes covered by DMAS FFS.

Final supplemental payments have been developed by health plan and by regions to reflect differences in MCO reimbursement levels and utilization. The supplemental payment calculation will be reviewed semi-annually and may include adjustments for utilization changes associated with the primary care fee increase. The approved supplemental payments presented in Exhibit 10 will be applied for the first half of FY 2014, the period from July 1, 2013 to December 31, 2013.

Supplemental primary care physician payments will also be developed and applied for any new populations that are moved into managed care and receive health plan services during the time period January 1, 2013 to December 31, 2014. This includes the Foster Care/Adoption Assistance expansion that is described elsewhere in this report. The MN expansion population will receive the ABAD supplemental payment for their rate cell.

Supplemental payments for the first half of FY 2014 are based upon the CMS approved list of DMAS paid CPT codes within the primary care service range and the list of DMAS FFS and health plan contracted physicians that attested by April 30, 2013 to meeting the primary care specialist criteria. As of that date, approximately 5,700

physicians submitted the required documentation. The unit cost supplemental payment is calculated as the difference between the CY 2013 Medicare fee schedule and the paid amounts in the FY 2011 to FY 2012 base data for the eligible CPT codes, as adjusted and trended, in the final FY 2014 Medallion II rate development. The same methodology was used for the component of the rates developed with DMAS PCCM and FFS paid claims data. The total dollar amount to be paid as the Medicare Enhanced Capitation rate therefore considers both changes in unit cost and in utilization.

There are two additional adjustments to this dollar amount. It is first increased by 5%, an adjustment for the expected increase in the utilization of the eligible primary care services. The utilization increase is based on estimates by the CMS Office of the Actuary included in the preamble to the final rule implementing the regulations. The second adjustment is a Provider Attestation Completion Factor that represents the increase in enhanced payments to eligible providers if the proportion of eligible providers and eligible claims in the historical base data was similar to the proportion of eligible providers and eligible claims identified in the most recent encounter paid claims data. For the FY 2014 health plan base data, this completion factor is an increase of 4.6% for LIFC Child, 12.3% for LIFC Adult, and 1.6% for ABAD. These factors are applied to all plan specific rate cells. For the Roanoke-Alleghany and Far Southwest rates that used DMAS FFS/PCCM data, the Provider Attestation Completion Factors are somewhat higher. The resulting dollar amounts are divided by the historical period enrollment to produce the plan specific Medicare enhanced PCP supplemental payment by region, aid category, and age-gender rate cell.

For some plans, we find small dollars and enrollment reported in regions outside of the health plan service area. In these regions, the health plan will be paid the all plan regional average PMPM for each age-gender rate cell. Plan specific PCP supplemental payments are presented in Exhibits 10a to 10f. PCP supplemental payments that are based on the all health plan average for the region and rate cell are shaded in light gray.

Weighted averages for these tables use the February 2013 member enrollment. The weighted average All Plan PCP supplemental payment is $10.77 PMPM for ABAD and$8.18 PMPM for LIFC. Total weighted average PCP supplemental payment is $8.49 PMPM.

Exhibits 11a to 11f present the plan specific rates after CDPS adjustment and Kalydeco reinsurance adjustment with the rate cell level PCP supplemental payment adjustment. These are also weighted by the February 2013 member enrollment.

New plan entrant

As of October 1, 2013, Kaiser Permanante will participate in the Medallion II program in the Northern Virginia region. The rates for Kaiser are based on the NOVA Medallion II base rates, as presented in Exhibit 5e, with no CDPS adjustment. They are then adjusted for Kalydeco reinsurance applied to all rate cells for members 6 years of age and older. The Medicare Enhanced PCP supplemental payment will be the NOVA all health plan regional average. Final rates for this plan are presented in Exhibit 12.

II. Foster Care and Adoption Assistance Expansion

Background

The Medallion II program began a Foster Care Pilot in Richmond effective November 1, 2011. As of June 2012, the pilot had enrolled 155 foster care children under the age of 21 in managed care plans to receive their acute care and traditional behavioral health services. Effective September, 2013, there will be a managed care expansion for Foster Care (FC) and Adoption Assistance (AA) children into the entire Richmond/Charlottesville and Tidewater regions. A second expansion into the remainder of the state will occur before the end of 2014.

Databook

Because this is a new managed care expansion, the primary data available to develop rates is DMAS FFS eligibility and paid claims data. We did not use the MCO experience from the Richmond Foster Care Pilot because it represented a small population of approximately 100 average monthly enrollees over a brief period of time.

The FFS base period data was developed using paid claims for FY 2011 and FY 2012. Data and contract period trend evaluation used FY 2010 to FY 2012 data.

Foster Care and Adoption Assistance children are defined as children, up to the age of 20, who are in DESIG codes 72 (Adoption Assistance), 76 (Foster Care) or 74 (combined). As of February 2013, DMAS discontinued use of DESIG code 74 and all currently eligible Foster Care or Adoption Assistance children who had been in DESIG code 74 were re-assigned to either Foster Care 76 or Adoption Assistance 72. We used the DMAS February 2013 eligibility file to develop a list of FC/AA member IDs. This member list was compared to the member IDs of children in DESIG code 74. When a match was found, all previous eligibility and claims for the person were assigned to either Foster Care or to Adoption Assistance. Because children leave the program, there was a residual population of children who could not be reassigned. Overall, children in DESIG code 74 who could not be assigned comprised approximately 16% of the FC/AA member months and 13% of the claims in the base period. The selected FC/AA population excluded the small number of children who were concurrently in a waiver program, most commonly the EDCD waiver. Children in the Early Intervention program were included.

A review of the base period data by region showed a similar proportion identified as either Foster Care or Adoption Assistance. Base costs for the Foster Care children were higher, approximately $438 PMPM compared to $279 PMPM for Adoption Assistance. Base period costs for the remaining DESIG code 74 population was similar to the Adoption Assistance children at $282 PMPM.

Because of the similarities across regions and the substantial proportion who could not be assigned to either Foster Care or Adoption Assistance, the first year of the expansion will use a single statewide rate.

Processing of the data is similar to that used for the development of the MCO and PCCM base data in the Medallion II program. Claims were excluded for services that will not be the responsibility of the MCO. The major exclusions were community mental health rehabilitation services, school based special education services, early intervention services, inpatient psychiatric residential, and foster care case management.

Foster Care Exhibit 1 presents the historical claims data for the combined Foster Care and Adoption Assistance population.

Foster Care and Adoption Assistance legislative and program adjustments

Legislation and policy changes in the Medallion II program for FY 2011 and later must be reflected in the development of per capita rates, as the data used to develop rates do not fully include the effect of those changes.

The historical data presented in Exhibit 1 is adjusted by the policy and program factors described in this section (Exhibits 2a to 2j) and the Trend and IBNR factors (Exhibit 3).

In general, the methodology for Foster Care and Adoption Assistance adjustments is similar to those developed for the Medallion II or the PCCM populations in expansion areas. Actual adjustment values may differ where the adjustment is developed using FC/AA encounter data instead of Medallion II encounter or PCCM data. All of these adjustments are reflected in the column "Policy and Program Adjustments" in Exhibits 4, with the exclusion of a Provider Incentive Adjustment.

Only those adjustments that differ from those used for Medallion II MCO, LIFC Child, or the PCCM population are described. A summary of the adjustments for the Foster Care and Adoption Assistance program is presented in the following table:

Medallion II Adjustment Methodology Used in FosterCare/Adoption Assistance Rates		
Medallion Exhibit Number and Adjustment Name	**FC/AA**	**Foster Care/Adoption Assistance Values**
2a PCCM Pharmacy Adjustment	2a	2a: -4.1% applied to pharmacy services
2b MCO Exempt Infant Formula Carveout	2b	2b: LIFC Child Age 6-20
2c MCO Hospital Inpatient	2c	2c: Same as Med II
2d MCO Freestanding Psychiatric Hospital	2d	2d: Same as Med II
2e MCO Hospital Outpatient	2e	2e: Same as Med II
2f MCO Behavioral Health Utilization	2f	2f: LIFC Child Age 6-20
Medallion Exhibit Number and Adjustment Name	**FC/AA**	**Foster Care/Adoption Assistance Values**

2g PCCM Non-Emergency Transportation Adjustment	2g	2g: $1.04 PMPM Vendor Service Cost for LIFC Child
2h PCCM Emergency Transportation Fee Increase	2h	2h: 38.4% Same as Med II PCCM
2i PCCM Managed Care Savings	2i	2i: -8.5% All Services Managed Care Savings; Exclude Pharmacy
2j PCCM Provider Incentive	NA	Not applied
2i MCO Administrative Cost	2i	2i: 10.0% of base capitation rate with contribution to reserves; Same as LIFC Child

Pharmacy adjustment

The outpatient prescription drug adjustment is based on FC/AA data, taking into consideration aspects of pharmacy management reported by the health plans. The calculation uses the FFS data net cost and subtracts out the DMAS FFS dispensing fees. It then applies the managed care factors for rebates and Pharmacy Benefit Management administrative fees, to determine an adjusted PMPM.

Review of the Foster Care and Adoption Assistance brand-generic mix shows very high use of generics and a higher proportional usage than observed in the LIFC Child population. In the FY 2011 to FY 2012 period, nearly 87% of the prescriptions were for generic drugs.

Overall, pharmacy services represented approximately 40% of the total base period costs. Foster Care and Adoption Assistance utilization rates are more than three times higher than LIFC Child and unit cost is twice as high. The higher utilization and higher unit cost seen in the FFS data are similar to that reported by the health plans in the Richmond Foster Care Pilot. Because of this, there are no factors applied to improve brand-generic mix or to reflect lower expected utilization.

The Federal Affordable Care Act (ACA) signed in March 2010 extended Medicaid FFS pharmacy rebates to Medicaid managed care plans. MCOs are required to submit pharmacy data to the State Medicaid agency, which will then submit the information to the pharmaceutical manufacturers to claim the rebate. PBM contracts with the MCOs have been modified to reduce the rebate available to the MCOs for their Medicaid managed care populations.

Based on plan submitted data, we estimate the effective pharmacy rebate will not change from the amount projected by the health plans, or 2.3%. The final pharmacy adjustment factors are shown in Exhibit 2a. The PBM factor is a reduction of 4.1%.

Exempt infant formula carveout adjustment

DMAS policy regarding reimbursement of selected formula for infants with diseases of inborn errors of metabolism requires direct billing for those services. Historically, the health plans referred members to the Woman, Infants, and Children (WIC) program for these services, but pay for services after the WIC benefit maximum is reached. This adjustment removes the amount that the health plans paid for selected formulas after

children up to age 19 have met the WIC cap. The exempt formula adjustment is applied to all children up to age 19. DMAS provided a list of HCPCS codes to identify the exempt formula services.

The value of these services has been removed and is shown in Exhibit 2b. The adjustment is applied to the DME/Supplies service line in Exhibit I.4 under the column labeled "Policy and Program Adjustments".

Behavioral health utilization adjustment

DMAS has made significant changes to the process to authorize and deliver Community Mental Health Rehabilitation Services (CMHRS) for children that is expected to increase referrals for traditional behavioral health services provided by psychiatrists, psychologists, and other clinicians whose services are covered by the MCOs. The estimated annual cost uses the factor developed for the LIC Child population in Medallion II. This adjustment factor is shown in Exhibit 2f and added in Exhibit 4 under the column labeled "Policy and Program Adjustments".

Non-emergency transportation adjustment

Non-emergency transportation services for FFS Medicaid beneficiaries are provided by an outside vendor and are not reflected in the base data. The adjustment uses the projected FY 2014 capitation payment to the transportation vendor for the LIFC Child rate cell. The amount removes the vendor administrative component. The value is shown in Exhibit 2g and is applied as a PMPM amount in the last column of Exhibit 4 under the column PMPM FY14.

Foster Care and Adoption Assistance Managed Care Savings Adjustment

For the FC/AA population, we applied a pharmacy managed care savings adjustment as described in FC/AA Exhibit 2a. A uniform -8.5% managed care savings assumption is applied to all other service lines. Service specific managed care savings were not applied. The Foster Care population PMPM was 13% to 17% higher than the MCO Foster Care pilot PMPM, but the combined FC/AA PMPM was lower than the reported data for the Richmond pilot. Services with the greatest potential for managed care savings include Hospital Inpatient Other and Hospital Inpatient Psych, Professional Psych, and Laboratory and Radiology. In the Richmond Foster Care pilot, inpatient costs may have been shifted to the outpatient setting; we observe 25% to 50% lower costs for inpatient care, but this is substantially offset by higher outpatient expenditures.

Foster Care and Adoption Assistance trend and IBNR adjustments

Trend and IBNR adjustment factors use the combined Foster Care and Adoption Assistance data and applies the same methodology described for the Medallion II trend development. We used the monthly historical FFS expenditures for FY 2011 and FY 2012 with run-out through December 2012 to develop the data period trend. Contract period trend was evaluated data using monthly health plan expenditures through October 2012 with run out through December 2012.

Incurred But Not Reported (IBNR) completion factors in the first column of Exhibit 3 are based on the FC/AA historical data and are applied to the total claims in the first column of Exhibit 4, with the dollar value of the IBNR completion factors shown in the second column of that exhibit. The data used in this analysis has run-out through December 2012 or six months past the end of the data reporting period, and the resulting IBNR factors, are small. IBNR factors for Inpatient Hospital, Outpatient Hospital, Inpatient Psychiatric, Practitioner, Prescription Drug and Other services are all calculated to be 0.4% or less.

The second column of Exhibit 3 provides information on the cumulative impact of the policy and program adjustments in Exhibits 2a - 2f. This is for information purposes and should be evaluated in conjunction with the IBNR and applied trend.

Utilization and cost trend are presented separately for the data period and as a combined trend for the contract period. Overall, the data period trend, weighted by the service distribution in the Foster Care and Adoption Assistance population is 3.3%. The contract period trend is slightly lower with a weighted average of 2.7%. The inpatient hospital contract trend was developed the same as in the Medallion II program and the separate negative utilization trend is set to 0.0%. Prior to this inpatient hospital adjustment, contract period trend using three years of historical data was -6.3% after capping outliers at $100,000 and driven by both negative unit cost and utilization trend.

The resulting trend factors are shown in Exhibit 3. These trend and IBNR factors are applied to the historical data in Exhibit 4 by applicable service category.

Capitation rates for Foster Care and Adoption Assistance

The administrative factor is then applied to the medical component of the capitation rate to produce the statewide Foster Care and Adoption Assistance rate. The resulting rate of $345.79 is shown in Exhibit 5. This is then increased by the PCP Supplemental payment of $8.89 PMPM which is a 1.4% addition to the base rate. The final rate for July to December 2013 is compared to the FY 2013 Richmond Pilot; the FY 2014 statewide Foster Care /Adoption Assistance rate is 44.0% lower. This is also the rate that will be paid in the Richmond City pilot in FY 2014.

This difference from the Richmond pilot rate can be explained by a number of factors. The original Richmond Foster Care Pilot historical base was developed using the FY 2009 to FY 2010 claims history of 265 children identified as Foster Care in Richmond City. At that time, there was not consistent coding of Foster Care in the DMAS eligibility file. Also, because the eligibility file did not indicate start and end dates all costs in the base period were captured and the original Richmond base costs were high - nearly $600 PMPM. With no new data, the rates developed for FY 2012, were simply trended for FY 2013. Although the rate development did not use the health plan data for the Foster Care Pilot, we note that the MCO reported costs for the Richmond pilot were approximately $380 PMPM.

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age Under 1								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	116,770	118,531						
Service Type								
DME/Supplies	$426,315	$353,195	$3.65	$2.98	631	644	$69.40	$55.54
FQHC / RHC	$83,555	$62,619	$0.72	$0.53	316	215	$27.15	$29.55
Home Health	$208,798	$17,870	$1.79	$0.15	24	4	$877.30	$435.85
IP - Maternity	$0	$824	$0.00	$0.01	0	0	-	$824.38
IP - Newborn	$13,195,443	$12,543,007	$113.00	$105.82	341	331	$3,974.33	$3,835.74
IP - Other	$3,791,990	$3,124,892	$32.47	$26.36	61	54	$6,394.59	$5,808.35
IP - Psych	$88	$20,153	$0.00	$0.17	0	2	-	$1,060.69
Lab	$196,775	$193,520	$1.69	$1.63	2,039	1,828	$9.92	$10.72
OP - Emergency Room & Related	$1,912,134	$1,760,664	$16.38	$14.85	939	964	$209.26	$184.92
OP - Other	$1,444,673	$1,356,044	$12.37	$11.44	300	304	$495.33	$451.29
Pharmacy	$2,363,076	$2,593,862	$20.24	$21.88	4,973	4,792	$48.84	$54.80
Prof - Anesthesia	$138,692	$138,861	$1.19	$1.17	61	62	$235.23	$228.01
Prof - Child EPSDT	$677,699	$599,070	$5.80	$5.05	5,338	5,152	$13.05	$11.77
Prof - Evaluation & Management	$9,333,974	$9,462,562	$79.93	$79.83	12,619	12,471	$76.01	$76.82
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$1,426,236	$2,174,189	$12.21	$18.34	8,065	8,921	$18.17	$24.67
Prof - Psych	$1,538	$567	$0.01	$0.00	2	1	$69.89	$80.99
Prof - Specialist	$572,785	$548,269	$4.91	$4.63	490	489	$120.14	$113.62
Prof - Vision	$176,984	$177,073	$1.52	$1.49	132	118	$137.95	$152.12
Radiology	$158,980	$151,807	$1.36	$1.28	1,077	955	$15.17	$16.09
Transportation/Ambulance	$432,892	$412,301	$3.71	$3.48	340	342	$130.82	$121.98
Total	$36,542,628	$35,691,350	$312.95	$301.11				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 1-5								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	475,224	472,605						
Service Type								
DME/Supplies	$826,264	$790,483	$1.74	$1.67	216	241	$96.44	$83.42
FQHC / RHC	$226,062	$212,222	$0.48	$0.45	184	163	$30.99	$32.97
Home Health	$120,992	$217,925	$0.25	$0.46	2	4	$1,260.34	$1,388.06
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$7,471,933	$5,559,740	$15.72	$11.76	23	21	$8,348.53	$6,763.67
IP - Psych	$13,185	$4,616	$0.03	$0.01	0	0	$732.51	$659.42
Lab	$945,809	$943,656	$1.99	$2.00	2,657	2,550	$8.99	$9.40
OP - Emergency Room & Related	$5,071,808	$4,630,156	$10.67	$9.80	616	621	$207.92	$189.37
OP - Other	$5,462,086	$5,065,306	$11.49	$10.72	209	202	$659.12	$637.95
Pharmacy	$6,610,911	$7,307,584	$13.91	$15.46	4,757	4,698	$35.09	$39.49
Prof - Anesthesia	$404,065	$430,536	$0.85	$0.91	64	66	$160.47	$165.97
Prof - Child EPSDT	$791,291	$769,012	$1.67	$1.63	1,674	1,716	$11.94	$11.38
Prof - Evaluation & Management	$15,040,770	$15,532,113	$31.65	$32.86	5,769	5,792	$65.83	$68.09
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$2,141,708	$3,603,664	$4.51	$7.63	2,261	2,497	$23.92	$36.65
Prof - Psych	$98,851	$111,171	$0.21	$0.24	39	44	$64.57	$64.41
Prof - Specialist	$1,044,705	$1,010,191	$2.20	$2.14	257	275	$102.45	$93.27
Prof - Vision	$676,930	$719,876	$1.42	$1.52	129	158	$132.24	$115.49
Radiology	$268,935	$266,789	$0.57	$0.56	390	374	$17.40	$18.09
Transportation/Ambulance	$1,341,972	$1,363,810	$2.82	$2.89	205	211	$165.25	$164.12
Total	$48,558,278	$48,538,852	$102.18	$102.70				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 6-14								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	517,738	545,126						
Service Type								
DME/Supplies	$540,080	$571,235	$1.04	$1.05	97	119	$128.50	$106.10
FQHC / RHC	$118,607	$128,699	$0.23	$0.24	78	78	$35.33	$36.51
Home Health	$5,918	$610	$0.01	$0.00	1	0	$219.18	$203.33
IP - Maternity	$7,406	$10,973	$0.01	$0.02	0	0	$2,468.72	$2,194.60
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$4,856,271	$3,104,217	$9.38	$5.69	12	10	$9,338.98	$6,929.06
IP - Psych	$748,291	$679,239	$1.45	$1.25	21	15	$819.60	$974.52
Lab	$836,460	$872,001	$1.62	$1.60	1,985	2,037	$9.77	$9.42
OP - Emergency Room & Related	$4,078,019	$4,204,774	$7.88	$7.71	341	363	$277.45	$255.11
OP - Other	$3,913,205	$4,126,679	$7.56	$7.57	167	185	$542.82	$492.33
Pharmacy	$9,409,105	$11,426,190	$18.17	$20.96	3,881	3,977	$56.19	$63.25
Prof - Anesthesia	$279,146	$286,546	$0.54	$0.53	37	37	$175.34	$169.86
Prof - Child EPSDT	$244,492	$196,309	$0.47	$0.36	418	393	$13.56	$11.00
Prof - Evaluation & Management	$10,294,511	$11,521,896	$19.88	$21.14	3,479	3,584	$68.58	$70.76
Prof - Maternity	$5,368	$9,147	$0.01	$0.02	0	0	$894.70	$571.68
Prof - Other	$4,666,976	$5,310,379	$9.01	$9.74	1,700	1,864	$63.61	$62.70
Prof - Psych	$755,614	$853,746	$1.46	$1.57	285	304	$61.38	$61.77
Prof - Specialist	$1,100,258	$1,176,966	$2.13	$2.16	214	230	$119.08	$112.86
Prof - Vision	$918,383	$1,081,790	$1.77	$1.98	462	517	$46.02	$46.04
Radiology	$420,781	$434,908	$0.81	$0.80	379	389	$25.71	$24.64
Transportation/Ambulance	$1,429,130	$1,551,067	$2.76	$2.85	218	236	$151.92	$144.78
Total	$44,628,023	$47,547,371	$86.20	$87.22				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 15-20 Female								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	82,858	83,807						
Service Type								
DME/Supplies	$59,667	$98,064	$0.72	$1.17	59	71	$147.33	$198.91
FQHC / RHC	$10,160	$10,360	$0.12	$0.12	43	44	$34.44	$33.97
Home Health	$3,266	$551	$0.04	$0.01	2	1	$204.10	$110.13
IP - Maternity	$2,131,318	$1,924,575	$25.72	$22.96	108	98	$2,860.83	$2,805.50
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$683,599	$810,177	$8.25	$9.67	18	19	$5,512.89	$6,091.55
IP - Psych	$333,239	$392,751	$4.02	$4.69	58	62	$828.95	$907.05
Lab	$222,944	$225,522	$2.69	$2.69	4,614	4,431	$7.00	$7.29
OP - Emergency Room & Related	$1,640,848	$1,690,452	$19.80	$20.17	640	693	$371.32	$349.34
OP - Other	$1,163,896	$1,167,933	$14.05	$13.94	422	406	$399.83	$411.97
Pharmacy	$1,440,098	$1,713,140	$17.38	$20.44	5,402	5,589	$38.61	$43.89
Prof - Anesthesia	$182,688	$180,454	$2.20	$2.15	146	142	$181.78	$181.36
Prof - Child EPSDT	$27,539	$28,878	$0.33	$0.34	269	287	$14.85	$14.40
Prof - Evaluation & Management	$2,027,157	$2,199,755	$24.47	$26.25	4,043	4,214	$72.62	$74.74
Prof - Maternity	$1,150,102	$1,114,506	$13.88	$13.30	225	215	$741.52	$742.01
Prof - Other	$390,397	$448,595	$4.71	$5.35	1,411	1,527	$40.08	$42.07
Prof - Psych	$179,473	$193,353	$2.17	$2.31	410	456	$63.37	$60.71
Prof - Specialist	$258,559	$263,252	$3.12	$3.14	390	413	$96.12	$91.25
Prof - Vision	$142,394	$164,279	$1.72	$1.96	578	655	$35.67	$35.90
Radiology	$375,284	$401,375	$4.53	$4.79	1,042	1,082	$52.17	$53.12
Transportation/Ambulance	$281,563	$284,252	$3.40	$3.39	403	455	$101.06	$89.39
Total	$12,704,191	$13,312,224	$153.32	$158.84				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 21-44 Female								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	103,659	106,328						
Service Type								
DME/Supplies	$328,171	$315,096	$3.17	$2.96	267	270	$142.37	$131.89
FQHC / RHC	$8,930	$10,742	$0.09	$0.10	29	35	$35.16	$34.43
Home Health	$56,167	$52,385	$0.54	$0.49	13	14	$501.49	$409.25
IP - Maternity	$8,156,343	$8,262,795	$78.68	$77.71	320	310	$2,949.85	$3,005.75
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$4,897,928	$4,758,262	$47.25	$44.75	84	74	$6,727.92	$7,275.63
IP - Psych	$511,416	$544,439	$4.93	$5.12	57	58	$1,031.08	$1,063.36
Lab	$515,044	$547,708	$4.97	$5.15	9,855	9,493	$6.05	$6.51
OP - Emergency Room & Related	$5,917,965	$6,084,902	$57.09	$57.23	1,643	1,812	$416.99	$379.07
OP - Other	$5,260,652	$5,255,302	$50.75	$49.43	1,115	1,160	$546.39	$511.22
Pharmacy	$6,698,313	$8,258,517	$64.62	$77.67	18,214	19,065	$42.57	$48.89
Prof - Anesthesia	$761,588	$757,219	$7.35	$7.12	504	488	$174.88	$174.96
Prof - Child EPSDT	$28,227	$28,603	$0.27	$0.27	240	232	$13.64	$13.93
Prof - Evaluation & Management	$5,099,771	$5,421,437	$49.20	$50.99	8,467	8,688	$69.73	$70.43
Prof - Maternity	$4,339,620	$4,458,624	$41.86	$41.93	697	710	$720.99	$709.07
Prof - Other	$1,416,986	$1,443,750	$13.67	$13.58	2,028	2,159	$80.87	$75.47
Prof - Psych	$337,315	$347,827	$3.25	$3.27	673	678	$58.01	$57.91
Prof - Specialist	$1,509,401	$1,490,785	$14.56	$14.02	1,270	1,266	$137.58	$132.88
Prof - Vision	$124,518	$134,871	$1.20	$1.27	175	178	$82.14	$85.69
Radiology	$1,881,318	$2,035,392	$18.15	$19.14	3,628	3,836	$60.03	$59.88
Transportation/Ambulance	$417,803	$457,929	$4.03	$4.31	1,182	1,351	$40.90	$38.27
Total	$48,267,477	$50,666,586	$465.64	$476.51				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 15-20 Male								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	73,896	75,752						
Service Type								
DME/Supplies	$95,816	$92,161	$1.30	$1.22	90	97	$172.02	$150.59
FQHC / RHC	$6,805	$7,866	$0.09	$0.10	31	44	$35.63	$28.40
Home Health	$0	$1,300	$0.00	$0.02	0	1	-	$325.00
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,174,982	$861,070	$15.90	$11.37	14	14	$13,662.58	$9,674.95
IP - Psych	$190,079	$163,506	$2.57	$2.16	34	29	$913.84	$879.07
Lab	$96,929	$100,826	$1.31	$1.33	1,686	1,905	$9.33	$8.38
OP - Emergency Room & Related	$802,904	$798,323	$10.87	$10.54	383	401	$340.21	$315.17
OP - Other	$768,891	$967,809	$10.41	$12.78	191	221	$653.82	$692.28
Pharmacy	$1,209,230	$1,386,510	$16.36	$18.30	3,436	3,515	$57.15	$62.49
Prof - Anesthesia	$47,839	$53,912	$0.65	$0.71	42	45	$185.42	$191.18
Prof - Child EPSDT	$19,649	$19,869	$0.27	$0.26	270	289	$11.83	$10.91
Prof - Evaluation & Management	$1,194,282	$1,321,917	$16.16	$17.45	2,701	2,833	$71.80	$73.91
Prof - Maternity	$963	$0	$0.01	$0.00	1	0	$137.64	-
Prof - Other	$1,560,988	$1,180,846	$21.12	$15.59	1,277	1,527	$198.52	$122.48
Prof - Psych	$124,846	$130,383	$1.69	$1.72	327	343	$61.99	$60.28
Prof - Specialist	$231,396	$268,676	$3.13	$3.55	288	313	$130.51	$136.04
Prof - Vision	$120,852	$127,562	$1.64	$1.68	447	477	$43.93	$42.34
Radiology	$105,064	$116,383	$1.42	$1.54	564	578	$30.26	$31.91
Transportation/Ambulance	$244,873	$238,912	$3.31	$3.15	218	231	$182.60	$163.98
Total	$7,996,390	$7,837,833	$108.21	$103.47				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 21-44 Male								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	12,481	12,853						
Service Type								
DME/Supplies	$49,842	$37,510	$3.99	$2.92	367	332	$130.48	$105.37
FQHC / RHC	$721	$486	$0.06	$0.04	17	7	$40.08	$69.47
Home Health	$1,596	$3,716	$0.13	$0.29	3	7	$532.03	$530.84
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$740,460	$817,861	$59.33	$63.63	70	65	$10,143.29	$11,683.74
IP - Psych	$75,241	$30,358	$6.03	$2.36	67	31	$1,074.87	$919.93
Lab	$26,789	$20,468	$2.15	$1.59	3,977	2,941	$6.48	$6.50
OP - Emergency Room & Related	$494,269	$440,670	$39.60	$34.29	1,162	1,222	$408.82	$336.65
OP - Other	$322,972	$305,602	$25.88	$23.78	413	401	$751.10	$712.36
Pharmacy	$790,293	$967,856	$63.32	$75.30	14,227	14,811	$53.41	$61.01
Prof - Anesthesia	$26,382	$20,045	$2.11	$1.56	118	90	$214.49	$208.81
Prof - Child EPSDT	$1,370	$915	$0.11	$0.07	162	129	$8.10	$6.63
Prof - Evaluation & Management	$400,546	$388,746	$32.09	$30.25	5,385	5,104	$71.51	$71.11
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$234,567	$165,112	$18.79	$12.85	1,957	1,737	$115.27	$88.72
Prof - Psych	$27,349	$24,289	$2.19	$1.89	483	408	$54.48	$55.58
Prof - Specialist	$128,914	$98,335	$10.33	$7.65	889	719	$139.37	$127.71
Prof - Vision	$16,005	$16,671	$1.28	$1.30	165	162	$93.05	$95.81
Radiology	$91,241	$75,683	$7.31	$5.89	1,768	1,549	$49.61	$45.62
Transportation/Ambulance	$71,721	$66,059	$5.75	$5.14	308	631	$224.13	$97.72
Total	$3,500,278	$3,480,382	$280.45	$270.78				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 45 and Over								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	17,434	17,093						
Service Type								
DME/Supplies	$119,360	$160,882	$6.85	$9.41	630	922	$130.45	$122.53
FQHC / RHC	$1,813	$1,334	$0.10	$0.08	37	29	$33.57	$31.77
Home Health	$31,003	$29,074	$1.78	$1.70	60	48	$356.35	$427.56
IP - Maternity	$9,211	$12,913	$0.53	$0.76	2	2	$3,070.36	$4,304.45
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,700,834	$2,532,087	$97.56	$148.14	114	142	$10,308.09	$12,535.08
IP - Psych	$114,369	$88,314	$6.56	$5.17	76	67	$1,039.71	$929.62
Lab	$70,672	$74,814	$4.05	$4.38	9,209	9,020	$5.28	$5.82
OP - Emergency Room & Related	$723,002	$715,464	$41.47	$41.86	1,034	1,112	$481.36	$451.68
OP - Other	$1,291,740	$1,126,416	$74.09	$65.90	1,159	1,165	$767.07	$678.97
Pharmacy	$2,172,634	$2,519,429	$124.62	$147.40	31,688	32,844	$47.19	$53.85
Prof - Anesthesia	$74,819	$77,307	$4.29	$4.52	288	286	$178.99	$189.94
Prof - Child EPSDT	$3,690	$3,865	$0.21	$0.23	340	310	$7.47	$8.76
Prof - Evaluation & Management	$943,414	$1,024,512	$54.11	$59.94	9,396	10,031	$69.11	$71.70
Prof - Maternity	$5,489	$5,434	$0.31	$0.32	8	9	$457.43	$418.00
Prof - Other	$437,339	$598,943	$25.09	$35.04	3,876	3,826	$77.67	$109.90
Prof - Psych	$69,398	$78,301	$3.98	$4.58	814	920	$58.71	$59.77
Prof - Specialist	$355,598	$391,877	$20.40	$22.93	1,757	1,799	$139.29	$152.90
Prof - Vision	$45,402	$55,623	$2.60	$3.25	560	611	$55.78	$63.93
Radiology	$283,589	$313,334	$16.27	$18.33	3,416	3,715	$57.14	$59.22
Transportation/Ambulance	$87,175	$105,794	$5.00	$6.19	2,249	2,478	$26.68	$29.98
Total	$8,540,550	$9,915,718	$489.88	$580.10				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

All Age Categories								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	1,400,060	1,432,095						
Service Type								
DME/Supplies	$2,445,517	$2,418,626	$1.75	$1.69	201	221	$104.16	$91.68
FQHC / RHC	$456,653	$434,330	$0.33	$0.30	125	109	$31.41	$33.35
Home Health	$427,740	$323,430	$0.31	$0.23	5	3	$738.76	$783.12
IP - Maternity	$10,304,278	$10,212,081	$7.36	$7.13	30	29	$2,930.68	$2,965.18
IP - Newborn	$13,195,443	$12,543,007	$9.42	$8.76	28	27	$3,974.33	$3,835.74
IP - Other	$25,317,997	$21,568,307	$18.08	$15.06	27	25	$7,951.63	$7,296.45
IP - Psych	$1,985,908	$1,923,375	$1.42	$1.34	19	17	$895.76	$970.42
Lab	$2,911,423	$2,978,515	$2.08	$2.08	3,048	2,967	$8.19	$8.41
OP - Emergency Room & Related	$20,640,948	$20,325,404	$14.74	$14.19	616	643	$287.04	$264.76
OP - Other	$19,628,115	$19,371,090	$14.02	$13.53	293	301	$573.22	$539.17
Pharmacy	$30,693,661	$36,173,088	$21.92	$25.26	5,836	5,914	$45.08	$51.25
Prof - Anesthesia	$1,915,220	$1,944,883	$1.37	$1.36	93	92	$176.38	$176.84
Prof - Child EPSDT	$1,793,958	$1,646,521	$1.28	$1.15	1,221	1,196	$12.59	$11.53
Prof - Evaluation & Management	$44,334,424	$46,872,939	$31.67	$32.73	5,471	5,515	$69.46	$71.21
Prof - Maternity	$5,501,542	$5,587,711	$3.93	$3.90	65	66	$724.36	$714.63
Prof - Other	$12,275,197	$14,925,477	$8.77	$10.42	2,436	2,664	$43.20	$46.95
Prof - Psych	$1,594,385	$1,739,637	$1.14	$1.21	225	240	$60.83	$60.71
Prof - Specialist	$5,201,616	$5,248,351	$3.72	$3.66	370	381	$120.64	$115.35
Prof - Vision	$2,221,467	$2,477,745	$1.59	$1.73	305	344	$62.40	$60.29
Radiology	$3,585,192	$3,795,672	$2.56	$2.65	781	787	$39.35	$40.39
Transportation/Ambulance	$4,307,130	$4,480,125	$3.08	$3.13	332	362	$111.11	$103.68
Total	$210,737,814	$216,990,315	$150.52	$151.52				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age Under 1								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	35,564	35,649						
Service Type								
DME/Supplies	$150,128	$117,127	$4.22	$3.29	648	541	$78.15	$72.93
FQHC / RHC	$439,452	$360,694	$12.36	$10.12	4,032	3,374	$36.78	$35.99
Home Health	$6,535	$2,893	$0.18	$0.08	7	3	$311.21	$289.32
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$5,832,418	$5,992,985	$164.00	$168.11	685	669	$2,873.05	$3,014.57
IP - Other	$1,067,944	$969,507	$30.03	$27.20	101	101	$3,571.72	$3,231.69
IP - Psych	$41,220	$44,726	$1.16	$1.25	0	0	-	-
Lab	$63,638	$58,694	$1.79	$1.65	1,696	1,555	$12.66	$12.70
OP - Emergency Room & Related	$470,817	$396,432	$13.24	$11.12	1,166	1,076	$136.23	$124.04
OP - Other	$489,980	$459,675	$13.78	$12.89	663	615	$249.35	$251.74
Pharmacy	$820,356	$691,108	$23.07	$19.39	5,112	4,906	$54.14	$47.42
Prof - Anesthesia	$34,180	$34,766	$0.96	$0.98	65	74	$176.18	$158.03
Prof - Child EPSDT	$153,515	$147,801	$4.32	$4.15	4,508	4,450	$11.49	$11.18
Prof - Evaluation & Management	$2,729,238	$2,945,078	$76.74	$82.61	11,791	12,206	$78.10	$81.22
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$517,429	$487,414	$14.55	$13.67	5,406	5,574	$32.30	$29.43
Prof - Psych	$47,905	$51,979	$1.35	$1.46	0	0	$47,905.12	-
Prof - Specialist	$221,919	$214,724	$6.24	$6.02	621	650	$120.54	$111.20
Prof - Vision	$52,584	$55,087	$1.48	$1.55	88	88	$201.47	$210.25
Radiology	$61,995	$61,552	$1.74	$1.73	1,560	1,527	$13.41	$13.57
Transportation/Ambulance	$191,385	$202,808	$5.38	$5.69	452	549	$142.72	$124.35
Total	$13,392,638	$13,295,049	$376.58	$372.94				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 1-5								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	138,025	138,900						
Service Type								
DME/Supplies	$173,463	$188,200	$1.26	$1.35	216	213	$69.86	$76.22
FQHC / RHC	$529,944	$552,274	$3.84	$3.98	1,399	1,356	$32.94	$35.18
Home Health	$5,779	$4,497	$0.04	$0.03	1	1	$412.78	$299.77
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,314,851	$1,754,163	$9.53	$12.63	34	32	$3,345.68	$4,677.77
IP - Psych	$168,608	$167,971	$1.22	$1.21	1	0	$16,860.84	-
Lab	$256,933	$245,125	$1.86	$1.76	1,732	1,657	$12.90	$12.78
OP - Emergency Room & Related	$1,282,869	$1,021,949	$9.29	$7.36	794	730	$140.40	$120.93
OP - Other	$1,767,245	$1,861,492	$12.80	$13.40	362	342	$424.92	$469.60
Pharmacy	$2,087,704	$2,192,993	$15.13	$15.79	4,866	4,651	$37.30	$40.74
Prof - Anesthesia	$129,620	$142,225	$0.94	$1.02	104	99	$108.47	$123.89
Prof - Child EPSDT	$167,022	$171,077	$1.21	$1.23	1,297	1,322	$11.19	$11.18
Prof - Evaluation & Management	$3,136,347	$3,158,905	$22.72	$22.74	4,341	4,182	$62.81	$65.26
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$613,683	$656,064	$4.45	$4.72	1,758	1,568	$30.35	$36.16
Prof - Psych	$258,679	$271,994	$1.87	$1.96	148	150	$151.72	$156.86
Prof - Specialist	$367,471	$397,872	$2.66	$2.86	331	349	$96.60	$98.43
Prof - Vision	$196,438	$218,110	$1.42	$1.57	81	106	$211.91	$177.90
Radiology	$90,341	$88,417	$0.65	$0.64	495	463	$15.88	$16.48
Transportation/Ambulance	$465,514	$529,319	$3.37	$3.81	441	459	$91.85	$99.61
Total	$13,012,512	$13,622,648	$94.28	$98.08				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 6-14								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	173,017	181,415						
Service Type								
DME/Supplies	$207,403	$167,542	$1.20	$0.92	132	140	$108.65	$79.40
FQHC / RHC	$301,220	$352,492	$1.74	$1.94	583	612	$35.86	$38.09
Home Health	$9,725	$2,609	$0.06	$0.01	1	0	$572.08	$521.87
IP - Maternity	$15,775	$10,779	$0.09	$0.06	1	0	$1,971.82	$2,155.88
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$918,959	$978,366	$5.31	$5.39	11	13	$5,637.78	$5,069.26
IP - Psych	$508,781	$499,788	$2.94	$2.75	42	30	$847.97	$1,088.86
Lab	$267,601	$278,157	$1.55	$1.53	1,388	1,343	$13.38	$13.70
OP - Emergency Room & Related	$1,094,629	$1,038,400	$6.33	$5.72	417	415	$181.98	$165.40
OP - Other	$1,357,226	$1,420,511	$7.84	$7.83	281	295	$334.79	$318.71
Pharmacy	$4,708,982	$5,437,840	$27.22	$29.97	5,334	5,412	$61.24	$66.47
Prof - Anesthesia	$64,436	$70,610	$0.37	$0.39	40	38	$112.65	$123.66
Prof - Child EPSDT	$50,013	$48,405	$0.29	$0.27	281	266	$12.35	$12.06
Prof - Evaluation & Management	$2,577,033	$2,801,249	$14.89	$15.44	2,884	2,848	$61.97	$65.06
Prof - Maternity	$11,468	$8,885	$0.07	$0.05	1	1	$573.41	$592.34
Prof - Other	$550,227	$638,557	$3.18	$3.52	1,252	1,233	$30.48	$34.26
Prof - Psych	$694,845	$783,594	$4.02	$4.32	782	881	$61.65	$58.86
Prof - Specialist	$341,030	$382,438	$1.97	$2.11	241	269	$98.08	$93.94
Prof - Vision	$283,092	$321,892	$1.64	$1.77	315	355	$62.37	$59.92
Radiology	$163,997	$177,413	$0.95	$0.98	497	511	$22.88	$22.96
Transportation/Ambulance	$647,300	$711,159	$3.74	$3.92	1,553	1,342	$28.91	$35.07
Total	$14,773,741	$16,130,687	$85.39	$88.92				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 15-20 Female								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	35,301	34,267						
Service Type								
DME/Supplies	$35,190	$28,520	$1.00	$0.83	97	105	$123.47	$95.07
FQHC / RHC	$130,729	$131,674	$3.70	$3.84	918	969	$48.40	$47.60
Home Health	$14,733	$5,875	$0.42	$0.17	7	5	$701.59	$451.89
IP - Maternity	$1,220,820	$1,062,200	$34.58	$31.00	173	152	$2,398.47	$2,453.12
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$743,780	$580,661	$21.07	$16.95	27	22	$9,414.94	$9,216.84
IP - Psych	$233,627	$179,194	$6.62	$5.23	104	90	$761.00	$694.55
Lab	$300,408	$275,184	$8.51	$8.03	6,186	5,925	$16.51	$16.26
OP - Emergency Room & Related	$665,170	$594,544	$18.84	$17.35	951	950	$237.82	$219.23
OP - Other	$575,660	$494,535	$16.31	$14.43	832	796	$235.25	$217.57
Pharmacy	$1,144,863	$1,183,837	$32.43	$34.55	9,933	10,165	$39.18	$40.78
Prof - Anesthesia	$87,815	$80,489	$2.49	$2.35	191	169	$156.25	$166.99
Prof - Child EPSDT	$29,436	$39,521	$0.83	$1.15	431	418	$23.20	$33.13
Prof - Evaluation & Management	$1,012,403	$1,012,918	$28.68	$29.56	5,040	5,076	$68.29	$69.88
Prof - Maternity	$728,391	$666,404	$20.63	$19.45	660	596	$375.07	$391.54
Prof - Other	$184,508	$217,756	$5.23	$6.35	1,766	1,843	$35.51	$41.38
Prof - Psych	$152,161	$175,256	$4.31	$5.11	841	975	$61.48	$62.97
Prof - Specialist	$155,671	$124,749	$4.41	$3.64	748	675	$70.79	$64.74
Prof - Vision	$58,534	$59,272	$1.66	$1.73	450	461	$44.24	$45.04
Radiology	$261,212	$231,698	$7.40	$6.76	1,516	1,399	$58.58	$58.00
Transportation/Ambulance	$175,784	$177,290	$4.98	$5.17	806	978	$74.17	$63.45
Total	$7,910,893	$7,321,576	$224.10	$213.66				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 21-44 Female								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	62,877	64,003						
Service Type								
DME/Supplies	$168,022	$245,085	$2.67	$3.83	337	399	$95.20	$115.23
FQHC / RHC	$406,930	$462,657	$6.47	$7.23	1,389	1,434	$55.93	$60.47
Home Health	$14,752	$46,430	$0.23	$0.73	6	20	$461.00	$433.92
IP - Maternity	$3,842,079	$3,890,032	$61.10	$60.78	286	282	$2,559.68	$2,586.46
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$2,149,261	$2,451,980	$34.18	$38.31	67	69	$6,123.25	$6,699.40
IP - Psych	$315,223	$349,942	$5.01	$5.47	95	96	$631.71	$684.82
Lab	$883,233	$917,336	$14.05	$14.33	9,757	9,787	$17.28	$17.57
OP - Emergency Room & Related	$2,514,145	$2,405,012	$39.99	$37.58	1,762	1,708	$272.33	$264.03
OP - Other	$2,583,769	$2,436,804	$41.09	$38.07	1,499	1,612	$328.89	$283.35
Pharmacy	$4,723,099	$5,265,508	$75.12	$82.27	22,398	22,868	$40.24	$43.17
Prof - Anesthesia	$271,157	$279,273	$4.31	$4.36	362	334	$142.86	$156.90
Prof - Child EPSDT	$50,153	$86,822	$0.80	$1.36	535	520	$17.89	$31.31
Prof - Evaluation & Management	$2,600,191	$2,669,339	$41.35	$41.71	7,536	7,405	$65.85	$67.59
Prof - Maternity	$2,240,254	$2,290,923	$35.63	$35.79	1,133	1,095	$377.34	$392.21
Prof - Other	$691,948	$773,321	$11.00	$12.08	2,340	2,382	$56.43	$60.88
Prof - Psych	$220,202	$271,663	$3.50	$4.24	776	913	$54.17	$55.78
Prof - Specialist	$835,437	$807,536	$13.29	$12.62	1,667	1,518	$95.62	$99.76
Prof - Vision	$82,486	$95,719	$1.31	$1.50	154	205	$101.96	$87.41
Radiology	$957,837	$999,479	$15.23	$15.62	3,075	3,077	$59.44	$60.91
Transportation/Ambulance	$429,371	$473,895	$6.83	$7.40	1,423	1,560	$57.60	$56.95
Total	$25,979,549	$27,218,756	$413.18	$425.27				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 15-20 Male								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	27,096	27,253						
Service Type								
DME/Supplies	$73,015	$43,011	$2.69	$1.58	138	122	$234.78	$154.71
FQHC / RHC	$45,120	$58,314	$1.67	$2.14	513	555	$38.93	$46.24
Home Health	$2,757	$1,550	$0.10	$0.06	2	1	$551.45	$516.75
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$337,001	$445,319	$12.44	$16.34	21	21	$7,020.85	$9,474.87
IP - Psych	$98,469	$104,319	$3.63	$3.83	62	58	$698.36	$790.30
Lab	$49,148	$50,526	$1.81	$1.85	1,414	1,520	$15.40	$14.64
OP - Emergency Room & Related	$271,455	$246,249	$10.02	$9.04	475	487	$252.99	$222.85
OP - Other	$284,544	$328,272	$10.50	$12.05	301	336	$418.45	$429.68
Pharmacy	$651,220	$771,911	$24.03	$28.32	5,233	5,362	$55.11	$63.39
Prof - Anesthesia	$12,563	$13,236	$0.46	$0.49	37	39	$151.36	$150.40
Prof - Child EPSDT	$5,450	$5,271	$0.20	$0.19	187	205	$12.88	$11.31
Prof - Evaluation & Management	$373,159	$407,393	$13.77	$14.95	2,463	2,593	$67.10	$69.17
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$115,878	$209,023	$4.28	$7.67	996	1,169	$51.50	$78.70
Prof - Psych	$99,787	$102,175	$3.68	$3.75	630	686	$70.17	$65.58
Prof - Specialist	$94,868	$96,111	$3.50	$3.53	357	350	$117.85	$121.05
Prof - Vision	$44,652	$45,483	$1.65	$1.67	309	296	$64.06	$67.68
Radiology	$57,967	$53,108	$2.14	$1.95	834	819	$30.78	$28.55
Transportation/Ambulance	$106,814	$107,412	$3.94	$3.94	949	948	$49.87	$49.87
Total	$2,723,866	$3,088,682	$100.53	$113.33				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 21-44 Male								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	7,088	7,480						
Service Type								
DME/Supplies	$42,892	$42,577	$6.05	$5.69	562	539	$129.19	$126.72
FQHC / RHC	$32,916	$17,692	$4.64	$2.37	1,048	507	$53.18	$55.99
Home Health	$8,642	$3,517	$1.22	$0.47	34	26	$432.11	$219.83
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$536,582	$386,033	$75.70	$51.61	98	69	$9,251.41	$8,977.51
IP - Psych	$32,419	$28,473	$4.57	$3.81	86	61	$635.67	$749.28
Lab	$27,705	$34,332	$3.91	$4.59	3,376	3,451	$13.89	$15.96
OP - Emergency Room & Related	$249,653	$243,025	$35.22	$32.49	1,552	1,341	$272.25	$290.70
OP - Other	$250,265	$198,443	$35.31	$26.53	1,004	890	$422.03	$357.56
Pharmacy	$596,551	$646,805	$84.16	$86.47	19,119	18,833	$52.82	$55.10
Prof - Anesthesia	$12,915	$6,221	$1.82	$0.83	142	82	$153.75	$121.98
Prof - Child EPSDT	$1,792	$1,950	$0.25	$0.26	313	375	$9.69	$8.33
Prof - Evaluation & Management	$203,365	$214,765	$28.69	$28.71	5,445	5,217	$63.24	$66.04
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$56,857	$83,581	$8.02	$11.17	2,096	2,073	$45.93	$64.69
Prof - Psych	$17,896	$23,639	$2.52	$3.16	537	555	$56.46	$68.32
Prof - Specialist	$111,392	$66,759	$15.72	$8.92	1,207	1,012	$156.23	$105.80
Prof - Vision	$8,719	$10,801	$1.23	$1.44	141	154	$105.05	$112.51
Radiology	$51,032	$56,659	$7.20	$7.57	2,177	2,326	$39.68	$39.08
Transportation/Ambulance	$42,347	$51,537	$5.97	$6.89	1,060	1,109	$67.65	$74.58
Total	$2,283,942	$2,116,811	$322.23	$283.00				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 45 and Over								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	6,362	6,518						
Service Type								
DME/Supplies	$82,104	$97,413	$12.91	$14.95	1,237	1,414	$125.16	$126.84
FQHC / RHC	$43,121	$40,165	$6.78	$6.16	1,699	1,697	$47.86	$43.56
Home Health	$3,157	$6,998	$0.50	$1.07	15	24	$394.62	$538.31
IP - Maternity	$0	$1,744	$0.00	$0.27	0	2	-	$1,744.19
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$784,622	$566,589	$123.33	$86.93	170	134	$8,718.02	$7,761.50
IP - Psych	$34,987	$42,046	$5.50	$6.45	123	98	$538.26	$793.32
Lab	$76,149	$75,576	$11.97	$11.59	9,354	9,043	$15.36	$15.39
OP - Emergency Room & Related	$207,621	$199,907	$32.63	$30.67	994	981	$393.97	$375.06
OP - Other	$510,976	$440,713	$80.32	$67.61	2,009	1,913	$479.79	$424.17
Pharmacy	$1,076,185	$1,178,858	$169.16	$180.86	41,555	42,770	$48.85	$50.75
Prof - Anesthesia	$16,779	$13,069	$2.64	$2.01	219	155	$144.65	$155.58
Prof - Child EPSDT	$2,530	$2,694	$0.40	$0.41	671	563	$7.11	$8.80
Prof - Evaluation & Management	$286,738	$306,186	$45.07	$46.98	8,088	8,152	$66.87	$69.15
Prof - Maternity	$0	$2,059	$0.00	$0.32	0	18	-	$205.93
Prof - Other	$170,924	$192,808	$26.87	$29.58	4,563	3,853	$70.66	$92.12
Prof - Psych	$21,138	$20,437	$3.32	$3.14	902	834	$44.22	$45.11
Prof - Specialist	$166,828	$139,447	$26.22	$21.39	2,594	2,193	$121.33	$117.08
Prof - Vision	$11,426	$15,969	$1.80	$2.45	268	337	$80.47	$87.26
Radiology	$97,233	$84,114	$15.28	$12.90	3,499	3,213	$52.42	$48.20
Transportation/Ambulance	$49,471	$48,047	$7.78	$7.37	3,010	2,415	$31.00	$36.62
Total	$3,641,990	$3,474,842	$572.46	$533.11				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

All Age Categories								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	485,330	495,485						
Service Type								
DME/Supplies	$932,219	$929,474	$1.92	$1.88	239	242	$96.48	$93.00
FQHC / RHC	$1,929,432	$1,975,962	$3.98	$3.99	1,214	1,160	$39.30	$41.26
Home Health	$66,081	$74,369	$0.14	$0.15	3	4	$478.85	$408.62
IP - Maternity	$5,078,673	$4,964,756	$10.46	$10.02	50	47	$2,516.69	$2,555.20
IP - Newborn	$5,832,418	$5,992,985	$12.02	$12.10	50	48	$2,873.05	$3,014.57
IP - Other	$7,852,999	$8,132,619	$16.18	$16.41	37	35	$5,302.50	$5,570.29
IP - Psych	$1,433,336	$1,416,459	$2.95	$2.86	41	35	$856.75	$976.20
Lab	$1,924,816	$1,934,931	$3.97	$3.91	3,076	2,997	$15.47	$15.64
OP - Emergency Room & Related	$6,756,359	$6,145,518	$13.92	$12.40	820	780	$203.79	$190.74
OP - Other	$7,819,665	$7,640,444	$16.11	$15.42	564	569	$342.68	$325.43
Pharmacy	$15,808,960	$17,368,860	$32.57	$35.05	8,400	8,437	$46.53	$49.86
Prof - Anesthesia	$629,465	$639,888	$1.30	$1.29	116	107	$133.81	$144.64
Prof - Child EPSDT	$459,910	$503,542	$0.95	$1.02	924	908	$12.31	$13.42
Prof - Evaluation & Management	$12,918,475	$13,515,833	$26.62	$27.28	4,793	4,729	$66.64	$69.21
Prof - Maternity	$2,980,113	$2,968,272	$6.14	$5.99	195	183	$377.28	$392.21
Prof - Other	$2,901,454	$3,258,524	$5.98	$6.58	1,920	1,873	$37.36	$42.13
Prof - Psych	$1,512,612	$1,700,738	$3.12	$3.43	537	607	$69.60	$67.88
Prof - Specialist	$2,294,615	$2,229,635	$4.73	$4.50	567	549	$99.98	$98.30
Prof - Vision	$737,931	$822,333	$1.52	$1.66	217	248	$84.04	$80.45
Radiology	$1,741,613	$1,752,440	$3.59	$3.54	1,065	1,044	$40.43	$40.67
Transportation/Ambulance	$2,107,985	$2,301,469	$4.34	$4.64	1,063	1,029	$49.04	$54.15
Total	$83,719,131	$86,269,052	$172.50	$174.11				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age Under 1								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	87,050	86,591						
Service Type								
DME/Supplies	$613,130	$497,277	$7.04	$5.74	1,107	1,035	$76.38	$66.56
FQHC / RHC	$75,736	$81,783	$0.87	$0.94	205	258	$50.83	$43.85
Home Health	$276,540	$222,162	$3.18	$2.57	13	4	$3,005.87	$7,660.74
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$14,671,178	$17,118,892	$168.54	$197.70	452	531	$4,470.19	$4,468.52
IP - Other	$3,195,257	$2,328,543	$36.71	$26.89	85	79	$5,153.64	$4,092.34
IP - Psych	$95,916	$104,295	$1.10	$1.20	0	0	-	-
Lab	$149,778	$126,607	$1.72	$1.46	1,874	1,636	$11.02	$10.73
OP - Emergency Room & Related	$1,538,082	$1,481,302	$17.67	$17.11	1,200	1,191	$176.65	$172.32
OP - Other	$1,735,101	$1,642,642	$19.93	$18.97	1,388	1,423	$172.27	$159.95
Pharmacy	$1,723,695	$1,451,958	$19.80	$16.77	4,681	4,635	$50.76	$43.41
Prof - Anesthesia	$92,701	$112,695	$1.06	$1.30	63	69	$203.29	$225.84
Prof - Child EPSDT	$453,010	$359,028	$5.20	$4.15	4,736	4,452	$13.19	$11.17
Prof - Evaluation & Management	$7,794,236	$8,073,375	$89.54	$93.24	13,955	14,007	$76.99	$79.88
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$1,245,083	$1,255,571	$14.30	$14.50	6,000	6,677	$28.61	$26.06
Prof - Psych	$113,073	$123,525	$1.30	$1.43	5	6	$2,899.31	$2,941.08
Prof - Specialist	$590,574	$623,613	$6.78	$7.20	800	745	$101.74	$115.98
Prof - Vision	$108,666	$111,300	$1.25	$1.29	56	52	$266.99	$295.23
Radiology	$130,887	$140,209	$1.50	$1.62	1,246	1,285	$14.48	$15.12
Transportation/Ambulance	$403,689	$385,877	$4.64	$4.46	651	660	$85.51	$81.00
Total	$35,006,333	$36,240,654	$402.14	$418.53				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 1-5								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	352,306	362,671						
Service Type								
DME/Supplies	$666,857	$711,010	$1.89	$1.96	356	376	$63.86	$62.62
FQHC / RHC	$138,626	$121,831	$0.39	$0.34	116	100	$40.82	$40.41
Home Health	$4,957	$131,318	$0.01	$0.36	1	4	$236.05	$1,227.27
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$5,362,459	$5,252,375	$15.22	$14.48	32	29	$5,698.68	$5,982.20
IP - Psych	$448,865	$455,150	$1.27	$1.25	3	1	$4,987.39	$18,964.60
Lab	$572,642	$552,860	$1.63	$1.52	1,985	1,755	$9.83	$10.42
OP - Emergency Room & Related	$4,214,182	$4,132,348	$11.96	$11.39	815	783	$176.15	$174.61
OP - Other	$6,812,656	$6,775,598	$19.34	$18.68	698	681	$332.47	$329.23
Pharmacy	$5,477,378	$5,971,534	$15.55	$16.47	4,496	4,462	$41.50	$44.28
Prof - Anesthesia	$296,986	$324,522	$0.84	$0.89	66	70	$153.24	$153.44
Prof - Child EPSDT	$530,373	$480,863	$1.51	$1.33	1,506	1,453	$12.00	$10.95
Prof - Evaluation & Management	$9,395,867	$9,767,794	$26.67	$26.93	4,881	4,797	$65.57	$67.37
Prof - Maternity	$104	$0	$0.00	$0.00	0	0	$103.52	-
Prof - Other	$1,445,984	$1,951,837	$4.10	$5.38	1,559	1,753	$31.60	$36.84
Prof - Psych	$622,381	$687,765	$1.77	$1.90	131	150	$162.29	$151.86
Prof - Specialist	$992,684	$1,041,420	$2.82	$2.87	379	357	$89.20	$96.61
Prof - Vision	$441,078	$469,954	$1.25	$1.30	83	93	$180.70	$167.12
Radiology	$193,385	$221,835	$0.55	$0.61	409	420	$16.09	$17.46
Transportation/Ambulance	$1,302,046	$1,296,370	$3.70	$3.57	461	418	$96.23	$102.67
Total	$38,919,509	$40,346,385	$110.47	$111.25				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 6-14								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	448,519	473,278						
Service Type								
DME/Supplies	$592,060	$673,219	$1.32	$1.42	182	210	$86.93	$81.21
FQHC / RHC	$140,599	$171,186	$0.31	$0.36	88	92	$42.74	$46.98
Home Health	$9,222	$4,118	$0.02	$0.01	1	1	$318.00	$142.01
IP - Maternity	$28,492	$16,343	$0.06	$0.03	0	0	$2,590.16	$2,042.82
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$4,413,340	$3,833,750	$9.84	$8.10	15	15	$7,783.67	$6,410.95
IP - Psych	$1,298,518	$1,380,737	$2.90	$2.92	44	40	$792.75	$883.39
Lab	$595,633	$603,921	$1.33	$1.28	1,402	1,351	$11.37	$11.33
OP - Emergency Room & Related	$3,885,178	$4,022,368	$8.66	$8.50	460	463	$226.16	$220.40
OP - Other	$4,998,815	$5,056,546	$11.15	$10.68	449	464	$297.81	$276.27
Pharmacy	$11,755,449	$13,722,539	$26.21	$28.99	4,890	5,092	$64.32	$68.33
Prof - Anesthesia	$209,332	$199,982	$0.47	$0.42	32	33	$173.72	$154.79
Prof - Child EPSDT	$121,340	$117,151	$0.27	$0.25	273	249	$11.87	$11.94
Prof - Evaluation & Management	$7,246,746	$7,910,353	$16.16	$16.71	2,928	2,961	$66.21	$67.74
Prof - Maternity	$18,517	$12,942	$0.04	$0.03	1	0	$411.48	$681.17
Prof - Other	$1,808,418	$1,993,420	$4.03	$4.21	1,118	1,200	$43.28	$42.11
Prof - Psych	$1,622,333	$1,855,467	$3.62	$3.92	706	785	$61.47	$59.94
Prof - Specialist	$1,053,572	$1,088,026	$2.35	$2.30	242	235	$116.55	$117.62
Prof - Vision	$579,996	$662,299	$1.29	$1.40	309	359	$50.14	$46.80
Radiology	$342,273	$379,854	$0.76	$0.80	444	456	$20.62	$21.11
Transportation/Ambulance	$1,470,386	$1,553,036	$3.28	$3.28	470	585	$83.74	$67.34
Total	$42,190,221	$45,257,259	$94.07	$95.63				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 15-20 Female								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	91,271	90,667						
Service Type								
DME/Supplies	$97,332	$72,047	$1.07	$0.79	113	103	$113.05	$92.25
FQHC / RHC	$108,142	$102,556	$1.18	$1.13	297	280	$47.85	$48.56
Home Health	$8,986	$6,964	$0.10	$0.08	2	3	$499.20	$331.62
IP - Maternity	$2,955,002	$2,523,224	$32.38	$27.83	138	124	$2,819.66	$2,692.88
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$993,861	$3,010,160	$10.89	$33.20	18	17	$7,416.87	$23,155.08
IP - Psych	$366,091	$482,959	$4.01	$5.33	82	103	$589.52	$620.77
Lab	$448,303	$421,086	$4.91	$4.64	4,883	5,064	$12.07	$11.01
OP - Emergency Room & Related	$2,179,197	$2,160,931	$23.88	$23.83	982	1,042	$291.69	$274.51
OP - Other	$2,038,567	$1,947,791	$22.34	$21.48	1,074	1,054	$249.58	$244.67
Pharmacy	$2,386,236	$2,609,053	$26.14	$28.78	8,331	8,663	$37.66	$39.86
Prof - Anesthesia	$236,541	$199,731	$2.59	$2.20	151	133	$206.59	$199.33
Prof - Child EPSDT	$51,198	$53,419	$0.56	$0.59	280	276	$24.04	$25.58
Prof - Evaluation & Management	$2,252,693	$2,346,829	$24.68	$25.88	4,402	4,513	$67.29	$68.82
Prof - Maternity	$1,539,339	$1,423,293	$16.87	$15.70	320	292	$631.91	$646.07
Prof - Other	$558,631	$602,940	$6.12	$6.65	1,309	1,333	$56.11	$59.88
Prof - Psych	$346,588	$378,476	$3.80	$4.17	769	876	$59.27	$57.20
Prof - Specialist	$333,176	$326,576	$3.65	$3.60	423	407	$103.47	$106.31
Prof - Vision	$120,051	$128,194	$1.32	$1.41	398	442	$39.69	$38.43
Radiology	$449,530	$466,647	$4.93	$5.15	1,178	1,262	$50.15	$48.94
Transportation/Ambulance	$487,197	$424,170	$5.34	$4.68	998	827	$64.17	$67.86
Total	$17,956,661	$19,687,047	$196.74	$217.14				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 21-44 Female								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	176,670	182,026						
Service Type								
DME/Supplies	$628,126	$578,493	$3.56	$3.18	312	293	$136.73	$130.00
FQHC / RHC	$481,538	$512,871	$2.73	$2.82	579	569	$56.48	$59.45
Home Health	$141,223	$107,604	$0.80	$0.59	29	22	$329.19	$321.21
IP - Maternity	$11,327,451	$11,344,865	$64.12	$62.33	250	247	$3,075.60	$3,023.68
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$7,404,579	$7,255,890	$41.91	$39.86	69	63	$7,331.27	$7,534.67
IP - Psych	$877,434	$1,044,166	$4.97	$5.74	98	104	$608.48	$663.38
Lab	$1,344,679	$1,392,768	$7.61	$7.65	8,175	8,128	$11.17	$11.30
OP - Emergency Room & Related	$9,173,857	$9,695,890	$51.93	$53.27	1,919	2,008	$324.74	$318.26
OP - Other	$11,744,039	$10,588,291	$66.47	$58.17	1,904	1,919	$418.86	$363.75
Pharmacy	$11,353,478	$12,954,254	$64.26	$71.17	20,404	21,463	$37.80	$39.79
Prof - Anesthesia	$939,599	$917,124	$5.32	$5.04	337	323	$189.51	$187.28
Prof - Child EPSDT	$96,409	$126,470	$0.55	$0.69	256	230	$25.57	$36.21
Prof - Evaluation & Management	$6,948,442	$7,401,961	$39.33	$40.66	7,255	7,376	$65.06	$66.15
Prof - Maternity	$5,504,285	$5,816,794	$31.16	$31.96	599	604	$624.28	$635.02
Prof - Other	$2,011,655	$2,197,308	$11.39	$12.07	1,623	1,674	$84.17	$86.54
Prof - Psych	$839,019	$1,007,596	$4.75	$5.54	1,182	1,394	$48.20	$47.65
Prof - Specialist	$2,354,388	$2,323,598	$13.33	$12.77	990	966	$161.57	$158.50
Prof - Vision	$183,918	$202,844	$1.04	$1.11	122	149	$102.52	$89.52
Radiology	$2,207,751	$2,364,209	$12.50	$12.99	2,971	3,076	$50.48	$50.67
Transportation/Ambulance	$1,311,259	$1,182,452	$7.42	$6.50	1,925	1,884	$46.26	$41.38
Total	$76,873,132	$79,015,447	$435.12	$434.09				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 15-20 Male								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	72,044	74,214						
Service Type								
DME/Supplies	$106,259	$119,062	$1.47	$1.60	144	149	$122.84	$129.41
FQHC / RHC	$26,817	$29,473	$0.37	$0.40	103	97	$43.32	$49.12
Home Health	$7,002	$7,179	$0.10	$0.10	7	3	$162.84	$341.85
IP - Maternity	$4,902	$10,039	$0.07	$0.14	0	0	$2,450.93	$5,019.33
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$917,764	$1,185,349	$12.74	$15.97	19	18	$7,980.55	$10,489.81
IP - Psych	$315,534	$283,434	$4.38	$3.82	86	76	$613.88	$606.93
Lab	$86,468	$90,853	$1.20	$1.22	1,207	1,278	$11.94	$11.49
OP - Emergency Room & Related	$960,642	$1,107,221	$13.33	$14.92	538	581	$297.50	$308.25
OP - Other	$973,866	$1,054,451	$13.52	$14.21	426	445	$381.16	$383.44
Pharmacy	$1,924,415	$2,198,819	$26.71	$29.63	4,554	4,724	$70.39	$75.27
Prof - Anesthesia	$45,078	$44,098	$0.63	$0.59	39	39	$191.01	$184.51
Prof - Child EPSDT	$11,950	$13,939	$0.17	$0.19	160	182	$12.47	$12.40
Prof - Evaluation & Management	$1,001,146	$1,091,320	$13.90	$14.71	2,466	2,530	$67.63	$69.75
Prof - Maternity	$3,688	$2,824	$0.05	$0.04	0	1	$1,843.95	$705.94
Prof - Other	$235,807	$311,986	$3.27	$4.20	814	994	$48.25	$50.75
Prof - Psych	$258,913	$287,969	$3.59	$3.88	756	811	$57.05	$57.39
Prof - Specialist	$258,928	$298,085	$3.59	$4.02	298	307	$144.57	$157.05
Prof - Vision	$90,740	$100,209	$1.26	$1.35	266	306	$56.78	$52.94
Radiology	$109,465	$113,766	$1.52	$1.53	735	769	$24.81	$23.93
Transportation/Ambulance	$261,825	$289,914	$3.63	$3.91	621	390	$70.21	$120.20
Total	$7,601,210	$8,639,989	$105.51	$116.42				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 21-44 Male								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	17,381	18,796						
Service Type								
DME/Supplies	$88,357	$130,640	$5.08	$6.95	401	504	$152.08	$165.58
FQHC / RHC	$22,898	$29,748	$1.32	$1.58	323	304	$48.93	$62.49
Home Health	$24,688	$22,110	$1.42	$1.18	66	48	$259.87	$294.80
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,001,745	$1,701,948	$57.63	$90.55	77	77	$8,944.15	$14,065.68
IP - Psych	$58,203	$131,010	$3.35	$6.97	75	124	$538.91	$675.31
Lab	$38,745	$46,302	$2.23	$2.46	2,844	2,753	$9.41	$10.74
OP - Emergency Room & Related	$784,987	$762,164	$45.16	$40.55	1,611	1,493	$336.33	$325.85
OP - Other	$743,008	$795,690	$42.75	$42.33	878	876	$584.13	$579.95
Pharmacy	$967,744	$1,209,148	$55.68	$64.33	15,372	16,434	$43.46	$46.97
Prof - Anesthesia	$30,098	$37,378	$1.73	$1.99	104	111	$200.65	$214.81
Prof - Child EPSDT	$1,630	$2,612	$0.09	$0.14	142	154	$7.95	$10.84
Prof - Evaluation & Management	$486,648	$547,235	$28.00	$29.11	5,121	5,169	$65.60	$67.58
Prof - Maternity	$0	$106	$0.00	$0.01	0	1	-	$105.84
Prof - Other	$117,866	$184,613	$6.78	$9.82	1,359	1,400	$59.86	$84.18
Prof - Psych	$64,450	$80,193	$3.71	$4.27	774	873	$57.49	$58.62
Prof - Specialist	$182,290	$253,291	$10.49	$13.48	775	793	$162.47	$203.94
Prof - Vision	$20,991	$21,782	$1.21	$1.16	126	136	$115.34	$102.26
Radiology	$91,069	$92,393	$5.24	$4.92	1,994	1,982	$31.53	$29.76
Transportation/Ambulance	$93,614	$98,485	$5.39	$5.24	731	926	$88.40	$67.87
Total	$4,819,031	$6,146,847	$277.26	$327.03				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 45 and Over								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	18,504	20,025						
Service Type								
DME/Supplies	$213,605	$202,963	$11.54	$10.14	914	1,000	$151.49	$121.68
FQHC / RHC	$47,080	$42,194	$2.54	$2.11	695	603	$43.92	$41.90
Home Health	$42,708	$47,529	$2.31	$2.37	136	67	$204.34	$428.19
IP - Maternity	$7,329	$23,113	$0.40	$1.15	1	3	$3,664.50	$4,622.65
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$2,474,933	$2,252,193	$133.75	$112.47	156	135	$10,269.43	$9,965.45
IP - Psych	$95,605	$158,725	$5.17	$7.93	97	143	$637.37	$666.91
Lab	$104,528	$106,923	$5.65	$5.34	7,228	6,531	$9.38	$9.81
OP - Emergency Room & Related	$851,531	$916,976	$46.02	$45.79	1,274	1,316	$433.57	$417.57
OP - Other	$2,037,507	$1,919,635	$110.11	$95.86	2,570	2,447	$514.13	$470.04
Pharmacy	$2,537,210	$3,165,473	$137.12	$158.08	37,782	38,658	$43.55	$49.07
Prof - Anesthesia	$59,610	$59,697	$3.22	$2.98	194	187	$199.36	$191.34
Prof - Child EPSDT	$8,044	$6,098	$0.43	$0.30	631	376	$8.27	$9.71
Prof - Evaluation & Management	$863,265	$972,760	$46.65	$48.58	8,414	8,609	$66.53	$67.71
Prof - Maternity	$4,178	$7,117	$0.23	$0.36	3	5	$1,044.53	$790.75
Prof - Other	$485,263	$333,628	$26.22	$16.66	3,442	2,760	$91.42	$72.45
Prof - Psych	$91,742	$121,141	$4.96	$6.05	1,232	1,609	$48.29	$45.12
Prof - Specialist	$486,038	$452,879	$26.27	$22.62	1,739	1,550	$181.22	$175.06
Prof - Vision	$37,562	$42,208	$2.03	$2.11	309	353	$78.75	$71.66
Radiology	$238,515	$214,932	$12.89	$10.73	3,837	3,502	$40.32	$36.78
Transportation/Ambulance	$132,569	$127,880	$7.16	$6.39	4,200	3,503	$20.47	$21.88
Total	$10,818,823	$11,174,064	$584.67	$558.01				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

All Age Categories								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	1,263,745	1,308,268						
Service Type								
DME/Supplies	$3,005,726	$2,984,710	$2.38	$2.28	319	328	$89.48	$83.55
FQHC / RHC	$1,041,437	$1,091,642	$0.82	$0.83	201	196	$49.31	$51.14
Home Health	$515,325	$548,984	$0.41	$0.42	9	7	$550.56	$754.10
IP - Maternity	$14,323,176	$13,917,584	$11.33	$10.64	45	43	$3,017.95	$2,958.67
IP - Newborn	$14,671,178	$17,118,892	$11.61	$13.09	31	35	$4,470.19	$4,468.52
IP - Other	$25,763,937	$26,820,207	$20.39	$20.50	36	33	$6,888.75	$7,454.20
IP - Psych	$3,556,167	$4,040,477	$2.81	$3.09	43	44	$779.35	$835.15
Lab	$3,340,776	$3,341,320	$2.64	$2.55	2,889	2,777	$10.98	$11.03
OP - Emergency Room & Related	$23,587,657	$24,279,200	$18.66	$18.56	884	890	$253.47	$250.36
OP - Other	$31,083,561	$29,780,645	$24.60	$22.76	867	866	$340.29	$315.38
Pharmacy	$38,125,605	$43,282,777	$30.17	$33.08	7,790	8,068	$46.48	$49.21
Prof - Anesthesia	$1,909,945	$1,895,227	$1.51	$1.45	99	97	$183.88	$179.98
Prof - Child EPSDT	$1,273,955	$1,159,581	$1.01	$0.89	919	857	$13.16	$12.41
Prof - Evaluation & Management	$35,989,042	$38,111,627	$28.48	$29.13	5,028	5,017	$67.97	$69.68
Prof - Maternity	$7,070,110	$7,263,075	$5.59	$5.55	107	105	$625.40	$637.34
Prof - Other	$7,908,707	$8,831,303	$6.26	$6.75	1,682	1,806	$44.66	$44.85
Prof - Psych	$3,958,499	$4,542,133	$3.13	$3.47	580	664	$64.81	$62.77
Prof - Specialist	$6,251,651	$6,407,489	$4.95	$4.90	469	448	$126.65	$131.12
Prof - Vision	$1,583,003	$1,738,790	$1.25	$1.33	204	235	$73.66	$67.82
Radiology	$3,762,875	$3,993,845	$2.98	$3.05	983	1,008	$36.33	$36.35
Transportation/Ambulance	$5,462,587	$5,358,185	$4.32	$4.10	788	780	$65.81	$63.05
Total	$234,184,918	$246,507,691	$185.31	$188.42				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age Under 1								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	43,549	44,454						
Service Type								
DME/Supplies	$181,320	$225,458	$4.16	$5.07	629	730	$79.42	$83.32
FQHC / RHC	$205,962	$143,880	$4.73	$3.24	1,133	975	$50.11	$39.82
Home Health	$19,299	$30,832	$0.44	$0.69	35	35	$153.17	$237.17
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$9,529,256	$9,661,072	$218.82	$217.33	639	614	$4,107.47	$4,250.74
IP - Other	$1,130,916	$1,899,198	$25.97	$42.72	96	90	$3,259.12	$5,669.25
IP - Psych	$48,422	$48,887	$1.11	$1.10	0	0	-	-
Lab	$82,710	$73,793	$1.90	$1.66	2,007	1,779	$11.36	$11.20
OP - Emergency Room & Related	$699,786	$633,655	$16.07	$14.25	1,136	1,116	$169.79	$153.20
OP - Other	$772,923	$932,403	$17.75	$20.97	936	1,043	$227.64	$241.42
Pharmacy	$967,306	$854,765	$22.21	$19.23	5,228	4,980	$50.99	$46.33
Prof - Anesthesia	$59,308	$60,798	$1.36	$1.37	82	85	$200.15	$193.01
Prof - Child EPSDT	$201,085	$189,142	$4.62	$4.25	4,636	4,488	$11.95	$11.38
Prof - Evaluation & Management	$4,183,386	$4,368,162	$96.06	$98.26	14,592	14,402	$79.00	$81.87
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$469,492	$779,551	$10.78	$17.54	6,502	6,808	$19.90	$30.91
Prof - Psych	$56,416	$56,996	$1.30	$1.28	1	2	$28,207.78	$9,499.31
Prof - Specialist	$334,109	$284,904	$7.67	$6.41	869	784	$105.90	$98.10
Prof - Vision	$62,494	$67,631	$1.44	$1.52	73	90	$235.83	$203.71
Radiology	$75,111	$78,148	$1.72	$1.76	1,431	1,573	$14.46	$13.41
Transportation/Ambulance	$211,428	$246,875	$4.85	$5.55	647	755	$90.08	$88.30
Total	$19,290,728	$20,636,149	$442.97	$464.21				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 1-5								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	175,222	175,340						
Service Type								
DME/Supplies	$256,691	$244,403	$1.46	$1.39	218	211	$80.62	$79.12
FQHC / RHC	$271,386	$281,704	$1.55	$1.61	480	438	$38.73	$44.03
Home Health	$28,323	$29,218	$0.16	$0.17	14	12	$138.16	$166.01
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$2,199,296	$1,697,765	$12.55	$9.68	33	28	$4,620.37	$4,212.82
IP - Psych	$203,938	$210,086	$1.16	$1.20	0	0	$50,984.56	$210,086.44
Lab	$344,744	$292,199	$1.97	$1.67	2,009	1,789	$11.75	$11.18
OP - Emergency Room & Related	$1,744,898	$1,669,812	$9.96	$9.52	768	737	$155.64	$155.10
OP - Other	$3,188,605	$3,491,323	$18.20	$19.91	534	585	$409.27	$408.39
Pharmacy	$2,806,606	$2,784,616	$16.02	$15.88	4,902	4,748	$39.21	$40.14
Prof - Anesthesia	$189,760	$200,176	$1.08	$1.14	96	97	$134.68	$141.67
Prof - Child EPSDT	$244,628	$248,592	$1.40	$1.42	1,463	1,514	$11.45	$11.23
Prof - Evaluation & Management	$4,693,420	$4,691,024	$26.79	$26.75	5,009	4,821	$64.17	$66.60
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$816,685	$632,951	$4.66	$3.61	1,502	1,507	$37.23	$28.74
Prof - Psych	$278,481	$294,506	$1.59	$1.68	96	129	$199.63	$156.32
Prof - Specialist	$455,751	$485,841	$2.60	$2.77	424	392	$73.56	$84.91
Prof - Vision	$240,745	$256,460	$1.37	$1.46	104	110	$158.18	$159.19
Radiology	$90,005	$90,309	$0.51	$0.52	400	397	$15.40	$15.55
Transportation/Ambulance	$631,404	$690,245	$3.60	$3.94	533	577	$81.19	$81.84
Total	$18,685,366	$18,291,230	$106.64	$104.32				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 6-14								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	227,553	240,435						
Service Type								
DME/Supplies	$272,538	$281,099	$1.20	$1.17	127	141	$112.85	$99.61
FQHC / RHC	$251,148	$259,007	$1.10	$1.08	328	308	$40.37	$41.91
Home Health	$39,445	$36,934	$0.17	$0.15	9	9	$224.12	$201.83
IP - Maternity	($5,172)	$8,128	($0.02)	$0.03	0	0	($2,585.89)	$2,709.47
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,072,872	$2,681,994	$4.71	$11.15	13	15	$4,291.49	$8,793.42
IP - Psych	$440,563	$520,323	$1.94	$2.16	19	24	$1,217.02	$1,066.23
Lab	$356,596	$334,943	$1.57	$1.39	1,459	1,336	$12.88	$12.51
OP - Emergency Room & Related	$1,791,751	$1,967,217	$7.87	$8.18	438	457	$215.87	$214.88
OP - Other	$2,448,754	$2,932,417	$10.76	$12.20	439	497	$293.97	$294.33
Pharmacy	$6,324,082	$7,398,713	$27.79	$30.77	5,534	5,584	$60.26	$66.13
Prof - Anesthesia	$95,358	$132,779	$0.42	$0.55	38	45	$132.63	$148.52
Prof - Child EPSDT	$65,190	$64,524	$0.29	$0.27	276	267	$12.48	$12.07
Prof - Evaluation & Management	$3,766,628	$4,180,391	$16.55	$17.39	3,095	3,135	$64.18	$66.56
Prof - Maternity	$1,919	$4,067	$0.01	$0.02	0	1	$239.87	$369.71
Prof - Other	$608,702	$694,195	$2.67	$2.89	907	1,000	$35.38	$34.64
Prof - Psych	$722,917	$779,369	$3.18	$3.24	669	653	$56.97	$59.53
Prof - Specialist	$462,367	$545,371	$2.03	$2.27	276	254	$88.22	$106.96
Prof - Vision	$309,459	$347,581	$1.36	$1.45	391	405	$41.75	$42.87
Radiology	$167,689	$194,186	$0.74	$0.81	444	481	$19.94	$20.15
Transportation/Ambulance	$811,727	$941,756	$3.57	$3.92	783	754	$54.65	$62.36
Total	$20,004,531	$24,304,993	$87.91	$101.09				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 15-20 Female								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	45,921	45,673						
Service Type								
DME/Supplies	$38,338	$39,938	$0.83	$0.87	92	100	$108.61	$105.38
FQHC / RHC	$181,802	$135,045	$3.96	$2.96	986	739	$48.16	$48.01
Home Health	$25,779	$17,609	$0.56	$0.39	23	27	$289.65	$170.96
IP - Maternity	$1,854,255	$1,409,946	$40.38	$30.87	163	144	$2,971.56	$2,568.21
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$714,958	$317,084	$15.57	$6.94	21	18	$8,826.64	$4,662.99
IP - Psych	$139,699	$97,678	$3.04	$2.14	61	36	$599.57	$707.81
Lab	$258,154	$243,836	$5.62	$5.34	5,223	5,086	$12.92	$12.60
OP - Emergency Room & Related	$1,002,983	$994,273	$21.84	$21.77	1,006	996	$260.45	$262.20
OP - Other	$1,170,632	$978,297	$25.49	$21.42	1,134	1,066	$269.79	$241.14
Pharmacy	$1,361,098	$1,412,256	$29.64	$30.92	9,918	9,613	$35.86	$38.60
Prof - Anesthesia	$121,430	$105,018	$2.64	$2.30	186	154	$170.55	$179.21
Prof - Child EPSDT	$49,802	$57,348	$1.08	$1.26	419	401	$31.09	$37.58
Prof - Evaluation & Management	$1,296,910	$1,263,224	$28.24	$27.66	5,151	4,962	$65.79	$66.89
Prof - Maternity	$955,804	$866,847	$20.81	$18.98	513	521	$486.41	$437.36
Prof - Other	$204,174	$251,311	$4.45	$5.50	1,271	1,325	$41.99	$49.82
Prof - Psych	$166,293	$168,920	$3.62	$3.70	778	795	$55.88	$55.84
Prof - Specialist	$194,287	$151,377	$4.23	$3.31	670	591	$75.75	$67.25
Prof - Vision	$65,521	$70,801	$1.43	$1.55	502	530	$34.11	$35.08
Radiology	$254,967	$245,695	$5.55	$5.38	1,323	1,273	$50.36	$50.72
Transportation/Ambulance	$209,441	$252,501	$4.56	$5.53	1,054	1,116	$51.91	$59.43
Total	$10,266,326	$9,079,003	$223.56	$198.78				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 21-44 Female								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	80,291	83,606						
Service Type								
DME/Supplies	$309,207	$353,187	$3.85	$4.22	344	398	$134.44	$127.50
FQHC / RHC	$472,021	$463,694	$5.88	$5.55	1,271	1,243	$55.50	$53.54
Home Health	$159,338	$161,195	$1.98	$1.93	57	64	$418.21	$360.62
IP - Maternity	$5,362,613	$5,280,302	$66.79	$63.16	286	270	$2,806.18	$2,802.71
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$3,936,579	$5,271,396	$49.03	$63.05	83	78	$7,118.59	$9,707.91
IP - Psych	$325,175	$371,577	$4.05	$4.44	65	72	$742.41	$741.67
Lab	$702,741	$761,330	$8.75	$9.11	8,102	8,054	$12.96	$13.57
OP - Emergency Room & Related	$3,652,861	$3,717,839	$45.50	$44.47	1,714	1,773	$318.44	$300.89
OP - Other	$5,266,428	$5,288,838	$65.59	$63.26	2,128	2,131	$369.89	$356.27
Pharmacy	$5,417,114	$6,481,056	$67.47	$77.52	21,485	22,390	$37.68	$41.55
Prof - Anesthesia	$442,436	$432,418	$5.51	$5.17	401	370	$164.78	$167.93
Prof - Child EPSDT	$73,194	$84,126	$0.91	$1.01	504	454	$21.73	$26.57
Prof - Evaluation & Management	$3,238,291	$3,519,514	$40.33	$42.10	7,685	7,784	$62.98	$64.90
Prof - Maternity	$2,960,758	$2,920,719	$36.88	$34.93	959	903	$461.32	$464.12
Prof - Other	$725,175	$865,282	$9.03	$10.35	1,727	1,809	$62.74	$68.65
Prof - Psych	$308,277	$350,549	$3.84	$4.19	906	1,017	$50.83	$49.49
Prof - Specialist	$1,150,585	$1,245,702	$14.33	$14.90	1,465	1,457	$117.41	$122.74
Prof - Vision	$90,775	$96,867	$1.13	$1.16	179	169	$75.90	$82.16
Radiology	$1,012,478	$1,123,014	$12.61	$13.43	2,878	3,018	$52.57	$53.40
Transportation/Ambulance	$532,497	$629,697	$6.63	$7.53	2,170	2,465	$36.68	$36.66
Total	$36,138,543	$39,418,301	$450.09	$471.48				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 15-20 Male								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	36,677	37,765						
Service Type								
DME/Supplies	$46,947	$56,254	$1.28	$1.49	120	107	$128.27	$166.92
FQHC / RHC	$33,399	$47,368	$0.91	$1.25	246	253	$44.47	$59.43
Home Health	$12,531	$13,186	$0.34	$0.35	14	16	$298.36	$269.11
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$450,256	$638,901	$12.28	$16.92	22	21	$6,720.24	$9,829.25
IP - Psych	$86,368	$117,452	$2.35	$3.11	43	34	$654.30	$1,108.04
Lab	$51,055	$46,673	$1.39	$1.24	1,327	1,159	$12.59	$12.80
OP - Emergency Room & Related	$458,419	$520,296	$12.50	$13.78	545	547	$275.16	$301.97
OP - Other	$536,529	$533,702	$14.63	$14.13	478	490	$367.49	$345.89
Pharmacy	$1,056,439	$1,141,978	$28.80	$30.24	5,131	5,167	$67.36	$70.23
Prof - Anesthesia	$22,628	$20,184	$0.62	$0.53	43	39	$174.06	$162.77
Prof - Child EPSDT	$5,721	$6,183	$0.16	$0.16	167	180	$11.22	$10.90
Prof - Evaluation & Management	$535,884	$582,914	$14.61	$15.44	2,656	2,705	$66.02	$68.47
Prof - Maternity	$0	$361	$0.00	$0.01	0	0	-	$361.11
Prof - Other	$83,720	$104,116	$2.28	$2.76	773	828	$35.44	$39.94
Prof - Psych	$114,866	$125,134	$3.13	$3.31	710	694	$52.93	$57.32
Prof - Specialist	$134,635	$141,714	$3.67	$3.75	360	343	$122.40	$131.46
Prof - Vision	$47,832	$52,019	$1.30	$1.38	329	344	$47.55	$48.08
Radiology	$57,757	$56,352	$1.57	$1.49	788	765	$23.99	$23.39
Transportation/Ambulance	$155,508	$151,336	$4.24	$4.01	571	663	$89.17	$72.55
Total	$3,890,494	$4,356,123	$106.07	$115.35				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 21-44 Male								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	10,151	11,058						
Service Type								
DME/Supplies	$53,705	$71,950	$5.29	$6.51	591	670	$107.41	$116.61
FQHC / RHC	$14,212	$16,902	$1.40	$1.53	449	397	$37.40	$46.18
Home Health	$7,771	$11,917	$0.77	$1.08	28	51	$323.80	$253.56
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$744,855	$855,717	$73.38	$77.38	117	90	$7,523.79	$10,309.84
IP - Psych	$53,140	$21,616	$5.23	$1.95	89	41	$708.53	$568.84
Lab	$29,598	$25,949	$2.92	$2.35	2,862	2,736	$12.23	$10.29
OP - Emergency Room & Related	$462,334	$533,415	$45.55	$48.24	1,550	1,640	$352.66	$353.02
OP - Other	$545,550	$544,011	$53.74	$49.20	1,345	1,348	$479.39	$438.01
Pharmacy	$725,287	$876,403	$71.45	$79.26	18,113	18,976	$47.34	$50.12
Prof - Anesthesia	$18,590	$15,824	$1.83	$1.43	125	115	$175.38	$149.28
Prof - Child EPSDT	$2,350	$1,791	$0.23	$0.16	223	224	$12.43	$8.70
Prof - Evaluation & Management	$326,920	$353,930	$32.21	$32.01	5,822	5,734	$66.38	$66.98
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$74,651	$75,811	$7.35	$6.86	1,207	1,552	$73.12	$53.01
Prof - Psych	$29,944	$32,319	$2.95	$2.92	660	607	$53.66	$57.82
Prof - Specialist	$134,973	$114,753	$13.30	$10.38	1,157	1,014	$137.87	$122.86
Prof - Vision	$11,736	$13,840	$1.16	$1.25	136	156	$102.05	$96.11
Radiology	$66,511	$73,774	$6.55	$6.67	2,393	2,341	$32.86	$34.20
Transportation/Ambulance	$56,588	$69,945	$5.57	$6.33	1,208	1,709	$55.37	$44.41
Total	$3,358,716	$3,709,867	$330.88	$335.49				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 45 and Over								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	8,418	9,034						
Service Type								
DME/Supplies	$86,186	$120,604	$10.24	$13.35	1,021	1,288	$120.37	$124.33
FQHC / RHC	$44,198	$42,806	$5.25	$4.74	1,341	1,186	$46.97	$47.94
Home Health	$24,039	$29,595	$2.86	$3.28	58	124	$586.31	$318.23
IP - Maternity	$0	$4,444	$0.00	$0.49	0	1	-	$4,443.78
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,422,140	$1,362,433	$168.94	$150.81	224	185	$9,058.21	$9,801.68
IP - Psych	$67,727	$63,309	$8.05	$7.01	114	134	$846.59	$626.82
Lab	$68,175	$71,048	$8.10	$7.86	7,796	7,890	$12.47	$11.96
OP - Emergency Room & Related	$320,322	$347,550	$38.05	$38.47	1,025	1,116	$445.51	$413.75
OP - Other	$1,058,083	$1,162,064	$125.69	$128.63	3,210	3,256	$469.84	$474.12
Pharmacy	$1,380,481	$1,584,870	$163.99	$175.43	42,248	44,047	$46.58	$47.79
Prof - Anesthesia	$34,607	$37,829	$4.11	$4.19	259	303	$190.15	$165.92
Prof - Child EPSDT	$5,496	$4,316	$0.65	$0.48	763	571	$10.27	$10.04
Prof - Evaluation & Management	$427,416	$449,083	$50.77	$49.71	9,196	8,896	$66.26	$67.06
Prof - Maternity	$0	$2,193	$0.00	$0.24	0	3	-	$1,096.66
Prof - Other	$152,907	$151,095	$18.16	$16.73	3,246	3,179	$67.15	$63.14
Prof - Psych	$38,190	$44,917	$4.54	$4.97	1,167	1,290	$46.63	$46.26
Prof - Specialist	$224,478	$273,189	$26.67	$30.24	2,312	2,279	$138.40	$159.20
Prof - Vision	$18,283	$20,162	$2.17	$2.23	364	388	$71.70	$69.05
Radiology	$99,995	$113,954	$11.88	$12.61	3,712	3,923	$38.40	$38.59
Transportation/Ambulance	$97,926	$82,836	$11.63	$9.17	4,791	4,104	$29.14	$26.81
Total	$5,570,645	$5,968,296	$661.75	$660.65				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

All Age Categories								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	627,782	647,365						
Service Type								
DME/Supplies	$1,244,931	$1,392,892	$1.98	$2.15	232	254	$102.74	$101.75
FQHC / RHC	$1,474,128	$1,390,405	$2.35	$2.15	606	551	$46.52	$46.78
Home Health	$316,525	$330,488	$0.50	$0.51	21	23	$292.00	$269.13
IP - Maternity	$7,211,697	$6,702,820	$11.49	$10.35	48	45	$2,842.61	$2,750.44
IP - Newborn	$9,529,256	$9,661,072	$15.18	$14.92	44	42	$4,107.47	$4,250.74
IP - Other	$11,671,871	$14,724,487	$18.59	$22.75	39	36	$5,749.69	$7,586.03
IP - Psych	$1,365,033	$1,450,929	$2.17	$2.24	25	25	$1,030.99	$1,056.76
Lab	$1,893,772	$1,849,771	$3.02	$2.86	2,875	2,727	$12.59	$12.58
OP - Emergency Room & Related	$10,133,353	$10,384,056	$16.14	$16.04	815	821	$237.59	$234.51
OP - Other	$14,987,503	$15,863,055	$23.87	$24.50	821	862	$349.01	$341.05
Pharmacy	$20,038,413	$22,534,656	$31.92	$34.81	8,370	8,512	$45.76	$49.08
Prof - Anesthesia	$984,117	$1,005,025	$1.57	$1.55	119	116	$157.73	$161.04
Prof - Child EPSDT	$647,466	$656,020	$1.03	$1.01	948	927	$13.05	$13.12
Prof - Evaluation & Management	$18,468,854	$19,408,242	$29.42	$29.98	5,264	5,194	$67.06	$69.26
Prof - Maternity	$3,918,481	$3,794,188	$6.24	$5.86	160	154	$466.99	$457.74
Prof - Other	$3,135,507	$3,554,312	$4.99	$5.49	1,621	1,694	$36.97	$38.90
Prof - Psych	$1,715,383	$1,852,710	$2.73	$2.86	510	534	$64.31	$64.32
Prof - Specialist	$3,091,185	$3,242,852	$4.92	$5.01	586	553	$100.83	$108.63
Prof - Vision	$846,844	$925,359	$1.35	$1.43	262	274	$61.85	$62.67
Radiology	$1,824,512	$1,975,432	$2.91	$3.05	971	1,013	$35.91	$36.14
Transportation/Ambulance	$2,706,519	$3,065,190	$4.31	$4.73	949	1,010	$54.50	$56.23
Total	$117,205,349	$125,763,961	$186.70	$194.27				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age Under 1								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	100,372	101,361						
Service Type								
DME/Supplies	$342,757	$311,307	$3.41	$3.07	439	418	$93.42	$88.16
FQHC / RHC	$44,810	$44,389	$0.45	$0.44	155	142	$34.58	$36.96
Home Health	$70,097	$89,776	$0.70	$0.89	26	33	$318.62	$318.35
IP - Maternity	$4,624	$0	$0.05	$0.00	0	0	$4,624.00	-
IP - Newborn	$20,633,110	$21,060,971	$205.57	$207.78	436	434	$5,657.55	$5,746.51
IP - Other	$3,236,661	$3,698,415	$32.25	$36.49	42	40	$9,221.26	$10,942.06
IP - Psych	$117,776	$123,793	$1.17	$1.22	0	0	-	-
Lab	$209,896	$200,520	$2.09	$1.98	1,507	1,269	$16.65	$18.70
OP - Emergency Room & Related	$2,191,708	$2,128,688	$21.84	$21.00	1,272	1,250	$206.03	$201.66
OP - Other	$2,467,594	$2,478,671	$24.58	$24.45	558	549	$528.62	$534.31
Pharmacy	$1,912,616	$1,430,755	$19.06	$14.12	4,386	4,130	$52.14	$41.02
Prof - Anesthesia	$167,647	$190,424	$1.67	$1.88	97	99	$206.72	$227.78
Prof - Child EPSDT	$526,161	$523,399	$5.24	$5.16	5,277	5,384	$11.92	$11.51
Prof - Evaluation & Management	$10,021,929	$10,446,718	$99.85	$103.06	14,584	14,465	$82.16	$85.50
Prof - Maternity	$0	$1,112	$0.00	$0.01	0	0	-	$1,111.99
Prof - Other	$1,540,191	$1,499,447	$15.34	$14.79	7,158	7,336	$25.72	$24.20
Prof - Psych	$136,877	$145,250	$1.36	$1.43	0	4	-	$4,272.07
Prof - Specialist	$896,384	$905,285	$8.93	$8.93	1,039	975	$103.16	$109.97
Prof - Vision	$144,814	$164,833	$1.44	$1.63	73	109	$237.01	$178.39
Radiology	$147,837	$147,956	$1.47	$1.46	1,207	1,137	$14.65	$15.41
Transportation/Ambulance	$366,027	$399,642	$3.65	$3.94	702	644	$62.36	$73.48
Total	$45,179,516	$45,991,352	$450.12	$453.74				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 1-5								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	395,271	406,019						
Service Type								
DME/Supplies	$628,028	$589,928	$1.59	$1.45	205	227	$92.96	$76.80
FQHC / RHC	$108,833	$99,715	$0.28	$0.25	102	90	$32.52	$32.67
Home Health	$16,563	$20,666	$0.04	$0.05	4	4	$111.91	$138.70
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$2,855,074	$3,793,040	$7.22	$9.34	13	13	$6,733.66	$8,373.16
IP - Psych	$518,241	$577,545	$1.31	$1.42	2	5	$7,003.26	$3,121.86
Lab	$840,984	$800,209	$2.13	$1.97	1,685	1,444	$15.15	$16.38
OP - Emergency Room & Related	$5,923,295	$5,837,010	$14.99	$14.38	862	840	$208.57	$205.34
OP - Other	$7,916,524	$7,818,351	$20.03	$19.26	384	407	$625.61	$567.45
Pharmacy	$5,613,450	$6,168,394	$14.20	$15.19	4,014	4,006	$42.46	$45.51
Prof - Anesthesia	$362,806	$382,653	$0.92	$0.94	74	72	$148.45	$157.02
Prof - Child EPSDT	$582,872	$606,730	$1.47	$1.49	1,524	1,579	$11.61	$11.36
Prof - Evaluation & Management	$10,159,304	$10,569,927	$25.70	$26.03	4,489	4,375	$68.71	$71.41
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$2,254,466	$2,640,894	$5.70	$6.50	2,174	2,154	$31.49	$36.24
Prof - Psych	$698,445	$761,808	$1.77	$1.88	144	162	$147.10	$139.07
Prof - Specialist	$1,065,670	$1,063,261	$2.70	$2.62	486	480	$66.57	$65.52
Prof - Vision	$523,572	$579,127	$1.32	$1.43	91	112	$174.35	$152.24
Radiology	$190,046	$187,802	$0.48	$0.46	380	370	$15.16	$15.01
Transportation/Ambulance	$1,298,779	$1,377,478	$3.29	$3.39	417	350	$94.62	$116.16
Total	$41,556,950	$43,874,537	$105.14	$108.06				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 6-14								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	525,265	550,301						
Service Type								
DME/Supplies	$585,468	$688,278	$1.11	$1.25	139	152	$96.33	$98.45
FQHC / RHC	$79,985	$86,634	$0.15	$0.16	55	53	$33.29	$35.83
Home Health	$12,195	$20,958	$0.02	$0.04	3	3	$92.39	$130.99
IP - Maternity	$43,825	$42,373	$0.08	$0.08	0	0	$2,739.09	$2,354.03
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$2,891,957	$3,107,636	$5.51	$5.65	8	8	$8,431.36	$8,135.17
IP - Psych	$1,128,080	$1,138,852	$2.15	$2.07	32	35	$806.92	$711.78
Lab	$945,131	$939,610	$1.80	$1.71	1,255	1,124	$17.20	$18.22
OP - Emergency Room & Related	$5,258,011	$5,456,151	$10.01	$9.91	448	453	$268.28	$262.61
OP - Other	$6,825,415	$7,432,017	$12.99	$13.51	274	319	$569.31	$508.80
Pharmacy	$14,667,186	$17,451,541	$27.92	$31.71	4,618	4,854	$72.56	$78.41
Prof - Anesthesia	$250,827	$267,097	$0.48	$0.49	36	36	$158.45	$161.78
Prof - Child EPSDT	$209,498	$193,087	$0.40	$0.35	376	344	$12.72	$12.24
Prof - Evaluation & Management	$8,253,990	$9,008,397	$15.71	$16.37	2,707	2,708	$69.67	$72.53
Prof - Maternity	$19,423	$22,973	$0.04	$0.04	1	1	$776.93	$604.57
Prof - Other	$3,099,671	$4,165,690	$5.90	$7.57	1,404	1,519	$50.44	$59.79
Prof - Psych	$1,791,693	$1,966,644	$3.41	$3.57	829	900	$49.37	$47.67
Prof - Specialist	$1,151,856	$1,253,177	$2.19	$2.28	296	300	$88.91	$91.06
Prof - Vision	$718,996	$801,968	$1.37	$1.46	428	443	$38.42	$39.50
Radiology	$346,525	$395,390	$0.66	$0.72	391	397	$20.26	$21.73
Transportation/Ambulance	$1,685,154	$1,821,706	$3.21	$3.31	440	418	$87.47	$95.04
Total	$49,964,886	$56,260,180	$95.12	$102.24				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 15-20 Female								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	109,155	107,762						
Service Type								
DME/Supplies	$111,593	$138,456	$1.02	$1.28	106	115	$115.64	$133.90
FQHC / RHC	$77,386	$73,925	$0.71	$0.69	152	143	$55.83	$57.75
Home Health	$14,770	$9,558	$0.14	$0.09	9	7	$171.75	$142.66
IP - Maternity	$3,438,633	$3,326,657	$31.50	$30.87	147	138	$2,575.76	$2,684.95
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$681,092	$658,898	$6.24	$6.11	12	15	$6,248.55	$4,991.65
IP - Psych	$313,567	$289,434	$2.87	$2.69	78	56	$444.78	$578.87
Lab	$399,037	$366,518	$3.66	$3.40	5,056	4,897	$8.68	$8.34
OP - Emergency Room & Related	$3,184,444	$3,077,810	$29.17	$28.56	994	1,009	$352.14	$339.75
OP - Other	$2,538,090	$2,565,472	$23.25	$23.81	460	432	$607.20	$661.89
Pharmacy	$3,003,339	$3,344,630	$27.51	$31.04	7,302	7,351	$45.22	$50.67
Prof - Anesthesia	$326,884	$322,347	$2.99	$2.99	200	197	$179.51	$182.53
Prof - Child EPSDT	$161,907	$179,382	$1.48	$1.66	475	477	$37.49	$41.84
Prof - Evaluation & Management	$2,431,855	$2,523,157	$22.28	$23.41	3,864	3,983	$69.19	$70.54
Prof - Maternity	$2,036,324	$1,950,407	$18.66	$18.10	320	322	$698.81	$674.18
Prof - Other	$788,670	$937,403	$7.23	$8.70	1,564	1,602	$55.44	$65.14
Prof - Psych	$353,461	$383,919	$3.24	$3.56	735	843	$52.87	$50.72
Prof - Specialist	$441,177	$472,546	$4.04	$4.39	647	649	$75.02	$81.05
Prof - Vision	$149,736	$157,927	$1.37	$1.47	556	586	$29.60	$30.02
Radiology	$592,610	$603,850	$5.43	$5.60	1,037	1,069	$62.82	$62.89
Transportation/Ambulance	$416,646	$429,753	$3.82	$3.99	1,016	806	$45.10	$59.38
Total	$21,461,222	$21,812,045	$196.61	$202.41				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 21-44 Female								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	213,526	222,637						
Service Type								
DME/Supplies	$868,945	$932,005	$4.07	$4.19	337	366	$145.09	$137.24
FQHC / RHC	$600,129	$646,446	$2.81	$2.90	508	454	$66.42	$76.71
Home Health	$150,641	$106,735	$0.71	$0.48	24	16	$350.33	$359.38
IP - Maternity	$13,186,950	$14,281,842	$61.76	$64.15	275	274	$2,692.31	$2,811.39
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$6,032,873	$6,228,849	$28.25	$27.98	64	55	$5,291.99	$6,059.19
IP - Psych	$621,542	$624,820	$2.91	$2.81	58	57	$604.03	$592.81
Lab	$1,121,847	$1,129,259	$5.25	$5.07	8,627	8,230	$7.31	$7.40
OP - Emergency Room & Related	$12,695,752	$13,749,870	$59.46	$61.76	1,756	1,843	$406.37	$402.13
OP - Other	$10,852,108	$10,761,620	$50.82	$48.34	875	835	$697.26	$694.88
Pharmacy	$12,161,290	$14,118,375	$56.95	$63.41	16,610	16,956	$41.15	$44.88
Prof - Anesthesia	$1,309,008	$1,359,301	$6.13	$6.11	436	439	$168.56	$166.76
Prof - Child EPSDT	$227,812	$320,702	$1.07	$1.44	412	386	$31.05	$44.83
Prof - Evaluation & Management	$7,370,064	$8,024,205	$34.52	$36.04	6,445	6,566	$64.27	$65.87
Prof - Maternity	$7,698,304	$8,199,231	$36.05	$36.83	696	743	$622.03	$595.05
Prof - Other	$2,862,895	$3,341,500	$13.41	$15.01	1,916	1,945	$83.97	$92.60
Prof - Psych	$804,512	$948,817	$3.77	$4.26	1,018	1,177	$44.42	$43.46
Prof - Specialist	$3,121,605	$3,207,056	$14.62	$14.40	1,401	1,395	$125.24	$123.92
Prof - Vision	$207,040	$229,525	$0.97	$1.03	136	135	$85.66	$91.55
Radiology	$2,907,530	$3,177,863	$13.62	$14.27	2,572	2,562	$63.54	$66.85
Transportation/Ambulance	$955,514	$1,018,181	$4.47	$4.57	2,115	2,121	$25.39	$25.87
Total	$85,756,362	$92,406,201	$401.62	$415.05				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 15-20 Male								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	83,686	84,787						
Service Type								
DME/Supplies	$149,878	$156,595	$1.79	$1.85	112	144	$191.91	$154.13
FQHC / RHC	$16,805	$12,206	$0.20	$0.14	67	51	$36.06	$33.72
Home Health	$4,855	$9,999	$0.06	$0.12	4	4	$167.40	$322.55
IP - Maternity	$2,285	$0	$0.03	$0.00	0	0	$2,285.25	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$841,512	$782,562	$10.06	$9.23	14	13	$8,858.02	$8,695.13
IP - Psych	$236,527	$224,697	$2.83	$2.65	56	46	$600.32	$689.25
Lab	$135,046	$130,946	$1.61	$1.54	1,027	1,055	$18.86	$17.56
OP - Emergency Room & Related	$1,244,641	$1,221,278	$14.87	$14.40	506	488	$352.59	$354.40
OP - Other	$1,501,241	$1,769,024	$17.94	$20.86	286	336	$751.75	$746.11
Pharmacy	$1,942,060	$2,322,488	$23.21	$27.39	3,897	4,090	$71.45	$80.37
Prof - Anesthesia	$51,197	$57,411	$0.61	$0.68	44	47	$166.22	$171.89
Prof - Child EPSDT	$19,084	$18,484	$0.23	$0.22	230	234	$11.91	$11.18
Prof - Evaluation & Management	$1,081,139	$1,138,287	$12.92	$13.43	2,176	2,192	$71.24	$73.50
Prof - Maternity	$1,828	$47	$0.02	$0.00	0	0	$1,827.85	$46.93
Prof - Other	$754,803	$979,932	$9.02	$11.56	962	1,165	$112.54	$119.08
Prof - Psych	$270,548	$289,343	$3.23	$3.41	748	816	$51.87	$50.20
Prof - Specialist	$299,302	$336,097	$3.58	$3.96	356	349	$120.54	$136.18
Prof - Vision	$110,877	$118,552	$1.32	$1.40	377	376	$42.16	$44.57
Radiology	$96,829	$105,364	$1.16	$1.24	601	613	$23.10	$24.33
Transportation/Ambulance	$288,975	$302,695	$3.45	$3.57	456	442	$90.84	$96.96
Total	$9,049,432	$9,976,008	$108.14	$117.66				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 21-44 Male								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	14,163	15,771						
Service Type								
DME/Supplies	$115,410	$112,892	$8.15	$7.16	591	568	$165.34	$151.13
FQHC / RHC	$16,444	$13,840	$1.16	$0.88	182	230	$76.49	$45.83
Home Health	$5,498	$2,960	$0.39	$0.19	14	5	$343.62	$493.35
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$849,038	$871,296	$59.95	$55.25	89	80	$8,086.07	$8,298.06
IP - Psych	$35,259	$71,581	$2.49	$4.54	34	93	$881.49	$586.73
Lab	$30,657	$32,824	$2.16	$2.08	3,200	2,659	$8.12	$9.39
OP - Emergency Room & Related	$600,909	$639,512	$42.43	$40.55	1,312	1,189	$388.18	$409.42
OP - Other	$753,265	$679,916	$53.19	$43.11	721	690	$885.15	$749.63
Pharmacy	$742,131	$1,020,724	$52.40	$64.72	13,706	13,968	$45.88	$55.60
Prof - Anesthesia	$25,665	$28,969	$1.81	$1.84	131	138	$165.58	$160.05
Prof - Child EPSDT	$3,087	$1,934	$0.22	$0.12	223	193	$11.74	$7.64
Prof - Evaluation & Management	$382,116	$427,465	$26.98	$27.10	4,946	4,763	$65.45	$68.29
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$135,474	$193,910	$9.57	$12.30	1,578	1,470	$72.72	$100.37
Prof - Psych	$41,661	$53,310	$2.94	$3.38	644	705	$54.82	$57.57
Prof - Specialist	$163,722	$199,733	$11.56	$12.66	1,016	1,039	$136.55	$146.22
Prof - Vision	$16,512	$16,749	$1.17	$1.06	133	121	$105.17	$105.34
Radiology	$73,863	$74,814	$5.22	$4.74	1,773	1,621	$35.29	$35.12
Transportation/Ambulance	$54,586	$67,949	$3.85	$4.31	1,122	779	$41.23	$66.36
Total	$4,045,298	$4,510,377	$285.62	$285.99				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 45 and Over								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	19,039	20,718						
Service Type								
DME/Supplies	$282,139	$275,827	$14.82	$13.31	1,241	1,350	$143.29	$118.33
FQHC / RHC	$143,562	$130,932	$7.54	$6.32	1,281	1,148	$70.65	$66.06
Home Health	$65,765	$46,916	$3.45	$2.26	84	51	$490.78	$533.13
IP - Maternity	$12,716	$952	$0.67	$0.05	3	1	$3,179.00	$952.00
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$2,132,498	$1,987,142	$112.01	$95.91	185	155	$7,278.15	$7,414.71
IP - Psych	$56,749	$76,607	$2.98	$3.70	54	72	$667.64	$612.86
Lab	$97,103	$92,282	$5.10	$4.45	7,984	7,465	$7.67	$7.16
OP - Emergency Room & Related	$1,024,667	$1,064,987	$53.82	$51.40	1,186	1,144	$544.46	$539.23
OP - Other	$2,192,327	$2,382,078	$115.15	$114.98	1,965	1,928	$703.12	$715.55
Pharmacy	$2,587,712	$3,239,474	$135.92	$156.36	35,672	35,522	$45.72	$52.82
Prof - Anesthesia	$81,357	$86,747	$4.27	$4.19	325	329	$157.97	$152.72
Prof - Child EPSDT	$14,609	$12,445	$0.77	$0.60	869	663	$10.60	$10.87
Prof - Evaluation & Management	$980,193	$1,063,687	$51.48	$51.34	9,173	8,946	$67.35	$68.87
Prof - Maternity	$6,156	$856	$0.32	$0.04	18	2	$219.84	$285.47
Prof - Other	$453,262	$556,709	$23.81	$26.87	3,952	3,720	$72.29	$86.67
Prof - Psych	$86,069	$84,395	$4.52	$4.07	1,416	1,359	$38.30	$35.97
Prof - Specialist	$542,935	$568,330	$28.52	$27.43	2,378	2,298	$143.90	$143.26
Prof - Vision	$31,480	$41,068	$1.65	$1.98	296	325	$66.98	$73.21
Radiology	$323,520	$280,705	$16.99	$13.55	4,172	3,695	$48.87	$44.00
Transportation/Ambulance	$95,440	$94,058	$5.01	$4.54	5,790	5,158	$10.39	$10.56
Total	$11,210,258	$12,086,198	$588.80	$583.37				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

All Age Categories								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	1,460,477	1,509,356						
Service Type								
DME/Supplies	$3,084,219	$3,205,288	$2.11	$2.12	221	239	$114.63	$106.41
FQHC / RHC	$1,087,955	$1,108,087	$0.74	$0.73	166	151	$53.91	$58.25
Home Health	$340,384	$307,568	$0.23	$0.20	10	9	$284.84	$284.78
IP - Maternity	$16,689,034	$17,651,823	$11.43	$11.69	51	50	$2,668.11	$2,785.08
IP - Newborn	$20,633,110	$21,060,971	$14.13	$13.95	30	29	$5,657.55	$5,746.51
IP - Other	$19,520,705	$21,127,837	$13.37	$14.00	23	22	$6,825.42	$7,556.45
IP - Psych	$3,027,741	$3,127,329	$2.07	$2.07	31	31	$812.82	$799.42
Lab	$3,779,701	$3,692,166	$2.59	$2.45	2,844	2,637	$10.92	$11.13
OP - Emergency Room & Related	$32,123,427	$33,175,305	$22.00	$21.98	870	874	$303.39	$301.61
OP - Other	$35,046,563	$35,887,148	$24.00	$23.78	452	469	$636.97	$608.32
Pharmacy	$42,629,784	$49,096,382	$29.19	$32.53	6,844	7,014	$51.18	$55.65
Prof - Anesthesia	$2,575,389	$2,694,949	$1.76	$1.79	127	127	$167.20	$169.24
Prof - Child EPSDT	$1,745,029	$1,856,163	$1.19	$1.23	1,033	1,027	$13.88	$14.37
Prof - Evaluation & Management	$40,680,589	$43,201,843	$27.85	$28.62	4,714	4,684	$70.91	$73.33
Prof - Maternity	$9,762,035	$10,174,627	$6.68	$6.74	126	133	$636.21	$608.71
Prof - Other	$11,889,433	$14,315,484	$8.14	$9.48	2,104	2,159	$46.43	$52.71
Prof - Psych	$4,183,267	$4,633,487	$2.86	$3.07	609	677	$56.48	$54.38
Prof - Specialist	$7,682,652	$8,005,486	$5.26	$5.30	624	618	$101.20	$102.99
Prof - Vision	$1,903,027	$2,109,748	$1.30	$1.40	272	288	$57.56	$58.31
Radiology	$4,678,758	$4,973,744	$3.20	$3.30	886	877	$43.39	$45.10
Transportation/Ambulance	$5,161,123	$5,511,461	$3.53	$3.65	817	764	$51.91	$57.34
Total	$268,223,923	$286,916,897	$183.66	$190.09				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age Under 1								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	36,738	32,373						
Service Type								
DME/Supplies	$110,401	$82,089	$3.01	$2.54	511	398	$70.59	$76.36
FQHC / RHC	$54,965	$48,749	$1.50	$1.51	531	421	$33.80	$42.95
Home Health	$23,712	$26,400	$0.65	$0.82	35	40	$223.70	$246.73
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$6,139,268	$4,782,299	$167.11	$147.72	594	555	$3,377.31	$3,194.25
IP - Other	$896,448	$700,494	$24.40	$21.64	71	58	$4,112.15	$4,490.35
IP - Psych	$55	$18,527	$0.00	$0.57	0	0	-	-
Lab	$107,863	$77,189	$2.94	$2.38	2,896	2,474	$12.17	$11.56
OP - Emergency Room & Related	$383,281	$275,159	$10.43	$8.50	1,103	982	$113.53	$103.87
OP - Other	$433,125	$291,422	$11.79	$9.00	296	269	$478.03	$401.94
Pharmacy	$1,099,814	$722,306	$29.94	$22.31	5,420	4,678	$66.28	$57.23
Prof - Anesthesia	$34,631	$21,233	$0.94	$0.66	68	46	$166.45	$169.86
Prof - Child EPSDT	$152,764	$124,569	$4.16	$3.85	4,957	4,275	$10.07	$10.80
Prof - Evaluation & Management	$3,211,836	$2,637,552	$87.43	$81.47	13,703	12,447	$76.56	$78.55
Prof - Maternity	$139	$0	$0.00	$0.00	0	0	$138.50	-
Prof - Other	$503,885	$607,360	$13.72	$18.76	7,617	6,957	$21.61	$32.36
Prof - Psych	$859	$21,532	$0.02	$0.67	3	0	$85.90	-
Prof - Specialist	$243,233	$147,417	$6.62	$4.55	753	523	$105.51	$104.40
Prof - Vision	$60,290	$52,055	$1.64	$1.61	57	66	$342.56	$294.09
Radiology	$43,485	$35,688	$1.18	$1.10	1,131	938	$12.56	$14.11
Transportation/Ambulance	$120,709	$140,185	$3.29	$4.33	334	332	$118.11	$156.28
Total	$13,620,763	$10,812,224	$370.75	$333.99				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 1-5								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	147,854	150,606						
Service Type								
DME/Supplies	$140,472	$226,367	$0.95	$1.50	213	217	$53.55	$83.04
FQHC / RHC	$110,625	$113,918	$0.75	$0.76	267	242	$33.67	$37.45
Home Health	$11,705	$5,377	$0.08	$0.04	4	2	$260.11	$268.87
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,037,623	$1,155,511	$7.02	$7.67	24	20	$3,541.38	$4,640.61
IP - Psych	$24,112	$52,583	$0.16	$0.35	2	2	$831.43	$1,877.95
Lab	$393,814	$348,903	$2.66	$2.32	2,351	2,273	$13.59	$12.23
OP - Emergency Room & Related	$1,172,222	$1,021,717	$7.93	$6.78	790	743	$120.49	$109.54
OP - Other	$1,728,565	$1,822,590	$11.69	$12.10	197	211	$711.05	$689.85
Pharmacy	$2,112,080	$2,399,887	$14.28	$15.93	5,041	4,917	$34.00	$38.89
Prof - Anesthesia	$109,204	$116,898	$0.74	$0.78	81	85	$110.08	$109.35
Prof - Child EPSDT	$177,129	$191,163	$1.20	$1.27	1,467	1,481	$9.80	$10.28
Prof - Evaluation & Management	$3,921,444	$4,008,879	$26.52	$26.62	5,014	4,884	$63.48	$65.40
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$995,743	$1,046,778	$6.73	$6.95	2,304	1,928	$35.07	$43.27
Prof - Psych	$138,582	$164,862	$0.94	$1.09	173	170	$65.12	$77.40
Prof - Specialist	$514,107	$464,659	$3.48	$3.09	395	334	$105.72	$110.71
Prof - Vision	$249,142	$250,052	$1.69	$1.66	76	80	$267.61	$248.81
Radiology	$64,529	$71,972	$0.44	$0.48	372	373	$14.06	$15.36
Transportation/Ambulance	$328,978	$382,688	$2.23	$2.54	164	166	$162.38	$183.63
Total	$13,230,076	$13,844,804	$89.48	$91.93				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 6-14								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	164,754	194,638						
Service Type								
DME/Supplies	$184,534	$200,675	$1.12	$1.03	109	110	$123.77	$112.36
FQHC / RHC	$131,389	$140,620	$0.80	$0.72	261	203	$36.71	$42.66
Home Health	$5,745	$15,760	$0.03	$0.08	2	3	$273.59	$335.33
IP - Maternity	$6,355	$4,262	$0.04	$0.02	0	0	$3,177.46	$2,131.03
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$955,708	$792,163	$5.80	$4.07	11	9	$6,205.90	$5,246.11
IP - Psych	$495,909	$583,677	$3.01	$3.00	45	46	$802.44	$784.51
Lab	$402,279	$416,792	$2.44	$2.14	1,968	1,891	$14.89	$13.59
OP - Emergency Room & Related	$1,048,856	$1,163,438	$6.37	$5.98	483	479	$158.13	$149.72
OP - Other	$1,079,862	$1,254,165	$6.55	$6.44	181	200	$434.73	$387.57
Pharmacy	$5,472,853	$7,848,376	$33.22	$40.32	6,153	6,399	$64.79	$75.61
Prof - Anesthesia	$58,053	$68,026	$0.35	$0.35	37	37	$115.64	$112.25
Prof - Child EPSDT	$48,171	$50,991	$0.29	$0.26	313	269	$11.19	$11.69
Prof - Evaluation & Management	$2,889,493	$3,508,055	$17.54	$18.02	3,314	3,307	$63.51	$65.40
Prof - Maternity	$4,402	$5,624	$0.03	$0.03	1	1	$400.16	$351.53
Prof - Other	$576,050	$736,241	$3.50	$3.78	1,231	1,153	$34.07	$39.35
Prof - Psych	$662,797	$807,028	$4.02	$4.15	767	813	$62.91	$61.20
Prof - Specialist	$413,410	$510,870	$2.51	$2.62	336	309	$89.64	$101.97
Prof - Vision	$276,780	$313,725	$1.68	$1.61	72	150	$280.71	$129.16
Radiology	$123,927	$154,229	$0.75	$0.79	507	529	$17.79	$17.98
Transportation/Ambulance	$387,726	$495,438	$2.35	$2.55	197	237	$143.12	$128.85
Total	$15,224,299	$19,070,156	$92.41	$97.98				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 15-20 Female								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	32,273	36,713						
Service Type								
DME/Supplies	$19,449	$34,362	$0.60	$0.94	68	93	$106.86	$120.57
FQHC / RHC	$48,230	$51,060	$1.49	$1.39	508	415	$35.31	$40.24
Home Health	$30,456	$12,979	$0.94	$0.35	49	19	$230.73	$227.71
IP - Maternity	$1,177,112	$1,020,352	$36.47	$27.79	169	123	$2,592.76	$2,706.50
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$207,431	$412,268	$6.43	$11.23	14	20	$5,606.23	$6,649.48
IP - Psych	$220,030	$310,279	$6.82	$8.45	99	125	$824.08	$812.25
Lab	$378,942	$332,509	$11.74	$9.06	8,502	7,072	$16.57	$15.37
OP - Emergency Room & Related	$596,471	$659,649	$18.48	$17.97	1,142	1,097	$194.29	$196.62
OP - Other	$606,144	$604,973	$18.78	$16.48	753	690	$299.18	$286.58
Pharmacy	$1,185,935	$1,424,399	$36.75	$38.80	11,425	11,251	$38.60	$41.38
Prof - Anesthesia	$112,410	$83,175	$3.48	$2.27	187	141	$223.04	$192.98
Prof - Child EPSDT	$34,820	$37,487	$1.08	$1.02	427	392	$30.33	$31.24
Prof - Evaluation & Management	$927,037	$1,050,769	$28.72	$28.62	5,261	5,159	$65.52	$66.57
Prof - Maternity	$754,722	$612,547	$23.39	$16.68	778	428	$360.77	$468.31
Prof - Other	$231,018	$259,945	$7.16	$7.08	1,902	1,716	$45.16	$49.50
Prof - Psych	$146,550	$182,536	$4.54	$4.97	889	995	$61.29	$59.97
Prof - Specialist	$147,604	$159,071	$4.57	$4.33	968	810	$56.68	$64.17
Prof - Vision	$49,210	$56,004	$1.52	$1.53	42	199	$439.38	$91.96
Radiology	$222,929	$209,637	$6.91	$5.71	1,596	1,451	$51.94	$47.24
Transportation/Ambulance	$101,044	$143,086	$3.13	$3.90	454	506	$82.69	$92.43
Total	$7,197,544	$7,657,087	$223.02	$208.57				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 21-44 Female								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	61,375	65,321						
Service Type								
DME/Supplies	$197,496	$272,021	$3.22	$4.16	374	373	$103.18	$133.80
FQHC / RHC	$120,331	$111,184	$1.96	$1.70	650	486	$36.22	$41.99
Home Health	$117,325	$76,462	$1.91	$1.17	91	44	$252.31	$318.59
IP - Maternity	$3,627,188	$3,340,757	$59.10	$51.14	260	214	$2,729.26	$2,872.53
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$3,133,733	$2,565,209	$51.06	$39.27	81	68	$7,606.15	$6,895.72
IP - Psych	$483,766	$490,180	$7.88	$7.50	114	119	$826.95	$755.29
Lab	$1,103,491	$1,029,409	$17.98	$15.76	12,044	10,461	$17.91	$18.08
OP - Emergency Room & Related	$2,197,771	$2,234,962	$35.81	$34.22	1,865	1,841	$230.45	$223.01
OP - Other	$3,162,825	$3,082,684	$51.53	$47.19	1,360	1,385	$454.82	$408.79
Pharmacy	$6,120,232	$6,899,406	$99.72	$105.62	27,418	27,355	$43.64	$46.33
Prof - Anesthesia	$338,346	$299,974	$5.51	$4.59	382	309	$173.33	$178.13
Prof - Child EPSDT	$70,101	$69,617	$1.14	$1.07	635	495	$21.58	$25.82
Prof - Evaluation & Management	$2,456,160	$2,583,817	$40.02	$39.56	7,762	7,507	$61.87	$63.23
Prof - Maternity	$2,188,793	$1,927,387	$35.66	$29.51	1,118	743	$382.79	$476.25
Prof - Other	$690,234	$745,590	$11.25	$11.41	2,372	2,020	$56.90	$67.82
Prof - Psych	$366,948	$408,961	$5.98	$6.26	1,303	1,381	$55.08	$54.40
Prof - Specialist	$973,074	$969,105	$15.85	$14.84	2,066	1,754	$92.10	$101.49
Prof - Vision	$95,004	$101,148	$1.55	$1.55	46	183	$402.56	$101.55
Radiology	$760,002	$781,949	$12.38	$11.97	3,183	2,991	$46.68	$48.03
Transportation/Ambulance	$363,451	$392,872	$5.92	$6.01	1,153	1,139	$61.63	$63.38
Total	$28,566,271	$28,382,694	$465.44	$434.51				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 15-20 Male								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	25,506	31,250						
Service Type								
DME/Supplies	$32,700	$48,745	$1.28	$1.56	95	110	$161.88	$170.44
FQHC / RHC	$19,895	$19,779	$0.78	$0.63	240	178	$39.01	$42.72
Home Health	$7,533	$5,036	$0.30	$0.16	8	5	$443.12	$419.70
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$341,675	$369,576	$13.40	$11.83	20	23	$7,945.94	$6,058.62
IP - Psych	$156,126	$168,539	$6.12	$5.39	91	80	$804.77	$810.28
Lab	$67,971	$82,689	$2.66	$2.65	1,877	1,886	$17.04	$16.83
OP - Emergency Room & Related	$265,026	$337,986	$10.39	$10.82	590	635	$211.51	$204.47
OP - Other	$334,094	$436,669	$13.10	$13.97	242	271	$648.73	$618.51
Pharmacy	$795,910	$1,198,562	$31.20	$38.35	5,702	6,290	$65.67	$73.17
Prof - Anesthesia	$14,801	$16,703	$0.58	$0.53	52	48	$133.34	$134.70
Prof - Child EPSDT	$8,013	$5,225	$0.31	$0.17	207	198	$18.17	$10.13
Prof - Evaluation & Management	$397,405	$532,393	$15.58	$17.04	2,885	3,031	$64.81	$67.46
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$79,062	$98,848	$3.10	$3.16	930	1,034	$40.01	$36.72
Prof - Psych	$100,056	$122,634	$3.92	$3.92	775	819	$60.71	$57.49
Prof - Specialist	$118,807	$146,817	$4.66	$4.70	483	470	$115.80	$120.05
Prof - Vision	$38,421	$45,162	$1.51	$1.45	36	131	$498.98	$132.05
Radiology	$33,253	$46,922	$1.30	$1.50	838	833	$18.67	$21.63
Transportation/Ambulance	$72,682	$95,007	$2.85	$3.04	321	349	$106.57	$104.52
Total	$2,883,429	$3,777,292	$113.05	$120.87				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 21-44 Male								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	10,600	10,402						
Service Type								
DME/Supplies	$82,766	$56,707	$7.81	$5.45	627	528	$149.40	$123.82
FQHC / RHC	$21,530	$13,583	$2.03	$1.31	685	419	$35.59	$37.42
Home Health	$15,375	$5,981	$1.45	$0.57	37	22	$465.90	$314.77
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$709,154	$471,827	$66.90	$45.36	97	83	$8,245.98	$6,553.15
IP - Psych	$98,183	$47,992	$9.26	$4.61	123	63	$900.76	$872.59
Lab	$81,176	$66,089	$7.66	$6.35	5,161	4,023	$17.81	$18.95
OP - Emergency Room & Related	$326,388	$313,573	$30.79	$30.15	1,662	1,466	$222.34	$246.71
OP - Other	$441,827	$430,886	$41.68	$41.42	838	768	$597.06	$646.98
Pharmacy	$1,032,996	$922,162	$97.45	$88.65	23,752	23,143	$49.23	$45.97
Prof - Anesthesia	$14,482	$14,021	$1.37	$1.35	110	128	$149.30	$126.31
Prof - Child EPSDT	$2,072	$1,387	$0.20	$0.13	383	245	$6.13	$6.54
Prof - Evaluation & Management	$331,788	$306,210	$31.30	$29.44	6,104	5,452	$61.53	$64.79
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$84,052	$65,368	$7.93	$6.28	1,859	1,391	$51.19	$54.20
Prof - Psych	$49,408	$47,320	$4.66	$4.55	994	1,015	$56.27	$53.77
Prof - Specialist	$146,484	$131,489	$13.82	$12.64	1,383	1,218	$119.87	$124.52
Prof - Vision	$16,644	$16,824	$1.57	$1.62	46	179	$405.95	$108.54
Radiology	$58,317	$50,315	$5.50	$4.84	2,304	2,094	$28.66	$27.72
Transportation/Ambulance	$48,097	$48,338	$4.54	$4.65	858	746	$63.45	$74.71
Total	$3,560,741	$3,010,070	$335.92	$289.37				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Age 45 and Over								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	6,130	6,743						
Service Type								
DME/Supplies	$79,940	$52,389	$13.04	$7.77	1,175	1,004	$133.23	$92.89
FQHC / RHC	$20,555	$19,133	$3.35	$2.84	1,143	881	$35.20	$38.65
Home Health	$32,476	$27,099	$5.30	$4.02	166	109	$382.07	$444.25
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,049,899	$784,909	$171.27	$116.40	194	149	$10,605.04	$9,344.15
IP - Psych	$40,752	$49,023	$6.65	$7.27	112	116	$714.94	$754.20
Lab	$94,031	$76,966	$15.34	$11.41	10,800	8,136	$17.04	$16.83
OP - Emergency Room & Related	$189,051	$158,373	$30.84	$23.49	1,090	1,023	$339.41	$275.43
OP - Other	$575,335	$496,535	$93.86	$73.64	1,916	1,742	$587.68	$507.19
Pharmacy	$1,129,793	$1,441,989	$184.31	$213.85	47,035	46,857	$47.02	$54.77
Prof - Anesthesia	$21,147	$19,353	$3.45	$2.87	321	258	$128.95	$133.47
Prof - Child EPSDT	$2,674	$2,429	$0.44	$0.36	720	532	$7.27	$8.12
Prof - Evaluation & Management	$280,402	$294,969	$45.74	$43.74	8,713	7,969	$63.00	$65.87
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$132,532	$98,323	$21.62	$14.58	3,592	2,913	$72.22	$60.06
Prof - Psych	$39,654	$37,874	$6.47	$5.62	1,409	1,191	$55.07	$56.61
Prof - Specialist	$171,616	$170,838	$28.00	$25.34	2,827	2,321	$118.85	$131.01
Prof - Vision	$15,387	$14,380	$2.51	$2.13	219	335	$137.38	$76.49
Radiology	$65,508	$62,401	$10.69	$9.25	3,921	3,465	$32.71	$32.05
Transportation/Ambulance	$39,721	$39,714	$6.48	$5.89	2,502	1,477	$31.08	$47.85
Total	$3,980,474	$3,846,696	$649.34	$570.47				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

All Age Categories								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	485,230	528,046						
Service Type								
DME/Supplies	$847,757	$973,355	$1.75	$1.84	226	209	$92.85	$105.65
FQHC / RHC	$527,520	$518,025	$1.09	$0.98	368	289	$35.46	$40.75
Home Health	$244,327	$175,095	$0.50	$0.33	22	13	$270.27	$311.00
IP - Maternity	$4,810,655	$4,365,371	$9.91	$8.27	44	35	$2,695.04	$2,830.98
IP - Newborn	$6,139,268	$4,782,299	$12.65	$9.06	45	34	$3,377.31	$3,194.25
IP - Other	$8,331,672	$7,251,956	$17.17	$13.73	33	27	$6,208.40	$6,008.25
IP - Psych	$1,518,932	$1,720,800	$3.13	$3.26	46	48	$817.07	$807.51
Lab	$2,629,567	$2,430,547	$5.42	$4.60	4,041	3,578	$16.09	$15.44
OP - Emergency Room & Related	$6,179,065	$6,164,857	$12.73	$11.67	881	832	$173.46	$168.33
OP - Other	$8,361,777	$8,419,923	$17.23	$15.95	421	423	$490.86	$452.54
Pharmacy	$18,949,614	$22,857,088	$39.05	$43.29	9,676	9,641	$48.43	$53.88
Prof - Anesthesia	$703,075	$639,382	$1.45	$1.21	112	98	$155.20	$148.87
Prof - Child EPSDT	$495,745	$482,868	$1.02	$0.91	1,066	895	$11.50	$12.25
Prof - Evaluation & Management	$14,415,565	$14,922,643	$29.71	$28.26	5,417	5,051	$65.81	$67.14
Prof - Maternity	$2,948,055	$2,545,559	$6.08	$4.82	193	122	$376.89	$473.94
Prof - Other	$3,292,577	$3,658,453	$6.79	$6.93	2,258	1,896	$36.06	$43.84
Prof - Psych	$1,504,854	$1,792,748	$3.10	$3.40	618	672	$60.26	$60.65
Prof - Specialist	$2,728,335	$2,700,266	$5.62	$5.11	708	596	$95.26	$102.95
Prof - Vision	$800,879	$849,349	$1.65	$1.61	66	134	$299.84	$143.93
Radiology	$1,371,950	$1,413,112	$2.83	$2.68	1,024	965	$33.13	$33.29
Transportation/Ambulance	$1,462,406	$1,737,327	$3.01	$3.29	386	385	$93.78	$102.44
Total	$88,263,595	$90,401,022	$181.90	$171.20				

Virginia Medicaid

Exhibit 1a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

All Age Categories								
All Regions	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	5,722,624	5,920,615						
Service Type								
DME/Supplies	$11,560,369	$11,904,345	$2.02	$2.01	241	254	$100.63	$95.14
FQHC / RHC	$6,517,125	$6,518,452	$1.14	$1.10	318	291	$43.02	$45.36
Home Health	$1,910,382	$1,759,934	$0.33	$0.30	10	9	$395.03	$419.63
IP - Maternity	$58,417,512	$57,814,435	$10.21	$9.76	44	41	$2,800.86	$2,832.93
IP - Newborn	$70,000,673	$71,159,226	$12.23	$12.02	34	33	$4,263.91	$4,306.42
IP - Other	$98,459,181	$99,625,413	$17.21	$16.83	31	28	$6,726.73	$7,137.51
IP - Psych	$12,887,117	$13,679,370	$2.25	$2.31	32	32	$838.95	$872.02
Lab	$16,480,055	$16,227,251	$2.88	$2.74	3,029	2,872	$11.41	$11.45
OP - Emergency Room & Related	$99,420,809	$100,474,340	$17.37	$16.97	802	804	$260.07	$253.17
OP - Other	$116,927,184	$116,962,304	$20.43	$19.76	552	563	$443.91	$420.81
Pharmacy	$166,246,037	$191,312,852	$29.05	$32.31	7,346	7,498	$47.46	$51.71
Prof - Anesthesia	$8,717,211	$8,819,354	$1.52	$1.49	109	106	$167.25	$168.27
Prof - Child EPSDT	$6,416,063	$6,304,694	$1.12	$1.06	1,038	998	$12.96	$12.81
Prof - Evaluation & Management	$166,806,949	$176,033,126	$29.15	$29.73	5,095	5,051	$68.65	$70.64
Prof - Maternity	$32,180,336	$32,333,431	$5.62	$5.46	122	116	$551.45	$565.69
Prof - Other	$41,402,875	$48,543,554	$7.23	$8.20	2,036	2,105	$42.63	$46.74
Prof - Psych	$14,468,998	$16,261,452	$2.53	$2.75	492	547	$61.64	$60.31
Prof - Specialist	$27,250,053	$27,834,078	$4.76	$4.70	526	508	$108.72	$110.95
Prof - Vision	$8,093,151	$8,923,325	$1.41	$1.51	242	271	$70.19	$66.69
Radiology	$16,964,901	$17,904,245	$2.96	$3.02	918	921	$38.75	$39.41
Transportation/Ambulance	$21,207,749	$22,453,757	$3.71	$3.79	691	686	$64.37	$66.38
Total	$1,002,334,730	$1,052,848,938	$175.15	$177.83				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age Under 1								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	113	128						
Service Type								
DME/Supplies	$3,618	$7,360	$32.02	$57.50	4,779	9,656	$80.40	$71.46
FQHC / RHC	$0	$0	$0.00	$0.00	0	0	-	-
Home Health	$6,224	$0	$55.08	$0.00	531	0	$1,244.88	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$310,030	$0	$2,743.62	$0.00	319	0	$103,343.17	-
IP - Other	$33,358	$7,025	$295.20	$54.88	319	375	$11,119.22	$1,756.16
IP - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Lab	$358	$217	$3.17	$1.70	3,823	2,719	$9.95	$7.49
OP - Emergency Room & Related	$4,042	$1,928	$35.77	$15.06	637	1,125	$673.63	$160.66
OP - Other	$38,680	$4,139	$342.30	$32.34	2,442	1,219	$1,681.72	$318.42
Pharmacy	$20,196	$62,555	$178.72	$488.71	8,232	13,156	$260.53	$445.75
Prof - Anesthesia	$3,776	$556	$33.41	$4.34	743	281	$539.37	$185.23
Prof - Child EPSDT	$216	$588	$1.91	$4.59	1,912	4,594	$11.98	$12.00
Prof - Evaluation & Management	$40,366	$12,761	$357.22	$99.70	38,549	16,594	$111.20	$72.10
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$9,773	$16,103	$86.49	$125.81	13,912	13,781	$74.61	$109.55
Prof - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Specialist	$30,915	$247	$273.59	$1.93	5,841	750	$562.10	$30.84
Prof - Vision	$635	$514	$5.62	$4.02	743	750	$90.76	$64.30
Radiology	$1,743	$316	$15.42	$2.47	14,973	2,250	$12.36	$13.16
Transportation/Ambulance	$763	$620	$6.76	$4.85	1,912	3,000	$42.41	$19.38
Total	$504,692	$114,930	$4,466.30	$897.89				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 1-5								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	3,260	3,209						
Service Type								
DME/Supplies	$335,955	$298,682	$103.05	$93.08	6,640	6,593	$186.23	$169.42
FQHC / RHC	$1,458	$223	$0.45	$0.07	144	30	$37.39	$27.89
Home Health	$13,275	$121,253	$4.07	$37.79	92	411	$531.00	$1,102.30
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$609,479	$1,884,531	$186.96	$587.26	247	288	$9,096.70	$24,474.43
IP - Psych	$73	$124	$0.02	$0.04	0	0	-	-
Lab	$8,937	$11,206	$2.74	$3.49	4,259	3,354	$7.72	$12.49
OP - Emergency Room & Related	$81,641	$99,959	$25.04	$31.15	1,027	1,208	$292.62	$309.47
OP - Other	$833,534	$387,415	$255.69	$120.73	2,915	2,449	$1,052.44	$591.47
Pharmacy	$351,277	$488,175	$107.75	$152.13	12,847	12,916	$100.65	$141.34
Prof - Anesthesia	$37,307	$25,154	$11.44	$7.84	626	411	$219.45	$228.67
Prof - Child EPSDT	$5,609	$4,043	$1.72	$1.26	1,686	1,414	$12.25	$10.70
Prof - Evaluation & Management	$242,297	$275,416	$74.32	$85.83	11,694	11,996	$76.27	$85.85
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$410,148	$886,585	$125.81	$276.28	6,379	12,120	$236.67	$273.55
Prof - Psych	$3,553	$2,553	$1.09	$0.80	210	172	$62.33	$55.49
Prof - Specialist	$54,335	$46,163	$16.67	$14.39	869	834	$230.23	$207.01
Prof - Vision	$12,299	$15,848	$3.77	$4.94	571	778	$79.35	$76.19
Radiology	$17,934	$13,048	$5.50	$4.07	1,977	2,296	$33.40	$21.25
Transportation/Ambulance	$19,136	$32,932	$5.87	$10.26	2,260	2,749	$31.17	$44.81
Total	$3,038,246	$4,593,310	$931.98	$1,431.38				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 6-20								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	17,167	16,991						
Service Type								
DME/Supplies	$442,062	$497,054	$25.75	$29.25	1,539	1,663	$200.85	$211.15
FQHC / RHC	$1,816	$1,527	$0.11	$0.09	27	25	$47.78	$43.62
Home Health	$7,055	$8,776	$0.41	$0.52	8	10	$587.95	$626.86
IP - Maternity	$22,306	$37,170	$1.30	$2.19	6	8	$2,788.29	$3,097.46
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$2,298,956	$2,636,912	$133.92	$155.19	97	78	$16,539.25	$23,971.93
IP - Psych	$166,828	$189,780	$9.72	$11.17	121	138	$964.33	$973.23
Lab	$30,639	$33,922	$1.78	$2.00	2,447	2,674	$8.75	$8.96
OP - Emergency Room & Related	$388,391	$358,484	$22.62	$21.10	814	757	$333.38	$334.41
OP - Other	$1,033,217	$1,086,885	$60.19	$63.97	1,218	1,224	$592.78	$627.17
Pharmacy	$2,296,121	$2,645,050	$133.75	$155.67	13,040	13,600	$123.08	$137.36
Prof - Anesthesia	$39,737	$85,583	$2.31	$5.04	133	171	$209.14	$353.65
Prof - Child EPSDT	$5,399	$5,340	$0.31	$0.31	297	355	$12.70	$10.64
Prof - Evaluation & Management	$609,959	$841,724	$35.53	$49.54	5,673	6,169	$75.16	$96.36
Prof - Maternity	$10,977	$16,690	$0.64	$0.98	15	19	$498.97	$618.13
Prof - Other	$337,970	$491,277	$19.69	$28.91	2,242	2,947	$105.38	$117.73
Prof - Psych	$120,951	$116,890	$7.05	$6.88	1,472	1,431	$57.43	$57.70
Prof - Specialist	$114,222	$224,790	$6.65	$13.23	491	459	$162.48	$345.83
Prof - Vision	$34,247	$40,978	$1.99	$2.41	470	535	$50.96	$54.13
Radiology	$49,376	$65,793	$2.88	$3.87	1,158	1,275	$29.80	$36.43
Transportation/Ambulance	$71,922	$96,539	$4.19	$5.68	1,680	1,779	$29.92	$38.32
Total	$8,082,153	$9,481,163	$470.80	$558.01				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Female								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	11,081	11,231						
Service Type								
DME/Supplies	$140,973	$158,990	$12.72	$14.16	896	1,212	$170.46	$140.20
FQHC / RHC	$1,476	$1,052	$0.13	$0.09	47	34	$34.32	$32.89
Home Health	$16,291	$21,891	$1.47	$1.95	63	49	$280.88	$475.89
IP - Maternity	$192,070	$145,399	$17.33	$12.95	61	52	$3,429.83	$2,967.33
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,979,685	$1,954,471	$178.66	$174.02	243	249	$8,837.88	$8,388.29
IP - Psych	$521,555	$632,146	$47.07	$56.29	506	542	$1,116.82	$1,246.84
Lab	$60,456	$61,669	$5.46	$5.49	10,476	9,555	$6.25	$6.90
OP - Emergency Room & Related	$1,099,010	$1,002,411	$99.18	$89.25	2,550	2,639	$466.67	$405.83
OP - Other	$895,172	$891,527	$80.78	$79.38	1,139	1,192	$850.92	$798.86
Pharmacy	$3,282,782	$3,340,256	$296.25	$297.41	37,466	37,621	$94.89	$94.87
Prof - Anesthesia	$48,046	$51,190	$4.34	$4.56	299	308	$174.08	$177.74
Prof - Child EPSDT	$3,485	$4,117	$0.31	$0.37	314	331	$12.02	$13.28
Prof - Evaluation & Management	$794,768	$866,459	$71.72	$77.15	12,077	12,769	$71.27	$72.50
Prof - Maternity	$63,161	$57,084	$5.70	$5.08	105	104	$651.14	$588.49
Prof - Other	$295,238	$283,471	$26.64	$25.24	3,541	3,324	$90.29	$91.12
Prof - Psych	$154,211	$140,509	$13.92	$12.51	3,117	2,690	$53.58	$55.80
Prof - Specialist	$191,696	$214,339	$17.30	$19.08	1,470	1,597	$141.26	$143.37
Prof - Vision	$24,662	$32,648	$2.23	$2.91	304	384	$87.76	$90.94
Radiology	$183,948	$176,028	$16.60	$15.67	3,996	3,775	$49.85	$49.82
Transportation/Ambulance	$89,987	$102,197	$8.12	$9.10	11,109	11,031	$8.77	$9.90
Total	$10,038,672	$10,137,856	$905.94	$902.67				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Male								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	11,136	11,793						
Service Type								
DME/Supplies	$187,622	$308,473	$16.85	$26.16	985	1,048	$205.28	$299.49
FQHC / RHC	$762	$353	$0.07	$0.03	29	16	$28.22	$22.04
Home Health	$38,542	$17,805	$3.46	$1.51	122	53	$341.08	$342.40
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$2,192,694	$1,541,638	$196.90	$130.72	189	167	$12,529.68	$9,400.23
IP - Psych	$612,285	$477,488	$54.98	$40.49	568	408	$1,161.83	$1,190.74
Lab	$28,774	$36,709	$2.58	$3.11	6,809	6,306	$4.55	$5.92
OP - Emergency Room & Related	$353,962	$417,954	$31.79	$35.44	914	1,079	$417.41	$394.30
OP - Other	$406,755	$861,340	$36.53	$73.04	519	713	$843.89	$1,228.73
Pharmacy	$3,304,192	$3,539,048	$296.71	$300.10	25,063	26,101	$142.07	$137.97
Prof - Anesthesia	$20,603	$23,071	$1.85	$1.96	139	135	$159.71	$173.46
Prof - Child EPSDT	$2,555	$1,829	$0.23	$0.16	817	497	$3.37	$3.75
Prof - Evaluation & Management	$439,801	$473,497	$39.49	$40.15	6,692	6,690	$70.82	$72.01
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$235,361	$237,942	$21.14	$20.18	3,061	2,688	$82.84	$90.06
Prof - Psych	$121,455	$123,011	$10.91	$10.43	2,695	2,540	$48.56	$49.28
Prof - Specialist	$95,223	$124,882	$8.55	$10.59	722	849	$142.12	$149.74
Prof - Vision	$11,650	$14,701	$1.05	$1.25	128	147	$97.90	$102.09
Radiology	$55,021	$67,825	$4.94	$5.75	1,607	1,850	$36.90	$37.31
Transportation/Ambulance	$107,728	$112,388	$9.67	$9.53	11,313	9,408	$10.26	$12.16
Total	$8,214,987	$8,379,954	$737.70	$710.59				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 45 and Over								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	47,318	48,921						
Service Type								
DME/Supplies	$955,918	$1,219,505	$20.20	$24.93	1,557	2,010	$155.71	$148.85
FQHC / RHC	$14,327	$13,128	$0.30	$0.27	152	150	$23.88	$21.45
Home Health	$301,720	$340,399	$6.38	$6.96	147	192	$519.31	$434.74
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$13,190,616	$15,220,178	$278.77	$311.12	318	321	$10,535.64	$11,645.12
IP - Psych	$917,164	$934,080	$19.38	$19.09	181	216	$1,286.35	$1,059.05
Lab	$265,204	$268,354	$5.60	$5.49	11,508	11,276	$5.84	$5.84
OP - Emergency Room & Related	$2,378,626	$2,523,684	$50.27	$51.59	1,013	1,135	$595.25	$545.31
OP - Other	$4,818,002	$4,751,480	$101.82	$97.13	1,520	1,550	$803.94	$751.82
Pharmacy	$16,025,106	$18,327,906	$338.67	$374.64	58,739	60,381	$69.19	$74.46
Prof - Anesthesia	$235,490	$248,132	$4.98	$5.07	349	378	$171.02	$161.23
Prof - Child EPSDT	$17,934	$17,358	$0.38	$0.35	560	512	$8.12	$8.31
Prof - Evaluation & Management	$3,644,825	$3,963,240	$77.03	$81.01	13,053	13,402	$70.81	$72.54
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$1,484,939	$1,933,227	$31.38	$39.52	4,604	5,109	$81.80	$92.82
Prof - Psych	$299,793	$309,357	$6.34	$6.32	1,484	1,463	$51.25	$51.87
Prof - Specialist	$1,358,329	$1,369,129	$28.71	$27.99	2,225	2,257	$154.83	$148.79
Prof - Vision	$215,385	$275,594	$4.55	$5.63	926	1,039	$58.96	$65.06
Radiology	$858,235	$902,849	$18.14	$18.46	4,413	4,349	$49.32	$50.92
Transportation/Ambulance	$351,382	$453,759	$7.43	$9.28	9,474	9,696	$9.41	$11.48
Total	$47,332,995	$53,071,358	$1,000.32	$1,084.84				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

All Age Categories								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	90,075	92,273						
Service Type								
DME/Supplies	$2,066,148	$2,490,064	$22.94	$26.99	1,589	1,896	$173.19	$170.82
FQHC / RHC	$19,839	$16,283	$0.22	$0.18	100	91	$26.56	$23.16
Home Health	$383,109	$510,124	$4.25	$5.53	106	131	$482.50	$507.59
IP - Maternity	$214,377	$182,569	$2.38	$1.98	9	8	$3,349.63	$2,992.93
IP - Newborn	$310,030	$0	$3.44	$0.00	0	0	$103,343.17	-
IP - Other	$20,304,787	$23,244,755	$225.42	$251.91	248	246	$10,916.55	$12,266.36
IP - Psych	$2,217,906	$2,233,617	$24.62	$24.21	250	258	$1,179.74	$1,125.25
Lab	$394,368	$412,078	$4.38	$4.47	8,801	8,560	$5.97	$6.26
OP - Emergency Room & Related	$4,305,672	$4,404,420	$47.80	$47.73	1,152	1,244	$497.82	$460.47
OP - Other	$8,025,360	$7,982,787	$89.10	$86.51	1,344	1,370	$795.77	$757.52
Pharmacy	$25,279,674	$28,402,990	$280.65	$307.81	41,525	42,899	$81.10	$86.10
Prof - Anesthesia	$384,958	$433,685	$4.27	$4.70	286	301	$179.13	$187.34
Prof - Child EPSDT	$35,198	$33,276	$0.39	$0.36	554	496	$8.47	$8.72
Prof - Evaluation & Management	$5,772,016	$6,433,098	$64.08	$69.72	10,723	11,091	$71.71	$75.43
Prof - Maternity	$74,138	$73,773	$0.82	$0.80	16	16	$623.01	$594.95
Prof - Other	$2,773,428	$3,848,606	$30.79	$41.71	3,908	4,440	$94.54	$112.73
Prof - Psych	$699,962	$692,321	$7.77	$7.50	1,784	1,697	$52.27	$53.05
Prof - Specialist	$1,844,721	$1,979,549	$20.48	$21.45	1,571	1,614	$156.41	$159.49
Prof - Vision	$298,878	$380,283	$3.32	$4.12	651	743	$61.16	$66.58
Radiology	$1,166,256	$1,225,859	$12.95	$13.29	3,320	3,320	$46.80	$48.02
Transportation/Ambulance	$640,919	$798,436	$7.12	$8.65	8,146	8,113	$10.48	$12.80
Total	$77,211,743	$85,778,571	$857.19	$929.62				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age Under 1								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	99	66						
Service Type								
DME/Supplies	$6,768	$2,184	$68.36	$33.09	7,394	6,000	$110.95	$66.17
FQHC / RHC	$2,322	$3,921	$23.46	$59.41	5,455	12,727	$51.61	$56.01
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$15,270	$2,116	$154.24	$32.05	606	545	$3,053.91	$705.18
IP - Other	$2,818	$11,665	$28.46	$176.74	242	727	$1,408.87	$2,916.26
IP - Psych	$2,271	$1,070	$22.94	$16.21	0	0	-	-
Lab	$652	$142	$6.59	$2.16	5,333	2,364	$14.82	$10.95
OP - Emergency Room & Related	$10,765	$4,633	$108.74	$70.20	1,576	3,091	$828.10	$272.54
OP - Other	$25,076	$15,187	$253.29	$230.11	4,364	8,000	$696.56	$345.17
Pharmacy	$42,325	$29,412	$427.53	$445.63	14,956	22,762	$343.03	$234.94
Prof - Anesthesia	$515	$917	$5.21	$13.89	364	1,273	$171.83	$130.96
Prof - Child EPSDT	$430	$327	$4.34	$4.95	4,606	5,273	$11.31	$11.27
Prof - Evaluation & Management	$13,180	$9,773	$133.13	$148.07	19,515	24,364	$81.86	$72.93
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$33,423	$16,429	$337.61	$248.93	16,121	5,455	$251.30	$547.64
Prof - Psych	$782	$369	$7.90	$5.58	121	0	$782.20	-
Prof - Specialist	$1,361	$2,263	$13.75	$34.29	1,333	1,636	$123.74	$251.48
Prof - Vision	$309	$495	$3.12	$7.49	485	1,091	$77.32	$82.42
Radiology	$657	$451	$6.64	$6.83	2,667	4,909	$29.86	$16.70
Transportation/Ambulance	$1,370	$1,694	$13.84	$25.67	3,394	5,455	$48.93	$56.46
Total	$160,295	$103,046	$1,619.14	$1,561.31				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 1-5								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	3,037	3,086						
Service Type								
DME/Supplies	$129,866	$142,280	$42.76	$46.10	3,319	4,254	$154.60	$130.05
FQHC / RHC	$29,307	$22,289	$9.65	$7.22	2,146	1,933	$53.97	$44.85
Home Health	$0	$1,251	$0.00	$0.41	0	23	-	$208.54
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$403,325	$291,918	$132.80	$94.59	233	167	$6,836.02	$6,788.78
IP - Psych	$53,944	$53,852	$17.76	$17.45	20	0	$10,788.86	-
Lab	$11,161	$16,422	$3.67	$5.32	2,975	3,581	$14.82	$17.83
OP - Emergency Room & Related	$54,669	$45,893	$18.00	$14.87	1,071	953	$201.73	$187.32
OP - Other	$351,462	$267,141	$115.73	$86.57	2,086	2,057	$665.65	$504.99
Pharmacy	$249,800	$302,740	$82.25	$98.10	11,245	11,899	$87.77	$98.93
Prof - Anesthesia	$10,440	$11,603	$3.44	$3.76	284	327	$145.00	$138.13
Prof - Child EPSDT	$9,617	$3,437	$3.17	$1.11	1,257	1,225	$30.24	$10.91
Prof - Evaluation & Management	$141,129	$133,496	$46.47	$43.26	7,748	7,291	$71.97	$71.20
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$272,186	$581,392	$89.62	$188.40	9,052	9,776	$118.81	$231.26
Prof - Psych	$21,619	$21,732	$7.12	$7.04	510	331	$167.59	$255.67
Prof - Specialist	$23,332	$28,428	$7.68	$9.21	608	715	$151.50	$154.50
Prof - Vision	$6,327	$7,682	$2.08	$2.49	229	292	$109.08	$102.42
Radiology	$10,386	$12,222	$3.42	$3.96	1,419	1,365	$28.93	$34.82
Transportation/Ambulance	$20,684	$26,230	$6.81	$8.50	2,232	3,239	$36.61	$31.49
Total	$1,799,253	$1,970,008	$592.44	$638.37				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 6-20								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	17,975	18,656						
Service Type								
DME/Supplies	$219,342	$212,598	$12.20	$11.40	889	1,017	$164.67	$134.47
FQHC / RHC	$77,641	$89,286	$4.32	$4.79	1,081	1,118	$47.96	$51.37
Home Health	$8,696	$7,121	$0.48	$0.38	13	15	$457.68	$309.63
IP - Maternity	$48,157	$37,088	$2.68	$1.99	13	8	$2,407.87	$2,852.93
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$750,864	$755,875	$41.77	$40.52	77	75	$6,472.97	$6,460.47
IP - Psych	$422,216	$438,981	$23.49	$23.53	165	207	$1,709.38	$1,363.30
Lab	$66,932	$69,640	$3.72	$3.73	2,821	3,042	$15.84	$14.73
OP - Emergency Room & Related	$241,897	$263,751	$13.46	$14.14	731	711	$220.91	$238.69
OP - Other	$527,700	$694,841	$29.36	$37.24	828	995	$425.56	$449.15
Pharmacy	$2,234,277	$2,539,478	$124.30	$136.12	14,483	15,568	$102.99	$104.92
Prof - Anesthesia	$24,236	$25,186	$1.35	$1.35	105	118	$153.39	$137.63
Prof - Child EPSDT	$5,875	$6,426	$0.33	$0.34	257	279	$15.26	$14.84
Prof - Evaluation & Management	$431,714	$483,978	$24.02	$25.94	4,275	4,446	$67.41	$70.02
Prof - Maternity	$20,364	$13,465	$1.13	$0.72	39	25	$345.15	$345.27
Prof - Other	$303,173	$347,735	$16.87	$18.64	2,928	2,770	$69.12	$80.74
Prof - Psych	$227,094	$232,787	$12.63	$12.48	2,031	2,162	$74.65	$69.26
Prof - Specialist	$84,731	$78,867	$4.71	$4.23	475	522	$119.00	$97.25
Prof - Vision	$30,826	$38,033	$1.71	$2.04	337	407	$61.04	$60.18
Radiology	$57,757	$57,631	$3.21	$3.09	1,025	1,129	$37.63	$32.84
Transportation/Ambulance	$136,704	$156,612	$7.61	$8.39	3,943	4,545	$23.14	$22.16
Total	$5,920,196	$6,549,381	$329.36	$351.06				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Female								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	10,712	11,099						
Service Type								
DME/Supplies	$155,060	$187,332	$14.48	$16.88	1,378	1,490	$126.07	$135.94
FQHC / RHC	$72,261	$104,352	$6.75	$9.40	2,039	2,172	$39.70	$51.94
Home Health	$23,574	$19,351	$2.20	$1.74	48	63	$548.23	$333.64
IP - Maternity	$151,119	$155,659	$14.11	$14.02	57	64	$2,963.11	$2,638.29
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,772,110	$1,755,185	$165.43	$158.14	283	265	$7,004.39	$7,164.02
IP - Psych	$329,356	$360,866	$30.75	$32.51	345	364	$1,069.34	$1,070.82
Lab	$172,315	$177,630	$16.09	$16.00	11,761	11,429	$16.41	$16.80
OP - Emergency Room & Related	$667,482	$594,756	$62.31	$53.59	2,445	2,353	$305.76	$273.33
OP - Other	$743,843	$885,854	$69.44	$79.81	1,918	1,962	$434.49	$488.07
Pharmacy	$2,692,959	$3,051,152	$251.40	$274.90	48,255	48,938	$62.52	$67.41
Prof - Anesthesia	$29,944	$24,891	$2.80	$2.24	230	187	$146.07	$143.88
Prof - Child EPSDT	$19,255	$9,911	$1.80	$0.89	876	631	$24.62	$16.97
Prof - Evaluation & Management	$654,326	$644,711	$61.08	$58.09	11,152	10,263	$65.73	$67.92
Prof - Maternity	$63,787	$75,148	$5.95	$6.77	207	248	$344.79	$328.16
Prof - Other	$199,676	$228,614	$18.64	$20.60	4,311	4,424	$51.89	$55.87
Prof - Psych	$113,370	$130,733	$10.58	$11.78	2,075	2,256	$61.22	$62.64
Prof - Specialist	$211,039	$168,436	$19.70	$15.18	2,465	2,028	$95.93	$89.78
Prof - Vision	$19,305	$24,614	$1.80	$2.22	223	314	$97.01	$84.88
Radiology	$160,128	$149,566	$14.95	$13.48	4,144	3,791	$43.29	$42.66
Transportation/Ambulance	$236,439	$248,704	$22.07	$22.41	8,959	7,978	$29.57	$33.70
Total	$8,487,346	$8,997,465	$792.32	$810.66				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Male								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	8,454	9,245						
Service Type								
DME/Supplies	$172,303	$230,363	$20.38	$24.92	2,216	2,218	$110.38	$134.79
FQHC / RHC	$29,822	$33,239	$3.53	$3.60	996	887	$42.48	$48.67
Home Health	$12,361	$12,034	$1.46	$1.30	31	48	$561.87	$325.25
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,269,696	$2,713,450	$150.19	$293.50	206	280	$8,756.52	$12,562.27
IP - Psych	$391,479	$289,269	$46.31	$31.29	616	309	$902.03	$1,215.42
Lab	$56,406	$60,540	$6.67	$6.55	6,126	5,770	$13.07	$13.62
OP - Emergency Room & Related	$296,153	$332,115	$35.03	$35.92	1,682	1,594	$249.92	$270.45
OP - Other	$523,439	$562,231	$61.92	$60.81	1,084	1,186	$685.13	$615.13
Pharmacy	$1,766,131	$2,010,057	$208.91	$217.42	30,687	30,442	$81.69	$85.71
Prof - Anesthesia	$6,431	$10,338	$0.76	$1.12	61	82	$149.56	$164.09
Prof - Child EPSDT	$2,390	$2,835	$0.28	$0.31	304	227	$11.17	$16.20
Prof - Evaluation & Management	$312,250	$405,295	$36.94	$43.84	6,825	7,521	$64.94	$69.95
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$210,581	$320,246	$24.91	$34.64	2,521	2,448	$118.57	$169.80
Prof - Psych	$83,420	$96,163	$9.87	$10.40	1,553	1,577	$76.25	$79.15
Prof - Specialist	$70,024	$93,115	$8.28	$10.07	1,296	1,280	$76.70	$94.44
Prof - Vision	$18,390	$14,018	$2.18	$1.52	163	187	$159.91	$97.35
Radiology	$56,220	$61,355	$6.65	$6.64	2,393	2,469	$33.35	$32.26
Transportation/Ambulance	$100,965	$118,300	$11.94	$12.80	7,347	8,023	$19.51	$19.14
Total	$5,378,462	$7,364,963	$636.20	$796.64				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 45 and Over								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	27,988	29,275						
Service Type								
DME/Supplies	$784,193	$862,432	$28.02	$29.46	3,217	3,584	$104.53	$98.64
FQHC / RHC	$298,542	$362,663	$10.67	$12.39	2,583	2,722	$49.55	$54.62
Home Health	$162,096	$202,109	$5.79	$6.90	148	205	$469.84	$405.03
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$9,820,524	$8,279,766	$350.88	$282.83	440	403	$9,571.66	$8,431.53
IP - Psych	$786,762	$810,618	$28.11	$27.69	377	288	$895.06	$1,154.73
Lab	$428,943	$473,411	$15.33	$16.17	12,543	12,967	$14.66	$14.96
OP - Emergency Room & Related	$1,276,408	$1,281,793	$45.61	$43.78	1,307	1,284	$418.63	$409.26
OP - Other	$3,294,162	$3,327,479	$117.70	$113.66	2,473	2,753	$571.11	$495.46
Pharmacy	$10,121,391	$11,616,958	$361.63	$396.82	74,679	76,554	$58.11	$62.20
Prof - Anesthesia	$64,190	$76,374	$2.29	$2.61	191	201	$144.25	$155.87
Prof - Child EPSDT	$21,440	$24,710	$0.77	$0.84	1,247	1,058	$7.37	$9.57
Prof - Evaluation & Management	$1,863,645	$2,013,572	$66.59	$68.78	11,763	11,868	$67.93	$69.55
Prof - Maternity	$0	$240	$0.00	$0.01	0	1	-	$80.00
Prof - Other	$1,212,562	$1,129,554	$43.32	$38.58	6,118	6,473	$84.98	$71.53
Prof - Psych	$241,282	$265,886	$8.62	$9.08	1,399	1,347	$73.94	$80.94
Prof - Specialist	$746,610	$819,581	$26.68	$28.00	3,377	3,166	$94.80	$106.11
Prof - Vision	$87,373	$107,807	$3.12	$3.68	482	594	$77.67	$74.45
Radiology	$473,635	$524,448	$16.92	$17.91	4,881	4,967	$41.60	$43.28
Transportation/Ambulance	$567,998	$648,358	$20.29	$22.15	11,694	11,650	$20.82	$22.81
Total	$32,251,758	$32,827,760	$1,152.34	$1,121.36				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

All Age Categories								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	68,265	71,427						
Service Type								
DME/Supplies	$1,467,533	$1,637,188	$21.50	$22.92	2,202	2,442	$117.16	$112.61
FQHC / RHC	$509,895	$615,750	$7.47	$8.62	1,890	1,955	$47.41	$52.91
Home Health	$206,726	$241,867	$3.03	$3.39	75	105	$481.88	$388.23
IP - Maternity	$199,276	$192,747	$2.92	$2.70	12	12	$2,806.71	$2,677.05
IP - Newborn	$15,270	$2,116	$0.22	$0.03	1	1	$3,053.91	$705.18
IP - Other	$14,019,337	$13,807,858	$205.37	$193.31	281	270	$8,756.61	$8,592.32
IP - Psych	$1,986,028	$1,954,658	$29.09	$27.37	329	269	$1,060.35	$1,222.43
Lab	$736,410	$797,786	$10.79	$11.17	8,630	8,789	$15.00	$15.25
OP - Emergency Room & Related	$2,547,373	$2,522,942	$37.32	$35.32	1,370	1,328	$326.75	$319.24
OP - Other	$5,465,682	$5,752,733	$80.07	$80.54	1,766	1,943	$543.96	$497.43
Pharmacy	$17,106,883	$19,549,796	$250.60	$273.70	46,326	47,522	$64.91	$69.11
Prof - Anesthesia	$135,757	$149,309	$1.99	$2.09	163	168	$146.61	$149.31
Prof - Child EPSDT	$59,006	$47,646	$0.86	$0.67	817	692	$12.70	$11.57
Prof - Evaluation & Management	$3,416,244	$3,690,824	$50.04	$51.67	8,917	8,931	$67.35	$69.43
Prof - Maternity	$84,150	$88,853	$1.23	$1.24	43	46	$344.88	$327.87
Prof - Other	$2,231,601	$2,623,971	$32.69	$36.74	4,694	4,808	$83.57	$91.68
Prof - Psych	$687,568	$747,669	$10.07	$10.47	1,649	1,686	$73.29	$74.52
Prof - Specialist	$1,137,096	$1,190,691	$16.66	$16.67	2,086	1,947	$95.83	$102.73
Prof - Vision	$162,530	$192,649	$2.38	$2.70	353	436	$81.02	$74.24
Radiology	$758,783	$805,673	$11.12	$11.28	3,285	3,303	$40.61	$40.98
Transportation/Ambulance	$1,064,161	$1,199,898	$15.59	$16.80	8,253	8,385	$22.67	$24.04
Total	$53,997,310	$57,812,623	$791.00	$809.39				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age Under 1								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	79	124						
Service Type								
DME/Supplies	$5,319	$20,827	$67.33	$167.96	8,354	17,226	$96.71	$117.01
FQHC / RHC	$182	$0	$2.30	$0.00	759	0	$36.42	-
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$80,181	$6,922	$1,014.95	$55.82	1,519	581	$8,018.14	$1,153.66
IP - Other	$9,806	$702,904	$124.13	$5,668.58	456	1,065	$3,268.66	$63,900.36
IP - Psych	$1,344	$2,801	$17.01	$22.59	0	0	-	-
Lab	$237	$1,598	$3.00	$12.88	3,494	6,387	$10.29	$24.21
OP - Emergency Room & Related	$3,697	$5,031	$46.80	$40.57	3,494	1,935	$160.73	$251.56
OP - Other	$11,215	$34,252	$141.97	$276.23	11,241	10,258	$151.56	$323.13
Pharmacy	$27,846	$49,137	$352.48	$396.26	22,584	19,972	$187.29	$238.09
Prof - Anesthesia	$1,332	$4,093	$16.86	$33.01	608	1,355	$333.00	$292.34
Prof - Child EPSDT	$305	$454	$3.86	$3.66	5,165	4,161	$8.96	$10.55
Prof - Evaluation & Management	$14,861	$80,705	$188.11	$650.85	30,987	58,935	$72.85	$132.52
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$19,557	$22,630	$247.55	$182.50	10,633	12,968	$279.38	$168.88
Prof - Psych	$743	$965	$9.40	$7.78	608	97	$185.69	$964.83
Prof - Specialist	$5,668	$10,776	$71.75	$86.91	3,949	5,032	$218.00	$207.24
Prof - Vision	$825	$287	$10.44	$2.32	1,823	387	$68.75	$71.77
Radiology	$331	$2,227	$4.18	$17.96	4,253	17,032	$11.81	$12.65
Transportation/Ambulance	$1,295	$357	$16.39	$2.88	6,076	5,032	$32.37	$6.87
Total	$184,742	$945,966	$2,338.50	$7,628.75				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 1-5								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	5,111	4,969						
Service Type								
DME/Supplies	$253,026	$390,714	$49.51	$78.63	4,003	6,535	$148.40	$144.39
FQHC / RHC	$2,186	$1,331	$0.43	$0.27	103	65	$49.68	$49.28
Home Health	$9,082	$425,334	$1.78	$85.60	16	304	$1,297.43	$3,375.67
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$345,605	$977,211	$67.62	$196.66	134	164	$6,063.25	$14,370.75
IP - Psych	$74,146	$76,453	$14.51	$15.39	28	19	$6,178.84	$9,556.67
Lab	$11,260	$11,222	$2.20	$2.26	3,505	2,746	$7.54	$9.87
OP - Emergency Room & Related	$101,156	$122,854	$19.79	$24.72	991	1,101	$239.71	$269.42
OP - Other	$870,265	$791,144	$170.27	$159.22	3,959	4,661	$516.17	$409.92
Pharmacy	$570,305	$507,627	$111.58	$102.16	11,683	12,302	$114.61	$99.65
Prof - Anesthesia	$18,590	$24,749	$3.64	$4.98	228	333	$191.65	$179.34
Prof - Child EPSDT	$9,518	$5,011	$1.86	$1.01	1,289	1,137	$17.34	$10.64
Prof - Evaluation & Management	$237,871	$289,934	$46.54	$58.35	8,004	9,546	$69.78	$73.35
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$228,154	$449,567	$44.64	$90.47	4,123	5,835	$129.93	$186.08
Prof - Psych	$35,731	$39,384	$6.99	$7.93	730	787	$114.89	$120.81
Prof - Specialist	$44,285	$61,633	$8.66	$12.40	733	937	$141.94	$158.85
Prof - Vision	$10,177	$10,822	$1.99	$2.18	315	326	$75.95	$80.16
Radiology	$10,912	$12,823	$2.14	$2.58	1,294	1,476	$19.80	$20.99
Transportation/Ambulance	$26,257	$27,727	$5.14	$5.58	1,716	2,128	$35.92	$31.47
Total	$2,858,526	$4,225,542	$559.29	$850.38				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 6-20								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	54,412	54,934						
Service Type								
DME/Supplies	$717,516	$704,673	$13.19	$12.83	1,058	1,089	$149.51	$141.39
FQHC / RHC	$87,276	$52,740	$1.60	$0.96	217	189	$88.88	$61.11
Home Health	$71,053	$157,749	$1.31	$2.87	16	42	$1,000.75	$813.14
IP - Maternity	$165,261	$213,000	$3.04	$3.88	12	16	$3,118.13	$2,917.81
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$2,353,425	$3,463,541	$43.25	$63.05	49	66	$10,601.02	$11,468.68
IP - Psych	$1,276,499	$1,295,405	$23.46	$23.58	263	230	$1,071.79	$1,227.87
Lab	$118,226	$121,558	$2.17	$2.21	2,795	2,457	$9.33	$10.81
OP - Emergency Room & Related	$923,021	$1,040,008	$16.96	$18.93	758	872	$268.71	$260.59
OP - Other	$2,534,299	$2,277,457	$46.58	$41.46	1,334	1,389	$418.89	$358.09
Pharmacy	$5,928,426	$6,559,665	$108.95	$119.41	12,726	13,763	$102.74	$104.12
Prof - Anesthesia	$70,735	$91,845	$1.30	$1.67	76	97	$204.44	$205.93
Prof - Child EPSDT	$18,262	$17,690	$0.34	$0.32	255	231	$15.80	$16.74
Prof - Evaluation & Management	$1,280,856	$1,471,611	$23.54	$26.79	4,164	4,596	$67.85	$69.95
Prof - Maternity	$72,604	$113,533	$1.33	$2.07	30	44	$541.82	$562.04
Prof - Other	$1,003,092	$1,148,822	$18.44	$20.91	1,430	1,667	$154.75	$150.55
Prof - Psych	$596,788	$657,542	$10.97	$11.97	2,074	2,301	$63.46	$62.42
Prof - Specialist	$235,664	$298,352	$4.33	$5.43	344	391	$151.16	$166.77
Prof - Vision	$84,245	$89,935	$1.55	$1.64	334	401	$55.68	$48.93
Radiology	$108,490	$130,123	$1.99	$2.37	845	1,006	$28.32	$28.24
Transportation/Ambulance	$326,516	$298,374	$6.00	$5.43	2,565	2,801	$28.07	$23.27
Total	$17,972,255	$20,203,625	$330.30	$367.78				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Female								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	25,519	26,534						
Service Type								
DME/Supplies	$448,540	$462,381	$17.58	$17.43	1,719	1,791	$122.72	$116.73
FQHC / RHC	$82,831	$95,143	$3.25	$3.59	799	728	$48.72	$59.13
Home Health	$63,649	$55,800	$2.49	$2.10	127	99	$235.74	$254.80
IP - Maternity	$432,499	$666,134	$16.95	$25.10	64	57	$3,180.14	$5,286.78
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$4,678,361	$5,159,131	$183.33	$194.43	259	261	$8,490.67	$8,941.30
IP - Psych	$1,135,797	$1,400,729	$44.51	$52.79	759	869	$703.28	$728.79
Lab	$196,531	$208,261	$7.70	$7.85	8,761	8,452	$10.55	$11.14
OP - Emergency Room & Related	$2,019,945	$2,383,116	$79.15	$89.81	2,461	2,786	$385.93	$386.81
OP - Other	$2,706,314	$2,625,903	$106.05	$98.96	2,621	2,575	$485.52	$461.25
Pharmacy	$5,971,061	$7,107,963	$233.98	$267.88	43,705	44,822	$64.25	$71.72
Prof - Anesthesia	$91,840	$82,804	$3.60	$3.12	222	225	$194.16	$166.27
Prof - Child EPSDT	$14,855	$13,749	$0.58	$0.52	452	326	$15.46	$19.07
Prof - Evaluation & Management	$1,592,801	$1,871,103	$62.42	$70.52	11,051	12,151	$67.78	$69.64
Prof - Maternity	$180,000	$181,494	$7.05	$6.84	130	149	$649.82	$549.98
Prof - Other	$574,458	$669,305	$22.51	$25.22	3,078	3,560	$87.76	$85.02
Prof - Psych	$324,162	$385,062	$12.70	$14.51	3,155	3,452	$48.31	$50.44
Prof - Specialist	$509,582	$487,697	$19.97	$18.38	1,386	1,319	$172.92	$167.19
Prof - Vision	$41,038	$43,914	$1.61	$1.65	208	256	$92.64	$77.45
Radiology	$304,788	$324,456	$11.94	$12.23	3,893	4,016	$36.81	$36.54
Transportation/Ambulance	$444,537	$541,289	$17.42	$20.40	13,664	13,113	$15.30	$18.67
Total	$21,813,589	$24,765,434	$854.80	$933.35				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Male								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	19,405	21,666						
Service Type								
DME/Supplies	$366,916	$445,647	$18.91	$20.57	2,114	1,762	$107.35	$140.10
FQHC / RHC	$68,816	$63,923	$3.55	$2.95	518	431	$82.22	$82.16
Home Health	$46,010	$50,671	$2.37	$2.34	106	72	$269.06	$389.78
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$3,090,770	$3,466,077	$159.28	$159.98	193	182	$9,906.31	$10,567.31
IP - Psych	$1,152,978	$1,091,585	$59.42	$50.38	1,008	862	$707.35	$701.53
Lab	$61,394	$58,312	$3.16	$2.69	4,167	3,674	$9.11	$8.79
OP - Emergency Room & Related	$1,041,099	$1,007,822	$53.65	$46.52	1,638	1,598	$393.16	$349.33
OP - Other	$1,485,357	$1,396,416	$76.55	$64.45	1,521	1,396	$604.05	$553.91
Pharmacy	$3,931,407	$4,586,976	$202.60	$211.71	27,307	26,000	$89.03	$97.71
Prof - Anesthesia	$28,321	$35,074	$1.46	$1.62	105	102	$167.58	$190.62
Prof - Child EPSDT	$9,017	$2,718	$0.46	$0.13	759	111	$7.35	$13.52
Prof - Evaluation & Management	$787,444	$866,828	$40.58	$40.01	7,083	6,976	$68.75	$68.82
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$712,211	$635,900	$36.70	$29.35	3,793	2,613	$116.13	$134.81
Prof - Psych	$213,047	$254,516	$10.98	$11.75	2,297	2,385	$57.35	$59.11
Prof - Specialist	$274,327	$270,774	$14.14	$12.50	843	845	$201.12	$177.44
Prof - Vision	$28,672	$34,047	$1.48	$1.57	193	179	$91.90	$105.08
Radiology	$123,329	$122,314	$6.36	$5.65	2,233	2,169	$34.15	$31.23
Transportation/Ambulance	$345,938	$392,520	$17.83	$18.12	16,432	15,639	$13.02	$13.90
Total	$13,767,054	$14,782,120	$709.46	$682.27				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 45 and Over								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	63,212	68,303						
Service Type								
DME/Supplies	$1,967,944	$2,141,255	$31.13	$31.35	3,405	3,418	$109.70	$110.07
FQHC / RHC	$309,656	$300,399	$4.90	$4.40	1,318	1,128	$44.61	$46.77
Home Health	$457,228	$430,683	$7.23	$6.31	360	271	$241.28	$279.12
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$22,638,523	$24,497,753	$358.14	$358.66	393	378	$10,947.06	$11,378.43
IP - Psych	$2,823,057	$3,089,271	$44.66	$45.23	769	759	$696.88	$715.44
Lab	$444,869	$482,736	$7.04	$7.07	9,378	9,003	$9.01	$9.42
OP - Emergency Room & Related	$4,000,164	$4,462,202	$63.28	$65.33	1,441	1,539	$527.03	$509.33
OP - Other	$10,843,134	$10,738,986	$171.54	$157.23	3,842	3,812	$535.78	$494.88
Pharmacy	$22,503,248	$26,392,417	$356.00	$386.40	70,595	71,324	$60.51	$65.01
Prof - Anesthesia	$240,269	$278,950	$3.80	$4.08	251	266	$181.75	$184.13
Prof - Child EPSDT	$33,247	$24,867	$0.53	$0.36	872	464	$7.24	$9.42
Prof - Evaluation & Management	$4,684,594	$5,265,349	$74.11	$77.09	12,974	13,395	$68.54	$69.06
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$3,163,533	$2,993,519	$50.05	$43.83	5,399	5,051	$111.24	$104.12
Prof - Psych	$696,626	$794,391	$11.02	$11.63	2,261	2,305	$58.50	$60.54
Prof - Specialist	$2,045,212	$2,070,467	$32.35	$30.31	2,256	2,143	$172.11	$169.74
Prof - Vision	$210,257	$234,221	$3.33	$3.43	549	596	$72.73	$69.07
Radiology	$945,216	$992,915	$14.95	$14.54	4,922	4,902	$36.45	$35.58
Transportation/Ambulance	$1,346,930	$1,353,968	$21.31	$19.82	22,042	21,611	$11.60	$11.01
Total	$79,353,708	$86,544,349	$1,255.36	$1,267.07				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

All Age Categories								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	167,738	176,530						
Service Type								
DME/Supplies	$3,759,261	$4,165,498	$22.41	$23.60	2,259	2,343	$119.07	$120.87
FQHC / RHC	$550,948	$513,535	$3.28	$2.91	752	659	$52.42	$52.94
Home Health	$647,022	$1,120,238	$3.86	$6.35	173	150	$268.03	$506.44
IP - Maternity	$597,760	$879,135	$3.56	$4.98	14	14	$3,162.75	$4,417.76
IP - Newborn	$80,181	$6,922	$0.48	$0.04	1	0	$8,018.14	$1,153.66
IP - Other	$33,116,491	$38,266,617	$197.43	$216.77	230	234	$10,307.03	$11,127.25
IP - Psych	$6,463,822	$6,956,245	$38.54	$39.41	608	602	$760.54	$785.22
Lab	$832,516	$883,688	$4.96	$5.01	6,364	6,051	$9.36	$9.93
OP - Emergency Room & Related	$8,089,082	$9,021,033	$48.22	$51.10	1,384	1,514	$418.00	$405.00
OP - Other	$18,450,584	$17,864,158	$110.00	$101.20	2,581	2,604	$511.37	$466.31
Pharmacy	$38,932,293	$45,203,785	$232.10	$256.07	40,906	42,168	$68.09	$72.87
Prof - Anesthesia	$451,087	$517,516	$2.69	$2.93	172	190	$187.10	$185.16
Prof - Child EPSDT	$85,203	$64,490	$0.51	$0.37	610	349	$10.00	$12.56
Prof - Evaluation & Management	$8,598,427	$9,845,531	$51.26	$55.77	8,999	9,606	$68.36	$69.67
Prof - Maternity	$252,604	$295,027	$1.51	$1.67	29	36	$614.61	$554.56
Prof - Other	$5,701,005	$5,919,743	$33.99	$33.53	3,536	3,502	$115.34	$114.90
Prof - Psych	$1,867,098	$2,131,859	$11.13	$12.08	2,293	2,442	$58.25	$59.34
Prof - Specialist	$3,114,738	$3,199,699	$18.57	$18.13	1,294	1,283	$172.17	$169.57
Prof - Vision	$375,213	$413,225	$2.24	$2.34	380	425	$70.73	$66.02
Radiology	$1,493,067	$1,584,858	$8.90	$8.98	3,021	3,133	$35.36	$34.38
Transportation/Ambulance	$2,491,474	$2,614,235	$14.85	$14.81	13,174	13,187	$13.53	$13.48
Total	$135,949,874	$151,467,036	$810.49	$858.02				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age Under 1								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	71	127						
Service Type								
DME/Supplies	$4,462	$16,860	$62.85	$132.76	9,296	13,795	$81.13	$115.48
FQHC / RHC	$643	$1,316	$9.06	$10.36	3,718	1,606	$29.25	$77.43
Home Health	$321	$8,254	$4.52	$64.99	338	189	$160.62	$4,127.08
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$55,467	$87,271	$781.23	$687.18	507	378	$18,489.04	$21,817.83
IP - Other	$21,340	$338,803	$300.57	$2,667.74	338	1,039	$10,670.21	$30,800.28
IP - Psych	$1,336	$1,965	$18.81	$15.48	0	0	-	-
Lab	$401	$1,154	$5.64	$9.09	6,254	6,331	$10.83	$17.22
OP - Emergency Room & Related	$2,080	$3,670	$29.29	$28.90	2,535	2,551	$138.65	$135.92
OP - Other	$20,838	$12,116	$293.50	$95.40	5,915	5,480	$595.38	$208.90
Pharmacy	$5,176	$60,843	$72.90	$479.08	16,897	18,262	$51.77	$314.80
Prof - Anesthesia	$3,170	$3,398	$44.64	$26.76	2,197	1,039	$243.82	$308.92
Prof - Child EPSDT	$426	$395	$6.01	$3.11	5,915	3,307	$12.18	$11.27
Prof - Evaluation & Management	$60,585	$43,152	$853.31	$339.78	52,732	40,724	$194.18	$100.12
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$30,653	$46,078	$431.73	$362.82	19,775	15,402	$261.99	$282.69
Prof - Psych	$460	$677	$6.48	$5.33	0	472	-	$135.39
Prof - Specialist	$5,796	$20,161	$81.64	$158.74	4,394	3,874	$222.93	$491.72
Prof - Vision	$545	$929	$7.68	$7.32	2,704	1,512	$34.09	$58.08
Radiology	$1,276	$1,365	$17.98	$10.75	14,535	10,961	$14.84	$11.77
Transportation/Ambulance	$810	$5,186	$11.41	$40.84	9,803	9,260	$13.97	$52.92
Total	$215,787	$653,593	$3,039.25	$5,146.40				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 1-5								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	3,683	3,584						
Service Type								
DME/Supplies	$253,750	$167,881	$68.90	$46.84	4,434	3,790	$186.44	$148.31
FQHC / RHC	$38,312	$20,371	$10.40	$5.68	1,626	1,430	$76.78	$47.71
Home Health	$99,565	$41,556	$27.03	$11.59	169	47	$1,914.71	$2,968.27
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$943,402	$622,709	$256.15	$173.75	205	211	$14,974.63	$9,884.26
IP - Psych	$58,608	$60,121	$15.91	$16.77	0	0	-	-
Lab	$9,871	$12,427	$2.68	$3.47	3,854	2,846	$8.34	$14.62
OP - Emergency Room & Related	$97,838	$64,693	$26.56	$18.05	1,078	1,125	$295.58	$192.54
OP - Other	$638,433	$437,663	$173.35	$122.12	3,418	3,211	$608.61	$456.37
Pharmacy	$408,128	$376,400	$110.81	$105.02	13,245	13,390	$100.40	$94.12
Prof - Anesthesia	$22,294	$18,886	$6.05	$5.27	407	365	$178.35	$173.26
Prof - Child EPSDT	$5,152	$5,296	$1.40	$1.48	1,424	1,547	$11.79	$11.46
Prof - Evaluation & Management	$204,583	$251,611	$55.55	$70.20	9,081	9,516	$73.41	$88.53
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$240,860	$272,151	$65.40	$75.93	5,285	5,227	$148.50	$174.34
Prof - Psych	$27,844	$25,421	$7.56	$7.09	609	619	$148.90	$137.41
Prof - Specialist	$37,902	$42,141	$10.29	$11.76	841	854	$146.91	$165.26
Prof - Vision	$9,519	$9,329	$2.58	$2.60	437	378	$71.04	$82.55
Radiology	$9,528	$10,506	$2.59	$2.93	1,365	1,741	$22.74	$20.20
Transportation/Ambulance	$29,423	$39,996	$7.99	$11.16	5,005	6,362	$19.16	$21.05
Total	$3,135,012	$2,479,155	$851.21	$691.73				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 6-20								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	25,323	25,093						
Service Type								
DME/Supplies	$400,760	$338,245	$15.83	$13.48	1,253	1,107	$151.52	$146.11
FQHC / RHC	$100,821	$73,369	$3.98	$2.92	834	640	$57.28	$54.84
Home Health	$6,780	$25,538	$0.27	$1.02	15	24	$218.71	$500.74
IP - Maternity	$33,625	$47,162	$1.33	$1.88	6	9	$2,586.50	$2,620.11
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,379,711	$981,594	$54.48	$39.12	78	64	$8,412.87	$7,325.33
IP - Psych	$565,963	$594,088	$22.35	$23.68	136	110	$1,965.15	$2,582.99
Lab	$65,712	$70,495	$2.59	$2.81	2,886	2,739	$10.79	$12.31
OP - Emergency Room & Related	$439,963	$446,852	$17.37	$17.81	784	830	$265.84	$257.55
OP - Other	$1,156,436	$1,048,400	$45.67	$41.78	1,218	1,311	$449.98	$382.49
Pharmacy	$3,350,526	$3,629,833	$132.31	$144.66	15,291	16,194	$103.84	$107.19
Prof - Anesthesia	$39,388	$40,450	$1.56	$1.61	104	108	$179.85	$178.98
Prof - Child EPSDT	$12,034	$9,970	$0.48	$0.40	324	297	$17.62	$16.03
Prof - Evaluation & Management	$659,700	$677,331	$26.05	$26.99	4,727	4,655	$66.14	$69.58
Prof - Maternity	$15,456	$30,908	$0.61	$1.23	18	30	$417.74	$490.61
Prof - Other	$385,309	$260,259	$15.22	$10.37	1,555	1,612	$117.40	$77.21
Prof - Psych	$286,058	$294,062	$11.30	$11.72	2,001	2,098	$67.75	$67.02
Prof - Specialist	$114,282	$116,847	$4.51	$4.66	504	466	$107.51	$119.97
Prof - Vision	$45,556	$45,763	$1.80	$1.82	439	469	$49.14	$46.70
Radiology	$50,800	$59,599	$2.01	$2.38	905	955	$26.60	$29.83
Transportation/Ambulance	$181,741	$191,168	$7.18	$7.62	3,364	3,226	$25.60	$28.34
Total	$9,290,622	$8,981,935	$366.88	$357.95				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Female								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	13,662	13,899						
Service Type								
DME/Supplies	$311,936	$293,049	$22.83	$21.08	1,910	1,926	$143.48	$131.35
FQHC / RHC	$117,541	$109,718	$8.60	$7.89	2,434	2,238	$42.42	$42.33
Home Health	$73,259	$52,192	$5.36	$3.76	145	111	$444.00	$404.59
IP - Maternity	$147,414	$141,036	$10.79	$10.15	46	46	$2,834.88	$2,661.06
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$2,325,308	$2,179,889	$170.20	$156.84	257	220	$7,936.21	$8,548.59
IP - Psych	$406,913	$411,058	$29.78	$29.57	336	443	$1,062.44	$801.28
Lab	$120,085	$130,750	$8.79	$9.41	9,405	9,375	$11.21	$12.04
OP - Emergency Room & Related	$880,514	$1,010,400	$64.45	$72.70	2,265	2,475	$341.42	$352.42
OP - Other	$1,352,667	$1,444,679	$99.01	$103.94	2,781	2,676	$427.25	$466.03
Pharmacy	$3,620,497	$3,643,915	$265.00	$262.17	45,914	45,376	$69.26	$69.33
Prof - Anesthesia	$43,010	$45,889	$3.15	$3.30	230	245	$164.16	$161.58
Prof - Child EPSDT	$33,827	$12,304	$2.48	$0.89	1,094	643	$27.17	$16.52
Prof - Evaluation & Management	$782,903	$846,799	$57.31	$60.93	10,636	10,906	$64.65	$67.04
Prof - Maternity	$76,544	$81,871	$5.60	$5.89	198	156	$340.19	$452.33
Prof - Other	$244,735	$322,290	$17.91	$23.19	3,181	3,868	$67.59	$71.94
Prof - Psych	$157,202	$170,521	$11.51	$12.27	2,340	2,479	$59.01	$59.39
Prof - Specialist	$260,512	$237,689	$19.07	$17.10	1,882	1,813	$121.56	$113.19
Prof - Vision	$18,921	$22,501	$1.38	$1.62	221	245	$75.08	$79.23
Radiology	$157,008	$161,204	$11.49	$11.60	3,676	3,624	$37.52	$38.40
Transportation/Ambulance	$205,074	$233,784	$15.01	$16.82	13,669	14,550	$13.18	$13.87
Total	$11,335,868	$11,551,540	$829.74	$831.11				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Male								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	10,104	10,877						
Service Type								
DME/Supplies	$188,782	$226,634	$18.68	$20.84	1,469	1,404	$152.61	$178.03
FQHC / RHC	$61,971	$105,878	$6.13	$9.73	1,264	1,286	$58.24	$90.80
Home Health	$28,040	$60,192	$2.78	$5.53	69	83	$483.46	$802.56
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,542,168	$1,477,162	$152.63	$135.81	176	165	$10,420.05	$9,847.74
IP - Psych	$352,508	$350,969	$34.89	$32.27	426	513	$981.92	$754.77
Lab	$36,181	$37,129	$3.58	$3.41	3,773	3,944	$11.39	$10.39
OP - Emergency Room & Related	$343,828	$400,388	$34.03	$36.81	1,219	1,238	$335.11	$356.85
OP - Other	$745,519	$524,578	$73.78	$48.23	1,597	1,497	$554.29	$386.57
Pharmacy	$2,207,613	$2,069,922	$218.49	$190.30	29,185	28,995	$89.84	$78.76
Prof - Anesthesia	$20,208	$20,572	$2.00	$1.89	126	131	$190.64	$172.88
Prof - Child EPSDT	$6,644	$2,178	$0.66	$0.20	610	235	$12.93	$10.22
Prof - Evaluation & Management	$333,257	$362,998	$32.98	$33.37	5,992	5,883	$66.06	$68.08
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$123,005	$253,307	$12.17	$23.29	1,806	2,124	$80.87	$131.59
Prof - Psych	$97,835	$113,318	$9.68	$10.42	1,784	1,891	$65.14	$66.11
Prof - Specialist	$131,977	$108,036	$13.06	$9.93	1,222	1,129	$128.26	$105.61
Prof - Vision	$15,926	$14,930	$1.58	$1.37	184	183	$102.75	$89.94
Radiology	$47,455	$57,350	$4.70	$5.27	1,935	1,820	$29.13	$34.76
Transportation/Ambulance	$140,424	$144,981	$13.90	$13.33	12,254	13,121	$13.61	$12.19
Total	$6,423,340	$6,330,522	$635.72	$582.01				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 45 and Over								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	40,546	42,282						
Service Type								
DME/Supplies	$1,212,545	$1,359,085	$29.91	$32.14	3,206	3,660	$111.95	$105.40
FQHC / RHC	$399,543	$376,268	$9.85	$8.90	2,111	2,056	$56.02	$51.94
Home Health	$223,983	$299,836	$5.52	$7.09	147	188	$451.58	$452.24
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$11,714,629	$12,710,865	$288.92	$300.62	377	350	$9,202.38	$10,300.54
IP - Psych	$1,073,765	$1,163,030	$26.48	$27.51	285	230	$1,113.86	$1,435.84
Lab	$345,032	$383,819	$8.51	$9.08	9,813	9,896	$10.41	$11.01
OP - Emergency Room & Related	$1,837,856	$1,933,990	$45.33	$45.74	1,187	1,293	$458.43	$424.40
OP - Other	$6,864,466	$6,539,657	$169.30	$154.67	3,713	3,908	$547.14	$474.92
Pharmacy	$13,287,998	$15,108,155	$327.73	$357.32	72,178	74,202	$54.49	$57.79
Prof - Anesthesia	$183,035	$175,001	$4.51	$4.14	260	276	$208.47	$179.86
Prof - Child EPSDT	$25,758	$25,380	$0.64	$0.60	1,141	738	$6.68	$9.77
Prof - Evaluation & Management	$2,561,771	$2,799,459	$63.18	$66.21	11,456	11,657	$66.18	$68.16
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$1,339,238	$1,542,554	$33.03	$36.48	4,457	4,749	$88.94	$92.19
Prof - Psych	$369,058	$387,566	$9.10	$9.17	1,514	1,388	$72.12	$79.26
Prof - Specialist	$1,120,855	$1,163,523	$27.64	$27.52	2,889	2,800	$114.82	$117.92
Prof - Vision	$136,391	$158,214	$3.36	$3.74	606	600	$66.60	$74.81
Radiology	$614,028	$649,971	$15.14	$15.37	4,700	4,592	$38.66	$40.17
Transportation/Ambulance	$785,541	$816,252	$19.37	$19.30	14,910	15,460	$15.59	$14.98
Total	$44,095,494	$47,592,626	$1,087.54	$1,125.60				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

All Age Categories								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	93,389	95,862						
Service Type								
DME/Supplies	$2,372,235	$2,401,755	$25.40	$25.05	2,352	2,503	$129.61	$120.14
FQHC / RHC	$718,832	$686,921	$7.70	$7.17	1,702	1,600	$54.26	$53.73
Home Health	$431,949	$487,567	$4.63	$5.09	103	117	$537.25	$522.02
IP - Maternity	$181,038	$188,198	$1.94	$1.96	8	9	$2,785.20	$2,650.68
IP - Newborn	$55,467	$87,271	$0.59	$0.91	0	1	$18,489.04	$21,817.83
IP - Other	$17,926,558	$18,311,022	$191.96	$191.01	250	231	$9,226.23	$9,913.93
IP - Psych	$2,459,092	$2,581,232	$26.33	$26.93	256	253	$1,233.25	$1,279.10
Lab	$577,281	$635,774	$6.18	$6.63	6,984	7,003	$10.62	$11.36
OP - Emergency Room & Related	$3,602,078	$3,859,992	$38.57	$40.27	1,235	1,332	$374.63	$362.64
OP - Other	$10,778,360	$10,007,094	$115.41	$104.39	2,661	2,752	$520.42	$455.18
Pharmacy	$22,879,938	$24,889,068	$245.00	$259.63	45,893	47,361	$64.06	$65.78
Prof - Anesthesia	$311,104	$304,196	$3.33	$3.17	206	216	$194.08	$176.65
Prof - Child EPSDT	$83,841	$55,523	$0.90	$0.58	870	585	$12.39	$11.87
Prof - Evaluation & Management	$4,602,799	$4,981,349	$49.29	$51.96	8,858	9,018	$66.77	$69.14
Prof - Maternity	$92,000	$112,780	$0.99	$1.18	34	31	$351.14	$462.21
Prof - Other	$2,363,801	$2,696,639	$25.31	$28.13	3,241	3,534	$93.72	$95.51
Prof - Psych	$938,456	$991,565	$10.05	$10.34	1,759	1,759	$68.54	$70.56
Prof - Specialist	$1,671,326	$1,688,396	$17.90	$17.61	1,835	1,785	$117.03	$118.40
Prof - Vision	$226,858	$251,666	$2.43	$2.63	454	460	$64.23	$68.50
Radiology	$880,095	$939,995	$9.42	$9.81	3,098	3,087	$36.50	$38.12
Transportation/Ambulance	$1,343,013	$1,431,367	$14.38	$14.93	10,916	11,512	$15.81	$15.56
Total	$74,496,121	$77,589,370	$797.70	$809.39				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age Under 1								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	205	254						
Service Type								
DME/Supplies	$9,438	$10,109	$46.04	$39.80	3,337	3,827	$165.58	$124.80
FQHC / RHC	$83	$0	$0.41	$0.00	59	0	$83.48	-
Home Health	$0	$369	$0.00	$1.45	0	142	-	$122.85
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$8,604	$22,088	$41.97	$86.96	468	283	$1,075.45	$3,681.26
IP - Other	$47,871	$108,987	$233.52	$429.08	644	236	$4,351.95	$21,797.43
IP - Psych	$2,695	$3,046	$13.15	$11.99	0	0	-	-
Lab	$744	$1,051	$3.63	$4.14	2,166	3,213	$20.10	$15.46
OP - Emergency Room & Related	$10,683	$14,423	$52.11	$56.78	2,166	1,465	$288.74	$465.25
OP - Other	$37,921	$32,959	$184.98	$129.76	3,512	3,213	$632.01	$484.68
Pharmacy	$60,931	$89,406	$297.22	$351.99	12,395	15,786	$287.74	$267.57
Prof - Anesthesia	$1,917	$1,913	$9.35	$7.53	527	472	$213.00	$191.26
Prof - Child EPSDT	$1,200	$1,413	$5.85	$5.56	5,561	5,528	$12.63	$12.08
Prof - Evaluation & Management	$36,309	$37,274	$177.12	$146.75	24,351	18,094	$87.28	$97.32
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$24,168	$43,538	$117.89	$171.41	12,702	12,850	$111.38	$160.07
Prof - Psych	$928	$1,049	$4.53	$4.13	0	0	-	-
Prof - Specialist	$2,126	$6,261	$10.37	$24.65	1,580	1,795	$78.75	$164.76
Prof - Vision	$2,236	$2,884	$10.91	$11.35	2,224	1,984	$58.84	$68.66
Radiology	$986	$817	$4.81	$3.22	2,985	2,646	$19.34	$14.59
Transportation/Ambulance	$1,682	$1,049	$8.21	$4.13	7,551	3,685	$13.04	$13.45
Total	$250,524	$378,635	$1,222.07	$1,490.69				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 1-5								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	7,214	6,549						
Service Type								
DME/Supplies	$396,093	$333,967	$54.91	$51.00	3,540	3,971	$186.13	$154.11
FQHC / RHC	$1,509	$913	$0.21	$0.14	80	49	$31.44	$33.80
Home Health	$33,521	$100,902	$4.65	$15.41	77	181	$728.72	$1,019.21
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$805,442	$751,677	$111.65	$114.78	96	126	$13,886.93	$10,893.87
IP - Psych	$141,107	$110,905	$19.56	$16.93	53	48	$4,409.59	$4,265.58
Lab	$22,642	$20,337	$3.14	$3.11	2,545	2,364	$14.80	$15.77
OP - Emergency Room & Related	$223,223	$181,983	$30.94	$27.79	1,154	1,087	$321.65	$306.89
OP - Other	$1,415,787	$1,305,357	$196.26	$199.32	3,468	3,784	$679.03	$632.13
Pharmacy	$595,756	$666,079	$82.58	$101.71	10,175	11,571	$97.39	$105.48
Prof - Anesthesia	$30,413	$40,423	$4.22	$6.17	279	354	$181.03	$209.45
Prof - Child EPSDT	$10,104	$8,692	$1.40	$1.33	1,451	1,402	$11.59	$11.36
Prof - Evaluation & Management	$430,399	$406,533	$59.66	$62.08	8,407	8,757	$85.16	$85.07
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$653,126	$1,004,803	$90.54	$153.43	6,604	8,715	$164.52	$211.27
Prof - Psych	$47,405	$43,650	$6.57	$6.67	286	552	$275.61	$145.02
Prof - Specialist	$90,311	$103,040	$12.52	$15.73	988	913	$152.04	$206.91
Prof - Vision	$20,710	$18,794	$2.87	$2.87	571	583	$60.38	$59.10
Radiology	$14,614	$14,947	$2.03	$2.28	1,460	1,387	$16.64	$19.74
Transportation/Ambulance	$28,215	$28,479	$3.91	$4.35	2,382	2,538	$19.70	$20.56
Total	$4,960,376	$5,141,481	$687.60	$785.08				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 6-20								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	57,403	56,336						
Service Type								
DME/Supplies	$846,019	$735,754	$14.74	$13.06	888	983	$199.06	$159.43
FQHC / RHC	$26,197	$25,905	$0.46	$0.46	110	116	$49.90	$47.71
Home Health	$63,515	$25,686	$1.11	$0.46	22	10	$604.91	$524.21
IP - Maternity	$197,444	$158,506	$3.44	$2.81	13	11	$3,085.07	$3,107.96
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$3,141,363	$2,988,578	$54.72	$53.05	77	60	$8,513.18	$10,673.49
IP - Psych	$1,301,886	$1,359,791	$22.68	$24.14	236	222	$1,151.09	$1,304.98
Lab	$144,148	$134,402	$2.51	$2.39	2,454	2,344	$12.28	$12.21
OP - Emergency Room & Related	$1,424,279	$1,318,721	$24.81	$23.41	782	780	$380.72	$360.31
OP - Other	$3,731,931	$3,520,249	$65.01	$62.49	1,015	1,044	$768.84	$718.56
Pharmacy	$6,982,991	$7,439,680	$121.65	$132.06	12,525	13,080	$116.55	$121.16
Prof - Anesthesia	$103,502	$106,905	$1.80	$1.90	114	111	$189.56	$205.19
Prof - Child EPSDT	$37,798	$32,320	$0.66	$0.57	400	382	$19.76	$18.01
Prof - Evaluation & Management	$1,613,879	$1,605,123	$28.11	$28.49	4,381	4,363	$77.00	$78.36
Prof - Maternity	$100,128	$76,504	$1.74	$1.36	31	29	$681.14	$566.70
Prof - Other	$2,217,252	$2,264,769	$38.63	$40.20	2,162	2,287	$214.37	$210.89
Prof - Psych	$615,981	$630,308	$10.73	$11.19	2,250	2,409	$57.23	$55.73
Prof - Specialist	$312,869	$285,544	$5.45	$5.07	474	472	$137.95	$128.80
Prof - Vision	$94,187	$100,936	$1.64	$1.79	465	515	$42.35	$41.74
Radiology	$128,446	$128,986	$2.24	$2.29	867	859	$30.97	$31.98
Transportation/Ambulance	$246,330	$232,826	$4.29	$4.13	1,955	1,791	$26.34	$27.69
Total	$23,330,146	$23,171,494	$406.43	$411.31				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Female								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	29,081	29,074						
Service Type								
DME/Supplies	$574,273	$620,864	$19.75	$21.35	1,483	1,592	$159.79	$161.01
FQHC / RHC	$93,678	$117,744	$3.22	$4.05	766	783	$50.45	$62.10
Home Health	$61,801	$67,622	$2.13	$2.33	41	58	$624.25	$479.59
IP - Maternity	$511,826	$550,643	$17.60	$18.94	65	61	$3,260.04	$3,720.56
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$3,383,161	$3,549,412	$116.34	$122.08	218	202	$6,407.50	$7,243.70
IP - Psych	$904,843	$899,172	$31.11	$30.93	493	559	$757.19	$663.60
Lab	$149,866	$143,784	$5.15	$4.95	9,394	9,197	$6.58	$6.45
OP - Emergency Room & Related	$2,836,723	$3,004,822	$97.55	$103.35	2,347	2,436	$498.72	$509.21
OP - Other	$2,594,899	$2,758,101	$89.23	$94.86	1,375	1,339	$778.78	$849.95
Pharmacy	$6,715,713	$7,056,888	$230.93	$242.72	35,545	36,118	$77.96	$80.64
Prof - Anesthesia	$104,093	$116,720	$3.58	$4.01	286	307	$149.99	$156.88
Prof - Child EPSDT	$43,238	$47,995	$1.49	$1.65	773	662	$23.07	$29.94
Prof - Evaluation & Management	$1,742,832	$1,823,118	$59.93	$62.71	10,699	10,985	$67.22	$68.50
Prof - Maternity	$207,646	$223,554	$7.14	$7.69	171	193	$500.35	$477.68
Prof - Other	$1,064,684	$1,090,871	$36.61	$37.52	3,583	3,882	$122.62	$115.99
Prof - Psych	$351,966	$349,996	$12.10	$12.04	2,874	2,875	$50.54	$50.24
Prof - Specialist	$500,573	$544,321	$17.21	$18.72	1,698	1,743	$121.62	$128.89
Prof - Vision	$48,150	$50,847	$1.66	$1.75	270	265	$73.62	$79.32
Radiology	$330,123	$336,482	$11.35	$11.57	3,432	3,345	$39.69	$41.52
Transportation/Ambulance	$274,999	$278,462	$9.46	$9.58	13,716	13,293	$8.27	$8.65
Total	$22,495,085	$23,631,418	$773.53	$812.80				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Male								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	23,058	24,314						
Service Type								
DME/Supplies	$552,717	$558,109	$23.97	$22.95	1,562	1,585	$184.18	$173.76
FQHC / RHC	$61,091	$149,932	$2.65	$6.17	409	525	$77.82	$141.05
Home Health	$196,418	$82,240	$8.52	$3.38	182	103	$561.19	$395.38
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$3,220,170	$3,177,060	$139.66	$130.67	197	220	$8,518.97	$7,123.45
IP - Psych	$872,592	$817,095	$37.84	$33.61	827	756	$548.80	$533.35
Lab	$69,217	$61,956	$3.00	$2.55	4,948	4,461	$7.28	$6.85
OP - Emergency Room & Related	$1,300,583	$1,563,697	$56.40	$64.31	1,386	1,629	$488.39	$473.70
OP - Other	$1,696,562	$1,661,029	$73.58	$68.32	890	948	$991.56	$864.67
Pharmacy	$4,818,562	$5,204,404	$208.98	$214.05	23,026	23,850	$108.91	$107.70
Prof - Anesthesia	$45,849	$47,447	$1.99	$1.95	135	131	$177.02	$179.05
Prof - Child EPSDT	$43,887	$6,052	$1.90	$0.25	695	321	$32.87	$9.30
Prof - Evaluation & Management	$948,619	$1,028,162	$41.14	$42.29	7,418	7,368	$66.55	$68.87
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$959,922	$1,491,372	$41.63	$61.34	3,697	3,602	$135.14	$204.35
Prof - Psych	$227,466	$244,360	$9.86	$10.05	2,190	2,293	$54.04	$52.58
Prof - Specialist	$279,226	$257,101	$12.11	$10.57	1,109	1,045	$131.03	$121.39
Prof - Vision	$32,547	$38,397	$1.41	$1.58	187	193	$90.66	$98.20
Radiology	$115,450	$114,997	$5.01	$4.73	1,961	1,879	$30.63	$30.20
Transportation/Ambulance	$199,583	$223,999	$8.66	$9.21	16,536	15,297	$6.28	$7.23
Total	$15,640,460	$16,727,407	$678.31	$687.97				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 45 and Over								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	77,319	79,883						
Service Type								
DME/Supplies	$2,841,939	$2,908,113	$36.76	$36.40	3,393	3,747	$130.01	$116.59
FQHC / RHC	$702,836	$677,886	$9.09	$8.49	1,547	1,579	$70.53	$64.49
Home Health	$712,089	$620,648	$9.21	$7.77	218	171	$507.19	$544.91
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$20,287,249	$21,990,405	$262.38	$275.28	407	393	$7,743.22	$8,406.12
IP - Psych	$2,157,184	$2,087,357	$27.90	$26.13	464	412	$721.95	$761.25
Lab	$444,033	$426,711	$5.74	$5.34	11,736	10,513	$5.87	$6.10
OP - Emergency Room & Related	$6,287,361	$6,550,429	$81.32	$82.00	1,514	1,571	$644.33	$626.36
OP - Other	$13,001,126	$14,100,118	$168.15	$176.51	2,549	2,724	$791.64	$777.68
Pharmacy	$27,629,375	$32,497,755	$357.34	$406.82	66,855	68,017	$64.14	$71.77
Prof - Anesthesia	$375,160	$397,669	$4.85	$4.98	349	354	$166.66	$168.65
Prof - Child EPSDT	$78,332	$92,212	$1.01	$1.15	1,193	900	$10.19	$15.40
Prof - Evaluation & Management	$6,217,205	$6,557,989	$80.41	$82.09	14,146	14,010	$68.21	$70.32
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$5,651,023	$5,534,190	$73.09	$69.28	6,229	6,117	$140.80	$135.92
Prof - Psych	$745,723	$784,540	$9.64	$9.82	1,928	1,912	$60.03	$61.64
Prof - Specialist	$2,547,738	$2,617,655	$32.95	$32.77	3,077	3,018	$128.51	$130.31
Prof - Vision	$276,668	$287,123	$3.58	$3.59	636	592	$67.51	$72.89
Radiology	$1,336,343	$1,424,602	$17.28	$17.83	5,200	5,088	$39.88	$42.06
Transportation/Ambulance	$791,321	$796,678	$10.23	$9.97	19,703	18,101	$6.23	$6.61
Total	$92,082,704	$100,352,079	$1,190.95	$1,256.24				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

All Age Categories								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	194,280	196,410						
Service Type								
DME/Supplies	$5,220,479	$5,166,915	$26.87	$26.31	2,155	2,375	$149.63	$132.91
FQHC / RHC	$885,394	$972,379	$4.56	$4.95	814	858	$67.17	$69.26
Home Health	$1,067,344	$897,467	$5.49	$4.57	124	100	$532.61	$547.57
IP - Maternity	$709,270	$709,149	$3.65	$3.61	14	12	$3,209.37	$3,563.56
IP - Newborn	$8,604	$22,088	$0.04	$0.11	0	0	$1,075.45	$3,681.26
IP - Other	$30,885,257	$32,566,119	$158.97	$165.81	245	239	$7,791.44	$8,337.46
IP - Psych	$5,380,305	$5,277,367	$27.69	$26.87	428	409	$775.71	$788.02
Lab	$830,650	$788,241	$4.28	$4.01	7,486	6,945	$6.85	$6.93
OP - Emergency Room & Related	$12,082,852	$12,634,075	$62.19	$64.33	1,395	1,463	$535.09	$527.65
OP - Other	$22,478,225	$23,377,812	$115.70	$119.03	1,758	1,853	$789.68	$770.81
Pharmacy	$46,803,328	$52,954,212	$240.91	$269.61	38,752	40,121	$74.60	$80.64
Prof - Anesthesia	$660,933	$711,077	$3.40	$3.62	243	250	$168.30	$173.81
Prof - Child EPSDT	$214,559	$188,683	$1.10	$0.96	851	667	$15.57	$17.28
Prof - Evaluation & Management	$10,989,244	$11,458,200	$56.56	$58.34	9,744	9,803	$69.66	$71.41
Prof - Maternity	$307,774	$300,059	$1.58	$1.53	35	37	$547.64	$497.61
Prof - Other	$10,570,175	$11,429,544	$54.41	$58.19	4,352	4,472	$150.03	$156.17
Prof - Psych	$1,989,470	$2,053,902	$10.24	$10.46	2,133	2,197	$57.62	$57.13
Prof - Specialist	$3,732,844	$3,813,920	$19.21	$19.42	1,789	1,783	$128.89	$130.69
Prof - Vision	$474,497	$498,981	$2.44	$2.54	477	473	$61.50	$64.39
Radiology	$1,925,963	$2,020,831	$9.91	$10.29	3,130	3,093	$38.01	$39.91
Transportation/Ambulance	$1,542,129	$1,561,494	$7.94	$7.95	12,531	11,826	$7.60	$8.07
Total	$158,759,295	$169,402,514	$817.17	$862.49				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age Under 1								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	233	123						
Service Type								
DME/Supplies	$10,259	$4,471	$44.03	$36.35	4,790	3,122	$110.31	$139.73
FQHC / RHC	$54	$0	$0.23	$0.00	52	0	$54.33	-
Home Health	$367	$1,609	$1.57	$13.08	155	488	$122.25	$321.86
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$148,164	$1,124	$635.90	$9.14	155	98	$49,387.85	$1,123.70
IP - Other	$36,083	$25,795	$154.86	$209.72	258	585	$7,216.59	$4,299.24
IP - Psych	$0	$848	$0.00	$6.90	0	0	-	-
Lab	$718	$683	$3.08	$5.55	3,502	6,146	$10.56	$10.84
OP - Emergency Room & Related	$1,863	$1,501	$8.00	$12.20	979	683	$98.06	$214.43
OP - Other	$121,824	$19,556	$522.85	$158.99	2,833	3,317	$2,214.97	$575.18
Pharmacy	$117,789	$73,473	$505.53	$597.34	12,241	14,896	$495.56	$481.22
Prof - Anesthesia	$4,076	$631	$17.49	$5.13	618	390	$339.68	$157.65
Prof - Child EPSDT	$882	$450	$3.78	$3.66	5,047	4,390	$9.00	$10.01
Prof - Evaluation & Management	$34,087	$15,858	$146.30	$128.93	19,674	19,902	$89.23	$77.73
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$8,992	$23,531	$38.59	$191.31	11,021	18,634	$42.02	$123.20
Prof - Psych	$0	$292	$0.00	$2.38	0	0	-	-
Prof - Specialist	$9,549	$1,232	$40.98	$10.02	1,391	1,366	$353.67	$88.01
Prof - Vision	$832	$616	$3.57	$5.01	412	585	$103.98	$102.74
Radiology	$922	$537	$3.96	$4.37	4,687	2,439	$10.14	$21.49
Transportation/Ambulance	$2,733	$2,343	$11.73	$19.05	1,442	1,854	$97.61	$123.32
Total	$499,194	$174,553	$2,142.47	$1,419.13				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 1-5								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	3,863	4,340						
Service Type								
DME/Supplies	$165,293	$171,074	$42.79	$39.42	3,529	3,727	$145.50	$126.91
FQHC / RHC	$2,223	$1,925	$0.58	$0.44	193	152	$35.85	$35.01
Home Health	$8,524	$10,821	$2.21	$2.49	81	91	$327.83	$327.92
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$346,757	$720,949	$89.76	$166.12	130	202	$8,256.11	$9,876.01
IP - Psych	$107	$7,016	$0.03	$1.62	0	0	-	-
Lab	$25,309	$24,339	$6.55	$5.61	4,566	5,016	$17.22	$13.42
OP - Emergency Room & Related	$61,439	$56,894	$15.90	$13.11	1,103	1,081	$173.07	$145.51
OP - Other	$649,784	$738,160	$168.21	$170.08	2,445	2,480	$825.65	$822.92
Pharmacy	$671,581	$496,773	$173.85	$114.46	13,224	13,963	$157.76	$98.37
Prof - Anesthesia	$10,850	$25,014	$2.81	$5.76	280	412	$120.56	$167.88
Prof - Child EPSDT	$4,409	$5,819	$1.14	$1.34	1,457	1,529	$9.40	$10.52
Prof - Evaluation & Management	$201,287	$263,847	$52.11	$60.79	9,285	9,829	$67.34	$74.22
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$177,843	$607,964	$46.04	$140.08	6,735	9,727	$82.03	$172.82
Prof - Psych	$13,798	$11,253	$3.57	$2.59	736	401	$58.22	$77.61
Prof - Specialist	$38,331	$60,706	$9.92	$13.99	892	1,031	$133.56	$162.75
Prof - Vision	$16,044	$17,510	$4.15	$4.03	575	528	$86.73	$91.67
Radiology	$7,214	$13,986	$1.87	$3.22	1,184	1,750	$18.93	$22.09
Transportation/Ambulance	$24,881	$33,038	$6.44	$7.61	1,963	1,855	$39.37	$49.24
Total	$2,425,671	$3,267,089	$627.92	$752.79				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 6-20								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	12,600	17,563						
Service Type								
DME/Supplies	$242,401	$267,913	$19.24	$15.25	1,415	1,423	$163.12	$128.62
FQHC / RHC	$8,544	$30,895	$0.68	$1.76	215	192	$37.81	$109.95
Home Health	$5,717	$11,377	$0.45	$0.65	20	34	$272.23	$227.53
IP - Maternity	$19,706	$26,410	$1.56	$1.50	9	7	$2,189.60	$2,641.03
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,108,808	$635,428	$88.00	$36.18	80	55	$13,200.09	$7,942.85
IP - Psych	$198,329	$341,018	$15.74	$19.42	232	231	$812.83	$1,008.93
Lab	$79,494	$91,617	$6.31	$5.22	4,798	4,040	$15.78	$15.49
OP - Emergency Room & Related	$179,849	$238,363	$14.27	$13.57	907	851	$188.92	$191.46
OP - Other	$549,476	$577,597	$43.61	$32.89	800	767	$654.14	$514.33
Pharmacy	$1,817,114	$3,227,156	$144.22	$183.75	18,654	19,997	$92.77	$110.27
Prof - Anesthesia	$22,079	$24,810	$1.75	$1.41	142	111	$148.18	$153.15
Prof - Child EPSDT	$5,612	$6,099	$0.45	$0.35	311	279	$17.16	$14.91
Prof - Evaluation & Management	$391,727	$516,660	$31.09	$29.42	5,475	5,139	$68.14	$68.69
Prof - Maternity	$13,474	$14,025	$1.07	$0.80	18	16	$709.15	$584.38
Prof - Other	$551,077	$1,234,723	$43.74	$70.30	3,179	2,976	$165.09	$283.45
Prof - Psych	$141,350	$222,395	$11.22	$12.66	2,325	2,577	$57.91	$58.96
Prof - Specialist	$75,733	$88,292	$6.01	$5.03	858	698	$84.05	$86.48
Prof - Vision	$26,242	$36,276	$2.08	$2.07	152	243	$164.01	$101.90
Radiology	$36,580	$37,017	$2.90	$2.11	1,196	1,043	$29.12	$24.24
Transportation/Ambulance	$136,687	$96,239	$10.85	$5.48	1,225	924	$106.29	$71.18
Total	$5,609,999	$7,724,311	$445.24	$439.81				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Female								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	11,192	13,619						
Service Type								
DME/Supplies	$243,444	$253,268	$21.75	$18.60	1,888	1,787	$138.24	$124.89
FQHC / RHC	$34,628	$33,247	$3.09	$2.44	1,099	727	$33.78	$40.30
Home Health	$63,617	$47,520	$5.68	$3.49	145	112	$471.23	$374.17
IP - Maternity	$140,965	$137,216	$12.60	$10.08	47	40	$3,203.75	$3,049.25
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,512,315	$1,514,258	$135.12	$111.19	204	174	$7,959.55	$7,686.59
IP - Psych	$420,871	$636,466	$37.60	$46.73	550	681	$820.41	$823.37
Lab	$237,335	$242,211	$21.21	$17.78	15,244	13,283	$16.69	$16.07
OP - Emergency Room & Related	$642,723	$729,182	$57.43	$53.54	2,746	2,632	$250.97	$244.12
OP - Other	$883,249	$947,945	$78.92	$69.60	1,663	1,687	$569.47	$495.01
Pharmacy	$3,294,847	$4,291,411	$294.39	$315.10	56,787	56,632	$62.21	$66.77
Prof - Anesthesia	$36,654	$36,293	$3.28	$2.66	254	237	$154.66	$134.92
Prof - Child EPSDT	$11,150	$14,835	$1.00	$1.09	923	845	$12.95	$15.47
Prof - Evaluation & Management	$680,967	$832,303	$60.84	$61.11	11,628	11,242	$62.79	$65.23
Prof - Maternity	$73,805	$69,434	$6.59	$5.10	254	143	$311.41	$428.60
Prof - Other	$276,738	$220,338	$24.73	$16.18	4,444	3,672	$66.76	$52.88
Prof - Psych	$151,724	$188,417	$13.56	$13.83	3,056	3,053	$53.24	$54.38
Prof - Specialist	$222,518	$271,409	$19.88	$19.93	2,816	2,539	$84.74	$94.21
Prof - Vision	$23,329	$29,633	$2.08	$2.18	143	218	$175.41	$119.97
Radiology	$139,495	$152,424	$12.46	$11.19	4,405	4,073	$33.96	$32.98
Transportation/Ambulance	$203,944	$236,100	$18.22	$17.34	7,127	6,160	$30.68	$33.77
Total	$9,294,318	$10,883,909	$830.44	$799.17				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Male								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	7,753	9,715						
Service Type								
DME/Supplies	$119,205	$221,228	$15.38	$22.77	1,162	1,434	$158.73	$190.55
FQHC / RHC	$12,175	$13,128	$1.57	$1.35	528	394	$35.70	$41.15
Home Health	$40,852	$37,113	$5.27	$3.82	105	116	$600.76	$394.82
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$832,169	$1,205,069	$107.34	$124.04	132	170	$9,790.22	$8,732.39
IP - Psych	$278,044	$273,659	$35.86	$28.17	554	488	$776.66	$692.81
Lab	$76,595	$82,578	$9.88	$8.50	6,680	5,896	$17.75	$17.30
OP - Emergency Room & Related	$248,317	$326,743	$32.03	$33.63	1,452	1,517	$264.73	$266.08
OP - Other	$344,393	$395,022	$44.42	$40.66	845	840	$630.76	$580.91
Pharmacy	$1,837,690	$2,550,796	$237.03	$262.56	34,121	33,570	$83.36	$93.86
Prof - Anesthesia	$14,896	$13,525	$1.92	$1.39	159	120	$144.62	$139.44
Prof - Child EPSDT	$3,194	$2,023	$0.41	$0.21	531	405	$9.31	$6.17
Prof - Evaluation & Management	$273,751	$362,814	$35.31	$37.35	6,786	6,763	$62.44	$66.27
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$110,810	$183,465	$14.29	$18.88	3,077	3,317	$55.74	$68.33
Prof - Psych	$69,014	$83,368	$8.90	$8.58	1,922	1,769	$55.57	$58.22
Prof - Specialist	$108,944	$127,510	$14.05	$13.13	1,548	1,508	$108.94	$104.43
Prof - Vision	$15,348	$17,436	$1.98	$1.79	122	149	$194.28	$144.10
Radiology	$43,017	$55,887	$5.55	$5.75	2,379	2,442	$27.99	$28.27
Transportation/Ambulance	$108,545	$117,012	$14.00	$12.04	3,874	4,882	$43.37	$29.61
Total	$4,536,958	$6,068,375	$585.19	$624.64				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

Age 45 and Over								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	27,970	35,515						
Service Type								
DME/Supplies	$691,108	$895,880	$24.71	$25.23	3,337	3,492	$88.87	$86.69
FQHC / RHC	$74,507	$177,277	$2.66	$4.99	970	913	$32.95	$65.59
Home Health	$248,937	$308,034	$8.90	$8.67	266	270	$402.16	$385.52
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$8,194,906	$11,411,535	$292.99	$321.32	386	363	$9,105.45	$10,625.27
IP - Psych	$844,761	$919,120	$30.20	$25.88	462	343	$784.37	$906.43
Lab	$522,412	$598,771	$18.68	$16.86	13,872	12,827	$16.16	$15.77
OP - Emergency Room & Related	$1,149,403	$1,358,487	$41.09	$38.25	1,404	1,406	$351.18	$326.56
OP - Other	$2,928,548	$3,201,447	$104.70	$90.14	2,006	2,049	$626.43	$527.94
Pharmacy	$10,328,081	$14,717,418	$369.26	$414.40	78,792	81,955	$56.24	$60.68
Prof - Anesthesia	$91,252	$120,312	$3.26	$3.39	293	289	$133.61	$140.55
Prof - Child EPSDT	$17,732	$19,873	$0.63	$0.56	1,231	929	$6.18	$7.23
Prof - Evaluation & Management	$1,860,108	$2,390,297	$66.50	$67.30	12,396	11,836	$64.38	$68.23
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$1,078,653	$1,573,168	$38.56	$44.30	6,085	5,235	$76.05	$101.54
Prof - Psych	$172,383	$266,944	$6.16	$7.52	1,375	1,518	$53.77	$59.43
Prof - Specialist	$860,523	$1,061,562	$30.77	$29.89	3,731	3,299	$98.96	$108.72
Prof - Vision	$86,864	$117,162	$3.11	$3.30	323	430	$115.51	$91.96
Radiology	$366,676	$422,258	$13.11	$11.89	4,855	4,706	$32.40	$30.32
Transportation/Ambulance	$504,647	$655,202	$18.04	$18.45	7,768	6,608	$27.87	$33.50
Total	$30,021,504	$40,214,747	$1,073.35	$1,132.33				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

All Age Categories								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	63,611	80,875						
Service Type								
DME/Supplies	$1,471,710	$1,813,835	$23.14	$22.43	2,453	2,520	$113.17	$106.78
FQHC / RHC	$132,132	$256,471	$2.08	$3.17	739	621	$33.74	$61.31
Home Health	$368,012	$416,474	$5.79	$5.15	164	164	$422.03	$375.88
IP - Maternity	$160,672	$163,627	$2.53	$2.02	10	8	$3,031.54	$2,975.03
IP - Newborn	$148,164	$1,124	$2.33	$0.01	1	0	$49,387.85	$1,123.70
IP - Other	$12,031,038	$15,513,035	$189.13	$191.81	246	233	$9,212.13	$9,893.52
IP - Psych	$1,742,112	$2,178,128	$27.39	$26.93	414	374	$794.76	$864.34
Lab	$941,863	$1,040,199	$14.81	$12.86	10,837	9,734	$16.40	$15.86
OP - Emergency Room & Related	$2,283,594	$2,711,170	$35.90	$33.52	1,528	1,486	$281.99	$270.63
OP - Other	$5,477,273	$5,879,728	$86.11	$72.70	1,595	1,590	$647.89	$548.84
Pharmacy	$18,067,103	$25,357,029	$284.02	$313.53	53,338	54,673	$63.90	$68.82
Prof - Anesthesia	$179,808	$220,586	$2.83	$2.73	240	228	$141.14	$143.52
Prof - Child EPSDT	$42,979	$49,099	$0.68	$0.61	937	748	$8.65	$9.74
Prof - Evaluation & Management	$3,441,926	$4,381,778	$54.11	$54.18	10,044	9,577	$64.65	$67.89
Prof - Maternity	$87,278	$83,459	$1.37	$1.03	48	28	$340.93	$448.70
Prof - Other	$2,204,113	$3,843,189	$34.65	$47.52	4,912	4,512	$84.65	$126.38
Prof - Psych	$548,269	$772,670	$8.62	$9.55	1,882	1,974	$54.96	$58.07
Prof - Specialist	$1,315,598	$1,610,712	$20.68	$19.92	2,554	2,266	$97.19	$105.45
Prof - Vision	$168,659	$218,633	$2.65	$2.70	248	326	$128.06	$99.61
Radiology	$593,904	$682,108	$9.34	$8.43	3,526	3,370	$31.78	$30.03
Transportation/Ambulance	$981,437	$1,139,932	$15.43	$14.09	5,509	4,828	$33.61	$35.03
Total	$52,387,644	$68,332,985	$823.56	$844.92				

Virginia Medicaid

Exhibit 1b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD non-ALTC)

All Age Categories								
All Regions	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	677,358	713,377						
Service Type								
DME/Supplies	$16,357,367	$17,675,256	$24.15	$24.78	2,165	2,345	$133.83	$126.77
FQHC / RHC	$2,817,039	$3,061,340	$4.16	$4.29	928	892	$53.81	$57.71
Home Health	$3,104,163	$3,673,736	$4.58	$5.15	130	127	$424.24	$488.46
IP - Maternity	$2,062,392	$2,315,424	$3.04	$3.25	12	11	$3,110.70	$3,524.24
IP - Newborn	$617,715	$119,520	$0.91	$0.17	1	0	$19,303.58	$5,976.00
IP - Other	$128,283,468	$141,709,406	$189.39	$198.65	246	240	$9,237.67	$9,936.15
IP - Psych	$20,249,265	$21,181,246	$29.89	$29.69	414	398	$866.32	$894.55
Lab	$4,313,087	$4,557,765	$6.37	$6.39	7,744	7,441	$9.87	$10.30
OP - Emergency Room & Related	$32,910,652	$35,153,632	$48.59	$49.28	1,348	1,419	$432.52	$416.77
OP - Other	$70,675,484	$70,864,311	$104.34	$99.34	2,017	2,076	$620.81	$574.08
Pharmacy	$169,069,218	$196,356,880	$249.60	$275.25	42,772	44,351	$70.03	$74.47
Prof - Anesthesia	$2,123,647	$2,336,368	$3.14	$3.28	218	226	$172.79	$173.58
Prof - Child EPSDT	$520,785	$438,716	$0.77	$0.61	759	567	$12.16	$13.02
Prof - Evaluation & Management	$36,820,656	$40,790,780	$54.36	$57.18	9,512	9,702	$68.57	$70.72
Prof - Maternity	$897,944	$953,951	$1.33	$1.34	33	33	$484.33	$486.71
Prof - Other	$25,844,123	$30,361,692	$38.15	$42.56	4,025	4,140	$113.76	$123.36
Prof - Psych	$6,730,823	$7,389,987	$9.94	$10.36	2,002	2,058	$59.55	$60.42
Prof - Specialist	$12,816,322	$13,482,967	$18.92	$18.90	1,746	1,709	$130.08	$132.72
Prof - Vision	$1,706,637	$1,955,438	$2.52	$2.74	439	474	$68.92	$69.38
Radiology	$6,818,067	$7,259,324	$10.07	$10.18	3,176	3,184	$38.03	$38.35
Transportation/Ambulance	$8,063,133	$8,745,362	$11.90	$12.26	10,794	10,503	$13.23	$14.01
Total	$552,801,987	$610,383,100	$816.11	$855.62				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age Under 1								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	-	5						
Service Type								
DME/Supplies	$0	$3,991	$0.00	$798.13	0	31,200	-	$306.97
FQHC / RHC	$0	$0	$0.00	$0.00	0	0	-	-
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$0	$0	$0.00	$0.00	0	0	-	-
IP - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Lab	$0	$32	$0.00	$6.39	0	4,800	-	$15.98
OP - Emergency Room & Related	$0	$0	$0.00	$0.00	0	0	-	-
OP - Other	$0	$2,084	$0.00	$416.73	0	12,000	-	$416.73
Pharmacy	$0	$10,541	$0.00	$2,108.24	0	24,000	-	$1,054.12
Prof - Anesthesia	$0	$187	$0.00	$37.44	0	2,400	-	$187.21
Prof - Child EPSDT	$0	$33	$0.00	$6.60	0	7,200	-	$11.00
Prof - Evaluation & Management	$0	$1,011	$0.00	$202.29	0	26,400	-	$91.95
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$0	$135	$0.00	$27.03	0	21,600	-	$15.02
Prof - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Specialist	$0	$232	$0.00	$46.34	0	2,400	-	$231.71
Prof - Vision	$0	$5	$0.00	$1.07	0	0	-	-
Radiology	$0	$0	$0.00	$0.00	0	0	-	-
Transportation/Ambulance	$0	$13	$0.00	$2.64	0	0	-	-
Total	$0	$18,265	$0.00	$3,652.91				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 1-5								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	534	695						
Service Type								
DME/Supplies	$207,437	$320,634	$388.46	$461.34	25,079	30,354	$185.88	$182.39
FQHC / RHC	$0	$0	$0.00	$0.00	0	0	-	-
Home Health	$78,050	$21,708	$146.16	$31.24	1,213	242	$1,445.37	$1,550.60
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$219,733	$323,600	$411.49	$465.61	517	518	$9,553.61	$10,786.67
IP - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Lab	$2,290	$6,376	$4.29	$9.17	8,764	7,545	$5.87	$14.59
OP - Emergency Room & Related	$29,356	$49,309	$54.97	$70.95	1,596	1,830	$413.47	$465.18
OP - Other	$318,947	$228,472	$597.28	$328.74	8,899	7,683	$805.42	$513.42
Pharmacy	$186,594	$272,853	$349.43	$392.59	31,596	34,308	$132.71	$137.32
Prof - Anesthesia	$6,251	$12,537	$11.71	$18.04	697	984	$201.65	$219.95
Prof - Child EPSDT	$821	$1,031	$1.54	$1.48	2,000	1,640	$9.22	$10.85
Prof - Evaluation & Management	$70,322	$106,611	$131.69	$153.40	19,708	22,222	$80.18	$82.84
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$203,262	$1,103,096	$380.64	$1,587.19	11,573	35,447	$394.68	$537.31
Prof - Psych	$3,015	$2,450	$5.65	$3.53	1,146	639	$59.12	$66.22
Prof - Specialist	$9,741	$26,009	$18.24	$37.42	1,708	2,348	$128.18	$191.24
Prof - Vision	$3,358	$3,170	$6.29	$4.56	1,326	846	$56.91	$64.69
Radiology	$4,736	$7,403	$8.87	$10.65	5,011	5,767	$21.24	$22.16
Transportation/Ambulance	$2,985	$5,164	$5.59	$7.43	6,022	6,078	$11.14	$14.67
Total	$1,346,898	$2,490,424	$2,522.28	$3,583.34				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 6-20								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	1,163	1,640						
Service Type								
DME/Supplies	$283,651	$435,164	$243.90	$265.34	15,869	16,734	$184.43	$190.28
FQHC / RHC	$1,523	$1,966	$1.31	$1.20	279	241	$56.42	$59.56
Home Health	$1,045	$1,645	$0.90	$1.00	21	66	$522.50	$182.78
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$434,314	$584,041	$373.44	$356.12	279	307	$16,085.71	$13,905.75
IP - Psych	$34	$17,811	$0.03	$10.86	0	146	-	$890.53
Lab	$3,179	$4,093	$2.73	$2.50	3,312	4,998	$9.90	$5.99
OP - Emergency Room & Related	$43,608	$58,300	$37.50	$35.55	1,001	944	$449.56	$451.94
OP - Other	$385,332	$375,700	$331.33	$229.09	6,366	5,612	$624.53	$489.83
Pharmacy	$315,840	$526,994	$271.57	$321.34	29,386	31,434	$110.90	$122.67
Prof - Anesthesia	$10,258	$12,368	$8.82	$7.54	423	410	$250.19	$220.86
Prof - Child EPSDT	$657	$557	$0.56	$0.34	516	424	$13.14	$9.60
Prof - Evaluation & Management	$83,794	$133,584	$72.05	$81.45	10,721	11,868	$80.65	$82.36
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$211,070	$479,847	$181.49	$292.59	6,232	12,841	$349.45	$273.42
Prof - Psych	$4,030	$9,307	$3.47	$5.68	774	1,141	$53.74	$59.66
Prof - Specialist	$26,883	$27,782	$23.12	$16.94	980	1,024	$282.98	$198.44
Prof - Vision	$3,265	$5,946	$2.81	$3.63	516	754	$65.30	$57.73
Radiology	$4,878	$9,338	$4.19	$5.69	1,981	2,473	$25.41	$27.63
Transportation/Ambulance	$10,979	$15,299	$9.44	$9.33	5,004	6,117	$22.64	$18.30
Total	$1,824,342	$2,699,741	$1,568.65	$1,646.18				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Female								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	515	662						
Service Type								
DME/Supplies	$23,267	$67,615	$45.18	$102.14	3,938	6,326	$137.68	$193.74
FQHC / RHC	$0	$934	$0.00	$1.41	0	73	-	$233.48
Home Health	$2,185	$12,505	$4.24	$18.89	93	435	$546.25	$521.06
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$36,377	$239,714	$70.63	$362.11	140	471	$6,062.77	$9,219.75
IP - Psych	$5,462	$6,208	$10.61	$9.38	140	127	$910.29	$886.85
Lab	$1,918	$1,782	$3.72	$2.69	9,367	7,668	$4.77	$4.21
OP - Emergency Room & Related	$9,936	$65,686	$19.29	$99.22	396	2,393	$584.47	$497.62
OP - Other	$15,062	$33,019	$29.25	$49.88	606	943	$579.32	$634.99
Pharmacy	$218,699	$345,431	$424.66	$521.80	40,404	37,795	$126.12	$165.67
Prof - Anesthesia	$981	$2,533	$1.91	$3.83	210	363	$109.05	$126.63
Prof - Child EPSDT	$319	$984	$0.62	$1.49	466	671	$15.94	$26.59
Prof - Evaluation & Management	$21,367	$56,792	$41.49	$85.79	7,713	13,450	$64.55	$76.54
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$10,683	$25,711	$20.74	$38.84	4,008	3,335	$62.11	$139.74
Prof - Psych	$3,642	$5,011	$7.07	$7.57	1,864	1,613	$45.52	$56.30
Prof - Specialist	$4,622	$8,667	$8.97	$13.09	955	1,088	$112.72	$144.44
Prof - Vision	$710	$1,920	$1.38	$2.90	210	399	$78.85	$87.29
Radiology	$2,756	$6,465	$5.35	$9.77	1,538	4,677	$41.76	$25.06
Transportation/Ambulance	$1,823	$6,289	$3.54	$9.50	3,518	4,967	$12.08	$22.95
Total	$359,809	$887,266	$698.66	$1,340.28				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Male								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	564	775						
Service Type								
DME/Supplies	$25,288	$47,600	$44.84	$61.42	4,383	5,388	$122.76	$136.78
FQHC / RHC	$0	$0	$0.00	$0.00	0	0	-	-
Home Health	$4,692	$1,923	$8.32	$2.48	532	108	$187.69	$274.69
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$93,446	$238,089	$165.68	$307.21	319	232	$6,229.73	$15,872.58
IP - Psych	$0	$7,489	$0.00	$9.66	0	124	-	$936.07
Lab	$764	$1,466	$1.35	$1.89	2,766	4,150	$5.87	$5.47
OP - Emergency Room & Related	$9,176	$29,638	$16.27	$38.24	596	1,053	$327.73	$435.85
OP - Other	$11,020	$22,857	$19.54	$29.49	447	774	$524.75	$457.14
Pharmacy	$133,087	$178,680	$235.97	$230.55	30,787	31,788	$91.97	$87.03
Prof - Anesthesia	$1,098	$1,962	$1.95	$2.53	106	124	$219.56	$245.29
Prof - Child EPSDT	$82	$187	$0.15	$0.24	149	217	$11.78	$13.36
Prof - Evaluation & Management	$30,547	$47,000	$54.16	$60.65	9,383	9,507	$69.27	$76.55
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$7,274	$5,854	$12.90	$7.55	2,660	2,028	$58.20	$44.69
Prof - Psych	$3,791	$5,716	$6.72	$7.38	1,553	1,672	$51.93	$52.93
Prof - Specialist	$5,737	$3,592	$10.17	$4.64	809	790	$150.98	$70.44
Prof - Vision	$822	$873	$1.46	$1.13	255	62	$68.47	$218.28
Radiology	$2,703	$5,039	$4.79	$6.50	2,340	2,385	$24.57	$32.72
Transportation/Ambulance	$4,731	$5,827	$8.39	$7.52	20,043	18,317	$5.02	$4.93
Total	$334,259	$603,791	$592.66	$779.09				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 45 and Over								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	1,306	1,705						
Service Type								
DME/Supplies	$118,477	$212,068	$90.72	$124.38	9,115	12,282	$119.43	$121.53
FQHC / RHC	$356	$810	$0.27	$0.48	395	169	$8.28	$33.77
Home Health	$73,696	$98,089	$56.43	$57.53	1,112	1,633	$609.06	$422.80
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,007,467	$1,144,633	$771.41	$671.34	809	809	$11,448.49	$9,953.33
IP - Psych	$34	$23,161	$0.03	$13.58	0	190	-	$857.83
Lab	$8,822	$10,260	$6.75	$6.02	14,545	15,568	$5.57	$4.64
OP - Emergency Room & Related	$88,910	$124,718	$68.08	$73.15	1,194	1,422	$683.92	$617.41
OP - Other	$157,263	$261,045	$120.42	$153.11	2,417	3,737	$597.96	$491.61
Pharmacy	$548,524	$916,642	$420.00	$537.62	84,680	99,090	$59.52	$65.11
Prof - Anesthesia	$6,641	$15,238	$5.09	$8.94	368	591	$166.03	$181.40
Prof - Child EPSDT	$692	$667	$0.53	$0.39	478	422	$13.31	$11.11
Prof - Evaluation & Management	$193,412	$260,853	$148.09	$152.99	24,570	24,859	$72.33	$73.85
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$84,193	$94,296	$64.47	$55.31	7,562	7,756	$102.30	$85.57
Prof - Psych	$7,575	$8,894	$5.80	$5.22	1,240	1,126	$56.11	$55.59
Prof - Specialist	$40,682	$91,374	$31.15	$53.59	2,867	3,364	$130.39	$191.16
Prof - Vision	$7,035	$14,335	$5.39	$8.41	983	1,457	$65.75	$69.25
Radiology	$30,275	$44,690	$23.18	$26.21	7,314	7,489	$38.03	$42.00
Transportation/Ambulance	$14,459	$24,276	$11.07	$14.24	10,328	11,585	$12.86	$14.75
Total	$2,388,513	$3,346,049	$1,828.88	$1,962.49				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

All Age Categories								
Northern Virginia	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	4,082	5,482						
Service Type								
DME/Supplies	$658,121	$1,087,072	$161.23	$198.30	11,821	14,228	$163.67	$167.24
FQHC / RHC	$1,879	$3,710	$0.46	$0.68	206	134	$26.85	$60.82
Home Health	$159,668	$135,870	$39.12	$24.78	606	626	$775.09	$475.07
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,791,336	$2,530,077	$438.84	$461.52	467	499	$11,266.27	$11,096.83
IP - Psych	$5,530	$54,668	$1.35	$9.97	18	136	$921.66	$881.75
Lab	$16,973	$24,009	$4.16	$4.38	8,308	8,811	$6.01	$5.97
OP - Emergency Room & Related	$180,986	$327,651	$44.34	$59.77	1,008	1,394	$527.65	$514.37
OP - Other	$887,624	$923,177	$217.45	$168.40	3,889	4,050	$670.92	$499.01
Pharmacy	$1,402,744	$2,251,141	$343.64	$410.64	48,950	53,652	$84.24	$91.85
Prof - Anesthesia	$25,229	$44,825	$6.18	$8.18	370	495	$200.23	$198.34
Prof - Child EPSDT	$2,571	$3,458	$0.63	$0.63	641	584	$11.79	$12.95
Prof - Evaluation & Management	$399,442	$605,852	$97.85	$110.52	15,763	17,092	$74.49	$77.59
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$516,483	$1,708,939	$126.53	$311.74	6,582	11,457	$230.68	$326.51
Prof - Psych	$22,053	$31,378	$5.40	$5.72	1,217	1,204	$53.27	$57.05
Prof - Specialist	$87,665	$157,655	$21.48	$28.76	1,652	1,896	$155.99	$182.05
Prof - Vision	$15,189	$26,250	$3.72	$4.79	697	843	$64.09	$68.18
Radiology	$45,348	$72,934	$11.11	$13.30	4,077	4,702	$32.70	$33.95
Transportation/Ambulance	$34,978	$56,868	$8.57	$10.37	8,731	9,393	$11.78	$13.25
Total	$6,253,821	$10,045,536	$1,532.05	$1,832.46				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age Under 1								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	2	2						
Service Type								
DME/Supplies	$0	$1,347	$0.00	$673.28	0	96,000	-	$84.16
FQHC / RHC	$0	$0	$0.00	$0.00	0	0	-	-
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$0	$247,364	$0.00	$123,681.91	0	12,000	-	$123,681.91
IP - Psych	$68	$71	$34.11	$35.42	0	0	-	-
Lab	$20	$0	$9.97	$0.00	12,000	0	$9.97	-
OP - Emergency Room & Related	$0	$0	$0.00	$0.00	0	0	-	-
OP - Other	$0	$0	$0.00	$0.00	0	0	-	-
Pharmacy	$0	$4,508	$0.00	$2,254.22	0	18,000	-	$1,502.81
Prof - Anesthesia	$0	$229	$0.00	$114.58	0	6,000	-	$229.16
Prof - Child EPSDT	$44	$0	$22.00	$0.00	24,000	0	$11.00	-
Prof - Evaluation & Management	$82	$20,367	$41.05	$10,183.59	6,000	468,000	$82.09	$261.12
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$8,524	$1,154	$4,261.94	$577.01	18,000	66,000	$2,841.30	$104.91
Prof - Psych	$23	$24	$11.75	$12.20	0	0	-	-
Prof - Specialist	$1	$987	$0.55	$493.55	6,000	36,000	$1.09	$164.52
Prof - Vision	$2	$2	$1.13	$1.22	0	0	-	-
Radiology	$0	$632	$0.00	$315.84	0	468,000	-	$8.10
Transportation/Ambulance	$7	$7	$3.60	$3.71	0	0	-	-
Total	$8,772	$276,693	$4,386.09	$138,346.51				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 1-5								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	284	371						
Service Type								
DME/Supplies	$68,294	$66,267	$240.47	$178.62	14,155	13,197	$203.86	$162.42
FQHC / RHC	$17,615	$15,073	$62.03	$40.63	8,746	6,663	$85.10	$73.17
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$19,273	$99,881	$67.86	$269.22	380	291	$2,141.41	$11,097.84
IP - Psych	$4,500	$10,584	$15.84	$28.53	0	32	-	$10,584.02
Lab	$653	$3,337	$2.30	$8.99	2,366	3,914	$11.67	$27.58
OP - Emergency Room & Related	$9,155	$6,797	$32.24	$18.32	1,268	1,358	$305.18	$161.83
OP - Other	$33,630	$108,250	$118.42	$291.78	4,099	5,143	$346.70	$680.82
Pharmacy	$41,386	$85,526	$145.72	$230.53	19,648	22,900	$89.00	$120.80
Prof - Anesthesia	$1,267	$5,794	$4.46	$15.62	423	1,035	$126.68	$181.07
Prof - Child EPSDT	$182	$295	$0.64	$0.79	718	938	$10.71	$10.17
Prof - Evaluation & Management	$16,211	$33,283	$57.08	$89.71	9,423	12,162	$72.69	$88.52
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$19,781	$31,036	$69.65	$83.66	14,239	15,623	$58.70	$64.26
Prof - Psych	$2,176	$2,611	$7.66	$7.04	549	323	$167.41	$261.09
Prof - Specialist	$2,276	$12,622	$8.02	$34.02	676	1,941	$142.28	$210.37
Prof - Vision	$751	$1,755	$2.64	$4.73	423	873	$75.06	$65.02
Radiology	$2,311	$3,887	$8.14	$10.48	2,746	3,364	$35.55	$37.38
Transportation/Ambulance	$15,554	$8,347	$54.77	$22.50	3,211	4,011	$204.66	$67.31
Total	$255,015	$495,345	$897.94	$1,335.16				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 6-20								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	619	772						
Service Type								
DME/Supplies	$99,521	$68,891	$160.78	$89.24	9,208	7,788	$209.52	$137.51
FQHC / RHC	$834	$1,261	$1.35	$1.63	426	544	$37.91	$36.04
Home Health	$3,090	$0	$4.99	$0.00	155	0	$386.22	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$125,826	$60,904	$203.27	$78.89	252	140	$9,678.91	$6,767.15
IP - Psych	$8,826	$63,174	$14.26	$81.83	136	979	$1,260.86	$1,002.77
Lab	$2,594	$4,666	$4.19	$6.04	3,354	3,249	$14.99	$22.32
OP - Emergency Room & Related	$9,945	$11,507	$16.07	$14.91	562	591	$342.91	$302.82
OP - Other	$64,719	$61,377	$104.55	$79.50	3,935	3,948	$318.82	$241.64
Pharmacy	$114,599	$217,975	$185.14	$282.35	26,830	26,518	$82.80	$127.77
Prof - Anesthesia	$2,614	$1,543	$4.22	$2.00	310	249	$163.34	$96.45
Prof - Child EPSDT	$172	$193	$0.28	$0.25	291	451	$11.48	$6.67
Prof - Evaluation & Management	$27,424	$32,342	$44.30	$41.89	6,901	7,197	$77.03	$69.85
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$100,917	$94,015	$163.03	$121.78	6,998	12,528	$279.55	$116.64
Prof - Psych	$4,647	$7,692	$7.51	$9.96	1,532	2,456	$58.82	$48.69
Prof - Specialist	$9,288	$6,684	$15.00	$8.66	1,183	731	$152.26	$142.22
Prof - Vision	$2,586	$2,160	$4.18	$2.80	291	451	$172.37	$74.49
Radiology	$1,855	$2,379	$3.00	$3.08	1,939	1,663	$18.55	$22.23
Transportation/Ambulance	$13,528	$19,853	$21.86	$25.72	9,247	11,176	$28.36	$27.61
Total	$592,985	$656,619	$957.97	$850.54				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Female								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	251	396						
Service Type								
DME/Supplies	$19,666	$55,925	$78.35	$141.22	8,414	10,879	$111.74	$155.78
FQHC / RHC	$27,901	$1,466	$111.16	$3.70	14,104	1,485	$94.58	$29.92
Home Health	$5,533	$3,149	$22.05	$7.95	622	273	$425.65	$349.84
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$118,307	$178,866	$471.34	$451.68	765	697	$7,394.16	$7,776.77
IP - Psych	$13,508	$7,462	$53.82	$18.84	2,151	273	$300.19	$829.09
Lab	$3,465	$7,619	$13.80	$19.24	9,896	12,515	$16.74	$18.45
OP - Emergency Room & Related	$19,437	$20,863	$77.44	$52.68	2,438	2,152	$381.12	$293.85
OP - Other	$35,472	$164,349	$141.32	$415.02	3,729	6,939	$454.77	$717.68
Pharmacy	$116,757	$161,590	$465.17	$408.06	91,315	66,030	$61.13	$74.16
Prof - Anesthesia	$925	$2,280	$3.69	$5.76	287	394	$154.17	$175.42
Prof - Child EPSDT	$733	$580	$2.92	$1.46	908	667	$38.59	$26.36
Prof - Evaluation & Management	$18,999	$31,433	$75.70	$79.38	12,574	12,818	$72.24	$74.31
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$5,795	$23,467	$23.09	$59.26	4,924	10,242	$56.26	$69.43
Prof - Psych	$3,543	$5,031	$14.12	$12.70	2,151	2,273	$78.74	$67.08
Prof - Specialist	$5,293	$10,650	$21.09	$26.89	2,199	2,455	$115.07	$131.48
Prof - Vision	$322	$1,132	$1.28	$2.86	287	485	$53.68	$70.77
Radiology	$2,610	$9,639	$10.40	$24.34	4,112	5,394	$30.35	$54.15
Transportation/Ambulance	$5,423	$27,004	$21.60	$68.19	44,940	67,152	$5.77	$12.19
Total	$403,690	$712,504	$1,608.33	$1,799.25				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Male								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	341	425						
Service Type								
DME/Supplies	$8,915	$19,066	$26.14	$44.86	2,745	4,941	$114.29	$108.95
FQHC / RHC	$44,995	$41,675	$131.95	$98.06	11,824	12,169	$133.91	$96.69
Home Health	$0	$1,902	$0.00	$4.48	0	198	-	$271.78
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$14,342	$22,866	$42.06	$53.80	70	141	$7,171.00	$4,573.17
IP - Psych	$5,719	$7,052	$16.77	$16.59	70	0	$2,859.31	-
Lab	$1,288	$2,639	$3.78	$6.21	3,871	5,139	$11.71	$14.50
OP - Emergency Room & Related	$4,168	$9,681	$12.22	$22.78	528	819	$277.85	$333.81
OP - Other	$15,776	$28,856	$46.26	$67.90	1,548	1,271	$358.53	$641.25
Pharmacy	$98,255	$107,967	$288.14	$254.04	42,088	40,264	$82.15	$75.71
Prof - Anesthesia	$115	$374	$0.34	$0.88	70	56	$57.47	$186.82
Prof - Child EPSDT	$80	$2,590	$0.23	$6.09	211	678	$13.27	$107.91
Prof - Evaluation & Management	$5,782	$12,402	$16.96	$29.18	3,449	5,336	$59.00	$65.62
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$8,059	$13,062	$23.63	$30.74	3,836	4,094	$73.94	$90.09
Prof - Psych	$2,981	$4,668	$8.74	$10.98	1,760	1,412	$59.63	$93.36
Prof - Specialist	$957	$1,608	$2.81	$3.78	985	1,242	$34.17	$36.55
Prof - Vision	$564	$653	$1.65	$1.54	176	226	$112.83	$81.65
Radiology	$1,059	$735	$3.10	$1.73	669	1,016	$55.72	$20.41
Transportation/Ambulance	$3,804	$2,479	$11.15	$5.83	32,411	42,071	$4.13	$1.66
Total	$216,858	$280,276	$635.95	$659.47				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 45 and Over								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	741	997						
Service Type								
DME/Supplies	$155,578	$116,662	$209.96	$117.01	20,696	16,177	$121.74	$86.80
FQHC / RHC	$7,786	$6,450	$10.51	$6.47	2,737	1,119	$46.07	$69.36
Home Health	$41,104	$49,586	$55.47	$49.74	1,344	1,661	$495.23	$359.32
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$633,387	$1,369,267	$854.77	$1,373.39	939	1,673	$10,920.47	$9,850.84
IP - Psych	$43,175	$17,284	$58.27	$17.34	761	48	$918.62	$4,321.12
Lab	$14,838	$28,913	$20.02	$29.00	21,085	25,637	$11.40	$13.57
OP - Emergency Room & Related	$63,613	$62,020	$85.85	$62.21	2,073	1,829	$496.98	$408.03
OP - Other	$327,234	$431,830	$441.61	$433.13	4,356	4,959	$1,216.48	$1,048.13
Pharmacy	$445,148	$678,914	$600.74	$680.96	125,377	120,481	$57.50	$67.82
Prof - Anesthesia	$4,824	$5,587	$6.51	$5.60	389	349	$200.98	$192.67
Prof - Child EPSDT	$500	$652	$0.67	$0.65	1,377	1,372	$5.88	$5.72
Prof - Evaluation & Management	$82,243	$177,869	$110.99	$178.40	19,482	29,549	$68.37	$72.45
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$50,129	$70,076	$67.65	$70.29	10,186	14,913	$79.70	$56.56
Prof - Psych	$6,822	$11,144	$9.21	$11.18	1,328	1,805	$83.20	$74.29
Prof - Specialist	$31,806	$59,724	$42.92	$59.90	5,879	6,138	$87.62	$117.11
Prof - Vision	$3,396	$4,084	$4.58	$4.10	696	638	$78.98	$77.06
Radiology	$18,184	$34,579	$24.54	$34.68	8,356	12,169	$35.24	$34.20
Transportation/Ambulance	$39,529	$80,099	$53.34	$80.34	37,198	27,394	$17.21	$35.19
Total	$1,969,295	$3,204,741	$2,657.62	$3,214.38				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

All Age Categories								
Other MSA	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	2,238	2,963						
Service Type								
DME/Supplies	$351,973	$328,158	$157.27	$110.75	12,558	11,352	$150.29	$117.07
FQHC / RHC	$99,131	$65,926	$44.29	$22.25	5,517	3,297	$96.34	$80.99
Home Health	$49,727	$54,637	$22.22	$18.44	558	624	$478.15	$354.79
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$911,134	$1,979,147	$407.12	$667.95	525	757	$9,297.29	$10,583.67
IP - Psych	$75,796	$105,627	$33.87	$35.65	542	312	$750.45	$1,371.78
Lab	$22,858	$47,173	$10.21	$15.92	9,920	12,373	$12.36	$15.44
OP - Emergency Room & Related	$106,318	$110,868	$47.51	$37.42	1,357	1,345	$420.23	$333.94
OP - Other	$476,831	$794,662	$213.06	$268.20	3,705	4,451	$690.06	$723.08
Pharmacy	$816,146	$1,256,481	$364.68	$424.06	68,080	64,929	$64.28	$78.37
Prof - Anesthesia	$9,744	$15,808	$4.35	$5.34	311	377	$168.00	$169.98
Prof - Child EPSDT	$1,711	$4,310	$0.76	$1.45	783	883	$11.72	$19.77
Prof - Evaluation & Management	$150,742	$307,696	$67.36	$103.85	11,496	16,135	$70.31	$77.23
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$193,205	$232,811	$86.33	$78.57	8,268	12,239	$125.30	$77.04
Prof - Psych	$20,194	$31,171	$9.02	$10.52	1,442	1,794	$75.07	$70.36
Prof - Specialist	$49,622	$92,275	$22.17	$31.14	2,761	3,029	$96.35	$123.36
Prof - Vision	$7,621	$9,788	$3.41	$3.30	424	539	$96.46	$73.59
Radiology	$26,019	$51,850	$11.63	$17.50	4,214	6,132	$33.10	$34.25
Transportation/Ambulance	$77,845	$137,790	$34.78	$46.50	25,260	27,641	$16.52	$20.19
Total	$3,446,616	$5,626,178	$1,540.04	$1,898.81				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age Under 1								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	-	-						
Service Type								
DME/Supplies	$0	$0	$0.00	$0.00	0	0	-	-
FQHC / RHC	$0	$0	$0.00	$0.00	0	0	-	-
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$0	$0	$0.00	$0.00	0	0	-	-
IP - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Lab	$0	$0	$0.00	$0.00	0	0	-	-
OP - Emergency Room & Related	$0	$0	$0.00	$0.00	0	0	-	-
OP - Other	$0	$0	$0.00	$0.00	0	0	-	-
Pharmacy	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Anesthesia	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Child EPSDT	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Evaluation & Management	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Specialist	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Vision	$0	$0	$0.00	$0.00	0	0	-	-
Radiology	$0	$0	$0.00	$0.00	0	0	-	-
Transportation/Ambulance	$0	$0	$0.00	$0.00	0	0	-	-
Total	$0	$0	$0.00	$0.00				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 1-5								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	234	289						
Service Type								
DME/Supplies	$131,384	$123,490	$561.47	$427.30	45,692	36,955	$147.46	$138.75
FQHC / RHC	$0	$0	$0.00	$0.00	0	0	-	-
Home Health	$38,117	$39,632	$162.89	$137.13	4,974	3,114	$392.96	$528.42
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$116,242	$35,622	$496.76	$123.26	667	415	$8,941.72	$3,562.17
IP - Psych	$5,958	$2,485	$25.46	$8.60	308	0	$992.97	-
Lab	$1,596	$1,986	$6.82	$6.87	8,974	7,474	$9.12	$11.04
OP - Emergency Room & Related	$12,342	$14,976	$52.74	$51.82	2,359	1,246	$268.31	$499.21
OP - Other	$157,103	$139,039	$671.38	$481.10	15,385	13,495	$523.68	$427.81
Pharmacy	$82,023	$69,573	$350.53	$240.74	36,718	29,772	$114.56	$97.03
Prof - Anesthesia	$4,269	$2,716	$18.25	$9.40	923	623	$237.19	$181.09
Prof - Child EPSDT	$483	$345	$2.07	$1.19	1,949	1,536	$12.72	$9.32
Prof - Evaluation & Management	$28,852	$31,982	$123.30	$110.67	20,410	17,522	$72.49	$75.79
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$5,781	$84,987	$24.71	$294.07	4,615	14,242	$64.24	$247.78
Prof - Psych	$1,707	$1,512	$7.30	$5.23	1,128	457	$77.61	$137.45
Prof - Specialist	$14,492	$9,611	$61.93	$33.25	2,256	1,910	$329.36	$208.92
Prof - Vision	$1,323	$865	$5.66	$2.99	1,385	664	$49.02	$54.09
Radiology	$1,458	$2,064	$6.23	$7.14	3,846	3,779	$19.44	$22.68
Transportation/Ambulance	$1,672	$1,639	$7.15	$5.67	6,359	2,242	$13.49	$30.35
Total	$604,804	$562,524	$2,584.63	$1,946.45				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 6-20								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	1,204	1,739						
Service Type								
DME/Supplies	$200,287	$366,695	$166.35	$210.87	15,030	16,761	$132.82	$150.97
FQHC / RHC	$693	$3,904	$0.58	$2.24	219	428	$31.52	$62.96
Home Health	$13,379	$7,504	$11.11	$4.32	439	117	$304.07	$441.41
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$366,613	$343,134	$304.50	$197.32	199	228	$18,330.67	$10,398.01
IP - Psych	$19,845	$29,884	$16.48	$17.18	249	235	$793.81	$878.93
Lab	$3,322	$3,713	$2.76	$2.14	3,239	3,464	$10.22	$7.40
OP - Emergency Room & Related	$35,691	$46,864	$29.64	$26.95	817	773	$435.26	$418.43
OP - Other	$347,353	$259,882	$288.50	$149.44	6,239	4,513	$554.88	$397.37
Pharmacy	$279,621	$449,685	$232.24	$258.59	30,478	33,095	$91.44	$93.76
Prof - Anesthesia	$6,297	$8,691	$5.23	$5.00	259	262	$242.19	$228.71
Prof - Child EPSDT	$851	$711	$0.71	$0.41	429	276	$19.80	$17.78
Prof - Evaluation & Management	$60,344	$80,431	$50.12	$46.25	8,193	8,177	$73.41	$67.87
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$202,686	$291,706	$168.34	$167.74	7,794	7,963	$259.19	$252.78
Prof - Psych	$11,795	$23,193	$9.80	$13.34	2,312	2,526	$50.84	$63.37
Prof - Specialist	$21,397	$26,172	$17.77	$15.05	1,136	973	$187.69	$185.62
Prof - Vision	$3,442	$4,049	$2.86	$2.33	568	628	$60.39	$44.49
Radiology	$4,946	$6,189	$4.11	$3.56	2,791	1,905	$17.67	$22.43
Transportation/Ambulance	$10,823	$11,193	$8.99	$6.44	10,176	10,123	$10.60	$7.63
Total	$1,589,386	$1,963,601	$1,320.09	$1,129.16				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Female								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	645	908						
Service Type								
DME/Supplies	$118,578	$115,088	$183.84	$126.75	11,572	7,850	$190.64	$193.75
FQHC / RHC	$1,639	$4,741	$2.54	$5.22	744	1,044	$40.97	$60.02
Home Health	$29,818	$19,372	$46.23	$21.33	2,735	806	$202.84	$317.57
IP - Maternity	$6,950	$0	$10.77	$0.00	37	0	$3,474.86	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$217,062	$572,681	$336.53	$630.71	447	330	$9,044.24	$22,907.25
IP - Psych	$9,720	$18,202	$15.07	$20.05	93	40	$1,944.10	$6,067.28
Lab	$3,100	$4,713	$4.81	$5.19	6,530	6,938	$8.83	$8.98
OP - Emergency Room & Related	$26,748	$29,041	$41.47	$31.98	912	833	$545.89	$460.97
OP - Other	$68,055	$100,492	$105.51	$110.67	3,479	2,947	$363.93	$450.64
Pharmacy	$281,341	$342,105	$436.19	$376.77	60,205	53,577	$86.94	$84.39
Prof - Anesthesia	$4,747	$5,833	$7.36	$6.42	279	291	$316.45	$265.15
Prof - Child EPSDT	$4,921	$1,263	$7.63	$1.39	837	515	$109.36	$32.38
Prof - Evaluation & Management	$49,062	$56,874	$76.06	$62.64	13,879	11,709	$65.77	$64.19
Prof - Maternity	$1,875	$0	$2.91	$0.00	149	0	$234.34	-
Prof - Other	$28,591	$23,089	$44.33	$25.43	6,028	3,396	$88.25	$89.84
Prof - Psych	$7,904	$11,636	$12.25	$12.82	2,009	2,524	$73.18	$60.92
Prof - Specialist	$11,537	$27,650	$17.89	$30.45	1,693	1,573	$126.78	$232.35
Prof - Vision	$815	$2,694	$1.26	$2.97	112	185	$135.89	$192.46
Radiology	$8,279	$8,766	$12.84	$9.65	4,409	3,079	$34.93	$37.62
Transportation/Ambulance	$8,455	$14,384	$13.11	$15.84	34,381	34,573	$4.58	$5.50
Total	$889,195	$1,358,623	$1,378.60	$1,496.28				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Male								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	695	1,011						
Service Type								
DME/Supplies	$120,145	$175,568	$172.87	$173.66	7,062	9,294	$293.75	$224.23
FQHC / RHC	$97,560	$80,350	$140.37	$79.48	1,088	1,757	$1,548.57	$542.90
Home Health	$11,703	$22,970	$16.84	$22.72	1,053	1,033	$191.85	$264.03
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$681,895	$460,861	$981.14	$455.85	380	368	$30,995.23	$14,866.49
IP - Psych	$13,763	$25,875	$19.80	$25.59	86	202	$2,752.58	$1,522.08
Lab	$2,585	$2,778	$3.72	$2.75	14,590	4,178	$3.06	$7.89
OP - Emergency Room & Related	$24,864	$26,428	$35.78	$26.14	846	1,116	$507.43	$281.15
OP - Other	$545,441	$243,117	$784.81	$240.47	3,678	3,549	$2,560.76	$813.10
Pharmacy	$185,618	$249,113	$267.08	$246.40	43,304	46,896	$74.01	$63.05
Prof - Anesthesia	$2,053	$3,003	$2.95	$2.97	155	190	$228.14	$187.68
Prof - Child EPSDT	$130	$572	$0.19	$0.57	173	760	$13.01	$8.93
Prof - Evaluation & Management	$46,633	$57,988	$67.10	$57.36	11,275	10,089	$71.41	$68.22
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$34,011	$37,089	$48.94	$36.69	5,629	4,190	$104.33	$105.07
Prof - Psych	$7,262	$13,313	$10.45	$13.17	1,847	2,255	$67.87	$70.07
Prof - Specialist	$21,253	$20,274	$30.58	$20.05	2,124	1,460	$172.79	$164.83
Prof - Vision	$863	$689	$1.24	$0.68	121	59	$123.33	$137.82
Radiology	$5,917	$5,368	$8.51	$5.31	3,471	2,481	$29.44	$25.69
Transportation/Ambulance	$12,198	$22,032	$17.55	$21.79	31,787	26,979	$6.63	$9.69
Total	$1,813,894	$1,447,391	$2,609.92	$1,431.64				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 45 and Over								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	1,984	2,563						
Service Type								
DME/Supplies	$467,239	$573,099	$235.50	$223.60	21,423	20,409	$131.91	$131.47
FQHC / RHC	$22,561	$24,897	$11.37	$9.71	1,452	1,409	$94.00	$82.72
Home Health	$160,000	$119,549	$80.65	$46.64	3,823	2,107	$253.16	$265.66
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,978,304	$3,059,342	$997.13	$1,193.66	1,034	1,189	$11,569.03	$12,044.65
IP - Psych	$62,094	$90,466	$31.30	$35.30	278	407	$1,349.86	$1,039.84
Lab	$17,904	$17,956	$9.02	$7.01	14,728	13,760	$7.35	$6.11
OP - Emergency Room & Related	$184,654	$266,017	$93.07	$103.79	1,694	1,774	$659.48	$701.89
OP - Other	$717,281	$877,645	$361.53	$342.43	7,264	7,674	$597.24	$535.48
Pharmacy	$1,051,377	$1,461,912	$529.93	$570.39	104,776	110,908	$60.69	$61.72
Prof - Anesthesia	$11,268	$19,935	$5.68	$7.78	321	454	$212.59	$205.51
Prof - Child EPSDT	$3,743	$8,535	$1.89	$3.33	5,673	534	$3.99	$74.87
Prof - Evaluation & Management	$297,232	$422,535	$149.81	$164.86	25,966	27,502	$69.24	$71.93
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$322,900	$430,430	$162.75	$167.94	17,625	16,373	$110.81	$123.09
Prof - Psych	$16,512	$28,681	$8.32	$11.19	1,179	1,952	$84.68	$68.78
Prof - Specialist	$127,064	$155,924	$64.04	$60.84	3,780	3,643	$203.30	$200.42
Prof - Vision	$9,540	$11,038	$4.81	$4.31	883	707	$65.34	$73.10
Radiology	$47,367	$81,451	$23.87	$31.78	8,825	9,748	$32.47	$39.12
Transportation/Ambulance	$64,621	$109,719	$32.57	$42.81	42,671	36,370	$9.16	$14.12
Total	$5,561,660	$7,759,129	$2,803.26	$3,027.36				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

All Age Categories								
Richmond/Charlottesville	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	4,762	6,510						
Service Type								
DME/Supplies	$1,037,632	$1,353,940	$217.90	$207.98	17,569	16,691	$148.83	$149.52
FQHC / RHC	$122,453	$113,892	$25.71	$17.49	920	1,088	$335.49	$193.04
Home Health	$253,016	$209,027	$53.13	$32.11	2,472	1,272	$257.92	$302.94
IP - Maternity	$6,950	$0	$1.46	$0.00	5	0	$3,474.86	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$3,360,117	$4,471,640	$705.61	$686.89	630	651	$13,440.47	$12,667.54
IP - Psych	$111,380	$166,912	$23.39	$25.64	219	260	$1,280.23	$1,183.77
Lab	$28,507	$31,146	$5.99	$4.78	10,410	8,291	$6.90	$6.92
OP - Emergency Room & Related	$284,300	$383,327	$59.70	$58.88	1,275	1,250	$561.86	$565.38
OP - Other	$1,835,232	$1,620,175	$385.39	$248.87	6,368	5,788	$726.25	$515.98
Pharmacy	$1,879,980	$2,572,388	$394.79	$395.14	67,638	68,582	$70.04	$69.14
Prof - Anesthesia	$28,634	$40,178	$6.01	$6.17	305	347	$236.64	$213.71
Prof - Child EPSDT	$10,129	$11,426	$2.13	$1.76	2,706	542	$9.43	$38.86
Prof - Evaluation & Management	$482,123	$649,810	$101.24	$99.82	17,418	16,990	$69.75	$70.50
Prof - Maternity	$1,875	$0	$0.39	$0.00	20	0	$234.34	-
Prof - Other	$593,970	$867,301	$124.73	$133.23	11,178	10,330	$133.90	$154.76
Prof - Psych	$45,180	$78,335	$9.49	$12.03	1,673	2,166	$68.04	$66.67
Prof - Specialist	$195,742	$239,630	$41.10	$36.81	2,512	2,225	$196.33	$198.53
Prof - Vision	$15,985	$19,336	$3.36	$2.97	612	511	$65.78	$69.80
Radiology	$67,967	$103,838	$14.27	$15.95	5,675	5,329	$30.18	$35.92
Transportation/Ambulance	$97,768	$158,967	$20.53	$24.42	29,960	26,135	$8.22	$11.21
Total	$10,458,940	$13,091,268	$2,196.33	$2,010.95				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age Under 1								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	-	4						
Service Type								
DME/Supplies	$0	$4,052	$0.00	$1,013.04	0	15,000	-	$810.43
FQHC / RHC	$0	$0	$0.00	$0.00	0	0	-	-
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$0	($0)	$0.00	($0.00)	0	0	-	-
IP - Psych	$0	$142	$0.00	$35.42	0	0	-	-
Lab	$0	$6	$0.00	$1.61	0	6,000	-	$3.22
OP - Emergency Room & Related	$0	$30	$0.00	$7.50	0	3,000	-	$30.00
OP - Other	$0	$1,948	$0.00	$487.01	0	9,000	-	$649.34
Pharmacy	$0	$516	$0.00	$129.02	0	39,000	-	$39.70
Prof - Anesthesia	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Child EPSDT	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Evaluation & Management	$0	$996	$0.00	$248.88	0	33,000	-	$90.50
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$0	$2,485	$0.00	$621.23	0	15,000	-	$496.98
Prof - Psych	$0	$49	$0.00	$12.20	0	0	-	-
Prof - Specialist	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Vision	$0	$5	$0.00	$1.22	0	6,000	-	$2.44
Radiology	$0	$36	$0.00	$9.06	0	6,000	-	$18.12
Transportation/Ambulance	$0	$15	$0.00	$3.71	0	36,000	-	$1.24
Total	$0	$10,280	$0.00	$2,569.89				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 1-5								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	195	239						
Service Type								
DME/Supplies	$54,413	$80,040	$279.04	$334.90	25,169	27,967	$133.04	$143.70
FQHC / RHC	$697	$1,706	$3.57	$7.14	1,108	1,607	$38.70	$53.33
Home Health	$2,962	$3,146	$15.19	$13.16	1,415	904	$128.77	$174.79
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$211,741	$172,071	$1,085.85	$719.96	677	904	$19,249.18	$9,559.47
IP - Psych	$2,763	$4,002	$14.17	$16.75	0	0	-	-
Lab	$1,381	$2,854	$7.08	$11.94	6,031	5,021	$14.09	$28.54
OP - Emergency Room & Related	$7,746	$13,818	$39.72	$57.82	1,477	1,607	$322.75	$431.82
OP - Other	$60,191	$121,455	$308.67	$508.18	8,862	10,745	$417.99	$567.55
Pharmacy	$88,020	$70,315	$451.38	$294.21	30,277	30,226	$178.90	$116.80
Prof - Anesthesia	$2,201	$4,671	$11.29	$19.54	677	1,155	$200.11	$203.08
Prof - Child EPSDT	$358	$281	$1.84	$1.18	1,600	1,506	$13.77	$9.37
Prof - Evaluation & Management	$21,209	$22,440	$108.76	$93.89	18,954	15,264	$68.86	$73.81
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$25,742	$20,001	$132.01	$83.69	15,877	10,293	$99.78	$97.57
Prof - Psych	$1,414	$2,113	$7.25	$8.84	615	753	$141.38	$140.85
Prof - Specialist	$4,691	$8,166	$24.06	$34.17	1,785	1,707	$161.76	$240.18
Prof - Vision	$724	$445	$3.72	$1.86	431	100	$103.49	$222.69
Radiology	$1,197	$5,844	$6.14	$24.45	3,815	5,975	$19.31	$49.11
Transportation/Ambulance	$2,669	$1,598	$13.69	$6.69	8,062	14,711	$20.37	$5.45
Total	$490,118	$534,968	$2,513.43	$2,238.36				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 6-20								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	668	786						
Service Type								
DME/Supplies	$125,868	$168,684	$188.43	$214.61	15,719	13,420	$143.85	$191.90
FQHC / RHC	$11,403	$78,639	$17.07	$100.05	1,814	656	$112.90	$1,828.81
Home Health	$29,781	$30	$44.58	$0.04	305	15	$1,751.80	$30.00
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$126,396	$211,955	$189.22	$269.66	198	183	$11,490.54	$17,662.92
IP - Psych	$11,863	$21,299	$17.76	$27.10	18	275	$11,862.76	$1,183.26
Lab	$2,119	$3,159	$3.17	$4.02	3,593	4,443	$10.59	$10.86
OP - Emergency Room & Related	$10,484	$7,054	$15.69	$8.97	772	580	$243.81	$185.62
OP - Other	$103,963	$59,345	$155.63	$75.50	4,186	4,061	$446.19	$223.10
Pharmacy	$130,138	$263,581	$194.82	$335.35	27,000	29,176	$86.59	$137.93
Prof - Anesthesia	$3,942	$2,840	$5.90	$3.61	305	275	$231.87	$157.75
Prof - Child EPSDT	$300	$389	$0.45	$0.50	323	458	$16.66	$12.97
Prof - Evaluation & Management	$30,597	$37,695	$45.80	$47.96	7,850	8,565	$70.02	$67.19
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$19,996	$19,259	$29.93	$24.50	4,994	3,191	$71.93	$92.15
Prof - Psych	$6,625	$7,216	$9.92	$9.18	1,204	1,206	$98.89	$91.34
Prof - Specialist	$13,567	$10,554	$20.31	$13.43	1,204	1,038	$202.49	$155.20
Prof - Vision	$1,775	$1,279	$2.66	$1.63	647	382	$49.31	$51.15
Radiology	$2,604	$2,784	$3.90	$3.54	2,443	1,908	$19.15	$22.27
Transportation/Ambulance	$14,253	$4,817	$21.34	$6.13	8,246	5,359	$31.05	$13.72
Total	$645,673	$900,579	$966.58	$1,145.77				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Female								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	389	451						
Service Type								
DME/Supplies	$43,224	$30,189	$111.12	$66.94	10,026	9,180	$133.00	$87.50
FQHC / RHC	$12,355	$3,151	$31.76	$6.99	3,393	1,996	$112.31	$42.01
Home Health	$2,306	$2,675	$5.93	$5.93	494	373	$144.10	$191.04
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$147,936	$208,454	$380.30	$462.20	802	931	$5,689.85	$5,955.81
IP - Psych	$7,293	$8,411	$18.75	$18.65	308	186	$729.35	$1,201.60
Lab	$2,839	$1,761	$7.30	$3.91	4,411	4,843	$19.85	$9.68
OP - Emergency Room & Related	$17,310	$40,043	$44.50	$88.79	1,357	1,490	$393.41	$715.05
OP - Other	$44,045	$204,389	$113.23	$453.19	5,429	6,705	$250.25	$811.07
Pharmacy	$189,838	$251,830	$488.01	$558.38	53,121	52,976	$110.24	$126.48
Prof - Anesthesia	$2,367	$1,663	$6.08	$3.69	308	346	$236.68	$127.94
Prof - Child EPSDT	$184	$79	$0.47	$0.18	617	532	$9.19	$3.97
Prof - Evaluation & Management	$26,087	$41,464	$67.06	$91.94	11,877	15,246	$67.76	$72.36
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$5,239	$14,364	$13.47	$31.85	2,622	6,652	$61.63	$57.46
Prof - Psych	$2,611	$3,307	$6.71	$7.33	956	585	$84.22	$150.34
Prof - Specialist	$5,836	$14,160	$15.00	$31.40	1,728	1,969	$104.22	$191.36
Prof - Vision	$248	$800	$0.64	$1.77	185	239	$41.30	$88.92
Radiology	$2,256	$5,247	$5.80	$11.63	2,931	4,417	$23.75	$31.61
Transportation/Ambulance	$24,599	$27,977	$63.24	$62.03	42,139	35,574	$18.01	$20.92
Total	$536,571	$859,964	$1,379.36	$1,906.79				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Male								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	386	483						
Service Type								
DME/Supplies	$31,647	$40,161	$81.99	$83.15	8,984	8,497	$109.50	$117.43
FQHC / RHC	$27,399	$411	$70.98	$0.85	8,580	348	$99.27	$29.33
Home Health	$557	$540	$1.44	$1.12	93	50	$185.80	$270.06
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$152,691	$44,310	$395.57	$91.74	497	174	$9,543.21	$6,330.06
IP - Psych	$24,543	$19,988	$63.58	$41.38	870	547	$876.52	$908.56
Lab	$2,689	$2,343	$6.97	$4.85	7,057	5,317	$11.84	$10.95
OP - Emergency Room & Related	$13,975	$8,579	$36.20	$17.76	777	820	$559.00	$259.98
OP - Other	$148,293	$45,732	$384.18	$94.68	3,109	2,708	$1,482.93	$419.56
Pharmacy	$101,178	$131,317	$262.12	$271.88	42,373	37,019	$74.23	$88.13
Prof - Anesthesia	$466	$561	$1.21	$1.16	93	99	$155.45	$140.27
Prof - Child EPSDT	$74	$79	$0.19	$0.16	249	224	$9.23	$8.78
Prof - Evaluation & Management	$18,001	$20,783	$46.64	$43.03	8,021	8,000	$69.77	$64.54
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$3,400	$2,443	$8.81	$5.06	1,803	1,391	$58.63	$43.62
Prof - Psych	$5,252	$5,760	$13.61	$11.92	3,171	2,907	$51.49	$49.23
Prof - Specialist	$2,483	$2,746	$6.43	$5.69	1,026	1,317	$75.25	$51.81
Prof - Vision	$511	$352	$1.32	$0.73	124	0	$127.63	-
Radiology	$2,430	$2,133	$6.30	$4.42	1,896	1,839	$39.84	$28.82
Transportation/Ambulance	$4,553	$4,308	$11.80	$8.92	19,244	40,894	$7.36	$2.62
Total	$540,142	$332,546	$1,399.33	$688.50				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 45 and Over								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	996	1,341						
Service Type								
DME/Supplies	$131,078	$231,213	$131.60	$172.42	13,699	17,754	$115.28	$116.54
FQHC / RHC	$24,328	$33,923	$24.43	$25.30	4,771	5,092	$61.43	$59.62
Home Health	$82,766	$72,075	$83.10	$53.75	843	734	$1,182.37	$878.97
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,020,915	$1,025,257	$1,025.01	$764.55	976	984	$12,603.88	$9,320.51
IP - Psych	$36,915	$22,965	$37.06	$17.13	783	72	$567.92	$2,870.59
Lab	$8,890	$12,722	$8.93	$9.49	14,470	12,644	$7.40	$9.00
OP - Emergency Room & Related	$68,190	$147,678	$68.46	$110.13	1,566	2,407	$524.54	$548.99
OP - Other	$272,533	$528,378	$273.63	$394.02	6,578	9,029	$499.14	$523.67
Pharmacy	$554,853	$777,583	$557.08	$579.85	111,687	114,872	$59.85	$60.57
Prof - Anesthesia	$6,977	$9,109	$7.01	$6.79	446	474	$188.57	$171.86
Prof - Child EPSDT	$697	$707	$0.70	$0.53	1,145	993	$7.33	$6.37
Prof - Evaluation & Management	$128,251	$181,533	$128.77	$135.37	21,482	22,864	$71.93	$71.05
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$45,279	$85,308	$45.46	$63.62	7,422	7,391	$73.50	$103.28
Prof - Psych	$8,510	$10,753	$8.54	$8.02	1,120	805	$91.50	$119.47
Prof - Specialist	$51,540	$71,813	$51.75	$53.55	5,024	4,609	$123.60	$139.44
Prof - Vision	$4,555	$6,048	$4.57	$4.51	819	671	$66.98	$80.64
Radiology	$28,458	$32,730	$28.57	$24.41	9,711	8,940	$35.31	$32.76
Transportation/Ambulance	$28,252	$53,847	$28.37	$40.15	18,072	25,047	$18.83	$19.24
Total	$2,502,985	$3,303,642	$2,513.04	$2,463.57				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

All Age Categories								
Rural	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	2,634	3,304						
Service Type								
DME/Supplies	$386,230	$554,340	$146.63	$167.78	13,827	14,935	$127.26	$134.81
FQHC / RHC	$76,181	$117,829	$28.92	$35.66	4,105	2,662	$84.55	$160.75
Home Health	$118,371	$78,466	$44.94	$23.75	588	425	$917.61	$670.65
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,659,679	$1,662,046	$630.10	$503.04	661	661	$11,446.06	$9,132.12
IP - Psych	$83,377	$76,807	$31.65	$23.25	474	200	$801.70	$1,396.49
Lab	$17,916	$22,847	$6.80	$6.92	8,515	7,998	$9.59	$10.38
OP - Emergency Room & Related	$117,705	$217,202	$44.69	$65.74	1,212	1,558	$442.50	$506.30
OP - Other	$629,025	$961,247	$238.81	$290.93	5,462	6,730	$524.62	$518.75
Pharmacy	$1,064,026	$1,495,143	$403.96	$452.53	65,376	68,441	$74.15	$79.34
Prof - Anesthesia	$15,953	$18,843	$6.06	$5.70	355	403	$204.53	$169.76
Prof - Child EPSDT	$1,612	$1,535	$0.61	$0.46	761	726	$9.65	$7.68
Prof - Evaluation & Management	$224,145	$304,910	$85.10	$92.29	14,446	15,712	$70.69	$70.48
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$99,656	$143,860	$37.83	$43.54	5,900	5,633	$76.95	$92.75
Prof - Psych	$24,411	$29,197	$9.27	$8.84	1,380	1,173	$80.56	$90.39
Prof - Specialist	$78,117	$107,440	$29.66	$32.52	2,743	2,702	$129.76	$144.41
Prof - Vision	$7,813	$8,929	$2.97	$2.70	551	410	$64.57	$79.02
Radiology	$36,945	$48,774	$14.03	$14.76	5,285	5,393	$31.85	$32.84
Transportation/Ambulance	$74,326	$92,561	$28.22	$28.01	18,565	23,383	$18.24	$14.38
Total	$4,715,490	$5,941,978	$1,790.24	$1,798.42				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age Under 1								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	2	5						
Service Type								
DME/Supplies	$421	$392	$210.45	$78.36	24,000	9,600	$105.23	$97.95
FQHC / RHC	$0	$0	$0.00	$0.00	0	0	-	-
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,409	$2,361	$704.35	$472.14	6,000	2,400	$1,408.70	$2,360.72
IP - Psych	$68	$106	$34.11	$21.25	0	0	-	-
Lab	$5	$47	$2.71	$9.38	6,000	9,600	$5.41	$11.73
OP - Emergency Room & Related	$0	$0	$0.00	$0.00	0	0	-	-
OP - Other	$1,183	$708	$591.36	$141.60	18,000	4,800	$394.24	$354.01
Pharmacy	$1,267	$235	$633.66	$46.94	60,000	38,400	$126.73	$14.67
Prof - Anesthesia	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Child EPSDT	$33	$55	$16.50	$11.00	18,000	12,000	$11.00	$11.00
Prof - Evaluation & Management	$1,514	$2,334	$756.77	$466.79	96,000	67,200	$94.60	$83.35
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$13,322	$13,271	$6,660.97	$2,654.14	288,000	129,600	$277.54	$245.75
Prof - Psych	$23	$37	$11.75	$7.32	0	0	-	-
Prof - Specialist	$67	$2	$33.47	$0.46	6,000	4,800	$66.94	$1.15
Prof - Vision	$72	$6	$36.09	$1.16	12,000	0	$36.09	-
Radiology	$18	$71	$9.22	$14.26	12,000	14,400	$9.22	$11.89
Transportation/Ambulance	$7	$16	$3.60	$3.28	0	0	-	-
Total	$19,410	$19,640	$9,704.99	$3,928.09				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 1-5								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	445	478						
Service Type								
DME/Supplies	$170,321	$116,728	$382.74	$244.20	23,461	14,862	$195.77	$197.18
FQHC / RHC	$0	$0	$0.00	$0.00	0	0	-	-
Home Health	$82,541	$116,811	$185.49	$244.37	2,670	3,289	$833.75	$891.69
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$51,988	$292,098	$116.83	$611.08	297	176	$4,726.15	$41,728.29
IP - Psych	$7,198	$7,863	$16.17	$16.45	0	0	-	-
Lab	$3,449	$1,676	$7.75	$3.51	4,530	2,460	$20.53	$17.10
OP - Emergency Room & Related	$26,388	$24,802	$59.30	$51.89	1,321	1,406	$538.53	$442.89
OP - Other	$308,305	$182,296	$692.82	$381.37	10,382	8,234	$800.79	$555.78
Pharmacy	$377,020	$58,074	$847.24	$121.49	28,719	23,699	$354.01	$61.52
Prof - Anesthesia	$5,406	$3,615	$12.15	$7.56	782	402	$186.42	$225.91
Prof - Child EPSDT	$693	$475	$1.56	$0.99	1,429	1,079	$13.08	$11.05
Prof - Evaluation & Management	$49,045	$57,671	$110.21	$120.65	14,939	14,887	$88.53	$97.25
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$292,461	$303,235	$657.22	$634.38	30,876	30,628	$255.42	$248.55
Prof - Psych	$2,479	$2,971	$5.57	$6.21	54	75	$1,239.50	$990.25
Prof - Specialist	$15,561	$7,639	$34.97	$15.98	2,238	1,331	$187.48	$144.13
Prof - Vision	$2,588	$1,986	$5.82	$4.16	1,321	1,054	$52.82	$47.30
Radiology	$2,490	$1,955	$5.59	$4.09	3,560	3,238	$18.86	$15.15
Transportation/Ambulance	$7,557	$2,573	$16.98	$5.38	6,526	4,519	$31.23	$14.29
Total	$1,405,490	$1,182,467	$3,158.40	$2,473.78				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 6-20								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	1,392	1,750						
Service Type								
DME/Supplies	$270,693	$329,376	$194.46	$188.22	12,103	14,853	$192.80	$152.07
FQHC / RHC	$3,097	$2,905	$2.22	$1.66	491	377	$54.33	$52.83
Home Health	$44,298	$78,181	$31.82	$44.67	448	789	$851.89	$679.84
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$202,166	$334,550	$145.23	$191.17	121	165	$14,440.45	$13,939.56
IP - Psych	$64,257	$69,797	$46.16	$39.88	509	658	$1,089.10	$727.06
Lab	$3,766	$4,555	$2.71	$2.60	2,388	2,050	$13.60	$15.24
OP - Emergency Room & Related	$50,388	$86,215	$36.20	$49.27	793	1,049	$547.70	$563.50
OP - Other	$428,940	$445,008	$308.15	$254.29	5,543	5,479	$667.09	$556.96
Pharmacy	$305,889	$505,422	$219.75	$288.81	29,078	31,961	$90.69	$108.44
Prof - Anesthesia	$9,131	$11,186	$6.56	$6.39	353	336	$222.71	$228.30
Prof - Child EPSDT	$1,259	$1,414	$0.90	$0.81	509	432	$21.34	$22.45
Prof - Evaluation & Management	$75,716	$108,818	$54.39	$62.18	8,267	8,571	$78.95	$87.05
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$96,147	$372,344	$69.07	$212.77	5,078	10,279	$163.24	$248.39
Prof - Psych	$17,642	$20,574	$12.67	$11.76	2,750	2,050	$55.30	$68.81
Prof - Specialist	$24,446	$44,139	$17.56	$25.22	1,129	1,406	$186.61	$215.31
Prof - Vision	$3,522	$5,426	$2.53	$3.10	716	885	$42.44	$42.06
Radiology	$5,153	$4,929	$3.70	$2.82	2,147	2,098	$20.69	$16.11
Transportation/Ambulance	$10,176	$17,596	$7.31	$10.05	9,750	7,255	$9.00	$16.63
Total	$1,616,688	$2,442,436	$1,161.41	$1,395.68				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Female								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	745	1,009						
Service Type								
DME/Supplies	$44,486	$118,891	$59.71	$117.83	7,361	9,633	$97.34	$146.78
FQHC / RHC	$39,117	$18,024	$52.51	$17.86	4,671	2,176	$134.89	$98.49
Home Health	$8,118	$12,737	$10.90	$12.62	242	333	$541.20	$454.91
IP - Maternity	$0	$3,134	$0.00	$3.11	0	12	-	$3,133.96
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$192,591	$262,358	$258.51	$260.02	435	452	$7,133.01	$6,904.16
IP - Psych	$12,042	$55,578	$16.16	$55.08	0	821	-	$805.48
Lab	$3,045	$4,629	$4.09	$4.59	7,490	6,458	$6.55	$8.53
OP - Emergency Room & Related	$103,847	$141,572	$139.39	$140.31	2,158	2,688	$774.98	$626.43
OP - Other	$160,872	$194,172	$215.94	$192.44	2,384	2,165	$1,086.97	$1,066.88
Pharmacy	$339,570	$618,512	$455.80	$613.00	51,834	53,055	$105.52	$138.65
Prof - Anesthesia	$2,290	$3,743	$3.07	$3.71	274	285	$134.69	$155.95
Prof - Child EPSDT	$2,001	$2,662	$2.69	$2.64	821	607	$39.23	$52.19
Prof - Evaluation & Management	$51,371	$94,293	$68.95	$93.45	12,097	15,722	$68.40	$71.33
Prof - Maternity	$0	$2,211	$0.00	$2.19	0	12	-	$2,210.91
Prof - Other	$22,196	$34,039	$29.79	$33.74	4,381	5,138	$81.60	$78.79
Prof - Psych	$10,681	$12,908	$14.34	$12.79	2,626	2,486	$65.53	$61.76
Prof - Specialist	$10,105	$14,722	$13.56	$14.59	1,272	1,594	$127.91	$109.87
Prof - Vision	$881	$1,774	$1.18	$1.76	129	274	$110.18	$77.13
Radiology	$7,639	$8,152	$10.25	$8.08	4,156	4,329	$29.61	$22.39
Transportation/Ambulance	$8,705	$23,643	$11.68	$23.43	29,509	15,306	$4.75	$18.37
Total	$1,019,558	$1,627,755	$1,368.53	$1,613.24				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Male								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	616	920						
Service Type								
DME/Supplies	$139,009	$167,755	$225.66	$182.34	13,032	11,883	$207.79	$184.14
FQHC / RHC	$432	$884	$0.70	$0.96	292	313	$28.77	$36.84
Home Health	$55,291	$60,320	$89.76	$65.57	896	743	$1,201.98	$1,058.25
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$219,413	$126,123	$356.19	$137.09	156	183	$27,426.64	$9,008.77
IP - Psych	$11,237	$15,160	$18.24	$16.48	39	0	$5,618.53	-
Lab	$1,193	$1,699	$1.94	$1.85	4,344	3,887	$5.35	$5.70
OP - Emergency Room & Related	$24,859	$66,221	$40.35	$71.98	857	1,709	$564.97	$505.50
OP - Other	$115,573	$204,492	$187.62	$222.27	1,909	2,152	$1,179.32	$1,239.35
Pharmacy	$166,873	$239,593	$270.90	$260.43	34,519	35,191	$94.17	$88.80
Prof - Anesthesia	$3,722	$3,620	$6.04	$3.93	370	248	$195.89	$190.51
Prof - Child EPSDT	$274	$397	$0.45	$0.43	214	287	$24.94	$18.04
Prof - Evaluation & Management	$40,284	$45,959	$65.40	$49.95	12,974	8,465	$60.49	$70.81
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$205,012	$149,821	$332.81	$162.85	4,247	6,365	$940.42	$307.01
Prof - Psych	$4,712	$11,443	$7.65	$12.44	1,714	3,091	$53.54	$48.28
Prof - Specialist	$18,021	$23,677	$29.25	$25.74	2,552	1,983	$137.56	$155.77
Prof - Vision	$1,329	$2,035	$2.16	$2.21	312	313	$83.09	$84.80
Radiology	$4,998	$4,249	$8.11	$4.62	3,156	1,852	$30.85	$29.92
Transportation/Ambulance	$5,794	$12,686	$9.41	$13.79	25,870	26,596	$4.36	$6.22
Total	$1,018,026	$1,136,133	$1,652.64	$1,234.93				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 45 and Over								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	1,989	2,727						
Service Type								
DME/Supplies	$388,282	$510,052	$195.21	$187.04	17,176	16,119	$136.38	$139.24
FQHC / RHC	$14,781	$60,686	$7.43	$22.25	814	2,561	$109.49	$104.27
Home Health	$132,001	$128,989	$66.37	$47.30	2,021	1,320	$394.03	$429.96
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$2,119,875	$2,009,710	$1,065.80	$736.97	1,406	1,074	$9,098.18	$8,236.52
IP - Psych	$57,551	$61,091	$28.93	$22.40	320	282	$1,085.87	$954.54
Lab	$20,715	$20,225	$10.41	$7.42	17,858	14,988	$7.00	$5.94
OP - Emergency Room & Related	$374,979	$432,852	$188.53	$158.73	2,643	2,499	$856.12	$762.06
OP - Other	$746,949	$846,223	$375.54	$310.31	5,291	6,108	$851.71	$609.67
Pharmacy	$1,097,581	$1,690,133	$551.83	$619.78	102,323	104,748	$64.72	$71.00
Prof - Anesthesia	$20,420	$23,868	$10.27	$8.75	597	581	$206.26	$180.82
Prof - Child EPSDT	$3,382	$5,988	$1.70	$2.20	3,373	1,421	$6.05	$18.54
Prof - Evaluation & Management	$419,588	$486,062	$210.95	$178.24	35,035	29,690	$72.26	$72.04
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$423,838	$311,447	$213.09	$114.21	17,888	12,013	$142.95	$114.08
Prof - Psych	$17,119	$26,134	$8.61	$9.58	2,160	1,729	$47.82	$66.50
Prof - Specialist	$123,795	$159,972	$62.24	$58.66	5,092	5,237	$146.68	$134.43
Prof - Vision	$10,654	$13,162	$5.36	$4.83	875	849	$73.47	$68.20
Radiology	$55,455	$76,814	$27.88	$28.17	10,727	9,897	$31.19	$34.15
Transportation/Ambulance	$85,030	$106,149	$42.75	$38.93	33,442	29,509	$15.34	$15.83
Total	$6,111,995	$6,969,557	$3,072.90	$2,555.76				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

All Age Categories								
Tidewater	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	5,189	6,889						
Service Type								
DME/Supplies	$1,013,212	$1,243,194	$195.26	$180.46	14,456	14,190	$162.09	$152.61
FQHC / RHC	$57,426	$82,499	$11.07	$11.98	1,149	1,470	$115.55	$97.75
Home Health	$322,250	$397,039	$62.10	$57.63	1,265	1,099	$589.12	$629.22
IP - Maternity	$0	$3,134	$0.00	$0.45	0	2	-	$3,133.96
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$2,787,443	$3,027,199	$537.18	$439.43	680	571	$9,481.10	$9,229.27
IP - Psych	$152,353	$209,595	$29.36	$30.42	264	399	$1,336.43	$915.26
Lab	$32,174	$32,832	$6.20	$4.77	9,468	8,096	$7.86	$7.06
OP - Emergency Room & Related	$580,461	$751,663	$111.86	$109.11	1,751	1,975	$766.79	$662.84
OP - Other	$1,761,821	$1,872,898	$339.53	$271.87	4,981	4,989	$817.93	$653.94
Pharmacy	$2,288,199	$3,111,969	$440.97	$451.73	61,048	63,726	$86.68	$85.06
Prof - Anesthesia	$40,969	$46,032	$7.90	$6.68	474	418	$199.85	$191.80
Prof - Child EPSDT	$7,643	$10,991	$1.47	$1.60	1,702	883	$10.39	$21.68
Prof - Evaluation & Management	$637,517	$795,137	$122.86	$115.42	20,242	18,445	$72.83	$75.09
Prof - Maternity	$0	$2,211	$0.00	$0.32	0	2	-	$2,210.91
Prof - Other	$1,052,976	$1,184,157	$202.92	$171.89	12,111	11,188	$201.06	$184.36
Prof - Psych	$52,657	$74,067	$10.15	$10.75	2,151	1,988	$56.62	$64.91
Prof - Specialist	$191,995	$250,151	$37.00	$36.31	2,935	3,024	$151.30	$144.10
Prof - Vision	$19,047	$24,389	$3.67	$3.54	701	716	$62.86	$59.34
Radiology	$75,754	$96,170	$14.60	$13.96	5,969	5,567	$29.35	$30.09
Transportation/Ambulance	$117,270	$162,663	$22.60	$23.61	23,302	19,631	$11.64	$14.43
Total	$11,191,167	$13,377,990	$2,156.71	$1,941.93				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age Under 1								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	5	-						
Service Type								
DME/Supplies	$806	$0	$161.26	$0.00	21,600	0	$89.59	-
FQHC / RHC	$0	$0	$0.00	$0.00	0	0	-	-
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$0	$0	$0.00	$0.00	0	0	-	-
IP - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Lab	$31	$0	$6.24	$0.00	7,200	0	$10.41	-
OP - Emergency Room & Related	$177	$0	$35.38	$0.00	2,400	0	$176.90	-
OP - Other	$432	$0	$86.42	$0.00	9,600	0	$108.02	-
Pharmacy	$9,160	$0	$1,832.01	$0.00	28,800	0	$763.34	-
Prof - Anesthesia	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Child EPSDT	$23	$0	$4.62	$0.00	4,800	0	$11.55	-
Prof - Evaluation & Management	$1,251	$0	$250.19	$0.00	48,000	0	$62.55	-
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$982	$0	$196.43	$0.00	21,600	0	$109.13	-
Prof - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Specialist	$578	$0	$115.62	$0.00	9,600	0	$144.52	-
Prof - Vision	$7	$0	$1.31	$0.00	0	0	-	-
Radiology	$30	$0	$6.04	$0.00	4,800	0	$15.11	-
Transportation/Ambulance	$7	$0	$1.42	$0.00	0	0	-	-
Total	$13,485	$0	$2,696.94	$0.00				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 1-5								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	195	243						
Service Type								
DME/Supplies	$68,950	$37,266	$353.59	$153.36	17,231	11,407	$246.25	$161.32
FQHC / RHC	$0	$394	$0.00	$1.62	0	494	-	$39.42
Home Health	$39,843	$21,149	$204.32	$87.03	3,446	2,617	$711.49	$399.03
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$9,445	$86,060	$48.44	$354.16	185	395	$3,148.44	$10,757.47
IP - Psych	$0	$300	$0.00	$1.24	0	0	-	-
Lab	$2,019	$3,440	$10.35	$14.16	5,908	11,654	$21.03	$14.58
OP - Emergency Room & Related	$3,081	$6,663	$15.80	$27.42	1,108	1,975	$171.17	$166.58
OP - Other	$17,965	$51,293	$92.13	$211.08	3,692	5,827	$299.41	$434.68
Pharmacy	$44,887	$530,940	$230.19	$2,184.94	24,615	30,519	$112.22	$859.13
Prof - Anesthesia	$512	$2,730	$2.63	$11.23	123	790	$256.12	$170.63
Prof - Child EPSDT	$344	$323	$1.76	$1.33	1,723	1,580	$12.28	$10.11
Prof - Evaluation & Management	$14,490	$25,087	$74.31	$103.24	12,492	16,938	$71.38	$73.14
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$41,205	$45,238	$211.31	$186.16	34,523	20,790	$73.45	$107.45
Prof - Psych	$471	$814	$2.42	$3.35	369	494	$78.55	$81.42
Prof - Specialist	$2,738	$5,073	$14.04	$20.88	1,415	1,481	$119.03	$169.12
Prof - Vision	$1,678	$1,554	$8.61	$6.39	1,600	1,086	$64.54	$70.63
Radiology	$422	$1,270	$2.17	$5.23	1,662	3,160	$15.64	$19.84
Transportation/Ambulance	$1,319	$4,258	$6.76	$17.52	800	1,580	$101.46	$133.07
Total	$249,369	$823,853	$1,278.82	$3,390.34				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 6-20								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	318	448						
Service Type								
DME/Supplies	$48,966	$60,191	$153.98	$134.35	9,321	12,938	$198.24	$124.62
FQHC / RHC	$106	$629	$0.33	$1.40	75	321	$52.87	$52.39
Home Health	$1,237	$1,121	$3.89	$2.50	113	80	$412.32	$373.79
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$44,218	$83,277	$139.05	$185.89	377	268	$4,421.79	$8,327.72
IP - Psych	$0	$29,567	$0.00	$66.00	0	938	-	$844.77
Lab	$4,868	$1,650	$15.31	$3.68	5,509	3,804	$33.34	$11.62
OP - Emergency Room & Related	$5,471	$5,330	$17.21	$11.90	830	723	$248.70	$197.41
OP - Other	$65,356	$59,755	$205.52	$133.38	2,981	2,598	$827.29	$616.03
Pharmacy	$55,703	$221,340	$175.17	$494.06	30,642	29,625	$68.60	$200.13
Prof - Anesthesia	$1,831	$1,730	$5.76	$3.86	604	295	$114.46	$157.27
Prof - Child EPSDT	$274	$71	$0.86	$0.16	491	214	$21.10	$8.91
Prof - Evaluation & Management	$17,218	$19,974	$54.15	$44.58	8,981	7,446	$72.35	$71.85
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$34,084	$102,073	$107.18	$227.84	17,585	19,205	$73.14	$142.36
Prof - Psych	$3,335	$3,809	$10.49	$8.50	2,377	1,741	$52.94	$58.60
Prof - Specialist	$8,711	$3,113	$27.39	$6.95	1,925	911	$170.80	$91.57
Prof - Vision	$625	$821	$1.97	$1.83	113	107	$208.47	$205.14
Radiology	$628	$1,172	$1.98	$2.62	1,396	1,554	$16.99	$20.20
Transportation/Ambulance	$2,144	$4,619	$6.74	$10.31	15,094	3,429	$5.36	$36.09
Total	$294,776	$600,241	$926.97	$1,339.82				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Female								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	160	226						
Service Type								
DME/Supplies	$26,155	$17,903	$163.47	$79.22	9,150	9,823	$214.38	$96.78
FQHC / RHC	$990	$311	$6.19	$1.38	1,800	319	$41.26	$51.85
Home Health	$14,761	$6,310	$92.25	$27.92	2,250	850	$492.02	$394.39
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$0	$21,391	$0.00	$94.65	0	106	-	$10,695.35
IP - Psych	$5,434	$8,581	$33.96	$37.97	525	531	$776.23	$858.14
Lab	$2,024	$2,967	$12.65	$13.13	13,875	11,363	$10.94	$13.86
OP - Emergency Room & Related	$3,000	$7,103	$18.75	$31.43	1,125	1,434	$200.02	$263.09
OP - Other	$8,333	$16,848	$52.08	$74.55	1,425	1,168	$438.56	$765.82
Pharmacy	$100,628	$123,663	$628.92	$547.18	78,750	79,646	$95.84	$82.44
Prof - Anesthesia	$216	$1,074	$1.35	$4.75	75	265	$215.68	$214.79
Prof - Child EPSDT	$90	$249	$0.56	$1.10	2,175	584	$3.10	$22.60
Prof - Evaluation & Management	$6,196	$9,425	$38.73	$41.70	8,100	7,858	$57.37	$63.68
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$5,878	$7,440	$36.73	$32.92	4,800	3,717	$91.84	$106.29
Prof - Psych	$1,573	$1,399	$9.83	$6.19	2,325	1,168	$50.73	$63.61
Prof - Specialist	$913	$9,108	$5.70	$40.30	2,025	2,496	$33.81	$193.78
Prof - Vision	$291	$642	$1.82	$2.84	75	265	$291.39	$128.48
Radiology	$503	$1,196	$3.14	$5.29	2,475	2,389	$15.25	$26.58
Transportation/Ambulance	$14,205	$17,989	$88.78	$79.60	39,000	33,611	$27.32	$28.42
Total	$191,188	$253,600	$1,194.93	$1,122.13				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Male								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	87	157						
Service Type								
DME/Supplies	$3,391	$25,950	$38.97	$165.29	12,414	11,694	$37.67	$169.61
FQHC / RHC	$264	$435	$3.04	$2.77	690	917	$52.88	$36.25
Home Health	$832	$15,416	$9.56	$98.19	138	1,146	$831.68	$1,027.76
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$48,069	$46,710	$552.51	$297.52	552	306	$12,017.16	$11,677.59
IP - Psych	$3,729	$11,277	$42.86	$71.83	276	994	$1,864.53	$867.43
Lab	$367	$1,146	$4.22	$7.30	4,552	6,497	$11.11	$13.48
OP - Emergency Room & Related	$2,180	$3,365	$25.06	$21.44	552	611	$544.97	$420.67
OP - Other	$2,696	$7,603	$30.98	$48.43	1,103	1,070	$336.94	$543.08
Pharmacy	$40,217	$63,093	$462.27	$401.86	40,966	50,217	$135.41	$96.03
Prof - Anesthesia	$175	$998	$2.01	$6.35	138	382	$175.24	$199.51
Prof - Child EPSDT	$401	$48	$4.61	$0.31	47,724	688	$1.16	$5.34
Prof - Evaluation & Management	$4,518	$6,014	$51.93	$38.30	8,276	6,803	$75.30	$67.57
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$24,321	$16,621	$279.55	$105.86	50,345	14,446	$66.63	$87.94
Prof - Psych	$249	$1,163	$2.86	$7.40	690	1,682	$49.72	$52.84
Prof - Specialist	$3,194	$10,770	$36.71	$68.60	1,655	1,758	$266.16	$468.24
Prof - Vision	$327	$312	$3.75	$1.99	414	153	$108.88	$156.04
Radiology	$944	$1,635	$10.85	$10.41	3,172	1,834	$41.05	$68.11
Transportation/Ambulance	$1,729	$576	$19.88	$3.67	104,828	12,153	$2.28	$3.62
Total	$137,602	$213,130	$1,581.63	$1,357.52				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

Age 45 and Over								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	446	586						
Service Type								
DME/Supplies	$116,820	$105,124	$261.93	$179.39	22,009	18,287	$142.81	$117.72
FQHC / RHC	$2,370	$2,076	$5.31	$3.54	1,937	1,126	$32.92	$37.75
Home Health	$33,653	$49,597	$75.45	$84.64	2,018	2,273	$448.70	$446.82
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$680,083	$706,642	$1,524.85	$1,205.87	1,937	1,311	$9,445.60	$11,041.28
IP - Psych	$5,522	$20,856	$12.38	$35.59	135	573	$1,104.43	$744.84
Lab	$13,563	$18,219	$30.41	$31.09	26,583	27,502	$13.73	$13.57
OP - Emergency Room & Related	$58,266	$53,564	$130.64	$91.41	4,332	3,543	$361.90	$309.62
OP - Other	$72,674	$60,790	$162.95	$103.74	2,879	3,031	$679.20	$410.74
Pharmacy	$315,450	$372,295	$707.29	$635.32	114,861	118,403	$73.89	$64.39
Prof - Anesthesia	$1,674	$1,984	$3.75	$3.39	323	348	$139.51	$116.72
Prof - Child EPSDT	$604	$825	$1.35	$1.41	9,982	9,051	$1.63	$1.87
Prof - Evaluation & Management	$81,409	$88,652	$182.53	$151.28	29,892	25,126	$73.28	$72.25
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$43,712	$80,701	$98.01	$137.71	22,870	21,317	$51.43	$77.52
Prof - Psych	$1,285	$3,157	$2.88	$5.39	592	1,085	$58.40	$59.56
Prof - Specialist	$16,215	$34,688	$36.36	$59.19	4,709	5,406	$92.66	$131.39
Prof - Vision	$1,599	$2,923	$3.59	$4.99	646	799	$66.63	$74.96
Radiology	$10,415	$10,935	$23.35	$18.66	11,435	9,440	$24.51	$23.72
Transportation/Ambulance	$44,654	$35,741	$100.12	$60.99	25,668	19,454	$46.81	$37.62
Total	$1,499,967	$1,648,769	$3,363.15	$2,813.60				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

All Age Categories								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	1,211	1,660						
Service Type								
DME/Supplies	$265,087	$246,434	$218.90	$148.45	15,518	14,060	$169.28	$126.70
FQHC / RHC	$3,730	$3,845	$3.08	$2.32	1,021	687	$36.22	$40.48
Home Health	$90,325	$93,594	$74.59	$56.38	1,635	1,431	$547.43	$472.69
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$781,815	$944,080	$645.59	$568.72	882	636	$8,784.44	$10,728.18
IP - Psych	$14,685	$70,581	$12.13	$42.52	139	622	$1,048.92	$820.71
Lab	$22,871	$27,422	$18.89	$16.52	14,378	14,602	$15.76	$13.58
OP - Emergency Room & Related	$72,175	$76,027	$59.60	$45.80	2,190	1,988	$326.58	$276.46
OP - Other	$167,455	$196,289	$138.28	$118.25	2,745	2,884	$604.53	$491.95
Pharmacy	$566,045	$1,311,330	$467.42	$789.96	67,779	69,853	$82.76	$135.71
Prof - Anesthesia	$4,409	$8,516	$3.64	$5.13	317	390	$137.77	$157.70
Prof - Child EPSDT	$1,736	$1,516	$1.43	$0.91	7,818	3,629	$2.20	$3.02
Prof - Evaluation & Management	$125,082	$149,152	$103.29	$89.85	17,242	15,072	$71.89	$71.54
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$150,181	$252,073	$124.01	$151.85	22,940	17,624	$64.87	$103.39
Prof - Psych	$6,912	$10,342	$5.71	$6.23	1,258	1,243	$54.43	$60.13
Prof - Specialist	$32,348	$62,752	$26.71	$37.80	2,893	2,877	$110.78	$157.67
Prof - Vision	$4,527	$6,252	$3.74	$3.77	565	520	$79.42	$86.84
Radiology	$12,943	$16,208	$10.69	$9.76	5,420	4,713	$23.66	$24.86
Transportation/Ambulance	$64,058	$63,183	$52.90	$38.06	26,230	13,749	$24.20	$33.22
Total	$2,386,386	$3,539,594	$1,970.59	$2,132.29				

Virginia Medicaid

Exhibit 1c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD ALTC)

All Age Categories								
All Regions	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	20,116	26,808						
Service Type								
DME/Supplies	$3,712,256	$4,813,138	$184.54	$179.54	14,429	14,575	$153.48	$147.82
FQHC / RHC	$360,801	$387,702	$17.94	$14.46	1,769	1,404	$121.69	$123.59
Home Health	$993,358	$968,633	$49.38	$36.13	1,272	929	$465.93	$466.59
IP - Maternity	$6,950	$3,134	$0.35	$0.12	1	0	$3,474.86	$3,133.96
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$11,291,523	$14,614,189	$561.32	$545.14	617	611	$10,909.68	$10,698.53
IP - Psych	$443,121	$684,191	$22.03	$25.52	254	291	$1,040.19	$1,052.60
Lab	$141,300	$185,429	$7.02	$6.92	9,676	9,153	$8.71	$9.07
OP - Emergency Room & Related	$1,341,944	$1,866,738	$66.71	$69.63	1,399	1,560	$572.01	$535.65
OP - Other	$5,757,989	$6,368,448	$286.24	$237.56	4,874	5,016	$704.69	$568.36
Pharmacy	$8,017,141	$11,998,452	$398.55	$447.57	61,907	63,939	$77.25	$84.00
Prof - Anesthesia	$124,938	$174,202	$6.21	$6.50	370	408	$201.51	$191.01
Prof - Child EPSDT	$25,403	$33,237	$1.26	$1.24	1,867	890	$8.12	$16.72
Prof - Evaluation & Management	$2,019,051	$2,812,556	$100.37	$104.91	16,752	17,014	$71.90	$74.00
Prof - Maternity	$1,875	$2,211	$0.09	$0.08	5	0	$234.34	$2,210.91
Prof - Other	$2,606,471	$4,389,141	$129.57	$163.73	10,179	10,865	$152.75	$180.83
Prof - Psych	$171,407	$254,491	$8.52	$9.49	1,615	1,703	$63.32	$66.90
Prof - Specialist	$635,490	$909,902	$31.59	$33.94	2,528	2,551	$149.99	$159.66
Prof - Vision	$70,181	$94,943	$3.49	$3.54	620	623	$67.48	$68.26
Radiology	$264,977	$389,774	$13.17	$14.54	5,198	5,321	$30.41	$32.79
Transportation/Ambulance	$466,244	$672,032	$23.18	$25.07	21,695	20,100	$12.82	$14.97
Total	$38,452,420	$51,622,545	$1,911.53	$1,925.64				

Virginia Medicaid

Exhibit 1d

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Roanoke-Alleghany

Age Under 1								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	10,584	12,935						
Service Type								
DME/Supplies	$178,592	$216,555	$16.87	$16.74	1,783	1,675	$113.54	$119.97
FQHC / RHC	$23,843	$28,835	$2.25	$2.23	451	544	$59.91	$49.21
Home Health	$0	$113	$0.00	$0.01	0	3	-	$37.50
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$5,949,401	$2,298,605	$562.12	$177.71	1,584	897	$4,258.70	$2,377.05
IP - Other	$286,734	$323,553	$27.09	$25.01	93	63	$3,496.75	$4,758.13
IP - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Lab	$34,269	$36,481	$3.24	$2.82	3,062	2,574	$12.69	$13.15
OP - Emergency Room	$54,774	$76,731	$5.18	$5.93	728	967	$85.32	$73.64
OP - Other	$179,997	$134,769	$17.01	$10.42	2,147	2,256	$95.04	$55.42
Pharmacy	$464,093	$343,269	$43.85	$26.54	4,878	4,653	$107.88	$68.45
Prof - Anesthesia	$13,300	$9,617	$1.26	$0.74	666	403	$22.66	$22.16
Prof - Child EPSDT	$37,829	$45,084	$3.57	$3.49	4,027	3,920	$10.65	$10.67
Prof - Evaluation & Management	$1,643,081	$1,337,662	$155.24	$103.42	22,065	16,619	$84.43	$74.68
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$178,465	$225,556	$16.86	$17.44	21,671	21,695	$9.34	$9.65
Prof - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Specialist	$104,953	$77,213	$9.92	$5.97	978	627	$121.61	$114.22
Prof - Vision	$5,444	$5,587	$0.51	$0.43	100	76	$61.86	$68.13
Radiology	$45,082	$52,547	$4.26	$4.06	2,745	1,989	$18.62	$24.51
Transportation/Ambulance	$25,177	$15,071	$2.38	$1.17	195	132	$146.38	$106.13
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$9,225,032	$5,227,248	$871.61	$404.12				

Virginia Medicaid

Exhibit 1d

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Roanoke-Alleghany

Age 1-5								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	38,898	28,256						
Service Type								
DME/Supplies	$67,372	$80,927	$1.73	$2.86	277	290	$74.94	$118.49
FQHC / RHC	$59,120	$45,739	$1.52	$1.62	276	293	$65.98	$66.38
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$4,075	$0	$0.10	$0.00	0	0	$4,075.15	-
IP - Other	$265,848	$177,479	$6.83	$6.28	29	21	$2,858.58	$3,622.02
IP - Psych	$0	$16,769	$0.00	$0.59	0	9	-	$798.51
Lab	$102,500	$75,815	$2.64	$2.68	2,403	2,546	$13.16	$12.65
OP - Emergency Room	$200,209	$182,980	$5.15	$6.48	615	789	$100.46	$98.43
OP - Other	$496,235	$273,289	$12.76	$9.67	871	761	$175.85	$152.59
Pharmacy	$714,448	$458,711	$18.37	$16.23	4,810	4,397	$45.82	$44.30
Prof - Anesthesia	$29,955	$23,610	$0.77	$0.84	387	426	$23.89	$23.52
Prof - Child EPSDT	$39,332	$35,753	$1.01	$1.27	1,204	1,476	$10.08	$10.29
Prof - Evaluation & Management	$957,895	$700,468	$24.63	$24.79	5,094	5,006	$58.01	$59.43
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$172,130	$167,141	$4.43	$5.92	4,501	4,356	$11.80	$16.29
Prof - Psych	$33,721	$35,945	$0.87	$1.27	161	199	$64.60	$76.64
Prof - Specialist	$129,682	$95,866	$3.33	$3.39	301	295	$132.87	$138.14
Prof - Vision	$33,239	$21,651	$0.85	$0.77	205	180	$49.91	$51.18
Radiology	$97,796	$93,044	$2.51	$3.29	1,068	1,292	$28.25	$30.58
Transportation/Ambulance	$16,467	$9,993	$0.42	$0.35	61	62	$83.59	$68.44
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$3,420,025	$2,495,180	$87.92	$88.30				

Virginia Medicaid

Exhibit 1d

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Roanoke-Alleghany

Age 6-14								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	81,037	48,114						
Service Type								
DME/Supplies	$103,570	$52,080	$1.28	$1.08	179	184	$85.74	$70.47
FQHC / RHC	$114,365	$58,525	$1.41	$1.22	208	188	$81.23	$77.52
Home Health	$0	$4,064	$0.00	$0.08	0	37	-	$27.65
IP - Maternity	$5,600	$0	$0.07	$0.00	0	0	$1,866.56	-
IP - Newborn	$13,280	$44,418	$0.16	$0.92	0	0	$13,279.59	$44,417.93
IP - Other	$491,230	$193,068	$6.06	$4.01	14	11	$5,339.46	$4,197.13
IP - Psych	$245,626	$204,477	$3.03	$4.25	47	69	$779.77	$740.86
Lab	$219,143	$121,637	$2.70	$2.53	2,330	2,134	$13.93	$14.21
OP - Emergency Room	$432,830	$293,146	$5.34	$6.09	403	514	$159.13	$142.23
OP - Other	$650,331	$333,787	$8.03	$6.94	702	660	$137.26	$126.05
Pharmacy	$3,486,851	$1,970,523	$43.03	$40.95	6,821	6,410	$75.70	$76.67
Prof - Anesthesia	$28,001	$19,431	$0.35	$0.40	183	332	$22.67	$14.61
Prof - Child EPSDT	$19,820	$16,858	$0.24	$0.35	284	405	$10.33	$10.37
Prof - Evaluation & Management	$1,371,057	$846,605	$16.92	$17.60	3,542	3,581	$57.32	$58.96
Prof - Maternity	$4,405	$0	$0.05	$0.00	1	0	$734.21	-
Prof - Other	$253,439	$141,247	$3.13	$2.94	2,125	2,265	$17.66	$15.55
Prof - Psych	$384,417	$284,357	$4.74	$5.91	1,123	1,009	$50.68	$70.26
Prof - Specialist	$209,101	$128,386	$2.58	$2.67	240	257	$129.23	$124.65
Prof - Vision	$231,217	$176,095	$2.85	$3.66	763	951	$44.86	$46.17
Radiology	$59,429	$35,096	$0.73	$0.73	532	554	$16.54	$15.79
Transportation/Ambulance	$22,439	$14,283	$0.28	$0.30	41	51	$81.89	$70.01
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$8,346,150	$4,938,082	$102.99	$102.63				

Virginia Medicaid

Exhibit 1d

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Roanoke-Alleghany

Age 15-20 Female								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	21,230	13,022						
Service Type								
DME/Supplies	$28,660	$10,182	$1.35	$0.78	157	90	$103.47	$103.90
FQHC / RHC	$43,690	$25,522	$2.06	$1.96	298	277	$82.90	$84.79
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$624,986	$469,046	$29.44	$36.02	142	180	$2,480.10	$2,405.37
IP - Newborn	$3,398	$0	$0.16	$0.00	1	0	$3,398.49	-
IP - Other	$358,900	$134,989	$16.91	$10.37	33	31	$6,083.06	$3,970.27
IP - Psych	$195,849	$78,831	$9.22	$6.05	140	100	$792.91	$723.22
Lab	$337,811	$227,241	$15.91	$17.45	11,435	12,323	$16.70	$16.99
OP - Emergency Room	$308,562	$224,869	$14.53	$17.27	939	1,262	$185.77	$164.26
OP - Other	$622,853	$257,592	$29.34	$19.78	1,813	1,801	$194.16	$131.83
Pharmacy	$782,238	$477,781	$36.85	$36.69	11,305	10,797	$39.11	$40.78
Prof - Anesthesia	$40,520	$23,449	$1.91	$1.80	1,026	919	$22.31	$23.52
Prof - Child EPSDT	$12,372	$8,973	$0.58	$0.69	410	487	$17.07	$16.99
Prof - Evaluation & Management	$564,162	$352,498	$26.57	$27.07	5,543	5,458	$57.53	$59.51
Prof - Maternity	$417,873	$341,536	$19.68	$26.23	375	503	$630.28	$625.52
Prof - Other	$129,585	$87,750	$6.10	$6.74	8,098	9,693	$9.04	$8.34
Prof - Psych	$145,552	$91,512	$6.86	$7.03	1,986	1,590	$41.43	$53.05
Prof - Specialist	$109,532	$57,399	$5.16	$4.41	607	655	$101.99	$80.73
Prof - Vision	$79,525	$55,645	$3.75	$4.27	1,016	1,083	$44.25	$47.36
Radiology	$148,602	$107,926	$7.00	$8.29	1,818	1,877	$46.21	$52.98
Transportation/Ambulance	$25,052	$14,798	$1.18	$1.14	189	214	$75.00	$63.78
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$4,979,723	$3,047,538	$234.56	$234.03				

Virginia Medicaid

Exhibit 1d

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Roanoke-Alleghany

Age 21-44 Female								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	31,305	24,696						
Service Type								
DME/Supplies	$106,238	$77,368	$3.39	$3.13	452	403	$90.19	$93.33
FQHC / RHC	$102,201	$76,944	$3.26	$3.12	436	393	$89.89	$95.11
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$1,555,751	$1,428,578	$49.70	$57.85	195	257	$3,050.49	$2,705.64
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,489,452	$828,219	$47.58	$33.54	89	75	$6,447.84	$5,378.05
IP - Psych	$232,536	$149,390	$7.43	$6.05	110	92	$807.42	$790.42
Lab	$764,512	$658,752	$24.42	$26.67	16,355	18,048	$17.92	$17.74
OP - Emergency Room	$868,262	$766,094	$27.74	$31.02	1,532	1,905	$217.28	$195.38
OP - Other	$1,852,541	$1,090,356	$59.18	$44.15	3,115	2,899	$228.01	$182.73
Pharmacy	$2,361,469	$1,714,796	$75.43	$69.44	22,051	19,912	$41.05	$41.85
Prof - Anesthesia	$101,919	$88,108	$3.26	$3.57	1,740	1,802	$22.45	$23.76
Prof - Child EPSDT	$12,088	$14,987	$0.39	$0.61	552	909	$8.39	$8.01
Prof - Evaluation & Management	$1,026,639	$821,461	$32.79	$33.26	7,295	7,172	$53.94	$55.66
Prof - Maternity	$829,163	$935,923	$26.49	$37.90	534	669	$595.24	$679.68
Prof - Other	$231,300	$219,676	$7.39	$8.90	4,722	10,727	$18.78	$9.95
Prof - Psych	$147,021	$111,340	$4.70	$4.51	1,051	974	$53.60	$55.56
Prof - Specialist	$452,098	$317,461	$14.44	$12.85	1,339	1,268	$129.47	$121.68
Prof - Vision	$39,201	$34,773	$1.25	$1.41	252	281	$59.67	$60.16
Radiology	$381,444	$361,441	$12.18	$14.64	3,304	3,434	$44.25	$51.14
Transportation/Ambulance	$54,876	$54,460	$1.75	$2.21	324	352	$65.02	$75.22
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$12,608,711	$9,750,128	$402.77	$394.81				

Virginia Medicaid

Exhibit 1d

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Roanoke-Alleghany

Age 15-20 Male								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	16,063	9,649						
Service Type								
DME/Supplies	$19,210	$17,185	$1.20	$1.78	152	194	$94.17	$110.16
FQHC / RHC	$19,350	$9,549	$1.20	$0.99	179	154	$80.96	$77.01
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$13,507	$0.00	$1.40	0	1	-	$13,507.19
IP - Other	$207,759	$330,590	$12.93	$34.26	22	45	$6,925.31	$9,183.05
IP - Psych	$140,366	$72,876	$8.74	$7.55	137	127	$767.03	$714.47
Lab	$66,023	$41,607	$4.11	$4.31	2,970	3,064	$16.61	$16.89
OP - Emergency Room	$162,508	$131,635	$10.12	$13.64	595	764	$203.90	$214.39
OP - Other	$296,986	$97,910	$18.49	$10.15	917	828	$241.85	$147.01
Pharmacy	$923,476	$445,597	$57.49	$46.18	7,781	7,009	$88.66	$79.06
Prof - Anesthesia	$10,229	$6,433	$0.64	$0.67	372	400	$20.54	$19.98
Prof - Child EPSDT	$2,466	$2,117	$0.15	$0.22	232	274	$7.95	$9.62
Prof - Evaluation & Management	$285,218	$188,477	$17.76	$19.53	3,708	3,751	$57.47	$62.49
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$63,772	$37,407	$3.97	$3.88	2,306	1,956	$20.66	$23.78
Prof - Psych	$129,623	$80,208	$8.07	$8.31	2,304	1,857	$42.03	$53.72
Prof - Specialist	$74,916	$54,022	$4.66	$5.60	365	391	$153.52	$172.04
Prof - Vision	$41,069	$26,740	$2.56	$2.77	681	708	$45.08	$47.00
Radiology	$24,757	$17,956	$1.54	$1.86	918	1,154	$20.14	$19.35
Transportation/Ambulance	$13,153	$9,263	$0.82	$0.96	149	147	$65.76	$78.50
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$2,480,881	$1,583,078	$154.44	$164.07				

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FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Roanoke-Alleghany

Age 21-44 Male								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	4,591	4,173						
Service Type								
DME/Supplies	$8,238	$14,036	$1.79	$3.36	293	414	$73.56	$97.47
FQHC / RHC	$10,716	$10,390	$2.33	$2.49	298	305	$94.00	$98.02
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$277,418	$836,203	$60.43	$200.36	97	112	$7,497.79	$21,441.10
IP - Psych	$27,059	$29,595	$5.89	$7.09	89	106	$795.85	$799.85
Lab	$36,670	$35,331	$7.99	$8.47	5,941	6,487	$16.13	$15.66
OP - Emergency Room	$114,732	$124,795	$24.99	$29.90	1,474	1,521	$203.43	$235.91
OP - Other	$204,290	$172,243	$44.50	$41.27	1,783	1,550	$299.55	$319.56
Pharmacy	$334,973	$240,781	$72.96	$57.69	16,057	15,441	$54.53	$44.84
Prof - Anesthesia	$7,088	$10,381	$1.54	$2.49	834	1,475	$22.22	$20.24
Prof - Child EPSDT	$541	$667	$0.12	$0.16	585	1,262	$2.42	$1.52
Prof - Evaluation & Management	$117,438	$120,981	$25.58	$28.99	5,591	5,731	$54.90	$60.70
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$22,669	$30,636	$4.94	$7.34	2,501	3,830	$23.69	$23.00
Prof - Psych	$17,876	$12,665	$3.89	$3.03	810	661	$57.67	$55.07
Prof - Specialist	$56,580	$84,690	$12.32	$20.29	1,022	1,308	$144.71	$186.13
Prof - Vision	$4,136	$3,371	$0.90	$0.81	188	155	$57.44	$62.42
Radiology	$17,780	$19,989	$3.87	$4.79	2,041	2,510	$22.77	$22.90
Transportation/Ambulance	$6,136	$7,054	$1.34	$1.69	193	259	$82.91	$78.37
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$1,264,339	$1,753,806	$275.40	$420.23				

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Exhibit 1d

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Roanoke-Alleghany

Age 45 and Over								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	2,692	2,334						
Service Type								
DME/Supplies	$20,936	$13,308	$7.78	$5.70	1,039	874	$89.86	$78.28
FQHC / RHC	$16,416	$10,573	$6.10	$4.53	878	571	$83.33	$95.25
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$314,140	$233,609	$116.69	$100.09	143	139	$9,816.89	$8,652.20
IP - Psych	$25,384	$24,021	$9.43	$10.29	138	154	$818.84	$800.71
Lab	$44,167	$38,349	$16.41	$16.43	10,868	11,301	$18.12	$17.45
OP - Emergency Room	$57,234	$49,934	$21.26	$21.39	834	1,141	$306.06	$224.93
OP - Other	$251,418	$179,705	$93.39	$77.00	3,584	3,332	$312.71	$277.32
Pharmacy	$331,528	$267,794	$123.15	$114.74	35,505	34,736	$41.62	$39.64
Prof - Anesthesia	$7,765	$5,867	$2.88	$2.51	1,676	1,409	$20.65	$21.41
Prof - Child EPSDT	$844	$852	$0.31	$0.36	602	1,440	$6.25	$3.04
Prof - Evaluation & Management	$91,281	$83,235	$33.91	$35.66	7,302	7,378	$55.73	$58.00
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$29,863	$41,104	$11.09	$17.61	4,039	10,643	$32.96	$19.86
Prof - Psych	$11,748	$10,771	$4.36	$4.62	892	1,203	$58.74	$46.03
Prof - Specialist	$77,474	$44,281	$28.78	$18.97	1,868	1,512	$184.90	$150.61
Prof - Vision	$4,460	$6,329	$1.66	$2.71	294	494	$67.58	$65.93
Radiology	$24,248	$21,566	$9.01	$9.24	3,267	3,111	$33.08	$35.65
Transportation/Ambulance	$6,003	$3,478	$2.23	$1.49	303	278	$88.28	$64.40
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$1,314,910	$1,034,776	$488.45	$443.35				

Virginia Medicaid

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FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Roanoke-Alleghany

All Age Categories								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	206,401	143,179						
Service Type								
DME/Supplies	$532,817	$481,640	$2.58	$3.36	330	388	$93.74	$104.16
FQHC / RHC	$389,701	$266,078	$1.89	$1.86	286	292	$79.27	$76.44
Home Health	$0	$4,177	$0.00	$0.03	0	13	-	$27.84
IP - Maternity	$2,186,337	$1,897,624	$10.59	$13.25	44	61	$2,857.96	$2,624.65
IP - Newborn	$5,970,154	$2,356,530	$28.93	$16.46	81	81	$4,264.40	$2,431.92
IP - Other	$3,691,481	$3,057,711	$17.88	$21.36	38	38	$5,627.26	$6,749.91
IP - Psych	$866,819	$575,959	$4.20	$4.02	64	64	$789.45	$753.87
Lab	$1,605,095	$1,235,213	$7.78	$8.63	5,687	6,265	$16.41	$16.52
OP - Emergency Room	$2,199,111	$1,850,185	$10.65	$12.92	730	974	$175.09	$159.27
OP - Other	$4,554,652	$2,539,651	$22.07	$17.74	1,366	1,395	$193.81	$152.58
Pharmacy	$9,399,075	$5,919,252	$45.54	$41.34	9,768	9,347	$55.95	$53.07
Prof - Anesthesia	$238,777	$186,896	$1.16	$1.31	618	719	$22.47	$21.78
Prof - Child EPSDT	$125,291	$125,291	$0.61	$0.88	710	1,061	$10.26	$9.90
Prof - Evaluation & Management	$6,056,771	$4,451,387	$29.34	$31.09	5,667	5,966	$62.14	$62.53
Prof - Maternity	$1,251,441	$1,277,460	$6.06	$8.92	120	161	$606.91	$664.31
Prof - Other	$1,081,225	$950,517	$5.24	$6.64	4,631	6,730	$13.57	$11.84
Prof - Psych	$869,960	$626,798	$4.21	$4.38	1,044	855	$48.45	$61.44
Prof - Specialist	$1,214,335	$859,317	$5.88	$6.00	542	568	$130.28	$126.69
Prof - Vision	$438,291	$330,190	$2.12	$2.31	547	569	$46.57	$48.62
Radiology	$799,137	$709,564	$3.87	$4.96	1,398	1,586	$33.22	$37.51
Transportation/Ambulance	$169,300	$128,398	$0.82	$0.90	126	143	$78.27	$75.09
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$43,639,772	$29,829,837	$211.43	$208.34				

Virginia Medicaid

Exhibit 1d

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Far Southwest

Age Under 1								
Far Southwest	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	21,436	19,609						
Service Type								
DME/Supplies	$408,587	$341,172	$19.06	$17.40	2,122	1,824	$107.81	$114.45
FQHC / RHC	$275,628	$239,259	$12.86	$12.20	5,969	7,156	$25.85	$20.46
Home Health	$13,050	$2,813	$0.61	$0.14	195	46	$37.50	$37.50
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$222,489	$123,105	$10.38	$6.28	6	4	$20,226.24	$17,586.41
IP - Other	$730,943	$524,790	$34.10	$26.76	143	102	$2,866.44	$3,161.39
IP - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Lab	$114,912	$95,416	$5.36	$4.87	5,212	4,803	$12.34	$12.16
OP - Emergency Room	$213,355	$192,244	$9.95	$9.80	1,167	1,432	$102.33	$82.16
OP - Other	$299,008	$189,184	$13.95	$9.65	889	434	$188.29	$266.46
Pharmacy	$1,257,664	$658,513	$58.67	$33.58	7,650	7,086	$92.04	$56.87
Prof - Anesthesia	$16,081	$14,471	$0.75	$0.74	369	551	$24.37	$16.08
Prof - Child EPSDT	$76,052	$71,486	$3.55	$3.65	3,963	4,148	$10.74	$10.55
Prof - Evaluation & Management	$1,174,346	$1,006,818	$54.78	$51.34	10,391	9,831	$63.27	$62.67
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$412,215	$405,454	$19.23	$20.68	41,539	41,075	$5.56	$6.04
Prof - Psych	$0	$201	$0.00	$0.01	0	2	-	$67.08
Prof - Specialist	$88,826	$67,311	$4.14	$3.43	237	207	$209.99	$199.14
Prof - Vision	$7,651	$8,364	$0.36	$0.43	70	78	$61.20	$65.34
Radiology	$58,612	$39,436	$2.73	$2.01	1,534	1,147	$21.38	$21.04
Transportation/Ambulance	$28,012	$45,566	$1.31	$2.32	141	155	$111.16	$180.10
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$5,397,431	$4,025,601	$251.79	$205.29				

Virginia Medicaid

Exhibit 1d

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Far Southwest

Age 1-5								
Far Southwest	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	99,292	99,051						
Service Type								
DME/Supplies	$181,829	$193,351	$1.83	$1.95	290	297	$75.79	$78.92
FQHC / RHC	$746,199	$752,050	$7.52	$7.59	2,118	2,146	$42.57	$42.46
Home Health	$19,013	$31,200	$0.19	$0.31	61	101	$37.50	$37.50
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$32,059	$8,956	$0.32	$0.09	1	0	$5,343.16	$4,477.78
IP - Other	$1,356,374	$943,062	$13.66	$9.52	57	44	$2,861.55	$2,619.62
IP - Psych	$0	$3,165	$0.00	$0.03	0	0	-	$791.27
Lab	$429,629	$403,345	$4.33	$4.07	4,294	4,081	$12.09	$11.97
OP - Emergency Room	$711,754	$838,039	$7.17	$8.46	842	1,071	$102.18	$94.81
OP - Other	$1,313,279	$849,934	$13.23	$8.58	605	290	$262.34	$354.58
Pharmacy	$3,018,654	$2,883,347	$30.40	$29.11	7,072	6,830	$51.58	$51.14
Prof - Anesthesia	$116,874	$112,799	$1.18	$1.14	603	593	$23.42	$23.05
Prof - Child EPSDT	$87,780	$95,957	$0.88	$0.97	1,043	1,148	$10.17	$10.13
Prof - Evaluation & Management	$2,664,423	$2,656,000	$26.83	$26.81	5,547	5,370	$58.06	$59.92
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$610,689	$828,208	$6.15	$8.36	7,414	8,199	$9.96	$12.24
Prof - Psych	$72,673	$128,147	$0.73	$1.29	235	312	$37.40	$49.75
Prof - Specialist	$332,192	$309,536	$3.35	$3.13	256	250	$156.99	$149.75
Prof - Vision	$123,870	$141,655	$1.25	$1.43	311	331	$48.07	$51.81
Radiology	$280,593	$278,736	$2.83	$2.81	1,266	1,241	$26.78	$27.21
Transportation/Ambulance	$62,004	$88,294	$0.62	$0.89	72	86	$104.38	$124.36
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$12,159,887	$11,545,782	$122.47	$116.56				

Virginia Medicaid

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FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Far Southwest

Age 6-14								
Far Southwest	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	150,375	150,678						
Service Type								
DME/Supplies	$263,161	$250,293	$1.75	$1.66	235	224	$89.21	$88.82
FQHC / RHC	$1,027,662	$1,037,600	$6.83	$6.89	1,115	1,098	$73.55	$75.25
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$18,082	$17,619	$0.12	$0.12	1	1	$2,260.23	$2,516.96
IP - Newborn	$23,915	$48,986	$0.16	$0.33	0	0	$23,914.52	$16,328.62
IP - Other	$871,120	$1,038,092	$5.79	$6.89	21	20	$3,363.40	$4,135.82
IP - Psych	$116,194	$172,364	$0.77	$1.14	12	18	$764.43	$766.06
Lab	$568,829	$540,978	$3.78	$3.59	3,468	3,220	$13.09	$13.38
OP - Emergency Room	$1,093,552	$1,302,707	$7.27	$8.65	605	762	$144.14	$136.14
OP - Other	$1,404,891	$1,275,557	$9.34	$8.47	478	317	$234.70	$320.65
Pharmacy	$7,631,957	$8,291,062	$50.75	$55.02	8,390	8,256	$72.59	$79.98
Prof - Anesthesia	$75,224	$82,471	$0.50	$0.55	247	278	$24.35	$23.63
Prof - Child EPSDT	$28,261	$27,796	$0.19	$0.18	246	261	$9.15	$8.47
Prof - Evaluation & Management	$2,696,490	$2,836,216	$17.93	$18.82	3,888	3,923	$55.35	$57.58
Prof - Maternity	$11,998	$12,382	$0.08	$0.08	1	1	$666.57	$1,031.80
Prof - Other	$692,570	$886,738	$4.61	$5.88	4,042	4,339	$13.67	$16.27
Prof - Psych	$579,577	$906,185	$3.85	$6.01	889	1,089	$52.05	$66.27
Prof - Specialist	$428,346	$477,034	$2.85	$3.17	244	263	$140.12	$144.38
Prof - Vision	$522,525	$551,963	$3.47	$3.66	926	912	$45.01	$48.19
Radiology	$208,893	$223,767	$1.39	$1.49	805	832	$20.70	$21.42
Transportation/Ambulance	$50,200	$67,727	$0.33	$0.45	39	50	$103.29	$108.19
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$18,313,447	$20,047,537	$121.79	$133.05				

Virginia Medicaid

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FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Far Southwest

Age 15-20 Female								
Far Southwest	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	34,131	32,633						
Service Type								
DME/Supplies	$50,983	$43,465	$1.49	$1.33	233	234	$76.90	$68.23
FQHC / RHC	$337,177	$349,921	$9.88	$10.72	2,204	2,393	$53.78	$53.77
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$1,307,123	$1,066,218	$38.30	$32.67	196	168	$2,346.72	$2,327.99
IP - Newborn	$0	$15,321	$0.00	$0.47	0	1	-	$5,106.91
IP - Other	$427,313	$430,545	$12.52	$13.19	39	38	$3,849.67	$4,139.85
IP - Psych	$107,912	$141,844	$3.16	$4.35	50	69	$765.33	$754.49
Lab	$499,553	$484,209	$14.64	$14.84	12,060	12,169	$14.56	$14.63
OP - Emergency Room	$607,256	$752,284	$17.79	$23.05	1,157	1,446	$184.46	$191.37
OP - Other	$883,119	$624,235	$25.87	$19.13	1,222	875	$253.99	$262.28
Pharmacy	$1,558,330	$1,466,995	$45.66	$44.95	13,160	12,772	$41.63	$42.24
Prof - Anesthesia	$102,733	$84,474	$3.01	$2.59	1,905	1,572	$18.96	$19.76
Prof - Child EPSDT	$16,735	$17,930	$0.49	$0.55	400	372	$14.71	$17.72
Prof - Evaluation & Management	$883,560	$884,615	$25.89	$27.11	5,220	5,220	$59.51	$62.32
Prof - Maternity	$880,094	$746,358	$25.79	$22.87	480	423	$644.29	$649.01
Prof - Other	$268,470	$289,410	$7.87	$8.87	8,656	8,795	$10.90	$12.10
Prof - Psych	$122,260	$142,964	$3.58	$4.38	736	956	$58.39	$54.99
Prof - Specialist	$171,617	$177,149	$5.03	$5.43	535	506	$112.76	$128.84
Prof - Vision	$139,867	$140,205	$4.10	$4.30	1,090	1,084	$45.12	$47.58
Radiology	$316,246	$312,903	$9.27	$9.59	2,183	2,146	$50.94	$53.61
Transportation/Ambulance	$45,018	$48,975	$1.32	$1.50	202	198	$78.43	$91.03
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$8,725,366	$8,220,020	$255.64	$251.89				

Virginia Medicaid

Exhibit 1d

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Far Southwest

Age 21-44 Female								
Far Southwest	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	55,620	57,038						
Service Type								
DME/Supplies	$219,617	$188,187	$3.95	$3.30	551	552	$85.96	$71.75
FQHC / RHC	$741,346	$746,510	$13.33	$13.09	2,731	2,463	$58.56	$63.77
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$2,823,700	$2,821,965	$50.77	$49.48	241	233	$2,530.20	$2,546.90
IP - Newborn	$3,202	$0	$0.06	$0.00	0	0	$3,201.54	-
IP - Other	$2,896,706	$2,558,662	$52.08	$44.86	107	95	$5,816.68	$5,660.76
IP - Psych	$376,109	$267,846	$6.76	$4.70	106	74	$769.14	$760.93
Lab	$1,473,297	$1,634,588	$26.49	$28.66	18,729	19,970	$16.97	$17.22
OP - Emergency Room	$1,757,741	$2,197,786	$31.60	$38.53	1,677	2,058	$226.13	$224.65
OP - Other	$2,998,506	$2,230,369	$53.91	$39.10	1,825	1,287	$354.39	$364.74
Pharmacy	$7,326,499	$7,904,916	$131.72	$138.59	30,033	29,707	$52.63	$55.98
Prof - Anesthesia	$271,160	$249,763	$4.88	$4.38	2,894	2,573	$20.21	$20.43
Prof - Child EPSDT	$24,206	$48,282	$0.44	$0.85	727	764	$7.19	$13.29
Prof - Evaluation & Management	$1,898,317	$1,975,229	$34.13	$34.63	7,181	6,941	$57.04	$59.87
Prof - Maternity	$1,772,624	$1,866,664	$31.87	$32.73	604	633	$633.53	$620.36
Prof - Other	$464,846	$463,292	$8.36	$8.12	6,403	6,585	$15.66	$14.80
Prof - Psych	$226,574	$214,743	$4.07	$3.76	884	824	$55.30	$54.84
Prof - Specialist	$823,368	$768,393	$14.80	$13.47	1,084	1,017	$163.82	$159.02
Prof - Vision	$47,620	$63,904	$0.86	$1.12	162	200	$63.41	$67.27
Radiology	$805,907	$825,103	$14.49	$14.47	3,588	3,423	$48.46	$50.71
Transportation/Ambulance	$142,154	$163,595	$2.56	$2.87	328	384	$93.40	$89.74
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$27,093,500	$27,189,797	$487.12	$476.70				

Virginia Medicaid

Exhibit 1d

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Far Southwest

Age 15-20 Male								
Far Southwest	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	29,125	28,564						
Service Type								
DME/Supplies	$69,810	$77,770	$2.40	$2.72	246	310	$116.94	$105.38
FQHC / RHC	$170,972	$177,897	$5.87	$6.23	918	959	$76.77	$77.96
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$6,644	$33,586	$0.23	$1.18	0	0	$6,644.05	$33,585.71
IP - Other	$461,025	$554,411	$15.83	$19.41	36	23	$5,238.92	$10,266.86
IP - Psych	$126,664	$46,013	$4.35	$1.61	67	29	$781.87	$676.67
Lab	$127,552	$120,990	$4.38	$4.24	3,470	3,516	$15.15	$14.46
OP - Emergency Room	$379,115	$475,514	$13.02	$16.65	787	984	$198.59	$202.95
OP - Other	$602,472	$392,365	$20.69	$13.74	641	451	$387.19	$365.67
Pharmacy	$1,311,420	$1,361,824	$45.03	$47.68	8,072	8,187	$66.94	$69.88
Prof - Anesthesia	$16,297	$15,254	$0.56	$0.53	305	310	$22.02	$20.70
Prof - Child EPSDT	$3,425	$3,454	$0.12	$0.12	226	234	$6.25	$6.19
Prof - Evaluation & Management	$491,854	$507,918	$16.89	$17.78	3,421	3,420	$59.25	$62.40
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$117,812	$151,415	$4.05	$5.30	3,141	3,249	$15.45	$19.58
Prof - Psych	$97,085	$114,365	$3.33	$4.00	866	849	$46.19	$56.59
Prof - Specialist	$142,936	$140,835	$4.91	$4.93	343	344	$171.80	$172.17
Prof - Vision	$84,803	$84,725	$2.91	$2.97	791	750	$44.19	$47.44
Radiology	$74,501	$70,075	$2.56	$2.45	1,314	1,266	$23.37	$23.25
Transportation/Ambulance	$22,901	$27,198	$0.79	$0.95	106	127	$89.11	$89.76
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$4,307,289	$4,355,609	$147.89	$152.48				

Virginia Medicaid

Exhibit 1d

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Far Southwest

Age 21-44 Male								
Far Southwest	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	11,881	11,836						
Service Type								
DME/Supplies	$80,100	$83,425	$6.74	$7.05	829	864	$97.56	$97.92
FQHC / RHC	$129,439	$123,796	$10.89	$10.46	1,640	1,496	$79.70	$83.87
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$682,651	$714,442	$57.46	$60.36	95	112	$7,262.24	$6,494.93
IP - Psych	$77,956	$47,144	$6.56	$3.98	101	65	$779.56	$736.63
Lab	$233,177	$229,908	$19.63	$19.42	11,400	12,277	$20.66	$18.99
OP - Emergency Room	$328,462	$444,845	$27.65	$37.58	1,452	2,041	$228.42	$220.99
OP - Other	$595,403	$425,352	$50.11	$35.94	1,391	890	$432.39	$484.46
Pharmacy	$1,534,326	$1,645,255	$129.14	$139.00	27,275	27,967	$56.82	$59.64
Prof - Anesthesia	$17,347	$14,724	$1.46	$1.24	833	825	$21.03	$18.09
Prof - Child EPSDT	$1,287	$1,172	$0.11	$0.10	542	522	$2.40	$2.28
Prof - Evaluation & Management	$337,930	$367,536	$28.44	$31.05	5,817	6,041	$58.68	$61.69
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$83,973	$63,211	$7.07	$5.34	2,912	2,829	$29.13	$22.66
Prof - Psych	$41,618	$47,927	$3.50	$4.05	743	855	$56.55	$56.85
Prof - Specialist	$134,675	$157,497	$11.34	$13.31	744	860	$182.73	$185.73
Prof - Vision	$7,461	$9,475	$0.63	$0.80	116	144	$64.88	$66.72
Radiology	$83,420	$74,492	$7.02	$6.29	2,572	2,554	$32.76	$29.57
Transportation/Ambulance	$23,015	$28,772	$1.94	$2.43	309	328	$75.21	$88.80
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$4,392,239	$4,478,972	$369.69	$378.42				

Virginia Medicaid

Exhibit 1d

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Far Southwest

Age 45 and Over								
Far Southwest	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	5,464	5,783						
Service Type								
DME/Supplies	$75,377	$74,053	$13.80	$12.80	2,616	2,011	$63.29	$76.42
FQHC / RHC	$91,604	$94,273	$16.77	$16.30	2,495	2,357	$80.64	$82.99
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$342,066	$667,715	$62.61	$115.46	119	158	$6,334.55	$8,785.72
IP - Psych	$58,620	$24,826	$10.73	$4.29	167	68	$771.32	$752.29
Lab	$118,540	$116,049	$21.70	$20.07	14,268	13,937	$18.25	$17.28
OP - Emergency Room	$119,964	$201,081	$21.96	$34.77	1,024	1,444	$257.43	$288.91
OP - Other	$484,368	$341,442	$88.65	$59.04	2,218	1,687	$479.57	$419.98
Pharmacy	$1,088,962	$1,190,095	$199.31	$205.78	50,049	52,417	$47.79	$47.11
Prof - Anesthesia	$12,124	$11,875	$2.22	$2.05	1,254	1,147	$21.23	$21.47
Prof - Child EPSDT	$1,520	$1,484	$0.28	$0.26	1,746	1,245	$1.91	$2.47
Prof - Evaluation & Management	$205,860	$233,563	$37.68	$40.39	7,569	7,603	$59.74	$63.75
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$121,780	$72,782	$22.29	$12.59	11,344	4,828	$23.58	$31.28
Prof - Psych	$38,980	$35,966	$7.13	$6.22	1,575	1,386	$54.37	$53.84
Prof - Specialist	$104,010	$118,649	$19.04	$20.52	1,518	1,465	$150.52	$168.06
Prof - Vision	$8,525	$10,189	$1.56	$1.76	310	307	$60.46	$68.84
Radiology	$66,364	$56,531	$12.15	$9.77	3,923	3,426	$37.16	$34.24
Transportation/Ambulance	$9,945	$13,453	$1.82	$2.33	312	315	$70.04	$88.50
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$2,948,608	$3,264,026	$539.69	$564.39				

Virginia Medicaid

Exhibit 1d

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Far Southwest

All Age Categories								
Far Southwest	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	407,323	405,194						
Service Type								
DME/Supplies	$1,349,464	$1,251,716	$3.31	$3.09	441	417	$90.17	$88.98
FQHC / RHC	$3,520,026	$3,521,306	$8.64	$8.69	1,947	1,963	$53.27	$53.11
Home Health	$32,063	$34,013	$0.08	$0.08	25	27	$37.50	$37.50
IP - Maternity	$4,148,906	$3,905,802	$10.19	$9.64	50	47	$2,468.12	$2,483.03
IP - Newborn	$288,308	$229,953	$0.71	$0.57	1	0	$14,415.38	$14,372.04
IP - Other	$7,768,198	$7,431,719	$19.07	$18.34	54	47	$4,237.97	$4,724.55
IP - Psych	$863,455	$703,202	$2.12	$1.74	33	28	$770.94	$752.89
Lab	$3,565,488	$3,625,482	$8.75	$8.95	6,941	7,024	$15.13	$15.29
OP - Emergency Room	$5,211,200	$6,404,500	$12.79	$15.81	928	1,170	$165.35	$162.08
OP - Other	$8,581,047	$6,328,439	$21.07	$15.62	838	543	$301.50	$344.99
Pharmacy	$24,727,811	$25,402,008	$60.71	$62.69	12,472	12,435	$58.41	$60.50
Prof - Anesthesia	$627,839	$585,832	$1.54	$1.45	875	826	$21.13	$21.00
Prof - Child EPSDT	$239,267	$267,561	$0.59	$0.66	742	766	$9.50	$10.35
Prof - Evaluation & Management	$10,352,779	$10,467,896	$25.42	$25.83	5,268	5,171	$57.90	$59.96
Prof - Maternity	$2,664,716	$2,625,403	$6.54	$6.48	123	124	$637.19	$629.44
Prof - Other	$2,772,355	$3,160,510	$6.81	$7.80	7,547	7,622	$10.82	$12.28
Prof - Psych	$1,178,768	$1,590,499	$2.89	$3.93	672	779	$51.64	$60.47
Prof - Specialist	$2,225,969	$2,216,405	$5.46	$5.47	424	423	$154.54	$155.12
Prof - Vision	$942,322	$1,010,480	$2.31	$2.49	599	601	$46.34	$49.80
Radiology	$1,894,536	$1,881,042	$4.65	$4.64	1,581	1,536	$35.30	$36.27
Transportation/Ambulance	$383,249	$483,579	$0.94	$1.19	122	140	$92.73	$102.26
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$83,337,765	$83,127,344	$204.60	$205.15				

Virginia Medicaid

Exhibit 1d

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Low Income Families with Children (LIFC)
PCCM Expansion - Roanoke/Alleghany and Far Southwest

All Age Categories								
PCCM Expansion	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	613,724	548,373						
Service Type								
DME/Supplies	$1,882,282	$1,733,356	$3.07	$3.16	404	409	$91.15	$92.73
FQHC / RHC	$3,909,727	$3,787,384	$6.37	$6.91	1,388	1,527	$55.07	$54.28
Home Health	$32,063	$38,189	$0.05	$0.07	17	23	$37.50	$36.13
IP - Maternity	$6,335,243	$5,803,425	$10.32	$10.58	48	50	$2,590.04	$2,527.62
IP - Newborn	$6,258,462	$2,586,483	$10.20	$4.72	28	22	$4,407.37	$2,625.87
IP - Other	$11,459,679	$10,489,429	$18.67	$19.13	49	44	$4,604.13	$5,177.41
IP - Psych	$1,730,274	$1,279,160	$2.82	$2.33	43	37	$780.11	$753.33
Lab	$5,170,583	$4,860,695	$8.42	$8.86	6,519	6,826	$15.51	$15.58
OP - Emergency Room	$7,410,311	$8,254,685	$12.07	$15.05	862	1,119	$168.13	$161.44
OP - Other	$13,135,699	$8,868,090	$21.40	$16.17	1,016	766	$252.79	$253.45
Pharmacy	$34,126,887	$31,321,260	$55.61	$57.12	11,562	11,629	$57.71	$58.94
Prof - Anesthesia	$866,616	$772,728	$1.41	$1.41	789	798	$21.48	$21.19
Prof - Child EPSDT	$364,559	$392,852	$0.59	$0.72	731	843	$9.75	$10.20
Prof - Evaluation & Management	$16,409,550	$14,919,283	$26.74	$27.21	5,402	5,378	$59.39	$60.70
Prof - Maternity	$3,916,158	$3,902,862	$6.38	$7.12	122	133	$627.19	$640.44
Prof - Other	$3,853,580	$4,111,027	$6.28	$7.50	6,566	7,389	$11.47	$12.18
Prof - Psych	$2,048,727	$2,217,297	$3.34	$4.04	797	799	$50.24	$60.74
Prof - Specialist	$3,440,304	$3,075,722	$5.61	$5.61	464	461	$145.01	$145.97
Prof - Vision	$1,380,612	$1,340,670	$2.25	$2.44	582	593	$46.41	$49.51
Radiology	$2,693,673	$2,590,606	$4.39	$4.72	1,520	1,549	$34.66	$36.60
Transportation/Ambulance	$552,549	$611,978	$0.90	$1.12	123	141	$87.76	$95.04
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$126,977,537	$112,957,181	$206.90	$205.99				

Virginia Medicaid

Exhibit 1e

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)
PCCM Roanoke-Alleghany

Age Under 1								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	78	63						
Service Type								
DME/Supplies	$9,312	$8,573	$120.07	$135.94	15,782	12,749	$91.29	$127.95
FQHC / RHC	$0	$0	$0.00	$0.00	0	0	-	-
Home Health	$0	$263	$0.00	$4.16	0	1,332	-	$37.50
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$41,241	$109,241	$531.75	$1,732.21	155	381	$41,240.82	$54,620.39
IP - Other	$40,462	$1,638	$521.71	$25.97	774	190	$8,092.46	$1,637.61
IP - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Lab	$356	$557	$4.59	$8.83	4,332	6,470	$12.72	$16.37
OP - Emergency Room	$273	$1,599	$3.52	$25.36	464	951	$91.02	$319.83
OP - Other	$478	$5,700	$6.16	$90.38	3,713	8,182	$19.91	$132.55
Pharmacy	$72,247	$20,682	$931.53	$327.96	15,627	11,988	$715.32	$328.29
Prof - Anesthesia	$0	$456	$0.00	$7.23	0	5,899	-	$14.70
Prof - Child EPSDT	$198	$154	$2.55	$2.44	2,785	2,664	$11.00	$11.00
Prof - Evaluation & Management	$26,130	$24,529	$336.91	$388.96	29,243	33,680	$138.25	$138.58
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$1,904	$4,432	$24.55	$70.28	14,235	68,121	$20.69	$12.38
Prof - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Specialist	$306	$2,549	$3.94	$40.42	309	2,474	$152.90	$196.10
Prof - Vision	$0	$289	$0.00	$4.59	0	951	-	$57.89
Radiology	$5,455	$3,220	$70.33	$51.06	26,303	20,741	$32.09	$29.54
Transportation/Ambulance	$310	$220	$4.00	$3.49	619	381	$77.50	$110.00
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$198,671	$184,102	$2,561.61	$2,919.27				

Virginia Medicaid

Exhibit 1e

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)
PCCM Roanoke-Alleghany

Age 1-5								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	1,106	612						
Service Type								
DME/Supplies	$97,345	$54,396	$88.02	$88.93	8,051	5,670	$131.19	$188.22
FQHC / RHC	$1,943	$1,507	$1.76	$2.46	217	392	$97.16	$75.37
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$67,528	$39,074	$61.06	$63.88	11	20	$67,527.97	$39,074.32
IP - Other	$57,897	$52,054	$52.35	$85.10	195	177	$3,216.53	$5,783.78
IP - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Lab	$8,581	$4,844	$7.76	$7.92	6,260	5,415	$14.87	$17.55
OP - Emergency Room	$8,443	$7,836	$7.63	$12.81	781	1,197	$117.26	$128.46
OP - Other	$102,535	$34,766	$92.71	$56.84	3,722	3,708	$298.94	$183.95
Pharmacy	$203,549	$115,005	$184.04	$188.02	16,199	16,224	$136.34	$139.06
Prof - Anesthesia	$4,921	$2,106	$4.45	$3.44	6,108	1,687	$8.74	$24.49
Prof - Child EPSDT	$1,190	$753	$1.08	$1.23	1,410	1,471	$9.15	$10.04
Prof - Evaluation & Management	$60,968	$30,913	$55.12	$50.54	10,633	9,848	$62.21	$61.58
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$54,023	$55,845	$48.84	$91.30	20,474	42,631	$28.63	$25.70
Prof - Psych	$4,024	$2,739	$3.64	$4.48	705	530	$61.90	$101.43
Prof - Specialist	$13,083	$8,773	$11.83	$14.34	749	785	$189.61	$219.33
Prof - Vision	$3,619	$1,256	$3.27	$2.05	825	530	$47.61	$46.52
Radiology	$53,011	$27,509	$47.93	$44.97	17,295	15,440	$33.26	$34.95
Transportation/Ambulance	$1,583	$1,055	$1.43	$1.72	174	314	$98.91	$65.94
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$744,242	$440,433	$672.91	$720.05				

Virginia Medicaid

Exhibit 1e

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)
PCCM Roanoke-Alleghany

Age 6-20								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	10,917	5,719						
Service Type								
DME/Supplies	$320,960	$176,244	$29.40	$30.82	2,341	2,237	$150.69	$165.33
FQHC / RHC	$11,841	$8,308	$1.08	$1.45	168	220	$77.39	$79.12
Home Health	$6,667	$959	$0.61	$0.17	100	65	$73.26	$30.92
IP - Maternity	$42,139	$7,436	$3.86	$1.30	18	6	$2,633.70	$2,478.50
IP - Newborn	$43,329	$32,616	$3.97	$5.70	2	4	$21,664.55	$16,307.85
IP - Other	$546,096	$145,080	$50.02	$25.37	87	59	$6,912.60	$5,181.42
IP - Psych	$222,262	$136,733	$20.36	$23.91	345	430	$707.84	$666.99
Lab	$84,379	$45,954	$7.73	$8.04	5,929	6,056	$15.64	$15.92
OP - Emergency Room	$110,786	$60,258	$10.15	$10.54	704	860	$173.10	$146.97
OP - Other	$407,604	$172,760	$37.34	$30.21	1,975	1,744	$226.82	$207.89
Pharmacy	$4,082,189	$2,291,034	$373.94	$400.63	21,328	21,780	$210.40	$220.74
Prof - Anesthesia	$13,991	$5,752	$1.28	$1.01	943	562	$16.31	$21.46
Prof - Child EPSDT	$3,257	$2,133	$0.30	$0.37	302	367	$11.84	$12.19
Prof - Evaluation & Management	$324,736	$156,061	$29.75	$27.29	5,900	5,265	$60.51	$62.20
Prof - Maternity	$22,703	$5,839	$2.08	$1.02	51	19	$493.54	$648.81
Prof - Other	$198,965	$91,097	$18.23	$15.93	7,773	6,902	$28.14	$27.70
Prof - Psych	$211,931	$115,077	$19.41	$20.12	5,691	3,649	$40.94	$66.17
Prof - Specialist	$54,718	$29,170	$5.01	$5.10	549	428	$109.66	$142.99
Prof - Vision	$35,712	$23,466	$3.27	$4.10	878	1,083	$44.70	$45.48
Radiology	$28,197	$12,150	$2.58	$2.12	1,192	1,022	$26.01	$24.95
Transportation/Ambulance	$16,945	$5,505	$1.55	$0.96	255	172	$73.04	$67.13
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$6,789,408	$3,523,633	$621.93	$616.18				

Virginia Medicaid

Exhibit 1e

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)
PCCM Roanoke-Alleghany

Age 21-44 Female								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	7,081	4,008						
Service Type								
DME/Supplies	$171,341	$81,766	$24.20	$20.40	3,064	2,760	$94.77	$88.68
FQHC / RHC	$26,171	$16,721	$3.70	$4.17	527	560	$84.15	$89.42
Home Health	$29,478	$0	$4.16	$0.00	622	0	$80.32	-
IP - Maternity	$100,227	$17,255	$14.15	$4.31	51	21	$3,340.89	$2,465.01
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,091,300	$568,041	$154.11	$141.73	242	237	$7,631.47	$7,190.40
IP - Psych	$172,951	$138,017	$24.42	$34.43	368	566	$797.01	$730.25
Lab	$172,910	$101,462	$24.42	$25.31	17,151	17,614	$17.08	$17.25
OP - Emergency Room	$232,887	$166,124	$32.89	$41.45	1,717	2,479	$229.90	$200.63
OP - Other	$558,866	$320,025	$78.92	$79.85	3,586	3,350	$264.11	$285.99
Pharmacy	$1,869,044	$1,116,593	$263.94	$278.59	46,762	46,580	$67.73	$71.77
Prof - Anesthesia	$21,452	$11,599	$3.03	$2.89	1,476	1,491	$24.63	$23.29
Prof - Child EPSDT	$3,444	$2,542	$0.49	$0.63	1,223	1,659	$4.77	$4.59
Prof - Evaluation & Management	$347,710	$216,693	$49.10	$54.06	10,625	11,087	$55.46	$58.52
Prof - Maternity	$31,584	$15,478	$4.46	$3.86	142	87	$376.01	$533.71
Prof - Other	$196,215	$114,423	$27.71	$28.55	38,176	40,059	$8.71	$8.55
Prof - Psych	$80,371	$51,451	$11.35	$12.84	2,608	2,904	$52.22	$53.04
Prof - Specialist	$117,055	$79,887	$16.53	$19.93	1,789	1,898	$110.85	$126.00
Prof - Vision	$12,602	$8,873	$1.78	$2.21	361	410	$59.16	$64.76
Radiology	$63,363	$37,640	$8.95	$9.39	3,687	3,862	$29.12	$29.18
Transportation/Ambulance	$25,281	$23,127	$3.57	$5.77	657	1,042	$65.16	$66.46
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$5,324,250	$3,087,717	$751.87	$770.38				

Virginia Medicaid

Exhibit 1e

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)
PCCM Roanoke-Alleghany

Age 21-44 Male								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	5,211	3,016						
Service Type								
DME/Supplies	$157,156	$121,424	$30.16	$40.25	2,259	2,108	$160.20	$229.10
FQHC / RHC	$9,637	$7,024	$1.85	$2.33	242	278	$91.78	$100.35
Home Health	$20	$6,712	$0.00	$2.23	32	489	$1.44	$54.57
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$1,280,551	$282,860	$245.72	$93.77	265	159	$11,135.23	$7,071.49
IP - Psych	$183,784	$101,147	$35.27	$33.53	532	501	$795.60	$802.75
Lab	$59,477	$37,200	$11.41	$12.33	8,540	9,361	$16.04	$15.81
OP - Emergency Room	$137,391	$110,300	$26.36	$36.57	1,170	1,953	$270.45	$224.64
OP - Other	$230,473	$193,748	$44.22	$64.23	2,259	2,061	$234.94	$374.03
Pharmacy	$1,293,525	$714,729	$248.21	$236.95	30,586	28,906	$97.38	$98.37
Prof - Anesthesia	$10,133	$6,346	$1.94	$2.10	1,135	1,182	$20.55	$21.37
Prof - Child EPSDT	$590	$487	$0.11	$0.16	325	1,953	$4.18	$0.99
Prof - Evaluation & Management	$191,342	$108,975	$36.72	$36.13	7,919	7,467	$55.64	$58.06
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$168,633	$110,475	$32.36	$36.62	21,838	42,257	$17.78	$10.40
Prof - Psych	$37,421	$21,588	$7.18	$7.16	1,683	1,699	$51.19	$50.56
Prof - Specialist	$64,350	$40,001	$12.35	$13.26	999	1,050	$148.27	$151.52
Prof - Vision	$7,345	$4,804	$1.41	$1.59	279	306	$60.70	$62.39
Radiology	$22,177	$17,012	$4.26	$5.64	2,524	2,470	$20.23	$27.39
Transportation/Ambulance	$14,975	$10,037	$2.87	$3.33	539	565	$64.00	$70.68
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$3,868,980	$1,894,869	$742.40	$628.18				

Virginia Medicaid

Exhibit 1e

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)
PCCM Roanoke-Alleghany

Age 45 and Over								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	17,709	10,442						
Service Type								
DME/Supplies	$701,479	$429,241	$39.61	$41.11	6,167	5,765	$77.08	$85.57
FQHC / RHC	$68,275	$46,846	$3.86	$4.49	512	564	$90.43	$95.41
Home Health	$82,778	$69,231	$4.67	$6.63	875	1,068	$64.07	$74.52
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$0	$0.00	$0.00	0	0	-	-
IP - Other	$5,711,647	$3,077,061	$322.52	$294.69	401	390	$9,648.05	$9,076.88
IP - Psych	$355,870	$215,968	$20.10	$20.68	303	305	$796.13	$814.97
Lab	$412,646	$243,834	$23.30	$23.35	17,173	17,228	$16.28	$16.27
OP - Emergency Room	$406,471	$352,066	$22.95	$33.72	987	1,374	$279.17	$294.37
OP - Other	$2,152,472	$1,139,679	$121.54	$109.15	3,969	3,834	$367.50	$341.63
Pharmacy	$7,289,032	$4,078,819	$411.59	$390.63	77,634	73,683	$63.62	$63.62
Prof - Anesthesia	$63,897	$36,368	$3.61	$3.48	2,008	1,917	$21.56	$21.80
Prof - Child EPSDT	$9,789	$11,567	$0.55	$1.11	1,483	2,073	$4.47	$6.41
Prof - Evaluation & Management	$1,058,629	$634,167	$59.78	$60.73	12,211	11,876	$58.74	$61.37
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$504,633	$418,808	$28.50	$40.11	32,087	39,947	$10.66	$12.05
Prof - Psych	$110,099	$61,073	$6.22	$5.85	1,447	1,343	$51.54	$52.24
Prof - Specialist	$531,204	$312,420	$30.00	$29.92	2,727	2,374	$131.98	$151.22
Prof - Vision	$46,388	$30,998	$2.62	$2.97	497	560	$63.20	$63.65
Radiology	$226,811	$135,337	$12.81	$12.96	4,558	4,711	$33.72	$33.02
Transportation/Ambulance	$94,613	$63,721	$5.34	$6.10	901	1,011	$71.14	$72.41
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$19,826,735	$11,357,204	$1,119.56	$1,087.67				

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Exhibit 1e

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)
PCCM Roanoke-Alleghany

All Age Categories								
Roanoke/Alleghany	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	42,102	23,859						
Service Type								
DME/Supplies	$1,457,594	$871,645	$34.62	$36.53	4,237	3,968	$98.06	$110.47
FQHC / RHC	$117,867	$80,406	$2.80	$3.37	383	439	$87.70	$92.10
Home Health	$118,943	$77,164	$2.83	$3.23	503	548	$67.43	$70.79
IP - Maternity	$142,366	$24,691	$3.38	$1.03	13	5	$3,094.91	$2,469.06
IP - Newborn	$152,098	$180,931	$3.61	$7.58	1	3	$38,024.47	$36,186.16
IP - Other	$8,727,954	$4,126,733	$207.30	$172.96	271	249	$9,168.02	$8,320.03
IP - Psych	$934,867	$591,865	$22.20	$24.81	345	395	$773.26	$753.97
Lab	$738,350	$433,851	$17.54	$18.18	12,875	13,289	$16.35	$16.42
OP - Emergency Room	$896,252	$698,184	$21.29	$29.26	1,052	1,504	$242.76	$233.43
OP - Other	$3,452,428	$1,866,678	$82.00	$78.24	3,169	3,036	$310.53	$309.26
Pharmacy	$14,809,587	$8,336,862	$351.75	$349.41	50,290	49,393	$83.93	$84.89
Prof - Anesthesia	$114,394	$62,627	$2.72	$2.62	1,639	1,432	$19.90	$21.99
Prof - Child EPSDT	$18,467	$17,635	$0.44	$0.74	990	1,566	$5.32	$5.67
Prof - Evaluation & Management	$2,009,514	$1,171,339	$47.73	$49.09	9,766	9,607	$58.64	$61.32
Prof - Maternity	$54,287	$21,317	$1.29	$0.89	37	19	$417.59	$560.97
Prof - Other	$1,124,372	$795,082	$26.71	$33.32	25,200	32,481	$12.72	$12.31
Prof - Psych	$443,846	$251,928	$10.54	$10.56	2,750	2,179	$46.00	$58.16
Prof - Specialist	$780,716	$472,801	$18.54	$19.82	1,734	1,620	$128.30	$146.79
Prof - Vision	$105,665	$69,686	$2.51	$2.92	554	628	$54.38	$55.79
Radiology	$399,013	$232,868	$9.48	$9.76	3,661	3,718	$31.06	$31.50
Transportation/Ambulance	$153,706	$103,665	$3.65	$4.34	628	739	$69.74	$70.52
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$36,752,286	$20,487,958	$872.93	$858.69				

Virginia Medicaid

Exhibit 1e

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)
PCCM Far Southwest

Age Under 1								
Far Southwest	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	56	76						
Service Type								
DME/Supplies	$3,143	$13,614	$56.12	$179.13	6,214	15,000	$108.36	$143.31
FQHC / RHC	$1,075	$1,134	$19.19	$14.92	57,429	2,526	$4.01	$70.86
Home Health	$113	$750	$2.01	$9.87	643	3,158	$37.50	$37.50
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$24,056	$0.00	$316.52	0	158	-	$24,055.74
IP - Other	$32,198	$19,936	$574.97	$262.32	1,714	947	$4,024.80	$3,322.75
IP - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Lab	$232	$231	$4.15	$3.04	3,857	3,000	$12.90	$12.15
OP - Emergency Room	$717	$810	$12.81	$10.65	1,500	947	$102.47	$134.94
OP - Other	$2,739	$2,741	$48.91	$36.07	3,000	1,737	$195.66	$249.22
Pharmacy	$32,835	$28,082	$586.34	$369.50	21,429	12,632	$328.35	$351.02
Prof - Anesthesia	$912	$764	$16.28	$10.05	9,857	7,895	$19.82	$15.28
Prof - Child EPSDT	$77	$176	$1.38	$2.32	1,500	2,526	$11.00	$11.00
Prof - Evaluation & Management	$13,343	$7,857	$238.28	$103.39	29,786	12,947	$96.00	$95.82
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$2,871	$3,825	$51.26	$50.33	46,714	40,579	$13.17	$14.88
Prof - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Specialist	$3,154	$2,621	$56.33	$34.48	1,929	1,105	$350.49	$374.38
Prof - Vision	$1,354	$0	$24.18	$0.00	1,286	0	$225.71	-
Radiology	$756	$2,715	$13.51	$35.72	11,571	14,053	$14.01	$30.51
Transportation/Ambulance	$288	$3,107	$5.13	$40.88	429	632	$143.75	$776.74
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$95,807	$112,419	$1,710.84	$1,479.20				

Virginia Medicaid

Exhibit 1e

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)
PCCM Far Southwest

Age 1-5								
Far Southwest	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	2,423	2,004						
Service Type								
DME/Supplies	$212,731	$212,692	$87.81	$106.12	7,178	8,843	$146.81	$144.00
FQHC / RHC	$16,502	$11,905	$6.81	$5.94	5,300	1,162	$15.42	$61.36
Home Health	$525	$9,638	$0.22	$4.81	69	1,539	$37.50	$37.50
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$25,864	$79,011	$10.68	$39.42	5	24	$25,864.10	$19,752.73
IP - Other	$316,401	$880,099	$130.61	$439.11	327	263	$4,793.95	$20,002.26
IP - Psych	$0	$0	$0.00	$0.00	0	0	-	-
Lab	$26,199	$18,781	$10.81	$9.37	9,362	7,951	$13.86	$14.14
OP - Emergency Room	$40,902	$25,939	$16.88	$12.94	1,184	1,317	$171.14	$117.91
OP - Other	$181,913	$141,111	$75.09	$70.40	2,719	1,958	$331.35	$431.53
Pharmacy	$628,140	$503,251	$259.29	$251.09	18,893	18,321	$164.69	$164.46
Prof - Anesthesia	$9,894	$10,657	$4.08	$5.32	2,090	3,065	$23.45	$20.81
Prof - Child EPSDT	$2,211	$1,627	$0.91	$0.81	1,110	1,006	$9.87	$9.69
Prof - Evaluation & Management	$155,037	$152,543	$64.00	$76.11	11,814	12,771	$65.01	$71.52
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$93,073	$95,018	$38.42	$47.41	23,187	19,823	$19.88	$28.70
Prof - Psych	$6,956	$11,412	$2.87	$5.69	1,268	1,383	$27.17	$49.40
Prof - Specialist	$29,496	$25,906	$12.18	$12.93	857	838	$170.50	$185.05
Prof - Vision	$7,180	$6,531	$2.96	$3.26	728	754	$48.84	$51.83
Radiology	$80,187	$38,139	$33.10	$19.03	11,571	7,388	$34.33	$30.91
Transportation/Ambulance	$11,463	$10,534	$4.73	$5.26	332	395	$171.09	$159.61
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$1,844,676	$2,234,796	$761.46	$1,115.00				

Virginia Medicaid

Exhibit 1e

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)
PCCM Far Southwest

Age 6-20								
Far Southwest	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	13,340	13,003						
Service Type								
DME/Supplies	$315,912	$323,090	$23.68	$24.85	1,949	2,162	$145.78	$137.90
FQHC / RHC	$130,633	$128,785	$9.79	$9.90	1,558	1,561	$75.42	$76.16
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$22,136	$33,292	$1.66	$2.56	10	13	$2,012.37	$2,378.03
IP - Newborn	$24,043	$23,858	$1.80	$1.83	3	2	$8,014.36	$11,928.79
IP - Other	$497,221	$452,285	$37.27	$34.78	75	67	$5,990.61	$6,195.68
IP - Psych	$193,671	$191,340	$14.52	$14.71	242	282	$719.97	$625.29
Lab	$131,087	$116,495	$9.83	$8.96	7,666	7,295	$15.38	$14.74
OP - Emergency Room	$176,522	$224,777	$13.23	$17.29	989	1,297	$160.62	$159.98
OP - Other	$546,945	$374,848	$41.00	$28.83	1,299	1,082	$378.77	$319.84
Pharmacy	$3,724,429	$4,449,058	$279.19	$342.15	22,852	22,885	$146.61	$179.41
Prof - Anesthesia	$13,789	$16,782	$1.03	$1.29	653	708	$18.99	$21.88
Prof - Child EPSDT	$3,471	$3,536	$0.26	$0.27	324	297	$9.64	$10.98
Prof - Evaluation & Management	$392,855	$404,830	$29.45	$31.13	5,816	5,959	$60.76	$62.70
Prof - Maternity	$12,172	$16,577	$0.91	$1.27	23	22	$468.14	$690.69
Prof - Other	$251,377	$381,936	$18.84	$29.37	9,522	14,606	$23.75	$24.13
Prof - Psych	$143,025	$217,028	$10.72	$16.69	2,886	3,551	$44.58	$56.40
Prof - Specialist	$69,219	$65,160	$5.19	$5.01	434	425	$143.31	$141.65
Prof - Vision	$51,643	$52,670	$3.87	$4.05	1,049	1,001	$44.29	$48.54
Radiology	$45,544	$43,923	$3.41	$3.38	1,422	1,486	$28.81	$27.28
Transportation/Ambulance	$16,817	$25,895	$1.26	$1.99	194	236	$77.86	$101.15
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$6,762,512	$7,546,165	$506.93	$580.33				

Virginia Medicaid

Exhibit 1e

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)
PCCM Far Southwest

Age 21-44 Female								
Far Southwest	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	20,676	19,767						
Service Type								
DME/Supplies	$429,129	$440,451	$20.75	$22.28	3,281	3,119	$75.90	$85.72
FQHC / RHC	$368,480	$336,296	$17.82	$17.01	3,268	2,905	$65.44	$70.28
Home Health	$0	$1,329	$0.00	$0.07	0	12	-	$69.95
IP - Maternity	$131,413	$104,995	$6.36	$5.31	26	24	$2,920.29	$2,692.18
IP - Newborn	$0	$7,042	$0.00	$0.36	0	1	-	$7,042.05
IP - Other	$2,420,650	$2,321,740	$117.07	$117.45	222	214	$6,336.78	$6,577.17
IP - Psych	$313,270	$287,880	$15.15	$14.56	236	231	$771.60	$757.58
Lab	$528,242	$541,632	$25.55	$27.40	18,695	19,822	$16.40	$16.59
OP - Emergency Room	$830,860	$1,153,013	$40.18	$58.33	1,882	2,624	$256.28	$266.78
OP - Other	$1,535,275	$1,331,344	$74.25	$67.35	2,190	1,674	$406.91	$482.72
Pharmacy	$6,289,372	$5,899,496	$304.19	$298.45	59,974	59,688	$60.86	$60.00
Prof - Anesthesia	$48,080	$48,330	$2.33	$2.44	1,273	1,387	$21.92	$21.16
Prof - Child EPSDT	$6,634	$6,712	$0.32	$0.34	1,450	1,634	$2.66	$2.49
Prof - Evaluation & Management	$993,953	$1,045,505	$48.07	$52.89	9,506	9,886	$60.68	$64.20
Prof - Maternity	$64,925	$55,735	$3.14	$2.82	86	50	$438.68	$671.50
Prof - Other	$252,983	$236,908	$12.24	$11.98	7,093	7,501	$20.70	$19.17
Prof - Psych	$146,560	$138,260	$7.09	$6.99	1,617	1,617	$52.61	$51.90
Prof - Specialist	$392,406	$367,617	$18.98	$18.60	1,426	1,575	$159.71	$141.72
Prof - Vision	$29,647	$33,482	$1.43	$1.69	283	294	$60.88	$69.18
Radiology	$246,283	$242,580	$11.91	$12.27	4,184	4,172	$34.16	$35.30
Transportation/Ambulance	$121,264	$108,962	$5.86	$5.51	851	905	$82.72	$73.13
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$15,149,424	$14,709,307	$732.70	$744.12				

Virginia Medicaid

Exhibit 1e

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)
PCCM Far Southwest

Age 21-44 Male								
Far Southwest	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	13,373	13,061						
Service Type								
DME/Supplies	$301,135	$236,932	$22.52	$18.14	2,449	2,249	$110.35	$96.79
FQHC / RHC	$174,135	$163,052	$13.02	$12.48	2,054	1,919	$76.07	$78.05
Home Health	$0	$0	$0.00	$0.00	0	0	-	-
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$0	$40,325	$0.00	$3.09	0	1	-	$40,325.04
IP - Other	$1,857,659	$1,447,525	$138.91	$110.83	211	195	$7,904.93	$6,827.95
IP - Psych	$221,855	$225,299	$16.59	$17.25	258	257	$773.01	$804.64
Lab	$213,908	$220,359	$16.00	$16.87	11,376	11,864	$16.87	$17.06
OP - Emergency Room	$388,373	$443,011	$29.04	$33.92	1,400	1,765	$248.96	$230.61
OP - Other	$593,388	$526,036	$44.37	$40.27	1,356	860	$392.71	$562.00
Pharmacy	$3,104,373	$2,873,763	$232.13	$220.02	39,469	38,069	$70.58	$69.35
Prof - Anesthesia	$18,714	$11,043	$1.40	$0.85	788	460	$21.31	$22.04
Prof - Child EPSDT	$1,729	$1,493	$0.13	$0.11	590	433	$2.63	$3.17
Prof - Evaluation & Management	$469,628	$463,550	$35.12	$35.49	6,879	6,620	$61.26	$64.34
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$83,471	$112,870	$6.24	$8.64	4,603	6,017	$16.27	$17.23
Prof - Psych	$65,893	$59,192	$4.93	$4.53	1,095	1,007	$54.01	$54.01
Prof - Specialist	$141,335	$120,575	$10.57	$9.23	856	836	$148.15	$132.50
Prof - Vision	$9,960	$16,006	$0.74	$1.23	145	228	$61.48	$64.54
Radiology	$77,979	$76,795	$5.83	$5.88	2,704	2,410	$25.88	$29.28
Transportation/Ambulance	$68,737	$71,451	$5.14	$5.47	858	893	$71.90	$73.51
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$7,792,271	$7,109,277	$582.67	$544.30				

Virginia Medicaid

Exhibit 1e

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)
PCCM Far Southwest

Age 45 and Over								
Far Southwest	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	60,748	61,264						
Service Type								
DME/Supplies	$2,696,856	$2,799,184	$44.39	$45.69	6,712	6,497	$79.37	$84.39
FQHC / RHC	$1,163,032	$1,150,903	$19.15	$18.79	2,976	2,792	$77.20	$80.74
Home Health	$0	$2,237	$0.00	$0.04	0	16	-	$26.95
IP - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
IP - Newborn	$17,257	$59,153	$0.28	$0.97	0	1	$17,257.37	$19,717.76
IP - Other	$14,729,109	$13,368,708	$242.46	$218.22	366	332	$7,948.79	$7,882.49
IP - Psych	$589,474	$658,909	$9.70	$10.76	146	163	$797.66	$790.06
Lab	$1,587,137	$1,647,276	$26.13	$26.89	18,693	19,027	$16.77	$16.96
OP - Emergency Room	$1,656,769	$2,248,713	$27.27	$36.71	1,045	1,302	$313.13	$338.36
OP - Other	$6,013,910	$5,968,791	$99.00	$97.43	2,723	2,405	$436.30	$486.06
Pharmacy	$24,250,870	$24,793,691	$399.21	$404.70	87,100	87,357	$55.00	$55.59
Prof - Anesthesia	$131,401	$134,052	$2.16	$2.19	1,192	1,287	$21.77	$20.39
Prof - Child EPSDT	$27,086	$25,481	$0.45	$0.42	1,573	1,330	$3.40	$3.75
Prof - Evaluation & Management	$3,268,933	$3,468,868	$53.81	$56.62	10,268	10,367	$62.89	$65.54
Prof - Maternity	$0	$0	$0.00	$0.00	0	0	-	-
Prof - Other	$1,474,568	$1,145,446	$24.27	$18.70	21,025	17,519	$13.85	$12.81
Prof - Psych	$268,245	$283,462	$4.42	$4.63	1,039	1,037	$50.98	$53.53
Prof - Specialist	$1,401,523	$1,458,324	$23.07	$23.80	2,066	1,928	$134.01	$148.13
Prof - Vision	$122,998	$159,436	$2.02	$2.60	408	473	$59.59	$65.96
Radiology	$775,542	$706,690	$12.77	$11.54	4,688	4,100	$32.68	$33.76
Transportation/Ambulance	$387,839	$388,896	$6.38	$6.35	966	963	$79.33	$79.12
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$60,562,548	$60,468,220	$996.95	$987.01				

Virginia Medicaid

Exhibit 1e

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)
PCCM Far Southwest

All Age Categories								
Far Southwest	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	110,616	109,176						
Service Type								
DME/Supplies	$3,958,906	$4,025,964	$35.79	$36.88	4,991	4,910	$86.05	$90.12
FQHC / RHC	$1,853,858	$1,792,075	$16.76	$16.41	2,827	2,531	$71.15	$77.82
Home Health	$638	$13,953	$0.01	$0.13	2	42	$37.50	$36.82
IP - Maternity	$153,549	$138,288	$1.39	$1.27	6	6	$2,741.95	$2,609.20
IP - Newborn	$67,165	$233,445	$0.61	$2.14	1	1	$13,432.91	$19,453.72
IP - Other	$19,853,237	$18,490,293	$179.48	$169.36	285	262	$7,557.38	$7,756.00
IP - Psych	$1,318,270	$1,363,428	$11.92	$12.49	185	198	$775.00	$757.46
Lab	$2,486,805	$2,544,774	$22.48	$23.31	16,267	16,702	$16.58	$16.75
OP - Emergency Room	$3,094,144	$4,096,262	$27.97	$37.52	1,241	1,596	$270.51	$282.11
OP - Other	$8,874,169	$8,344,871	$80.23	$76.44	2,286	1,922	$421.08	$477.29
Pharmacy	$38,030,020	$38,547,341	$343.80	$353.08	66,996	67,453	$61.58	$62.81
Prof - Anesthesia	$222,788	$221,628	$2.01	$2.03	1,117	1,175	$21.63	$20.74
Prof - Child EPSDT	$41,209	$39,025	$0.37	$0.36	1,270	1,150	$3.52	$3.73
Prof - Evaluation & Management	$5,293,749	$5,543,154	$47.86	$50.77	9,223	9,352	$62.27	$65.15
Prof - Maternity	$77,096	$72,311	$0.70	$0.66	19	12	$443.08	$675.81
Prof - Other	$2,158,343	$1,976,004	$19.51	$18.10	15,109	14,041	$15.50	$15.47
Prof - Psych	$630,679	$709,354	$5.70	$6.50	1,381	1,444	$49.53	$54.01
Prof - Specialist	$2,037,134	$2,040,203	$18.42	$18.69	1,577	1,534	$140.16	$146.19
Prof - Vision	$222,782	$268,125	$2.01	$2.46	437	479	$55.25	$61.50
Radiology	$1,226,292	$1,110,842	$11.09	$10.17	4,114	3,667	$32.33	$33.30
Transportation/Ambulance	$606,407	$608,844	$5.48	$5.58	824	847	$79.83	$79.04
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$92,207,238	$92,180,183	$833.58	$844.33				

Virginia Medicaid

Exhibit 1e

FY 2014 Capitation Rate Development
Fee-For-Service Data - PCCM Expansion
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)
PCCM Expansion - Roanoke/Alleghany and Far Southwest

All Age Categories								
PCCM Expansion	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	152,718	133,035						
Service Type								
DME/Supplies	$5,416,499	$4,897,609	$35.47	$36.81	4,783	4,741	$88.98	$93.18
FQHC / RHC	$1,971,725	$1,872,481	$12.91	$14.08	2,153	2,156	$71.96	$78.34
Home Health	$119,581	$91,117	$0.78	$0.68	140	133	$67.14	$62.03
IP - Maternity	$295,915	$162,978	$1.94	$1.23	8	6	$2,901.13	$2,586.95
IP - Newborn	$219,262	$414,375	$1.44	$3.11	1	2	$24,362.49	$24,375.02
IP - Other	$28,581,191	$22,617,026	$187.15	$170.01	281	260	$7,985.80	$7,853.13
IP - Psych	$2,253,136	$1,955,292	$14.75	$14.70	229	233	$774.27	$756.40
Lab	$3,225,155	$2,978,625	$21.12	$22.39	15,332	16,090	$16.53	$16.70
OP - Emergency Room	$3,990,396	$4,794,446	$26.13	$36.04	1,189	1,580	$263.74	$273.80
OP - Other	$12,326,597	$10,211,549	$80.71	$76.76	2,530	2,122	$382.90	$434.16
Pharmacy	$52,839,607	$46,884,203	$345.99	$352.42	62,390	64,214	$66.55	$65.86
Prof - Anesthesia	$337,182	$284,256	$2.21	$2.14	1,261	1,221	$21.01	$21.00
Prof - Child EPSDT	$59,676	$56,661	$0.39	$0.43	1,193	1,224	$3.93	$4.17
Prof - Evaluation & Management	$7,303,264	$6,714,493	$47.82	$50.47	9,373	9,398	$61.23	$64.44
Prof - Maternity	$131,384	$93,628	$0.86	$0.70	24	13	$432.18	$645.71
Prof - Other	$3,282,714	$2,771,085	$21.50	$20.83	17,891	17,348	$14.42	$14.41
Prof - Psych	$1,074,525	$961,283	$7.04	$7.23	1,759	1,575	$48.01	$55.04
Prof - Specialist	$2,817,850	$2,513,004	$18.45	$18.89	1,620	1,549	$136.66	$146.30
Prof - Vision	$328,447	$337,811	$2.15	$2.54	469	506	$54.97	$60.23
Radiology	$1,625,306	$1,343,710	$10.64	$10.10	3,989	3,676	$32.01	$32.97
Transportation/Ambulance	$760,113	$712,509	$4.98	$5.36	770	827	$77.56	$77.67
Non ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$128,959,525	$112,668,142	$844.43	$846.90				

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Exhibit 2a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Pharmacy Adjustment

		LIFC	ABAD	ALTC	Source
1.	Health Plan Total Drug Cost PMPM	$30.71	$262.76	$426.55	FY11-12 Health Plan Encounter Data
2.	Health Plan Drug Ingredient Cost PMPM	$29.67	$256.70	$417.74	Health Plan Encounter Analysis
3.	Change in Average Managed Care Discount	0.2%	0.2%	0.2%	From Plan Data
4.	Current Average Managed Care Rebate	2.3%	2.3%	2.3%	From Plan Data
5.	FY14 Managed Care Dispensing Fee PMPM	$0.61	$3.59	$5.19	From Plan Data
6.	Average PBM Admin Cost PMPM	$0.13	$0.74	$1.10	From Plan Data
7.	Adjusted PMPM with FY14 Pharmacy Pricing Arrangements	$29.67	$254.62	$413.60	= (2.) * (1 - (3.)) * (1 - (4.)) + (5.) + (6.)
8.	**Pharmacy Adjustment**	**-3.4%**	**-3.1%**	**-3.0%**	= (7.) / (1.) - 1

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Exhibit 2b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Exempt Infant Formula Carveout Adjustment

		LIFC Age 0-5	LIFC Age 6-20	ABAD Age 0-5	ABAD Age 6-20	ALTC Age 0-5	ALTC Age 6-20	Source
1.	Claims Associated with Exempt Infant Formula	$67,942	$14,123	$50,070	$56,769	$16,506	$31,693	FY11-12 Health Plan Encounter Data
2.	Total Claims in DME/Supplies Service Category	$8,852,668	$6,757,531	$3,140,255	$5,624,338	$1,456,233	$2,457,988	FY11-12 Health Plan Encounter Data
3.	**Exempt Infant Formula Carveout Adjustment**	**-0.8%**	**-0.2%**	**-1.6%**	**-1.0%**	**-1.1%**	**-1.3%**	= (1.) / (2.)

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Exhibit 2c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Hospital Inpatient Adjustments

		LIFC and ABAD		ALTC		Source
		IP - Med/Surg	IP - Psych	IP - Med/Surg	IP - Psych	
1a.	FY11 Total Claims in IP Service Categories	$357,840,941	$33,136,381	$11,298,473	$443,121	FY11 Health Plan Encounter Data
1b.	FY12 Total Claims in IP Service Categories	$372,743,425	$34,860,616	$14,617,323	$684,191	FY12 Health Plan Encounter Data
2.	FY11-12 Hospital Capital Percentage	9.7%	9.7%	9.7%	9.7%	Provided by DMAS
3.	% Excluded Claims from Freestanding Psych Hospitals	0.0%	12.4%	0.0%	9.0%	FY11-12 Health Plan Encounter Data
4a.	FY12 Capital Reimbursement Reduction	5.3%	5.3%	5.3%	5.3%	Provided by DMAS
4b.	Dollar Change	($1,851,330)	($150,251)	($58,454)	($2,087)	= - (1a.) * (2.) * (1 - (3.)) * (4a.)
5a.	FY13 Hospital Rate Change	2.6%	2.6%	2.6%	2.6%	Provided by DMAS
5b.	Dollar Change	$17,152,561	$1,399,155	$608,448	$24,089	= ((1a.) + (1b.)) * (1 - (2.)) * (1 - (3.)) * (5a.)
6a.	FY14 Hospital Rate Change	4.7%	-7.4%	4.7%	-7.4%	Provided by DMAS
6b.	Dollar Change	$31,601,749	($4,067,655)	$1,120,999	($70,032)	= ((1a.) + (1b.)) * (1 - (2.)) * (1 - (3.)) * (1 + (5a.)) * (6a.)
7.	**Hospital Inpatient Adjustment**	**6.4%**	**-4.1%**	**6.4%**	**-4.3%**	= ((4b.) + (5b.) + (6b.)) / ((1a.) + (1b.))

Virginia Medicaid

Exhibit 2d

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Freestanding Psychiatric Hospital Rate Adjustment

	LIFC and ABAD	ALTC	Source
1a. FY11 Total Claims in IP Service Categories	$33,136,381	$443,121	FY11 Health Plan Encounter Data
1b. FY12 Total Claims in IP Service Categories	$34,860,616	$684,191	FY12 Health Plan Encounter Data
2. FY11-12 Hospital Capital Percentage	3.9%	3.9%	Provided by DMAS
3. % Excluded Claims from Freestanding Psych Hospitals	12.4%	9.0%	FY11-12 Health Plan Encounter Data
4a. FY12 Capital Reimbursement Reduction	5.3%	5.3%	Provided by DMAS
4b. Dollar Change	($8,517)	($83)	= - (1a.) * (2.) * (3.) * (4a.)
5a. FY13 Hospital Rate Change	2.6%	2.6%	Provided by DMAS
5b. Dollar Change	$209,941	$2,531	= ((1a.) + (1b.)) * (1 - (2.)) * (3.) * (5a.)
6a. FY14 Hospital Rate Change	-0.9%	-0.9%	Provided by DMAS
6b. Dollar Change	($74,316)	($896)	= ((1a.) + (1b.)) * (1 - (2.)) * (3.) * (1 + (5a.)) * (6a.)
7. Freestanding Psychiatric Hospital Rate Adjustment	**0.2%**	**0.1%**	= ((4b.) + (5b.) + (6b.)) / ((1a.) + (1b.))

Virginia Medicaid

Exhibit 2e

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Hospital Outpatient Adjustment

			LIFC	ABAD	ALTC	Source
1.	Claims Associated with FY11 Outpatient Services	a. OP - Emergency Room & Related	$99,420,809	$32,910,652	$1,341,944	FY11 Health Plan Encounter Data
		b. OP - Other	$116,927,184	$70,675,484	$5,757,989	FY11 Health Plan Encounter Data
2.	Claims Associated with FY12 Outpatient Services	a. OP - Emergency Room & Related	$100,474,340	$35,153,632	$1,866,738	FY12 Health Plan Encounter Data
		b. OP - Other	$116,962,304	$70,864,311	$6,368,448	FY12 Health Plan Encounter Data
3.	% ER Triage of Total Outpatient		6.0%	6.0%	6.0%	Provided by DMAS
4.	% FY11 OP - Emergency Room & Related of Total Outpatient		46.0%	31.8%	18.9%	= (1a.) / ((1a.) + (1b.))
5.	% FY11 Claims Exempt from Fee Reduction		13.1%	18.9%	31.7%	= (3.) / (4.)
6.	FY12 Hospital Outpatient Rate Reduction		5.0%	5.0%	5.0%	Provided by DMAS
7.	Dollar Change	a. OP - Emergency Room & Related	($4,321,996)	($1,334,774)	($45,797)	= - (1a.) * (1 - (5.)) * (6.)
		b. OP - Other	($5,846,359)	($3,533,774)	($287,899)	= - (1b.) * (6.)
8.	**Hospital Outpatient Adjustment**	**a. OP - Emergency Room & Related**	**-2.2%**	**-2.0%**	**-1.4%**	= (7a.) / ((1a.) + (2a.))
		b. OP - Other	**-2.5%**	**-2.5%**	**-2.4%**	= (7b.) / ((1b.) + (2b.))

Virginia Medicaid

Exhibit 2f

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Behavioral Health Utilization Adjustment

		LIFC Age 6 - 20	ABAD Age 6 - 20	Source
1.	Estimated additional annual expenditures effective FY12	$900,000		Provided by DMAS
2.	% Allocation	75.7%	16.2%	FY11 Health Plan Encounter Data
3.	Estimated additional annual expenditures by Aid Category	$681,165	$145,499	= (1.) * (2.)
4.	Prof - Psych Service Category - Ages 6 - 20	$8,563,740	$1,988,223	FY11 Health Plan Encounter Data
5.	**Behavioral Health Utilization Adjustment**	**4.0%**	**3.7%**	= (3.) / (4.) * (12/24 months)

Virginia Medicaid

Exhibit 2g

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Emergency Transportation Adjustment

		LIFC CHILD	LIFC ADULT	ABAD	ALTC	Source
1.	Claims Associated with Transportation	$33,726,686	$9,934,820	$16,808,495	$1,138,276	FY11-12 Health Plan Encounter Data
2.	Base Period Member Months	9,916,678	1,726,561	1,390,735	46,924	FY11-12 Health Plan Encounter Data
3.	Total Trend Factor for Transportation	1.0211	1.0386	1.1042	1.0170	FY10-12 Health Plan Encounter Data
4.	Trended Base Period Transportation PMPM	$3.47	$5.98	$13.35	$24.67	= (1.) / (2.) * (3.)
5.	FY13 Emergency Transportation Dollar Increase	$0.05	$0.05	$0.05	$0.05	Provided by DMAS. PMPM based on annualized Feb 2013 Member
6.	**Emergency Transportation Adjustment**	**1.5%**	**0.9%**	**0.4%**	**0.2%**	= (5.) / (6.)

Virginia Medicaid

Exhibit 2h

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Provider Incentive Payment Adjustment

	LIFC and ABAD	ALTC	Source
Provider Incentive Payment Adjustment	**0.8%**	**0.1%**	From Plan Data

Virginia Medicaid

Exhibit 2i

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Administrative Cost Adjustment

		LIFC Child	LIFC Adult	ABAD	ALTC	Source
1.	Claims Adjustment Expense PMPM	$2.94	$9.37	$18.99	$39.25	Expense from CY2012 BOI Reports; Member months from capitation payment files
2.	General Admin Expense PMPM	$8.75	$27.83	$56.42	$116.61	Expense from CY2012 BOI Reports; Member months from capitation payment files
3.	Claims Adjustment Expense Increase %	1.7%	1.7%	1.7%	1.7%	BLS CPI-U
4.	General Admin Expense Increase %	1.8%	1.8%	1.8%	1.8%	Weighted average of BLS Compensation Trend and CPI
5a.	Administrative PMPM*	$12.00	$38.19	$77.43	$160.03	= (1.) * (1+ (3.)) ^ (18 months/12) + (2.) * (1+ (4.)) ^ (18 months/12)
5b.	Administrative PMPM Weighted by Claims	$14.10	$38.22	$63.96	$110.47	Reallocation of administrative costs weighted by claims
6.	Adjusted and Trended Base PMPM	$149.10	$474.41	$961.81	$1,987.95	Weighted average of medical component of FY2014 MedII Base Rates
7.	Administrative allowance as % of Base Capitation Rate	8.51%	7.34%	6.14%	5.19%	= (5b.) / (((5b.) + (6.)) / (1 - 1.5%))
8.	Contribution to Reserves as % of Base Capitation Rate	1.50%	1.50%	1.50%	1.50%	Provided by DMAS
9.	**Administrative Factor as % of Base Capitation Rate**	**10.0%**	**8.8%**	**7.6%**	**6.7%**	= (7.) + (8.)

*Note:

Administrative increases are applied from midpoint of CY2012 to the midpoint of the contract period (18 months) using compound interest calculations.

Virginia Medicaid

Exhibit 3a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Incurred But Not Reported (IBNR), Policy/Program, and Trend Adjustments - LIFC Child Under 21

	LIFC Child Under 21							
	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend	Total Trend Factor
Category of Service	IBNR	Policy/ Program[1]	Total Base Data Adjustments	Cost Trend	Utilization Trend	Cost and Utilization Trend		
Inpatient Medical/Surgical	4.0%	6.4%	10.7%	8.2%	-1.5%	6.5%	0.0%	1.0654
Inpatient Psychiatric	0.7%	-4.0%	-3.3%	7.4%	-3.3%	3.8%	6.8%	1.1460
Outpatient Hospital	1.4%	-2.3%	-1.0%	-2.2%	3.7%	1.4%	0.8%	1.0265
Practitioner	0.6%	0.2%	0.7%	4.3%	1.1%	5.5%	4.0%	1.1186
Prescription Drug	0.0%	-3.4%	-3.4%	9.3%	0.7%	10.1%	9.8%	1.2670
Other	0.9%	0.5%	1.5%	1.8%	-1.3%	0.5%	1.1%	1.0211
Weighted Average[2]	**1.4%**	**0.4%**	**1.8%**	**4.7%**	**0.7%**	**5.4%**	**3.3%**	**1.1073**
Months of Trend Applied				12	12	12	18	

[1] The Policy and Program Adjustments are summarized in this table as weighted averages and are applied at the rate cell level in Exhibits 4a - 4e.

[2] Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY11-12), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY11-12 Claims)

Trend rates for managed care plans are calculated based on regression studies of historical health plan data.

Trend rates have been calculated separately for the broad service categories shown above. Utilization trend is based on service units per thousand.

Data period trends are applied from the midpoint of the data period to the end of the data period using compound interest calculations; includes FY11-12 incurred claims paid through Oct 2012.

Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes FY10-12 incurred claims paid through Feb 2013.

Total Trend = [(1 + data period trend) ^ (months/12) * (1 + contract period trend) ^ (months/12)]

Virginia Medicaid

Exhibit 3b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Incurred But Not Reported (IBNR), Policy/Program, and Trend Adjustments - LIFC Adult 21 and Over

	LIFC Adult 21 and Over							
	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend	Total Trend Factor
Category of Service	IBNR	Policy/ Program[1]	Total Base Data Adjustments	Cost Trend	Utilization Trend	Cost and Utilization Trend		
Inpatient Medical/Surgical	1.0%	6.4%	7.5%	3.4%	-4.3%	-1.0%	0.0%	0.9903
Inpatient Psychiatric	0.3%	-4.0%	-3.7%	1.0%	0.3%	1.3%	0.7%	1.0243
Outpatient Hospital	1.3%	-2.3%	-1.0%	-4.3%	3.9%	-0.6%	0.0%	0.9940
Practitioner	0.7%	0.0%	0.7%	1.6%	1.3%	2.9%	2.7%	1.0710
Prescription Drug	0.0%	-3.4%	-3.4%	8.9%	3.2%	12.4%	9.5%	1.2889
Other	0.7%	0.2%	0.9%	3.1%	-1.6%	1.5%	1.5%	1.0386
Weighted Average[2]	**0.8%**	**0.3%**	**1.1%**	**2.0%**	**0.7%**	**2.6%**	**2.4%**	**1.0668**
Months of Trend Applied				12	12	12	18	

[1] The Policy and Program Adjustments are summarized in this table as weighted averages and are applied at the rate cell level in Exhibits 4a - 4e.

[2] Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY11-12), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY11-12 Claims)

Trend rates for managed care plans are calculated based on regression studies of historical health plan data.

Trend rates have been calculated separately for the broad service categories shown above. Utilization trend is based on service units per thousand.

Data period trends are applied from the midpoint of the data period to the end of the data period using compound interest calculations; includes FY11-12 incurred claims paid through Oct 2012.

Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes FY10-12 incurred claims paid through Feb 2013.

Total Trend = [(1 + data period trend) ^ (months/12) * (1 + contract period trend) ^ (months/12)]

Virginia Medicaid

Exhibit 3c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Incurred But Not Reported (IBNR), Policy/Program, and Trend Adjustments - ABAD

	ABAD All Age Categories							
	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend	Total Trend Factor
Category of Service	IBNR	Policy/ Program[1]	Total Base Data Adjustments	Cost Trend	Utilization Trend	Cost and Utilization Trend		
Inpatient Medical/Surgical	2.8%	6.4%	9.4%	7.9%	-0.8%	7.0%	0.5%	1.0779
Inpatient Psychiatric	0.9%	-4.0%	-3.1%	2.2%	-7.1%	-5.1%	0.0%	0.9493
Outpatient Hospital	1.5%	-2.2%	-0.8%	-5.1%	5.8%	0.4%	1.8%	1.0316
Practitioner	1.1%	0.1%	1.1%	5.4%	1.8%	7.3%	7.4%	1.1943
Prescription Drug	0.0%	-3.1%	-3.1%	6.8%	3.1%	10.1%	6.8%	1.2155
Other	1.3%	-0.1%	1.2%	1.7%	2.8%	4.6%	3.7%	1.1042
Weighted Average[2]	**1.2%**	**0.0%**	**1.2%**	**4.2%**	**2.0%**	**6.2%**	**4.0%**	**1.1272**
Months of Trend Applied				12	12	12	18	

[1] The Policy and Program Adjustments are summarized in this table as weighted averages and are applied at the rate cell level in Exhibits 4a - 4e.

[2] Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY11-12), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY11-12 Claims)

Trend rates for managed care plans are calculated based on regression studies of historical health plan data.

Trend rates have been calculated separately for the broad service categories shown above. Utilization trend is based on service units per thousand.

Data period trends are applied from the midpoint of the data period to the end of the data period using compound interest calculations; includes FY11-12 incurred claims paid through Oct 2012.

Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes FY10-12 incurred claims paid through Feb 2013.

Total Trend = [(1 + data period trend) ^ (months/12) * (1 + contract period trend) ^ (months/12)]

Virginia Medicaid

Exhibit 3d

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Incurred But Not Reported (IBNR), Policy/Program, and Trend Adjustments - ALTC

	ALTC All Age Categories							
	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend[3]	Total Trend Factor
Category of Service	IBNR	Policy/ Program[1]	Total Base Data Adjustments	Cost Trend	Utilization Trend	Cost and Utilization Trend		
Inpatient Medical/Surgical		6.4%	7.5%					
Inpatient Psychiatric		-4.1%	-3.2%					
Outpatient Hospital		-1.9%	-0.9%					
Practitioner		0.0%	1.0%					
Prescription Drug		-3.0%	-2.1%					
Other		-0.4%	0.6%					
Weighted Average[2]	**1.0%**	**0.7%**	**1.7%**	**-1.1%**	**2.6%**	**1.5%**	**0.2%**	**1.0170**
Months of Trend Applied[3]				11	11	11	18	

[1] The Policy and Program Adjustments are summarized in this table as weighted averages and are applied at the rate cell level in Exhibits 4a - 4e.

[2] Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY11-12), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY11-12 Claims)

[3] Contract period trend and data period trend months were adjusted to reflect population growth of the ALTC population

Trend rates for managed care plans are calculated based on regression studies of historical health plan data. For ALTC, the trend was developed from the EDCD waiver population and adjusted for change in the ALTC mix between EDCD and non-EDCD for the base data period through the midpoint of the contract period.

Utilization trend is based on service units per thousand.

Data period trends are applied from the weighted midpoint of the data period to the end of the data period using compound interest calculations; includes FY11-12 incurred claims paid through Oct 2012.

Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes FY10-12 incurred claims paid through Feb 2013.

Total Trend = [(1 + data period trend) ^ (months/12) * (1 + contract period trend) ^ (months/12)]

Virginia Medicaid

PCCM Exhibit 2a

FY 2014 Capitation Rate Development
Fee-for-Service Data - PCCM Roanoke-Alleghany and Far Southwest
Pharmacy Adjustment

		LIFC Child	LIFC Adult	ABAD	Source
1a.	Member Months	944,685	217,413	285,754	FY11-12 PCCM Data
1b.	FFS Scripts	550,850	440,283	1,428,945	FY11-12 PCCM Data
1c.	FFS Net Payments	$35,841,429	$23,264,364	$94,042,916	FY11-12 PCCM Data
2a.	FFS Annual Utilization per 1000 Members	6,997	24,301	60,007	= (1b.) / (1a.) * 12000
2b.	All MCO Annual Utilization per 1000 Members	6,121	28,439	54,085	FY11-12 Health Plan Encounter Data
3.	FFS Net Cost PMPM	$37.94	$107.01	$329.10	= (1c.) / (1a.)
4.	FFS Net Cost per Script	$65.07	$52.84	$65.81	= (1c.) / (1b.)
5.	Average FFS Copayment per Script	$0.00	$1.33	$1.37	FY11-12 PCCM Data
6.	Average FFS value of Dispensing Fees	$3.63	$3.42	$3.54	FY11-12 PCCM Data
7.	FFS Ingredient Cost per Script	$61.43	$50.75	$63.64	= (4.) + (5.) - (6.)
8.	Average MCO Rebate	2.3%	2.3%	2.3%	From MCO Plan Data
9.	FFS Ingredient Cost per Script with Rebate	$60.00	$49.57	$62.16	= (7.) * (1 - (8.))
10.	Brand-Generic Improvement Adjustment	0.986	0.970	1.000	Assumes a shift to MCO Brand-Generic Mix in 3 years
11.	Adjusted FFS Ingredient Cost per Script with Brand-Generic Improvement Adjustment	$59.15	$48.07	$62.16	= (9.) * (10.)
12.	Managed Care Savings Utilization Reduction	0.917	1.000	0.934	Assumes a shift to MCO Utilization in 3 years
13.	Adjusted FFS Ingredient Cost per Script with MC Savings Utilization Reduction	$54.21	$48.07	$58.07	= (11.) * (12.)
14.	MCO Average Dispensing Fees	$0.99	$0.99	$0.99	From MCO Plan Data
15.	Adjusted Cost per Script	$55.20	$49.06	$59.05	= (13.) + (14.)
16.	MCO Average PBM Admin Cost PMPM	$0.61	$0.61	$3.59	From MCO Plan Data
17.	Adjusted Cost PMPM	$32.80	$99.96	$298.90	= (15.) * (1b.) / (1a.) + (16.)
18.	**Pharmacy Adjustment Factor**	**-13.6%**	**-6.6%**	**-9.2%**	= (17.) / (3.) - 1

Virginia Medicaid

PCCM Exhibit 2b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Exempt Infant Formula Carveout Adjustment

		LIFC Age 0-5	LIFC Age 6-20	ABAD Age 0-5	ABAD Age 6-20	Source
1.	Claims Associated with Exempt Infant Formula	$67,942	$14,123	$50,070	$56,769	FY11-12 Health Plan Encounter Data
2.	Total Claims in DME/Supplies Service Category	$8,852,668	$6,757,531	$3,140,255	$5,624,338	FY11-12 Health Plan Encounter Data
3.	**Exempt Infant Formula Carveout Adjustment**	**-0.8%**	**-0.2%**	**-1.6%**	**-1.0%**	= - (1.) / (2.)

Virginia Medicaid

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Hospital Inpatient Adjustments

PCCM Exhibit 2c

	Inpatient Medical/Surgical	Inpatient Psychiatric	Source
1a. FY11 Total Claims in IP Service Categories	$357,840,941	$33,136,381	FY11 Health Plan Encounter Data
1b. FY12 Total Claims in IP Service Categories	$372,743,425	$34,860,616	FY12 Health Plan Encounter Data
2. FY11-12 Hospital Capital Percentage	9.7%	9.7%	Provided by DMAS
3. % Excluded Claims from Freestanding Psych Hospitals	0.0%	12.4%	FY11-12 Health Plan Encounter Data
4a. FY12 Capital Reimbursement Reduction	5.3%	5.3%	Provided by DMAS
4b. Dollar Change	($1,851,330)	($150,251)	= - (1a.) * (2.) * (1 - (3.)) * (4a.)
5a. FY13 Hospital Rate Change	2.6%	2.6%	Provided by DMAS
5b. Dollar Change	$17,152,561	$1,399,155	= ((1a.) + (1b.)) * (1 - (2.)) * (1 - (3.)) * (5a.)
6a. FY14 Hospital Rate Change	4.7%	-7.4%	Provided by DMAS
6b. Dollar Change	$31,601,749	($4,067,655)	= ((1a.) + (1b.)) * (1 - (2.)) * (1 - (3.)) * (1 + (5a.)) * (6a.)
7. Hospital Inpatient Adjustment	**6.4%**	**-4.1%**	= ((4b.) + (5b.) + (6b.)) / ((1a.) + (1b.))

Virginia Medicaid

PCCM Exhibit 2d

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Freestanding Psychiatric Hospital Rate Adjustment

	Adjustment Values	Source
1a. FY11 Total Claims in IP Service Categories	$33,136,381	FY11 Health Plan Encounter Data
1b. FY12 Total Claims in IP Service Categories	$34,860,616	FY12 Health Plan Encounter Data
2. FY11-12 Hospital Capital Percentage	3.9%	Provided by DMAS
3. % Excluded Claims from Freestanding Psych Hospitals	12.4%	FY11-12 Health Plan Encounter Data
4a. FY12 Capital Reimbursement Reduction	5.3%	Provided by DMAS
4b. Dollar Change	($8,517)	= - (1a.) * (2.) * (3.) * (4a.)
5a. FY13 Hospital Rate Change	2.6%	Provided by DMAS
5b. Dollar Change	$209,941	= ((1a.) + (1b.)) * (1 - (2.)) * (3.) * (5a.)
6a. FY14 Hospital Rate Change	-0.9%	Provided by DMAS
6b. Dollar Change	($74,316)	= ((1a.) + (1b.)) * (1 - (2.)) * (3.) * (1 + (5a.)) * (6a.)
7. FY14 Hospital Rate Change	**0.2%**	Provided by DMAS

Virginia Medicaid

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Hospital Outpatient Adjustment

PCCM Exhibit 2e

			LIFC	ABAD	Source
1.	Claims Associated with FY11 Outpatient Services	a. OP - Emergency Room & Related	$99,420,809	$32,910,652	FY11 Health Plan Encounter Data
		b. OP - Other	$116,927,184	$70,675,484	FY11 Health Plan Encounter Data
2.	Claims Associated with FY12 Outpatient Services	a. OP - Emergency Room & Related	$100,474,340	$35,153,632	FY12 Health Plan Encounter Data
		b. OP - Other	$116,962,304	$70,864,311	FY12 Health Plan Encounter Data
3.	% ER Triage of Total Outpatient		6.0%	6.0%	Provided by DMAS
4.	% FY11 OP - Emergency Room & Related of Total Outpatient		46.0%	31.8%	= (1a.) / ((1a.) + (1b.))
5.	% FY11 Claims Exempt from Fee Reduction		13.1%	18.9%	= (3.) / (4.)
6.	FY12 Hospital Outpatient Rate Reduction		5.0%	5.0%	Provided by DMAS
7.	Dollar Change	a. OP - Emergency Room & Related	-$4,321,996	-$1,334,774	= - (1a.) * (1 - (5.)) * (6.)
		b. OP - Other	-$5,846,359	-$3,533,774	= - (1b.) * (6.)
8.	**Hospital Outpatient Adjustment**	**a. OP - Emergency Room & Related**	**-2.2%**	**-2.0%**	= (7a.) / ((1a.) + (2a.))
		b. OP - Other	**-2.5%**	**-2.5%**	= (7b.) / ((1b.) + (2b.))

Virginia Medicaid

PCCM Exhibit 2f

FY 2014 Capitation Rate Development
Fee-for-Service Data - PCCM Roanoke-Alleghany and Far Southwest
Behavioral Health Utilization Adjustments

		LIFC Age 6 - 20	ABAD Age 6 - 20	
1.	Estimated additional annual expenditures effective FY12	$173,000		MCO Estimated adjusted for PCCM Utilization
2.	% Allocation	77.9%	22.1%	FY11 PCCM Data
3.	Estimated additional annual expenditures by Aid Category	$134,724	$38,276	= (1.) * (2.)
4.	Prof - Psych Service Category - Ages 6 - 20	$1,458,515.21	$354,956.66	FY11 PCCM Data
5.	**Behavioral Health Utilization Adjustment**	**4.6%**	**5.4%**	= (3.) / (4.) * (12/24 months)

Virginia Medicaid

PCCM Exhibit 2g

FY 2014 Capitation Rate Development
Fee-for-Service Data - PCCM Roanoke-Alleghany and Far Southwest
Non-ER Transportation Adjustment

	LIFC Child	LIFC Adult	ABAD Child	ABAD Adult	
Non-ER Transportation Rate	**$1.04**	**$2.00**	**$14.64**	**$29.26**	From DMAS - Service Cost Component Only

Virginia Medicaid

PCCM Exhibit 2h

FY 2014 Capitation Rate Development
Fee-for-Service Data - PCCM Roanoke-Alleghany and Far Southwest
Emergency Transportation Adjustment

	Adjustment Value	Source
Emergency Transportation Adjustment	**38.4%**	Provided by DMAS

Virginia Medicaid

PCCM Exhibit 2i

FY 2014 Capitation Rate Development
Fee-for-Service Data - PCCM Roanoke-Alleghany and Far Southwest
Managed Care Savings Adjustment

Service Category	LIFC Child	LIFC Adult	ABAD	Source
All Service Categories	-8.5%	-8.5%	-8.5%	Expected managed care savings / Excludes Pharmacy

Virginia Medicaid

PCCM Exhibit 2j

FY 2014 Capitation Rate Development
Fee-for-Service Data - PCCM Roanoke-Alleghany and Far Southwest
Provider Incentive Payment Adjustment

	Adjustment Value	Source
Provider Incentive Payment Adjustment	**0.3%**	PCCM Fee Excluding FQHC

Virginia Medicaid

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Administrative Cost Adjustment

PCCM Exhibit 2k

		LIFC Children	LIFC Adults	ABAD	Source
1.	Administrative allowance as % of Base Capitation Rate	8.5%	7.3%	6.1%	As applied for Medallion II Rates
2.	Contribution to Reserves as % of Base Capitation Rate	1.5%	1.5%	1.5%	Provided by DMAS
3.	**Administrative Factor as % of Base Capitation Rate**	**10.0%**	**8.8%**	**7.6%**	= (1.) + (2.)

*Note:

Administrative increases are applied from midpoint of CY2012 to the midpoint of the contract period (18 months) using compound interest calculations.

Virginia Medicaid

PCCM Exhibit 3a

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Fee-for-Service Data - PCCM Roanoke-Alleghany and Far Southwest

	LIFC Child Under 21							
	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend	Total Trend Factor
Category of Service	**IBNR**	**Policy/ Program[1]**	**Total Base Data Adjustments**	**Cost Trend**	**Utilization Trend**	**Cost and Utilization Trend**		
Inpatient Medical/Surgical	0.1%	6.4%	6.5%	-2.2%	3.1%	0.9%	0.0%	1.0085
Inpatient Psychiatric	0.0%	-4.0%	-3.9%	-4.6%	-0.9%	-5.5%	6.8%	1.0434
Outpatient Hospital	1.1%	-2.4%	-1.3%	-2.8%	2.8%	-0.1%	0.8%	1.0119
Practitioner	0.1%	0.3%	0.4%	1.3%	3.2%	4.6%	4.0%	1.1092
Prescription Drug	0.0%	-13.6%	-13.6%	2.4%	-2.7%	-0.3%	9.8%	1.1471
Other	0.1%	2.2%	2.4%	3.4%	3.4%	7.0%	1.1%	1.0871
PCCM Roanoke-Alleghany Wtd Avg[2]	**0.2%**	**-1.4%**	**-1.2%**	**0.0%**	**1.9%**	**2.0%**	**3.5%**	**1.0733**
PCCM Far Southwest Wtd Avg[2]	**0.2%**	**-3.5%**	**-3.3%**	**0.7%**	**1.5%**	**2.2%**	**4.4%**	**1.0906**
			Months of Trend Applied	12	12	12	18	

[1] The Policy and Program Adjustments are summarized in this table as weighted averages and are applied at the rate cell level in Exhibits 4a - 4e. Managed care savings adjustment are excluded.

[2] Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY11-12), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY11-12 Claims).

Data period trend rates for the PCCM population are calculated based on regression studies of historical FFS data. Contract period trends are developed from historical health plan data. Trend rates have been calculated separately for the broad service categories shown above. Utilization trend is based on service units per thousand.

Data period trends are applied from the midpoint of the data period to the end of the data period using compound interest calculations; includes FY11-12 incurred claims paid through Oct 2012. Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes FY10-12 incurred claims paid through Feb 2013.

Total Trend = [(1 + data period trend) ^ (months/12) * (1 + contract period trend) ^ (months/12)]

Virginia Medicaid

PCCM Exhibit 3b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Fee-for-Service Data - PCCM Roanoke-Alleghany and Far Southwest

	LIFC Adult 21 and Over							
	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend	Total Trend Factor
Category of Service	**IBNR**	**Policy/ Program[1]**	**Total Base Data Adjustments**	**Cost Trend**	**Utilization Trend**	**Cost and Utilization Trend**		
Inpatient Medical/Surgical	0.0%	6.4%	6.4%	1.8%	1.7%	3.6%	0.0%	1.0357
Inpatient Psychiatric	0.1%	-4.0%	-3.8%	-2.6%	-21.9%	-23.8%	0.7%	0.7699
Outpatient Hospital	1.4%	-2.4%	-1.1%	-0.8%	-2.7%	-3.5%	0.0%	0.9654
Practitioner	0.1%	0.0%	0.1%	1.2%	5.6%	6.9%	2.7%	1.1126
Prescription Drug	0.0%	-6.6%	-6.6%	0.8%	-8.2%	-7.5%	9.5%	1.0605
Other	0.1%	2.1%	2.2%	-0.8%	8.2%	7.3%	1.5%	1.0982
PCCM Roanoke-Alleghany Wtd Avg[2]	**0.3%**	**0.0%**	**0.3%**	**0.6%**	**0.3%**	**0.9%**	**2.5%**	**1.0457**
PCCM Far Southwest Wtd Avg[2]	**0.3%**	**-1.0%**	**-0.7%**	**0.6%**	**-0.6%**	**0.0%**	**3.4%**	**1.0508**

Months of Trend Applied	12	12	12	18

[1] The Policy and Program Adjustments are summarized in this table as weighted averages and are applied at the rate cell level in Exhibits 4a - 4e. Managed care savings adjustment are excluded.

[2] Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY11-12), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY11-12 Claims).

Data period trend rates for the PCCM population are calculated based on regression studies of historical FFS data. Contract period trends are developed from historical health plan data. Trend rates have been calculated separately for the broad service categories shown above. Utilization trend is based on service units per thousand.

Data period trends are applied from the midpoint of the data period to the end of the data period using compound interest calculations; includes FY11-12 incurred claims paid through Oct 2012. Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes FY10-12 incurred claims paid through Feb 2013.

Total Trend = [(1 + data period trend) ^ (months/12) * (1 + contract period trend) ^ (months/12)]

Virginia Medicaid

PCCM Exhibit 3c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Fee-for-Service Data - PCCM Roanoke-Alleghany and Far Southwest

	ABAD All Age Categories							
	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend	Total Trend Factor
Category of Service	**IBNR**	**Policy/ Program[1]**	**Total Base Data Adjustments**	**Cost Trend**	**Utilization Trend**	**Cost and Utilization Trend**		
Inpatient Medical/Surgical	0.1%	6.4%	6.5%	-1.5%	-2.2%	-3.7%	0.5%	0.9703
Inpatient Psychiatric	0.4%	-4.0%	-3.6%	-2.4%	1.3%	-1.1%	0.0%	0.9891
Outpatient Hospital	1.1%	-2.4%	-1.3%	2.4%	6.2%	8.7%	1.8%	1.1171
Practitioner	0.1%	0.1%	0.2%	7.6%	-5.0%	2.2%	7.4%	1.1377
Prescription Drug	0.0%	-9.2%	-9.2%	-1.1%	4.0%	2.8%	6.8%	1.1349
Other	0.2%	2.6%	2.8%	-0.2%	4.5%	4.4%	3.7%	1.1020
PCCM Roanoke-Alleghany Wtd Avg[2]	**0.2%**	**-2.4%**	**-2.2%**	**0.5%**	**1.4%**	**1.8%**	**4.2%**	**1.0848**
PCCM Far Southwest Wtd Avg[2]	**0.2%**	**-2.6%**	**-2.4%**	**0.6%**	**1.6%**	**2.1%**	**4.4%**	**1.0898**

Months of Trend Applied	12	12	12	18

[1] The Policy and Program Adjustments are summarized in this table as weighted averages and are applied at the rate cell level in Exhibits 4a - 4e. Managed care savings adjustment are excluded.

[2] Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY11-12), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY11-12 Claims).

Data period trend rates for the PCCM population are calculated based on regression studies of historical FFS data. Contract period trends are developed from historical health plan data. Trend rates have been calculated separately for the broad service categories shown above. Utilization trend is based on service units per thousand.

Data period trends are applied from the midpoint of the data period to the end of the data period using compound interest calculations; includes FY11-12 incurred claims paid through Oct 2012. Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes FY10-12 incurred claims paid through Feb 2013.

Total Trend = [(1 + data period trend) ^ (months/12) * (1 + contract period trend) ^ (months/12)]

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age Under 1									
Northern Virginia	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$779,510		$779,510	$7,223	($6,038)	$780,695	1.021	$797,131	$3.39
FQHC / RHC	$146,174		$146,174	$826		$147,000	1.119	$164,428	$0.70
Home Health	$226,668		$226,668	$3,119		$229,787	1.026	$235,872	$1.00
IP - Maternity	$824	($0)	$824	$33	$55	$912	1.065	$972	$0.00
IP - Newborn	$25,738,451	($11,058)	$25,727,392	$1,029,692	$1,717,785	$28,474,869	1.065	$30,336,143	$128.92
IP - Other	$6,916,882	($2,972)	$6,913,911	$276,717	$461,633	$7,652,260	1.065	$8,152,454	$34.65
IP - Psych	$20,241		$20,241	$142	($807)	$19,576	1.146	$22,434	$0.10
Lab	$390,295		$390,295	$2,466		$392,762	1.021	$401,030	$1.70
OP - Emergency Room & Related	$3,672,798		$3,672,798	$50,540	($80,503)	$3,642,834	1.026	$3,739,297	$15.89
OP - Other	$2,800,716		$2,800,716	$38,539	($70,971)	$2,768,285	1.026	$2,841,589	$12.08
Pharmacy	$4,956,938		$4,956,938	$215	($167,368)	$4,789,785	1.267	$6,068,821	$25.79
Prof - Anesthesia	$277,553		$277,553	$1,569		$279,122	1.119	$312,214	$1.33
Prof - Child EPSDT	$1,276,769		$1,276,769	$7,215		$1,283,985	1.119	$1,436,214	$6.10
Prof - Evaluation & Management	$18,796,536		$18,796,536	$106,003		$18,902,539	1.119	$21,143,621	$89.86
Prof - Maternity	$0		$0	$0		$0	1.119	$0	$0.00
Prof - Other	$3,600,425		$3,600,425	$20,323		$3,620,748	1.119	$4,050,023	$17.21
Prof - Psych	$2,105		$2,105	$11		$2,115	1.119	$2,366	$0.01
Prof - Specialist	$1,121,055		$1,121,055	$6,335		$1,127,390	1.119	$1,261,053	$5.36
Prof - Vision	$354,056		$354,056	$686		$354,742	1.119	$396,800	$1.69
Radiology	$310,787		$310,787	$2,880		$313,666	1.021	$320,270	$1.36
Transportation/Ambulance	$845,192		$845,192	$2,650	$12,851	$860,693	1.021	$878,813	$3.73
Provider Incentive Payment Adjustment									$2.76
Total	$72,233,977	($14,031)	$72,219,947	$1,557,182	$1,866,638	$75,643,767		$82,561,545	$353.64
Admin Cost Adjustment									$39.34
Medallion II Capitation Rate									**$392.97**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 1-5									
Northern Virginia	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$1,616,747		$1,616,747	$14,981	($12,523)	$1,619,204	1.021	$1,653,292	$1.74
FQHC / RHC	$438,285		$438,285	$2,477		$440,762	1.119	$493,018	$0.52
Home Health	$338,917		$338,917	$4,664		$343,581	1.026	$352,679	$0.37
IP - Maternity	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$13,031,673	($1,305,732)	$11,725,941	$521,345	$786,267	$13,033,552	1.065	$13,885,497	$14.65
IP - Psych	$17,801		$17,801	$123	($710)	$17,215	1.146	$19,728	$0.02
Lab	$1,889,465		$1,889,465	$12,769		$1,902,234	1.021	$1,942,280	$2.05
OP - Emergency Room & Related	$9,701,963		$9,701,963	$133,504	($212,656)	$9,622,812	1.026	$9,877,624	$10.42
OP - Other	$10,527,392		$10,527,392	$144,863	($266,766)	$10,405,488	1.026	$10,681,026	$11.27
Pharmacy	$13,918,495		$13,918,495	$603	($469,948)	$13,449,150	1.267	$17,040,531	$17.98
Prof - Anesthesia	$834,601		$834,601	$4,717		$839,318	1.119	$938,827	$0.99
Prof - Child EPSDT	$1,560,303		$1,560,303	$8,818		$1,569,121	1.119	$1,755,156	$1.85
Prof - Evaluation & Management	$30,572,883		$30,572,883	$171,864		$30,744,747	1.119	$34,389,839	$36.28
Prof - Maternity	$0		$0	$0		$0	1.119	$0	$0.00
Prof - Other	$5,745,373		$5,745,373	$32,371		$5,777,744	1.119	$6,462,752	$6.82
Prof - Psych	$210,022		$210,022	$1,184		$211,206	1.119	$236,246	$0.25
Prof - Specialist	$2,054,896		$2,054,896	$11,613		$2,066,509	1.119	$2,311,514	$2.44
Prof - Vision	$1,396,807		$1,396,807	$2,574		$1,399,381	1.119	$1,565,291	$1.65
Radiology	$535,724		$535,724	$4,964		$540,688	1.021	$552,071	$0.58
Transportation/Ambulance	$2,705,783		$2,705,783	$4,110	$41,076	$2,750,968	1.021	$2,808,882	$2.96
Provider Incentive Payment Adjustment									$0.89
Total	$97,097,129	($1,305,732)	$95,791,397	$1,077,543	($135,260)	$96,733,679		$106,966,252	$113.74
Admin Cost Adjustment									$12.65
Medallion II Capitation Rate									**$126.39**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 6-14									
Northern Virginia	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$1,111,316		$1,111,316	$10,298	($2,344)	$1,119,269	1.021	$1,142,832	$1.08
FQHC / RHC	$247,306		$247,306	$1,398		$248,704	1.119	$278,190	$0.26
Home Health	$6,528		$6,528	$90		$6,618	1.026	$6,793	$0.01
IP - Maternity	$18,379	$765	$19,144	$735	$1,276	$21,156	1.065	$22,539	$0.02
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$7,960,488	$331,386	$8,291,874	$318,467	$552,778	$9,163,119	1.065	$9,762,071	$9.18
IP - Psych	$1,427,530		$1,427,530	$10,135	($56,910)	$1,380,756	1.146	$1,582,329	$1.49
Lab	$1,708,461		$1,708,461	$9,951		$1,718,413	1.021	$1,754,589	$1.65
OP - Emergency Room & Related	$8,282,792		$8,282,792	$113,976	($181,549)	$8,215,219	1.026	$8,432,758	$7.93
OP - Other	$8,039,883		$8,039,883	$110,633	($203,732)	$7,946,784	1.026	$8,157,215	$7.67
Pharmacy	$20,835,296		$20,835,296	$903	($703,489)	$20,132,710	1.267	$25,508,828	$24.00
Prof - Anesthesia	$565,693		$565,693	$3,197		$568,890	1.119	$636,337	$0.60
Prof - Child EPSDT	$440,800		$440,800	$2,491		$443,291	1.119	$495,848	$0.47
Prof - Evaluation & Management	$21,816,408		$21,816,408	$122,160		$21,938,568	1.119	$24,539,601	$23.09
Prof - Maternity	$14,515		$14,515	$82		$14,597	1.119	$16,328	$0.02
Prof - Other	$9,977,355		$9,977,355	$56,267		$10,033,622	1.119	$11,223,206	$10.56
Prof - Psych	$1,609,360		$1,609,360	$9,092	$64,366	$1,682,819	1.119	$1,882,333	$1.77
Prof - Specialist	$2,277,224		$2,277,224	$12,869		$2,290,093	1.119	$2,561,606	$2.41
Prof - Vision	$2,000,173		$2,000,173	$5,216		$2,005,389	1.119	$2,243,147	$2.11
Radiology	$855,689		$855,689	$7,929		$863,618	1.021	$881,799	$0.83
Transportation/Ambulance	$2,980,197		$2,980,197	$3,690	$45,229	$3,029,116	1.021	$3,092,885	$2.91
Provider Incentive Payment Adjustment									$0.77
Total	$92,175,394	$332,151	$92,507,545	$799,579	($484,375)	$92,822,749		$104,221,235	$98.83
Admin Cost Adjustment									$10.99
Medallion II Capitation Rate									**$109.82**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 15-20 Female									
Northern Virginia	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$157,731		$157,731	$1,462	($333)	$158,860	1.021	$162,204	$0.97
FQHC / RHC	$20,520		$20,520	$116		$20,636	1.119	$23,083	$0.14
Home Health	$3,816		$3,816	$53		$3,869	1.026	$3,971	$0.02
IP - Maternity	$4,055,893	$211,308	$4,267,201	$162,260	$284,368	$4,713,829	1.065	$5,021,951	$30.13
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$1,493,776	$77,824	$1,571,600	$59,760	$104,732	$1,736,092	1.065	$1,849,572	$11.10
IP - Psych	$725,989		$725,989	$5,156	($28,942)	$702,203	1.146	$804,716	$4.83
Lab	$448,466		$448,466	$3,265		$451,731	1.021	$461,241	$2.77
OP - Emergency Room & Related	$3,331,300		$3,331,300	$45,840	($73,018)	$3,304,122	1.026	$3,391,615	$20.35
OP - Other	$2,331,829		$2,331,829	$32,087	($59,089)	$2,304,827	1.026	$2,365,859	$14.20
Pharmacy	$3,153,238		$3,153,238	$137	($106,467)	$3,046,908	1.267	$3,860,536	$23.16
Prof - Anesthesia	$363,143		$363,143	$2,052		$365,195	1.119	$408,493	$2.45
Prof - Child EPSDT	$56,417		$56,417	$319		$56,736	1.119	$63,463	$0.38
Prof - Evaluation & Management	$4,226,912		$4,226,912	$23,714		$4,250,626	1.119	$4,754,579	$28.53
Prof - Maternity	$2,264,608		$2,264,608	$12,798		$2,277,406	1.119	$2,547,415	$15.28
Prof - Other	$838,992		$838,992	$4,721		$843,713	1.119	$943,744	$5.66
Prof - Psych	$372,825		$372,825	$2,107	$14,911	$389,843	1.119	$436,063	$2.62
Prof - Specialist	$521,811		$521,811	$2,949		$524,760	1.119	$586,976	$3.52
Prof - Vision	$306,673		$306,673	$782		$307,455	1.119	$343,907	$2.06
Radiology	$776,660		$776,660	$7,197		$783,856	1.021	$800,358	$4.80
Transportation/Ambulance	$565,815		$565,815	$1,525	$8,600	$575,939	1.021	$588,064	$3.53
Provider Incentive Payment Adjustment									$1.39
Total	$26,016,415	$289,132	$26,305,546	$368,298	$144,762	$26,818,606		$29,417,808	$177.90
Admin Cost Adjustment									$19.79
Medallion II Capitation Rate									**$197.69**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 21-44 Female									
Northern Virginia	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$643,267		$643,267	$4,516		$647,783	1.039	$672,779	$3.20
FQHC / RHC	$19,672		$19,672	$139		$19,811	1.071	$21,218	$0.10
Home Health	$108,552		$108,552	$1,457		$110,009	0.994	$109,350	$0.52
IP - Maternity	$16,419,138	$42,943	$16,462,080	$171,431	$1,067,859	$17,701,370	0.990	$17,529,631	$83.48
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$9,656,190	$25,255	$9,681,445	$100,819	$628,014	$10,410,279	0.990	$10,309,278	$49.09
IP - Psych	$1,055,855		$1,055,855	$2,966	($41,913)	$1,016,908	1.024	$1,041,584	$4.96
Lab	$1,062,752		$1,062,752	$6,601		$1,069,352	1.039	$1,110,615	$5.29
OP - Emergency Room & Related	$12,002,867		$12,002,867	$161,072	($263,000)	$11,900,938	0.994	$11,829,670	$56.34
OP - Other	$10,515,954		$10,515,954	$141,118	($266,387)	$10,390,686	0.994	$10,328,461	$49.19
Pharmacy	$14,956,830		$14,956,830	$799	($505,012)	$14,452,617	1.289	$18,628,053	$88.71
Prof - Anesthesia	$1,518,807		$1,518,807	$10,733		$1,529,540	1.071	$1,638,148	$7.80
Prof - Child EPSDT	$56,830		$56,830	$402		$57,232	1.071	$61,295	$0.29
Prof - Evaluation & Management	$10,521,209		$10,521,209	$74,057		$10,595,266	1.071	$11,347,602	$54.04
Prof - Maternity	$8,798,244		$8,798,244	$62,176		$8,860,419	1.071	$9,489,570	$45.19
Prof - Other	$2,860,736		$2,860,736	$20,166		$2,880,902	1.071	$3,085,466	$14.69
Prof - Psych	$685,143		$685,143	$4,840		$689,982	1.071	$738,976	$3.52
Prof - Specialist	$3,000,185		$3,000,185	$21,202		$3,021,387	1.071	$3,235,926	$15.41
Prof - Vision	$259,389		$259,389	$799		$260,188	1.071	$278,664	$1.33
Radiology	$3,916,710		$3,916,710	$27,494		$3,944,204	1.039	$4,096,400	$19.51
Transportation/Ambulance	$875,732		$875,732	$2,636	$7,737	$886,105	1.039	$920,297	$4.38
Provider Incentive Payment Adjustment									$3.99
Total	$98,934,062	$68,198	$99,002,260	$815,421	$627,298	$100,444,979		$106,472,982	$511.04
Admin Cost Adjustment									$49.58
Medallion II Capitation Rate									**$560.62**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 15-20 Male									
Northern Virginia	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$187,977		$187,977	$1,742	($396)	$189,323	1.021	$193,308	$1.29
FQHC / RHC	$14,671		$14,671	$83		$14,754	1.119	$16,503	$0.11
Home Health	$1,300		$1,300	$18		$1,318	1.026	$1,353	$0.01
IP - Maternity	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$2,036,052	$67,815	$2,103,867	$81,454	$140,296	$2,325,617	1.065	$2,477,632	$16.56
IP - Psych	$353,585		$353,585	$2,511	($14,096)	$342,000	1.146	$391,928	$2.62
Lab	$197,755		$197,755	$1,035		$198,790	1.021	$202,975	$1.36
OP - Emergency Room & Related	$1,601,227		$1,601,227	$22,034	($35,097)	$1,588,164	1.026	$1,630,218	$10.89
OP - Other	$1,736,700		$1,736,700	$23,898	($44,008)	$1,716,590	1.026	$1,762,045	$11.77
Pharmacy	$2,595,740		$2,595,740	$113	($87,643)	$2,508,210	1.267	$3,177,987	$21.24
Prof - Anesthesia	$101,751		$101,751	$575		$102,326	1.119	$114,458	$0.76
Prof - Child EPSDT	$39,519		$39,519	$223		$39,742	1.119	$44,454	$0.30
Prof - Evaluation & Management	$2,516,199		$2,516,199	$14,065		$2,530,264	1.119	$2,830,252	$18.91
Prof - Maternity	$963		$963	$5		$969	1.119	$1,084	$0.01
Prof - Other	$2,741,834		$2,741,834	$15,478		$2,757,311	1.119	$3,084,218	$20.61
Prof - Psych	$255,230		$255,230	$1,442	$10,208	$266,880	1.119	$298,521	$1.99
Prof - Specialist	$500,071		$500,071	$2,826		$502,897	1.119	$562,521	$3.76
Prof - Vision	$248,414		$248,414	$552		$248,966	1.119	$278,483	$1.86
Radiology	$221,448		$221,448	$2,052		$223,500	1.021	$228,205	$1.52
Transportation/Ambulance	$483,785		$483,785	$1,141	$7,350	$492,276	1.021	$502,640	$3.36
Provider Incentive Payment Adjustment									$0.94
Total	$15,834,223	$67,815	$15,902,038	$171,246	($23,387)	$16,049,896		$17,798,784	$119.87
Admin Cost Adjustment									$13.33
Medallion II Capitation Rate									**$133.21**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 21-44 Male									
Northern Virginia	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$87,352		$87,352	$613		$87,966	1.039	$91,360	$3.61
FQHC / RHC	$1,208		$1,208	$9		$1,216	1.071	$1,303	$0.05
Home Health	$5,312		$5,312	$71		$5,383	0.994	$5,351	$0.21
IP - Maternity	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$1,558,322	$4,076	$1,562,397	$16,270	$101,349	$1,680,017	0.990	$1,663,717	$65.67
IP - Psych	$105,598		$105,598	$297	($4,192)	$101,703	1.024	$104,171	$4.11
Lab	$47,258		$47,258	$231		$47,489	1.039	$49,321	$1.95
OP - Emergency Room & Related	$934,939		$934,939	$12,546	($20,486)	$926,999	0.994	$921,448	$36.37
OP - Other	$628,573		$628,573	$8,435	($15,923)	$621,086	0.994	$617,366	$24.37
Pharmacy	$1,758,149		$1,758,149	$94	($59,363)	$1,698,879	1.289	$2,189,694	$86.43
Prof - Anesthesia	$46,428		$46,428	$328		$46,756	1.071	$50,076	$1.98
Prof - Child EPSDT	$2,284		$2,284	$16		$2,301	1.071	$2,464	$0.10
Prof - Evaluation & Management	$789,292		$789,292	$5,541		$794,833	1.071	$851,272	$33.60
Prof - Maternity	$0		$0	$0		$0	1.071	$0	$0.00
Prof - Other	$399,679		$399,679	$2,817		$402,495	1.071	$431,075	$17.02
Prof - Psych	$51,638		$51,638	$365		$52,003	1.071	$55,695	$2.20
Prof - Specialist	$227,250		$227,250	$1,606		$228,856	1.071	$245,106	$9.67
Prof - Vision	$32,675		$32,675	$102		$32,778	1.071	$35,105	$1.39
Radiology	$166,924		$166,924	$1,172		$168,096	1.039	$174,582	$6.89
Transportation/Ambulance	$137,780		$137,780	$550	$1,218	$139,549	1.039	$144,934	$5.72
Provider Incentive Payment Adjustment									$2.37
Total	$6,980,661	$4,076	$6,984,736	$51,064	$2,604	$7,038,404		$7,634,041	$303.71
Admin Cost Adjustment									$29.47
Medallion II Capitation Rate									**$333.17**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 45 and Over									
Northern Virginia	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$280,242		$280,242	$1,967		$282,209	1.039	$293,099	$8.49
FQHC / RHC	$3,147		$3,147	$22		$3,170	1.071	$3,395	$0.10
Home Health	$60,077		$60,077	$806		$60,883	0.994	$60,519	$1.75
IP - Maternity	$22,124	$58	$22,182	$231	$1,439	$23,852	0.990	$23,621	$0.68
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$4,232,921	$11,071	$4,243,992	$44,195	$275,298	$4,563,486	0.990	$4,519,211	$130.89
IP - Psych	$202,683		$202,683	$570	($8,046)	$195,207	1.024	$199,944	$5.79
Lab	$145,486		$145,486	$878		$146,364	1.039	$152,012	$4.40
OP - Emergency Room & Related	$1,438,466		$1,438,466	$19,303	($31,519)	$1,426,251	0.994	$1,417,710	$41.06
OP - Other	$2,418,157		$2,418,157	$32,450	($61,256)	$2,389,351	0.994	$2,375,042	$68.79
Pharmacy	$4,692,062		$4,692,062	$251	($158,426)	$4,533,887	1.289	$5,843,751	$169.25
Prof - Anesthesia	$152,127		$152,127	$1,075		$153,202	1.071	$164,080	$4.75
Prof - Child EPSDT	$7,555		$7,555	$53		$7,608	1.071	$8,149	$0.24
Prof - Evaluation & Management	$1,967,926		$1,967,926	$13,861		$1,981,786	1.071	$2,122,507	$61.47
Prof - Maternity	$10,923		$10,923	$77		$11,000	1.071	$11,781	$0.34
Prof - Other	$1,036,281		$1,036,281	$7,317		$1,043,599	1.071	$1,117,701	$32.37
Prof - Psych	$147,700		$147,700	$1,044		$148,743	1.071	$159,305	$4.61
Prof - Specialist	$747,474		$747,474	$5,282		$752,757	1.071	$806,207	$23.35
Prof - Vision	$101,025		$101,025	$550		$101,575	1.071	$108,787	$3.15
Radiology	$596,923		$596,923	$4,190		$601,113	1.039	$624,309	$18.08
Transportation/Ambulance	$192,969		$192,969	$770	$1,706	$195,446	1.039	$202,987	$5.88
Provider Incentive Payment Adjustment									$4.61
Total	$18,456,268	$11,129	$18,467,397	$134,894	$19,197	$18,621,488		$20,214,115	$590.07
Admin Cost Adjustment									$57.25
Medallion II Capitation Rate									**$647.31**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age Under 1									
Other MSA	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$267,255		$267,255	$2,476	($2,070)	$267,661	1.021	$273,296	$3.84
FQHC / RHC	$800,146		$800,146	$4,522		$804,668	1.119	$900,069	$12.64
Home Health	$9,429		$9,429	$130		$9,558	1.026	$9,811	$0.14
IP - Maternity	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Newborn	$11,825,403	$558,502	$12,383,905	$473,087	$825,409	$13,682,401	1.065	$14,576,758	$204.69
IP - Other	$2,037,451	$96,229	$2,133,680	$81,512	$142,214	$2,357,405	1.065	$2,511,498	$35.27
IP - Psych	$85,946		$85,946	$0	($3,402)	$82,543	1.146	$94,594	$1.33
Lab	$122,333		$122,333	$980		$123,312	1.021	$125,908	$1.77
OP - Emergency Room & Related	$867,249		$867,249	$11,934	($19,009)	$860,174	1.026	$882,951	$12.40
OP - Other	$949,655		$949,655	$13,068	($24,064)	$938,658	1.026	$963,514	$13.53
Pharmacy	$1,511,464		$1,511,464	$66	($51,034)	$1,460,496	1.267	$1,850,498	$25.99
Prof - Anesthesia	$68,945		$68,945	$390		$69,335	1.119	$77,555	$1.09
Prof - Child EPSDT	$301,316		$301,316	$1,703		$303,019	1.119	$338,944	$4.76
Prof - Evaluation & Management	$5,674,316		$5,674,316	$31,982		$5,706,298	1.119	$6,382,836	$89.63
Prof - Maternity	$0		$0	$0		$0	1.119	$0	$0.00
Prof - Other	$1,004,842		$1,004,842	$5,713		$1,010,556	1.119	$1,130,367	$15.87
Prof - Psych	$99,884		$99,884	$0		$99,884	1.119	$111,727	$1.57
Prof - Specialist	$436,643		$436,643	$2,468		$439,111	1.119	$491,172	$6.90
Prof - Vision	$107,670		$107,670	$140		$107,811	1.119	$120,593	$1.69
Radiology	$123,547		$123,547	$1,145		$124,691	1.021	$127,316	$1.79
Transportation/Ambulance	$394,193		$394,193	$2,026	$6,006	$402,224	1.021	$410,692	$5.77
Provider Incentive Payment Adjustment									$3.47
Total	$26,687,686	$654,730	$27,342,417	$633,340	$874,050	$28,849,806		$31,380,100	$444.12
Admin Cost Adjustment									$49.40
Medallion II Capitation Rate									**$493.52**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 1-5									
Other MSA	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$361,663		$361,663	$3,351	($2,801)	$362,213	1.021	$369,838	$1.34
FQHC / RHC	$1,082,218		$1,082,218	$6,116		$1,088,334	1.119	$1,217,367	$4.40
Home Health	$10,276		$10,276	$141		$10,417	1.026	$10,693	$0.04
IP - Maternity	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$3,069,014	$159,901	$3,228,915	$122,785	$215,177	$3,566,877	1.065	$3,800,028	$13.72
IP - Psych	$336,580		$336,580	$58	($13,326)	$323,312	1.146	$370,512	$1.34
Lab	$502,058		$502,058	$4,068		$506,126	1.021	$516,781	$1.87
OP - Emergency Room & Related	$2,304,818		$2,304,818	$31,716	($50,519)	$2,286,015	1.026	$2,346,549	$8.47
OP - Other	$3,628,737		$3,628,737	$49,933	($91,953)	$3,586,717	1.026	$3,681,693	$13.29
Pharmacy	$4,280,697		$4,280,697	$186	($144,535)	$4,136,348	1.267	$5,240,893	$18.93
Prof - Anesthesia	$271,845		$271,845	$1,536		$273,381	1.119	$305,794	$1.10
Prof - Child EPSDT	$338,099		$338,099	$1,911		$340,010	1.119	$380,321	$1.37
Prof - Evaluation & Management	$6,295,252		$6,295,252	$35,236		$6,330,488	1.119	$7,081,029	$25.57
Prof - Maternity	$0		$0	$0		$0	1.119	$0	$0.00
Prof - Other	$1,269,748		$1,269,748	$7,313		$1,277,060	1.119	$1,428,468	$5.16
Prof - Psych	$530,673		$530,673	$842		$531,516	1.119	$594,532	$2.15
Prof - Specialist	$765,343		$765,343	$4,325		$769,668	1.119	$860,920	$3.11
Prof - Vision	$414,548		$414,548	$491		$415,039	1.119	$464,246	$1.68
Radiology	$178,758		$178,758	$1,656		$180,415	1.021	$184,213	$0.67
Transportation/Ambulance	$994,833		$994,833	$2,937	$15,124	$1,012,894	1.021	$1,034,218	$3.73
Provider Incentive Payment Adjustment									$0.85
Total	$26,635,160	$159,901	$26,795,061	$274,602	($72,833)	$26,996,829		$29,888,094	$108.78
Admin Cost Adjustment									$12.10
Medallion II Capitation Rate									**$120.88**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 6-14									
Other MSA	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$374,946		$374,946	$3,474	($791)	$377,629	1.021	$385,579	$1.09
FQHC / RHC	$653,712		$653,712	$3,694		$657,407	1.119	$735,349	$2.07
Home Health	$12,335		$12,335	$170		$12,504	1.026	$12,836	$0.04
IP - Maternity	$26,554	$1,383	$27,937	$1,062	$1,862	$30,862	1.065	$32,879	$0.09
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$1,897,325	$98,860	$1,996,185	$75,913	$133,027	$2,205,126	1.065	$2,349,265	$6.63
IP - Psych	$1,008,570		$1,008,570	$4,087	($40,086)	$972,571	1.146	$1,114,554	$3.14
Lab	$545,757		$545,757	$4,328		$550,085	1.021	$561,666	$1.58
OP - Emergency Room & Related	$2,133,029		$2,133,029	$29,352	($46,754)	$2,115,628	1.026	$2,171,650	$6.13
OP - Other	$2,777,737		$2,777,737	$38,223	($70,388)	$2,745,572	1.026	$2,818,274	$7.95
Pharmacy	$10,146,822		$10,146,822	$440	($342,600)	$9,804,662	1.267	$12,422,840	$35.05
Prof - Anesthesia	$135,046		$135,046	$763		$135,809	1.119	$151,911	$0.43
Prof - Child EPSDT	$98,418		$98,418	$556		$98,974	1.119	$110,708	$0.31
Prof - Evaluation & Management	$5,378,282		$5,378,282	$29,970		$5,408,252	1.119	$6,049,454	$17.07
Prof - Maternity	$20,353		$20,353	$115		$20,468	1.119	$22,895	$0.06
Prof - Other	$1,188,783		$1,188,783	$6,926		$1,195,709	1.119	$1,337,472	$3.77
Prof - Psych	$1,478,438		$1,478,438	$5,510	$59,017	$1,542,966	1.119	$1,725,900	$4.87
Prof - Specialist	$723,468		$723,468	$4,089		$727,556	1.119	$813,815	$2.30
Prof - Vision	$604,984		$604,984	$1,038		$606,023	1.119	$677,873	$1.91
Radiology	$341,410		$341,410	$3,164		$344,573	1.021	$351,827	$0.99
Transportation/Ambulance	$1,358,459		$1,358,459	$4,425	$20,658	$1,383,542	1.021	$1,412,668	$3.99
Provider Incentive Payment Adjustment									$0.78
Total	$30,904,429	$100,244	$31,004,673	$217,300	($286,055)	$30,935,918		$35,259,414	$100.26
Admin Cost Adjustment									$11.15
Medallion II Capitation Rate									**$111.42**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 15-20 Female									
Other MSA	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$63,710		$63,710	$590	($134)	$64,166	1.021	$65,516	$0.94
FQHC / RHC	$262,402		$262,402	$1,483		$263,885	1.119	$295,171	$4.24
Home Health	$20,608		$20,608	$284		$20,891	1.026	$21,445	$0.31
IP - Maternity	$2,283,019	$96,467	$2,379,486	$91,334	$158,625	$2,629,445	1.065	$2,801,320	$40.27
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$1,324,441	$55,965	$1,380,406	$52,987	$92,023	$1,525,416	1.065	$1,625,126	$23.36
IP - Psych	$412,822		$412,822	$2,303	($16,433)	$398,692	1.146	$456,896	$6.57
Lab	$575,593		$575,593	$5,193		$580,786	1.021	$593,012	$8.52
OP - Emergency Room & Related	$1,259,714		$1,259,714	$17,334	($27,611)	$1,249,437	1.026	$1,282,522	$18.44
OP - Other	$1,070,194		$1,070,194	$14,726	($27,119)	$1,057,802	1.026	$1,085,812	$15.61
Pharmacy	$2,328,700		$2,328,700	$101	($78,627)	$2,250,174	1.267	$2,851,047	$40.98
Prof - Anesthesia	$168,303		$168,303	$951		$169,255	1.119	$189,321	$2.72
Prof - Child EPSDT	$68,957		$68,957	$390		$69,347	1.119	$77,568	$1.12
Prof - Evaluation & Management	$2,025,321		$2,025,321	$11,365		$2,036,686	1.119	$2,278,155	$32.75
Prof - Maternity	$1,394,795		$1,394,795	$7,882		$1,402,677	1.119	$1,568,978	$22.55
Prof - Other	$402,264		$402,264	$2,320		$404,584	1.119	$452,551	$6.51
Prof - Psych	$327,417		$327,417	$1,269	$13,072	$341,758	1.119	$382,276	$5.50
Prof - Specialist	$280,420		$280,420	$1,585		$282,004	1.119	$315,439	$4.53
Prof - Vision	$117,806		$117,806	$204		$118,010	1.119	$132,002	$1.90
Radiology	$492,909		$492,909	$4,567		$497,477	1.021	$507,950	$7.30
Transportation/Ambulance	$353,074		$353,074	$1,652	$5,377	$360,103	1.021	$367,684	$5.29
Provider Incentive Payment Adjustment									$1.96
Total	$15,232,470	$152,431	$15,384,901	$218,521	$119,172	$15,722,594		$17,349,793	$251.36
Admin Cost Adjustment									$27.96
Medallion II Capitation Rate									**$279.31**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 21-44 Female									
Other MSA	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$413,107		$413,107	$2,900		$416,007	1.039	$432,059	$3.41
FQHC / RHC	$869,587		$869,587	$6,145		$875,732	1.071	$937,915	$7.39
Home Health	$61,182		$61,182	$821		$62,003	0.994	$61,632	$0.49
IP - Maternity	$7,732,111	$20,223	$7,752,334	$80,730	$502,877	$8,335,941	0.990	$8,255,065	$65.06
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$4,601,241	$12,034	$4,613,276	$48,042	$299,253	$4,960,571	0.990	$4,912,443	$38.72
IP - Psych	$665,165		$665,165	$1,389	($26,385)	$640,169	1.024	$655,704	$5.17
Lab	$1,800,569		$1,800,569	$12,453		$1,813,022	1.039	$1,882,982	$14.84
OP - Emergency Room & Related	$4,919,157		$4,919,157	$66,012	($107,786)	$4,877,383	0.994	$4,848,175	$38.21
OP - Other	$5,020,572		$5,020,572	$67,373	($127,180)	$4,960,766	0.994	$4,931,059	$38.86
Pharmacy	$9,988,607		$9,988,607	$533	($337,262)	$9,651,879	1.289	$12,440,357	$98.05
Prof - Anesthesia	$550,431		$550,431	$3,890		$554,320	1.071	$593,681	$4.68
Prof - Child EPSDT	$136,975		$136,975	$968		$137,943	1.071	$147,738	$1.16
Prof - Evaluation & Management	$5,269,529		$5,269,529	$37,064		$5,306,594	1.071	$5,683,398	$44.79
Prof - Maternity	$4,531,177		$4,531,177	$32,021		$4,563,198	1.071	$4,887,216	$38.52
Prof - Other	$1,465,269		$1,465,269	$10,476		$1,475,745	1.071	$1,580,533	$12.46
Prof - Psych	$491,865		$491,865	$2,074		$493,939	1.071	$529,012	$4.17
Prof - Specialist	$1,642,973		$1,642,973	$11,611		$1,654,583	1.071	$1,772,070	$13.97
Prof - Vision	$178,205		$178,205	$533		$178,738	1.071	$191,429	$1.51
Radiology	$1,957,316		$1,957,316	$13,740		$1,971,056	1.039	$2,047,113	$16.13
Transportation/Ambulance	$903,265		$903,265	$4,057	$7,992	$915,314	1.039	$950,633	$7.49
Provider Incentive Payment Adjustment									$3.58
Total	$53,198,305	$32,257	$53,230,562	$402,833	$211,509	$53,844,904		$57,740,214	$458.66
Admin Cost Adjustment									$44.50
Medallion II Capitation Rate									**$503.16**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 15-20 Male									
Other MSA	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$116,026		$116,026	$1,075	($245)	$116,857	1.021	$119,317	$2.20
FQHC / RHC	$103,434		$103,434	$585		$104,018	1.119	$116,351	$2.14
Home Health	$4,307		$4,307	$59		$4,367	1.026	$4,482	$0.08
IP - Maternity	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$782,320	$40,760	$823,080	$31,299	$54,850	$909,229	1.065	$968,661	$17.82
IP - Psych	$202,788		$202,788	$970	($8,066)	$195,692	1.146	$224,261	$4.13
Lab	$99,674		$99,674	$809		$100,483	1.021	$102,599	$1.89
OP - Emergency Room & Related	$517,703		$517,703	$7,124	($11,347)	$513,480	1.026	$527,077	$9.70
OP - Other	$612,816		$612,816	$8,433	($15,529)	$605,720	1.026	$621,759	$11.44
Pharmacy	$1,423,131		$1,423,131	$62	($48,051)	$1,375,141	1.267	$1,742,351	$32.06
Prof - Anesthesia	$25,798		$25,798	$146		$25,944	1.119	$29,020	$0.53
Prof - Child EPSDT	$10,721		$10,721	$61		$10,782	1.119	$12,060	$0.22
Prof - Evaluation & Management	$780,552		$780,552	$4,346		$784,898	1.119	$877,955	$16.15
Prof - Maternity	$0		$0	$0		$0	1.119	$0	$0.00
Prof - Other	$324,901		$324,901	$1,866		$326,766	1.119	$365,508	$6.73
Prof - Psych	$201,962		$201,962	$706	$8,060	$210,728	1.119	$235,712	$4.34
Prof - Specialist	$190,979		$190,979	$1,079		$192,058	1.119	$214,828	$3.95
Prof - Vision	$90,135		$90,135	$149		$90,283	1.119	$100,987	$1.86
Radiology	$111,074		$111,074	$1,029		$112,104	1.021	$114,464	$2.11
Transportation/Ambulance	$214,227		$214,227	$739	$3,258	$218,224	1.021	$222,818	$4.10
Provider Incentive Payment Adjustment									$0.96
Total	$5,812,548	$40,760	$5,853,308	$60,535	($17,069)	$5,896,774		$6,600,209	$122.40
Admin Cost Adjustment									$13.61
Medallion II Capitation Rate									**$136.01**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 21-44 Male									
Other MSA	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$85,469		$85,469	$600		$86,069	1.039	$89,391	$6.14
FQHC / RHC	$50,608		$50,608	$358		$50,966	1.071	$54,585	$3.75
Home Health	$12,159		$12,159	$163		$12,323	0.994	$12,249	$0.84
IP - Maternity	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$922,614	$2,413	$925,027	$9,633	$60,005	$994,665	0.990	$985,015	$67.61
IP - Psych	$60,892		$60,892	$118	($2,415)	$58,595	1.024	$60,016	$4.12
Lab	$62,038		$62,038	$413		$62,450	1.039	$64,860	$4.45
OP - Emergency Room & Related	$492,678		$492,678	$6,611	($10,795)	$488,494	0.994	$485,569	$33.33
OP - Other	$448,709		$448,709	$6,021	($11,367)	$443,363	0.994	$440,708	$30.25
Pharmacy	$1,243,356		$1,243,356	$66	($41,981)	$1,201,441	1.289	$1,548,544	$106.30
Prof - Anesthesia	$19,136		$19,136	$135		$19,271	1.071	$20,640	$1.42
Prof - Child EPSDT	$3,742		$3,742	$26		$3,769	1.071	$4,037	$0.28
Prof - Evaluation & Management	$418,130		$418,130	$2,934		$421,065	1.071	$450,963	$30.96
Prof - Maternity	$0		$0	$0		$0	1.071	$0	$0.00
Prof - Other	$140,438		$140,438	$1,005		$141,444	1.071	$151,487	$10.40
Prof - Psych	$41,536		$41,536	$138		$41,674	1.071	$44,633	$3.06
Prof - Specialist	$178,151		$178,151	$1,259		$179,410	1.071	$192,149	$13.19
Prof - Vision	$19,520		$19,520	$54		$19,574	1.071	$20,964	$1.44
Radiology	$107,691		$107,691	$756		$108,447	1.039	$112,632	$7.73
Transportation/Ambulance	$93,885		$93,885	$398	$830	$95,113	1.039	$98,783	$6.78
Provider Incentive Payment Adjustment									$2.61
Total	$4,400,753	$2,413	$4,403,166	$30,690	($5,723)	$4,428,132		$4,837,223	$334.66
Admin Cost Adjustment									$32.47
Medallion II Capitation Rate									**$367.13**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 45 and Over									
Other MSA	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$179,517		$179,517	$1,260		$180,778	1.039	$187,753	$14.58
FQHC / RHC	$83,286		$83,286	$589		$83,875	1.071	$89,831	$6.97
Home Health	$10,155		$10,155	$136		$10,291	0.994	$10,230	$0.79
IP - Maternity	$1,744	$5	$1,749	$18	$113	$1,880	0.990	$1,862	$0.14
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$1,351,211	$3,534	$1,354,745	$14,108	$87,879	$1,456,733	0.990	$1,442,599	$112.00
IP - Psych	$77,033		$77,033	$171	($3,056)	$74,148	1.024	$75,947	$5.90
Lab	$151,725		$151,725	$1,045		$152,770	1.039	$158,665	$12.32
OP - Emergency Room & Related	$407,529		$407,529	$5,469	($8,930)	$404,068	0.994	$401,648	$31.18
OP - Other	$951,689		$951,689	$12,771	($24,108)	$940,352	0.994	$934,721	$72.57
Pharmacy	$2,255,043		$2,255,043	$120	($76,141)	$2,179,023	1.289	$2,808,554	$218.06
Prof - Anesthesia	$29,848		$29,848	$211		$30,059	1.071	$32,193	$2.50
Prof - Child EPSDT	$5,224		$5,224	$37		$5,261	1.071	$5,635	$0.44
Prof - Evaluation & Management	$592,924		$592,924	$4,172		$597,096	1.071	$639,494	$49.65
Prof - Maternity	$2,059		$2,059	$15		$2,074	1.071	$2,221	$0.17
Prof - Other	$363,733		$363,733	$2,582		$366,315	1.071	$392,326	$30.46
Prof - Psych	$41,575		$41,575	$162		$41,736	1.071	$44,700	$3.47
Prof - Specialist	$306,274		$306,274	$2,164		$308,439	1.071	$330,340	$25.65
Prof - Vision	$27,396		$27,396	$118		$27,514	1.071	$29,467	$2.29
Radiology	$181,347		$181,347	$1,273		$182,620	1.039	$189,667	$14.73
Transportation/Ambulance	$97,518		$97,518	$456	$863	$98,837	1.039	$102,651	$7.97
Provider Incentive Payment Adjustment									$4.81
Total	$7,116,832	$3,539	$7,120,371	$46,877	($23,379)	$7,143,869		$7,880,504	$616.66
Admin Cost Adjustment									$59.83
Medallion II Capitation Rate									**$676.48**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age Under 1									
Richmond/Charlottesville	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$1,110,408		$1,110,408	$10,289	($8,601)	$1,112,096	1.021	$1,135,507	$6.54
FQHC / RHC	$157,519		$157,519	$890		$158,410	1.119	$177,191	$1.02
Home Health	$498,701		$498,701	$6,862		$505,564	1.026	$518,951	$2.99
IP - Maternity	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Newborn	$31,790,070	$1,222,831	$33,012,901	$1,271,793	$2,201,052	$36,485,745	1.065	$38,870,655	$223.86
IP - Other	$5,523,800	$212,480	$5,736,280	$220,988	$382,452	$6,339,720	1.065	$6,754,119	$38.90
IP - Psych	$200,211		$200,211	$0	($7,925)	$192,286	1.146	$220,357	$1.27
Lab	$276,385		$276,385	$1,928		$278,313	1.021	$284,172	$1.64
OP - Emergency Room & Related	$3,019,384		$3,019,384	$41,548	($66,181)	$2,994,751	1.026	$3,074,052	$17.70
OP - Other	$3,377,744		$3,377,744	$46,480	($85,593)	$3,338,630	1.026	$3,427,038	$19.74
Pharmacy	$3,175,654		$3,175,654	$138	($107,224)	$3,068,567	1.267	$3,887,979	$22.39
Prof - Anesthesia	$205,396		$205,396	$1,161		$206,556	1.119	$231,046	$1.33
Prof - Child EPSDT	$812,038		$812,038	$4,589		$816,627	1.119	$913,446	$5.26
Prof - Evaluation & Management	$15,867,611		$15,867,611	$89,503		$15,957,114	1.119	$17,848,987	$102.79
Prof - Maternity	$0		$0	$0		$0	1.119	$0	$0.00
Prof - Other	$2,500,654		$2,500,654	$14,219		$2,514,873	1.119	$2,813,036	$16.20
Prof - Psych	$236,598		$236,598	$22		$236,621	1.119	$264,674	$1.52
Prof - Specialist	$1,214,187		$1,214,187	$6,862		$1,221,049	1.119	$1,365,816	$7.87
Prof - Vision	$219,967		$219,967	$262		$220,229	1.119	$246,339	$1.42
Radiology	$271,096		$271,096	$2,512		$273,608	1.021	$279,368	$1.61
Transportation/Ambulance	$789,566		$789,566	$3,003	$12,014	$804,582	1.021	$821,520	$4.73
Provider Incentive Payment Adjustment									$3.77
Total	$71,246,987	$1,435,311	$72,682,298	$1,723,048	$2,319,994	$76,725,340		$83,134,252	$482.54
Admin Cost Adjustment									$53.67
Medallion II Capitation Rate									**$536.21**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 1-5									
Richmond/Charlottesville	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$1,377,867		$1,377,867	$12,767	($10,673)	$1,379,961	1.021	$1,409,012	$1.97
FQHC / RHC	$260,458		$260,458	$1,472		$261,930	1.119	$292,984	$0.41
Home Health	$136,275		$136,275	$1,875		$138,151	1.026	$141,809	$0.20
IP - Maternity	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$10,614,833	($1,319,833)	$9,295,001	$424,668	$623,996	$10,343,664	1.065	$11,019,783	$15.41
IP - Psych	$904,016		$904,016	$440	($35,803)	$868,653	1.146	$995,466	$1.39
Lab	$1,125,502		$1,125,502	$7,894		$1,133,396	1.021	$1,157,256	$1.62
OP - Emergency Room & Related	$8,346,531		$8,346,531	$114,853	($182,946)	$8,278,437	1.026	$8,497,651	$11.89
OP - Other	$13,588,254		$13,588,254	$186,982	($344,329)	$13,430,907	1.026	$13,786,558	$19.28
Pharmacy	$11,448,912		$11,448,912	$496	($386,565)	$11,062,844	1.267	$14,017,000	$19.60
Prof - Anesthesia	$621,507		$621,507	$3,512		$625,019	1.119	$699,122	$0.98
Prof - Child EPSDT	$1,011,236		$1,011,236	$5,715		$1,016,951	1.119	$1,137,521	$1.59
Prof - Evaluation & Management	$19,163,661		$19,163,661	$107,605		$19,271,265	1.119	$21,556,063	$30.15
Prof - Maternity	$104		$104	$1		$104	1.119	$116	$0.00
Prof - Other	$3,397,821		$3,397,821	$19,599		$3,417,420	1.119	$3,822,588	$5.35
Prof - Psych	$1,310,146		$1,310,146	$1,873		$1,312,019	1.119	$1,467,572	$2.05
Prof - Specialist	$2,034,104		$2,034,104	$11,495		$2,045,600	1.119	$2,288,126	$3.20
Prof - Vision	$911,031		$911,031	$1,065		$912,097	1.119	$1,020,235	$1.43
Radiology	$415,221		$415,221	$3,847		$419,068	1.021	$427,890	$0.60
Transportation/Ambulance	$2,598,416		$2,598,416	$6,244	$39,481	$2,644,141	1.021	$2,699,805	$3.78
Provider Incentive Payment Adjustment									$0.95
Total	$79,265,894	($1,319,833)	$77,946,061	$912,405	($296,839)	$78,561,627		$86,436,557	$121.85
Admin Cost Adjustment									$13.55
Medallion II Capitation Rate									**$135.40**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 6-14									
Richmond/Charlottesville	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$1,265,279		$1,265,279	$11,724	($2,669)	$1,274,335	1.021	$1,301,162	$1.41
FQHC / RHC	$311,785		$311,785	$1,762		$313,547	1.119	$350,721	$0.38
Home Health	$13,340		$13,340	$184		$13,524	1.026	$13,882	$0.02
IP - Maternity	$44,834	($510)	$44,324	$1,794	$2,961	$49,079	1.065	$52,287	$0.06
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$8,247,090	($93,807)	$8,153,282	$329,947	$544,617	$9,027,847	1.065	$9,617,957	$10.43
IP - Psych	$2,679,255		$2,679,255	$11,642	($106,518)	$2,584,378	1.146	$2,961,666	$3.21
Lab	$1,199,555		$1,199,555	$7,733		$1,207,288	1.021	$1,232,704	$1.34
OP - Emergency Room & Related	$7,907,546		$7,907,546	$108,812	($173,324)	$7,843,034	1.026	$8,050,718	$8.73
OP - Other	$10,055,361		$10,055,361	$138,367	($254,805)	$9,938,924	1.026	$10,202,107	$11.07
Pharmacy	$25,477,988		$25,477,988	$1,105	($860,247)	$24,618,846	1.267	$31,192,915	$33.84
Prof - Anesthesia	$409,315		$409,315	$2,313		$411,628	1.119	$460,430	$0.50
Prof - Child EPSDT	$238,492		$238,492	$1,348		$239,840	1.119	$268,275	$0.29
Prof - Evaluation & Management	$15,157,098		$15,157,098	$84,742		$15,241,840	1.119	$17,048,910	$18.50
Prof - Maternity	$31,459		$31,459	$178		$31,637	1.119	$35,387	$0.04
Prof - Other	$3,801,838		$3,801,838	$21,953		$3,823,791	1.119	$4,277,139	$4.64
Prof - Psych	$3,477,801		$3,477,801	$12,823	$138,823	$3,629,447	1.119	$4,059,754	$4.40
Prof - Specialist	$2,141,599		$2,141,599	$12,103		$2,153,702	1.119	$2,409,044	$2.61
Prof - Vision	$1,242,295		$1,242,295	$1,734		$1,244,029	1.119	$1,391,521	$1.51
Radiology	$722,127		$722,127	$6,691		$728,818	1.021	$744,161	$0.81
Transportation/Ambulance	$3,023,423		$3,023,423	$5,125	$45,906	$3,074,454	1.021	$3,139,177	$3.41
Provider Incentive Payment Adjustment									$0.84
Total	$87,447,479	($94,317)	$87,353,162	$762,080	($665,256)	$87,449,986		$98,809,918	$108.04
Admin Cost Adjustment									$12.02
Medallion II Capitation Rate									**$120.05**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 15-20 Female									
Richmond/Charlottesville	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$169,379		$169,379	$1,569	($357)	$170,591	1.021	$174,182	$0.96
FQHC / RHC	$210,698		$210,698	$1,191		$211,889	1.119	$237,011	$1.30
Home Health	$15,950		$15,950	$219		$16,169	1.026	$16,597	$0.09
IP - Maternity	$5,478,226	($931,941)	$4,546,286	$219,162	$305,938	$5,071,386	1.065	$5,402,879	$29.70
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$4,004,021	($681,164)	$3,322,857	$160,187	$223,609	$3,706,653	1.065	$3,948,940	$21.70
IP - Psych	$849,051		$849,051	$4,671	($33,794)	$819,927	1.146	$939,627	$5.16
Lab	$869,389		$869,389	$7,355		$876,744	1.021	$895,201	$4.92
OP - Emergency Room & Related	$4,340,128		$4,340,128	$59,722	($95,131)	$4,304,720	1.026	$4,418,709	$24.29
OP - Other	$3,986,358		$3,986,358	$54,854	($101,015)	$3,940,197	1.026	$4,044,534	$22.23
Pharmacy	$4,995,289		$4,995,289	$217	($168,662)	$4,826,843	1.267	$6,115,774	$33.61
Prof - Anesthesia	$436,272		$436,272	$2,466		$438,738	1.119	$490,754	$2.70
Prof - Child EPSDT	$104,616		$104,616	$591		$105,208	1.119	$117,681	$0.65
Prof - Evaluation & Management	$4,599,522		$4,599,522	$25,807		$4,625,329	1.119	$5,173,707	$28.44
Prof - Maternity	$2,962,631		$2,962,631	$16,743		$2,979,374	1.119	$3,332,608	$18.32
Prof - Other	$1,161,572		$1,161,572	$6,650		$1,168,221	1.119	$1,306,725	$7.18
Prof - Psych	$725,064		$725,064	$2,841	$28,949	$756,854	1.119	$846,586	$4.65
Prof - Specialist	$659,752		$659,752	$3,728		$663,481	1.119	$742,143	$4.08
Prof - Vision	$248,245		$248,245	$351		$248,596	1.119	$278,069	$1.53
Radiology	$916,177		$916,177	$8,489		$924,666	1.021	$944,132	$5.19
Transportation/Ambulance	$911,368		$911,368	$3,959	$13,874	$929,201	1.021	$948,762	$5.21
Provider Incentive Payment Adjustment									$1.75
Total	$37,643,708	($1,613,105)	$36,030,603	$580,772	$173,411	$36,784,786		$40,374,624	$223.66
Admin Cost Adjustment									$24.88
Medallion II Capitation Rate									**$248.54**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 21-44 Female									
Richmond/Charlottesville	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$1,206,619		$1,206,619	$8,470		$1,215,089	1.039	$1,261,976	$3.52
FQHC / RHC	$994,409		$994,409	$7,027		$1,001,436	1.071	$1,072,545	$2.99
Home Health	$248,827		$248,827	$3,339		$252,166	0.994	$250,656	$0.70
IP - Maternity	$22,672,317	($43,417)	$22,628,900	$236,719	$1,467,956	$24,333,575	0.990	$24,097,490	$67.18
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$14,660,469	($28,075)	$14,632,395	$153,070	$949,216	$15,734,680	0.990	$15,582,022	$43.44
IP - Psych	$1,921,599		$1,921,599	$4,325	($76,237)	$1,849,687	1.024	$1,894,572	$5.28
Lab	$2,737,447		$2,737,447	$18,168		$2,755,615	1.039	$2,861,947	$7.98
OP - Emergency Room & Related	$18,869,747		$18,869,747	$253,221	($413,464)	$18,709,505	0.994	$18,597,463	$51.85
OP - Other	$22,332,330		$22,332,330	$299,687	($565,715)	$22,066,302	0.994	$21,934,158	$61.15
Pharmacy	$24,307,731		$24,307,731	$1,298	($820,742)	$23,488,288	1.289	$30,274,176	$84.40
Prof - Anesthesia	$1,856,724		$1,856,724	$13,121		$1,869,845	1.071	$2,002,617	$5.58
Prof - Child EPSDT	$222,879		$222,879	$1,575		$224,454	1.071	$240,392	$0.67
Prof - Evaluation & Management	$14,350,403		$14,350,403	$100,956		$14,451,360	1.071	$15,477,505	$43.15
Prof - Maternity	$11,321,079		$11,321,079	$80,004		$11,401,084	1.071	$12,210,638	$34.04
Prof - Other	$4,208,963		$4,208,963	$29,948		$4,238,911	1.071	$4,539,902	$12.66
Prof - Psych	$1,846,615		$1,846,615	$9,909		$1,856,523	1.071	$1,988,349	$5.54
Prof - Specialist	$4,677,986		$4,677,986	$33,059		$4,711,044	1.071	$5,045,560	$14.07
Prof - Vision	$386,763		$386,763	$1,026		$387,789	1.071	$415,324	$1.16
Radiology	$4,571,960		$4,571,960	$32,094		$4,604,054	1.039	$4,781,711	$13.33
Transportation/Ambulance	$2,493,712		$2,493,712	$10,793	$22,059	$2,526,564	1.039	$2,624,057	$7.32
Provider Incentive Payment Adjustment									$3.67
Total	$155,888,579	($71,491)	$155,817,087	$1,297,812	$563,073	$157,677,972		$167,153,060	$469.67
Admin Cost Adjustment									$45.57
Medallion II Capitation Rate									**$515.24**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 15-20 Male									
Richmond/Charlottesville	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$225,320		$225,320	$2,088	($475)	$226,933	1.021	$231,710	$1.58
FQHC / RHC	$56,290		$56,290	$318		$56,608	1.119	$63,320	$0.43
Home Health	$14,181		$14,181	$195		$14,376	1.026	$14,757	$0.10
IP - Maternity	$14,941	$778	$15,719	$598	$1,048	$17,364	1.065	$18,499	$0.13
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$2,103,112	$109,573	$2,212,685	$84,139	$147,454	$2,444,279	1.065	$2,604,051	$17.80
IP - Psych	$598,969		$598,969	$3,146	($23,835)	$578,280	1.146	$662,702	$4.53
Lab	$177,321		$177,321	$1,085		$178,406	1.021	$182,161	$1.25
OP - Emergency Room & Related	$2,067,864		$2,067,864	$28,455	($45,325)	$2,050,993	1.026	$2,105,304	$14.39
OP - Other	$2,028,317		$2,028,317	$27,911	($51,398)	$2,004,830	1.026	$2,057,918	$14.07
Pharmacy	$4,123,234		$4,123,234	$179	($139,218)	$3,984,194	1.267	$5,048,110	$34.52
Prof - Anesthesia	$89,176		$89,176	$504		$89,680	1.119	$100,313	$0.69
Prof - Child EPSDT	$25,890		$25,890	$146		$26,036	1.119	$29,123	$0.20
Prof - Evaluation & Management	$2,092,466		$2,092,466	$11,676		$2,104,142	1.119	$2,353,609	$16.09
Prof - Maternity	$6,512		$6,512	$37		$6,548	1.119	$7,325	$0.05
Prof - Other	$547,793		$547,793	$3,166		$550,959	1.119	$616,281	$4.21
Prof - Psych	$546,882		$546,882	$2,066	$21,832	$570,780	1.119	$638,451	$4.37
Prof - Specialist	$557,014		$557,014	$3,148		$560,162	1.119	$626,574	$4.28
Prof - Vision	$190,949		$190,949	$232		$191,181	1.119	$213,847	$1.46
Radiology	$223,231		$223,231	$2,068		$225,300	1.021	$230,043	$1.57
Transportation/Ambulance	$551,739		$551,739	$1,494	$8,386	$561,619	1.021	$573,442	$3.92
Provider Incentive Payment Adjustment									$0.99
Total	$16,241,199	$110,351	$16,351,550	$172,652	($81,531)	$16,442,670		$18,377,539	$126.64
Admin Cost Adjustment									$14.09
Medallion II Capitation Rate									**$140.73**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 21-44 Male									
Richmond/Charlottesville	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$218,997		$218,997	$1,537		$220,534	1.039	$229,044	$6.33
FQHC / RHC	$52,645		$52,645	$372		$53,017	1.071	$56,782	$1.57
Home Health	$46,797		$46,797	$628		$47,425	0.994	$47,141	$1.30
IP - Maternity	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$2,703,692	($5,975)	$2,697,718	$28,229	$175,004	$2,900,951	0.990	$2,872,805	$79.41
IP - Psych	$189,213		$189,213	$418	($7,507)	$182,125	1.024	$186,544	$5.16
Lab	$85,047		$85,047	$495		$85,542	1.039	$88,842	$2.46
OP - Emergency Room & Related	$1,547,151		$1,547,151	$20,762	($33,900)	$1,534,013	0.994	$1,524,826	$42.15
OP - Other	$1,538,699		$1,538,699	$20,648	($38,978)	$1,520,369	0.994	$1,511,265	$41.77
Pharmacy	$2,176,892		$2,176,892	$116	($73,502)	$2,103,506	1.289	$2,711,220	$74.94
Prof - Anesthesia	$67,476		$67,476	$477		$67,952	1.071	$72,778	$2.01
Prof - Child EPSDT	$4,242		$4,242	$30		$4,272	1.071	$4,576	$0.13
Prof - Evaluation & Management	$1,033,883		$1,033,883	$7,262		$1,041,145	1.071	$1,115,073	$30.82
Prof - Maternity	$106		$106	$1		$107	1.071	$114	$0.00
Prof - Other	$302,479		$302,479	$2,162		$304,642	1.071	$326,273	$9.02
Prof - Psych	$144,643		$144,643	$690		$145,333	1.071	$155,653	$4.30
Prof - Specialist	$435,581		$435,581	$3,078		$438,659	1.071	$469,807	$12.99
Prof - Vision	$42,773		$42,773	$132		$42,905	1.071	$45,952	$1.27
Radiology	$183,462		$183,462	$1,288		$184,750	1.039	$191,879	$5.30
Transportation/Ambulance	$192,099		$192,099	$664	$1,698	$194,461	1.039	$201,964	$5.58
Provider Incentive Payment Adjustment									$2.57
Total	$10,965,878	($5,975)	$10,959,903	$88,989	$22,815	$11,071,707		$11,812,538	$329.09
Admin Cost Adjustment									$31.93
Medallion II Capitation Rate									**$361.02**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 45 and Over									
Richmond/Charlottesville	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$416,568		$416,568	$2,924		$419,492	1.039	$435,679	$11.31
FQHC / RHC	$89,274		$89,274	$631		$89,905	1.071	$96,288	$2.50
Home Health	$90,237		$90,237	$1,211		$91,448	0.994	$90,900	$2.36
IP - Maternity	$30,442	$80	$30,522	$318	$1,980	$32,820	0.990	$32,501	$0.84
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$4,727,126	$12,363	$4,739,489	$49,356	$307,440	$5,096,285	0.990	$5,046,841	$130.99
IP - Psych	$254,331		$254,331	$600	($10,091)	$244,840	1.024	$250,781	$6.51
Lab	$211,451		$211,451	$1,372		$212,823	1.039	$221,036	$5.74
OP - Emergency Room & Related	$1,768,506		$1,768,506	$23,732	($38,751)	$1,753,488	0.994	$1,742,987	$45.24
OP - Other	$3,957,142		$3,957,142	$53,103	($100,241)	$3,910,003	0.994	$3,886,588	$100.87
Pharmacy	$5,702,683		$5,702,683	$305	($192,549)	$5,510,438	1.289	$7,102,432	$184.34
Prof - Anesthesia	$119,307		$119,307	$843		$120,150	1.071	$128,681	$3.34
Prof - Child EPSDT	$14,142		$14,142	$100		$14,242	1.071	$15,254	$0.40
Prof - Evaluation & Management	$1,836,025		$1,836,025	$12,926		$1,848,950	1.071	$1,980,238	$51.40
Prof - Maternity	$11,295		$11,295	$80		$11,375	1.071	$12,182	$0.32
Prof - Other	$818,891		$818,891	$5,808		$824,699	1.071	$883,258	$22.92
Prof - Psych	$212,884		$212,884	$1,170		$214,054	1.071	$229,253	$5.95
Prof - Specialist	$938,918		$938,918	$6,635		$945,553	1.071	$1,012,694	$26.28
Prof - Vision	$79,771		$79,771	$379		$80,149	1.071	$85,840	$2.23
Radiology	$453,447		$453,447	$3,183		$456,630	1.039	$474,250	$12.31
Transportation/Ambulance	$260,449		$260,449	$1,109	$2,304	$263,861	1.039	$274,043	$7.11
Provider Incentive Payment Adjustment									$4.90
Total	$21,992,886	$12,443	$22,005,329	$165,784	($29,908)	$22,141,205		$24,001,728	$627.85
Admin Cost Adjustment									$60.92
Medallion II Capitation Rate									**$688.77**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age Under 1									
Rural	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$406,777		$406,777	$3,769	($3,151)	$407,396	1.021	$415,972	$4.73
FQHC / RHC	$349,842		$349,842	$1,977		$351,819	1.119	$393,530	$4.47
Home Health	$50,131		$50,131	$690		$50,821	1.026	$52,167	$0.59
IP - Maternity	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Newborn	$19,190,328	$38,888	$19,229,216	$767,728	$1,283,789	$21,280,733	1.065	$22,671,759	$257.62
IP - Other	$3,030,114	$6,140	$3,036,254	$121,225	$202,708	$3,360,187	1.065	$3,579,827	$40.68
IP - Psych	$97,309		$97,309	$0	($3,852)	$93,457	1.146	$107,101	$1.22
Lab	$156,503		$156,503	$1,219		$157,723	1.021	$161,043	$1.83
OP - Emergency Room & Related	$1,333,441		$1,333,441	$18,349	($29,227)	$1,322,562	1.026	$1,357,584	$15.43
OP - Other	$1,705,327		$1,705,327	$23,466	($43,213)	$1,685,579	1.026	$1,730,214	$19.66
Pharmacy	$1,822,072		$1,822,072	$79	($61,521)	$1,760,630	1.267	$2,230,778	$25.35
Prof - Anesthesia	$120,106		$120,106	$679		$120,784	1.119	$135,105	$1.54
Prof - Child EPSDT	$390,227		$390,227	$2,205		$392,432	1.119	$438,959	$4.99
Prof - Evaluation & Management	$8,551,548		$8,551,548	$48,249		$8,599,796	1.119	$9,619,387	$109.31
Prof - Maternity	$0		$0	$0		$0	1.119	$0	$0.00
Prof - Other	$1,249,042		$1,249,042	$7,142		$1,256,185	1.119	$1,405,118	$15.97
Prof - Psych	$113,411		$113,411	$2		$113,413	1.119	$126,859	$1.44
Prof - Specialist	$619,013		$619,013	$3,498		$622,511	1.119	$696,316	$7.91
Prof - Vision	$130,124		$130,124	$181		$130,306	1.119	$145,755	$1.66
Radiology	$153,259		$153,259	$1,420		$154,679	1.021	$157,935	$1.79
Transportation/Ambulance	$458,302		$458,302	$2,075	$6,978	$467,355	1.021	$477,194	$5.42
Provider Incentive Payment Adjustment									$4.10
Total	$39,926,876	$45,028	$39,971,905	$1,003,953	$1,352,511	$42,328,369		$45,902,602	$525.71
Admin Cost Adjustment									$58.48
Medallion II Capitation Rate									**$584.18**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 1-5									
Rural	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$501,093		$501,093	$4,643	($3,881)	$501,855	1.021	$512,420	$1.46
FQHC / RHC	$553,090		$553,090	$3,126		$556,216	1.119	$622,160	$1.77
Home Health	$57,541		$57,541	$792		$58,333	1.026	$59,878	$0.17
IP - Maternity	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$3,897,061	$98,730	$3,995,790	$155,915	$266,536	$4,418,242	1.065	$4,707,042	$13.43
IP - Psych	$414,025		$414,025	$6	($16,389)	$397,641	1.146	$455,692	$1.30
Lab	$636,942		$636,942	$5,027		$641,970	1.021	$655,484	$1.87
OP - Emergency Room & Related	$3,414,709		$3,414,709	$46,988	($74,846)	$3,386,851	1.026	$3,476,535	$9.92
OP - Other	$6,679,928		$6,679,928	$91,919	($169,271)	$6,602,577	1.026	$6,777,413	$19.33
Pharmacy	$5,591,222		$5,591,222	$242	($188,784)	$5,402,681	1.267	$6,845,380	$19.53
Prof - Anesthesia	$389,936		$389,936	$2,204		$392,140	1.119	$438,632	$1.25
Prof - Child EPSDT	$493,220		$493,220	$2,787		$496,007	1.119	$554,814	$1.58
Prof - Evaluation & Management	$9,384,444		$9,384,444	$52,737		$9,437,181	1.119	$10,556,052	$30.11
Prof - Maternity	$0		$0	$0		$0	1.119	$0	$0.00
Prof - Other	$1,449,637		$1,449,637	$8,577		$1,458,214	1.119	$1,631,099	$4.65
Prof - Psych	$572,988		$572,988	$524		$573,512	1.119	$641,507	$1.83
Prof - Specialist	$941,592		$941,592	$5,321		$946,913	1.119	$1,059,179	$3.02
Prof - Vision	$497,204		$497,204	$593		$497,798	1.119	$556,817	$1.59
Radiology	$180,314		$180,314	$1,671		$181,985	1.021	$185,816	$0.53
Transportation/Ambulance	$1,321,649		$1,321,649	$3,432	$20,085	$1,345,166	1.021	$1,373,485	$3.92
Provider Incentive Payment Adjustment									$0.92
Total	$36,976,596	$98,730	$37,075,326	$386,505	($166,550)	$37,295,280		$41,109,405	$118.19
Admin Cost Adjustment									$13.15
Medallion II Capitation Rate									**$131.34**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 6-14									
Rural	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$553,636		$553,636	$5,130	($1,168)	$557,599	1.021	$569,337	$1.22
FQHC / RHC	$510,154		$510,154	$2,883		$513,037	1.119	$573,863	$1.23
Home Health	$76,379		$76,379	$1,051		$77,430	1.026	$79,481	$0.17
IP - Maternity	$2,957	($49)	$2,907	$118	$194	$3,220	1.065	$3,430	$0.01
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$3,754,866	($62,487)	$3,692,379	$150,230	$246,693	$4,089,302	1.065	$4,356,601	$9.31
IP - Psych	$960,885		$960,885	$2,661	($38,142)	$925,405	1.146	$1,060,503	$2.27
Lab	$691,539		$691,539	$5,271		$696,810	1.021	$711,479	$1.52
OP - Emergency Room & Related	$3,758,968		$3,758,968	$51,725	($82,392)	$3,728,301	1.026	$3,827,027	$8.18
OP - Other	$5,381,171		$5,381,171	$74,048	($136,360)	$5,318,859	1.026	$5,459,703	$11.67
Pharmacy	$13,722,794		$13,722,794	$595	($463,341)	$13,260,048	1.267	$16,800,932	$35.90
Prof - Anesthesia	$228,137		$228,137	$1,289		$229,427	1.119	$256,627	$0.55
Prof - Child EPSDT	$129,714		$129,714	$733		$130,447	1.119	$145,912	$0.31
Prof - Evaluation & Management	$7,947,019		$7,947,019	$44,525		$7,991,544	1.119	$8,939,020	$19.10
Prof - Maternity	$5,986		$5,986	$34		$6,020	1.119	$6,733	$0.01
Prof - Other	$1,302,898		$1,302,898	$7,912		$1,310,810	1.119	$1,466,219	$3.13
Prof - Psych	$1,502,286		$1,502,286	$4,640	$59,931	$1,566,857	1.119	$1,752,623	$3.75
Prof - Specialist	$1,007,738		$1,007,738	$5,695		$1,013,433	1.119	$1,133,586	$2.42
Prof - Vision	$657,039		$657,039	$749		$657,788	1.119	$735,776	$1.57
Radiology	$361,875		$361,875	$3,353		$365,229	1.021	$372,917	$0.80
Transportation/Ambulance	$1,753,483		$1,753,483	$4,302	$26,644	$1,784,429	1.021	$1,821,995	$3.89
Provider Incentive Payment Adjustment									$0.84
Total	$44,309,525	($62,536)	$44,246,989	$366,945	($387,940)	$44,225,993		$50,073,764	$107.84
Admin Cost Adjustment									$12.00
Medallion II Capitation Rate									**$119.84**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 15-20 Female									
Rural	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$78,276		$78,276	$725	($165)	$78,836	1.021	$80,496	$0.88
FQHC / RHC	$316,846		$316,846	$1,791		$318,637	1.119	$356,414	$3.89
Home Health	$43,387		$43,387	$597		$43,984	1.026	$45,149	$0.49
IP - Maternity	$3,264,201	$147,236	$3,411,437	$130,588	$227,395	$3,769,420	1.065	$4,015,810	$43.84
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$1,032,041	$46,554	$1,078,596	$41,290	$71,896	$1,191,782	1.065	$1,269,683	$13.86
IP - Psych	$237,378		$237,378	$867	($9,431)	$228,814	1.146	$262,218	$2.86
Lab	$501,990		$501,990	$4,422		$506,412	1.021	$517,073	$5.65
OP - Emergency Room & Related	$1,997,256		$1,997,256	$27,483	($43,778)	$1,980,961	1.026	$2,033,417	$22.20
OP - Other	$2,148,929		$2,148,929	$29,570	($54,454)	$2,124,045	1.026	$2,180,289	$23.80
Pharmacy	$2,773,354		$2,773,354	$120	($93,640)	$2,679,834	1.267	$3,395,441	$37.07
Prof - Anesthesia	$226,447		$226,447	$1,280		$227,727	1.119	$254,726	$2.78
Prof - Child EPSDT	$107,150		$107,150	$606		$107,755	1.119	$120,531	$1.32
Prof - Evaluation & Management	$2,560,134		$2,560,134	$14,392		$2,574,526	1.119	$2,879,761	$31.44
Prof - Maternity	$1,822,652		$1,822,652	$10,300		$1,832,952	1.119	$2,050,267	$22.38
Prof - Other	$455,486		$455,486	$2,685		$458,170	1.119	$512,491	$5.60
Prof - Psych	$335,213		$335,213	$1,137	$13,377	$349,726	1.119	$391,190	$4.27
Prof - Specialist	$345,663		$345,663	$1,953		$347,617	1.119	$388,830	$4.25
Prof - Vision	$136,322		$136,322	$190		$136,512	1.119	$152,697	$1.67
Radiology	$500,662		$500,662	$4,639		$505,301	1.021	$515,939	$5.63
Transportation/Ambulance	$461,942		$461,942	$1,933	$7,031	$470,906	1.021	$480,820	$5.25
Provider Incentive Payment Adjustment									$1.88
Total	$19,345,329	$193,790	$19,539,119	$276,569	$118,231	$19,933,919		$21,903,243	$241.02
Admin Cost Adjustment									$26.81
Medallion II Capitation Rate									**$267.82**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 21-44 Female									
Rural	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$662,394		$662,394	$4,650		$667,044	1.039	$692,783	$4.23
FQHC / RHC	$935,715		$935,715	$6,613		$942,327	1.071	$1,009,239	$6.16
Home Health	$320,534		$320,534	$4,301		$324,835	0.994	$322,890	$1.97
IP - Maternity	$10,642,915	($122,240)	$10,520,675	$111,122	$682,554	$11,314,350	0.990	$11,204,578	$68.36
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$9,207,975	($105,760)	$9,102,214	$96,141	$590,528	$9,788,883	0.990	$9,693,911	$59.15
IP - Psych	$696,752		$696,752	$1,407	($27,636)	$670,523	1.024	$686,794	$4.19
Lab	$1,464,071		$1,464,071	$9,962		$1,474,033	1.039	$1,530,911	$9.34
OP - Emergency Room & Related	$7,370,699		$7,370,699	$98,911	($161,503)	$7,308,107	0.994	$7,264,343	$44.32
OP - Other	$10,555,266		$10,555,266	$141,646	($267,383)	$10,429,529	0.994	$10,367,072	$63.25
Pharmacy	$11,898,171		$11,898,171	$635	($401,738)	$11,497,069	1.289	$14,818,632	$90.41
Prof - Anesthesia	$874,853		$874,853	$6,182		$881,036	1.071	$943,595	$5.76
Prof - Child EPSDT	$157,320		$157,320	$1,112		$158,431	1.071	$169,681	$1.04
Prof - Evaluation & Management	$6,757,805		$6,757,805	$47,579		$6,805,383	1.071	$7,288,612	$44.47
Prof - Maternity	$5,881,477		$5,881,477	$41,564		$5,923,041	1.071	$6,343,617	$38.70
Prof - Other	$1,590,457		$1,590,457	$11,461		$1,601,918	1.071	$1,715,665	$10.47
Prof - Psych	$658,826		$658,826	$3,047		$661,873	1.071	$708,870	$4.33
Prof - Specialist	$2,396,287		$2,396,287	$16,934		$2,413,221	1.071	$2,584,577	$15.77
Prof - Vision	$187,642		$187,642	$534		$188,176	1.071	$201,537	$1.23
Radiology	$2,135,492		$2,135,492	$14,991		$2,150,483	1.039	$2,233,464	$13.63
Transportation/Ambulance	$1,162,194		$1,162,194	$5,030	$10,281	$1,177,505	1.039	$1,222,941	$7.46
Provider Incentive Payment Adjustment									$3.89
Total	$75,556,844	($228,000)	$75,328,844	$623,820	$425,103	$76,377,766		$81,003,711	$498.12
Admin Cost Adjustment									$48.33
Medallion II Capitation Rate									**$546.45**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 15-20 Male									
Rural	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$103,201		$103,201	$956	($218)	$103,939	1.021	$106,128	$1.43
FQHC / RHC	$80,768		$80,768	$456		$81,224	1.119	$90,854	$1.22
Home Health	$25,717		$25,717	$354		$26,071	1.026	$26,762	$0.36
IP - Maternity	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$1,089,158	$56,747	$1,145,904	$43,575	$76,364	$1,265,843	1.065	$1,348,585	$18.12
IP - Psych	$203,820		$203,820	$769	($8,099)	$196,491	1.146	$225,176	$3.02
Lab	$97,729		$97,729	$723		$98,451	1.021	$100,524	$1.35
OP - Emergency Room & Related	$978,714		$978,714	$13,468	($21,452)	$970,730	1.026	$996,435	$13.39
OP - Other	$1,070,231		$1,070,231	$14,727	($27,120)	$1,057,838	1.026	$1,085,849	$14.59
Pharmacy	$2,198,416		$2,198,416	$95	($74,228)	$2,124,284	1.267	$2,691,540	$36.16
Prof - Anesthesia	$42,812		$42,812	$242		$43,054	1.119	$48,158	$0.65
Prof - Child EPSDT	$11,903		$11,903	$67		$11,970	1.119	$13,390	$0.18
Prof - Evaluation & Management	$1,118,799		$1,118,799	$6,262		$1,125,061	1.119	$1,258,448	$16.91
Prof - Maternity	$361		$361	$2		$363	1.119	$406	$0.01
Prof - Other	$187,836		$187,836	$1,155		$188,990	1.119	$211,397	$2.84
Prof - Psych	$240,000		$240,000	$729	$9,574	$250,303	1.119	$279,979	$3.76
Prof - Specialist	$276,349		$276,349	$1,562		$277,911	1.119	$310,860	$4.18
Prof - Vision	$99,851		$99,851	$92		$99,943	1.119	$111,792	$1.50
Radiology	$114,108		$114,108	$1,057		$115,166	1.021	$117,590	$1.58
Transportation/Ambulance	$306,844		$306,844	$923	$4,665	$312,432	1.021	$319,010	$4.29
Provider Incentive Payment Adjustment									$0.99
Total	$8,246,617	$56,747	$8,303,363	$87,215	($40,514)	$8,350,065		$9,342,883	$126.49
Admin Cost Adjustment									$14.07
Medallion II Capitation Rate									**$140.56**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 21-44 Male									
Rural	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$125,655		$125,655	$882		$126,537	1.039	$131,419	$6.20
FQHC / RHC	$31,114		$31,114	$220		$31,334	1.071	$33,559	$1.58
Home Health	$19,689		$19,689	$264		$19,953	0.994	$19,833	$0.94
IP - Maternity	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$1,600,572	$4,186	$1,604,758	$16,712	$104,097	$1,725,567	0.990	$1,708,825	$80.57
IP - Psych	$74,756		$74,756	$147	($2,965)	$71,938	1.024	$73,683	$3.47
Lab	$55,547		$55,547	$347		$55,894	1.039	$58,051	$2.74
OP - Emergency Room & Related	$995,749		$995,749	$13,362	($21,818)	$987,293	0.994	$981,381	$46.27
OP - Other	$1,089,561		$1,089,561	$14,621	($27,600)	$1,076,582	0.994	$1,070,135	$50.46
Pharmacy	$1,601,690		$1,601,690	$86	($54,080)	$1,547,695	1.289	$1,994,832	$94.06
Prof - Anesthesia	$34,414		$34,414	$243		$34,658	1.071	$37,119	$1.75
Prof - Child EPSDT	$4,141		$4,141	$29		$4,171	1.071	$4,467	$0.21
Prof - Evaluation & Management	$680,849		$680,849	$4,786		$685,636	1.071	$734,320	$34.62
Prof - Maternity	$0		$0	$0		$0	1.071	$0	$0.00
Prof - Other	$150,462		$150,462	$1,083		$151,546	1.071	$162,307	$7.65
Prof - Psych	$62,263		$62,263	$255		$62,518	1.071	$66,958	$3.16
Prof - Specialist	$249,727		$249,727	$1,765		$251,492	1.071	$269,349	$12.70
Prof - Vision	$25,576		$25,576	$72		$25,648	1.071	$27,469	$1.30
Radiology	$140,284		$140,284	$985		$141,269	1.039	$146,720	$6.92
Transportation/Ambulance	$126,533		$126,533	$500	$1,119	$128,151	1.039	$133,096	$6.28
Provider Incentive Payment Adjustment									$2.84
Total	$7,068,582	$4,186	$7,072,768	$56,360	($1,248)	$7,127,881		$7,653,524	$363.70
Admin Cost Adjustment									$35.29
Medallion II Capitation Rate									**$398.99**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 45 and Over									
Rural	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$206,791		$206,791	$1,452		$208,242	1.039	$216,278	$12.39
FQHC / RHC	$87,004		$87,004	$615		$87,619	1.071	$93,840	$5.38
Home Health	$53,634		$53,634	$720		$54,354	0.994	$54,028	$3.10
IP - Maternity	$4,444	$12	$4,455	$46	$289	$4,791	0.990	$4,744	$0.27
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$2,784,573	$7,283	$2,791,856	$29,074	$181,102	$3,002,031	0.990	$2,972,905	$170.35
IP - Psych	$131,036		$131,036	$309	($5,199)	$126,146	1.024	$129,207	$7.40
Lab	$139,223		$139,223	$943		$140,166	1.039	$145,575	$8.34
OP - Emergency Room & Related	$667,872		$667,872	$8,962	($14,634)	$662,200	0.994	$658,235	$37.72
OP - Other	$2,220,146		$2,220,146	$29,793	($56,240)	$2,193,699	0.994	$2,180,563	$124.95
Pharmacy	$2,965,351		$2,965,351	$158	($100,124)	$2,865,385	1.289	$3,693,210	$211.62
Prof - Anesthesia	$72,436		$72,436	$512		$72,948	1.071	$78,128	$4.48
Prof - Child EPSDT	$9,811		$9,811	$69		$9,881	1.071	$10,582	$0.61
Prof - Evaluation & Management	$876,498		$876,498	$6,176		$882,674	1.071	$945,350	$54.17
Prof - Maternity	$2,193		$2,193	$15		$2,209	1.071	$2,366	$0.14
Prof - Other	$304,002		$304,002	$2,173		$306,175	1.071	$327,915	$18.79
Prof - Psych	$83,106		$83,106	$415		$83,521	1.071	$89,452	$5.13
Prof - Specialist	$497,667		$497,667	$3,517		$501,184	1.071	$536,771	$30.76
Prof - Vision	$38,445		$38,445	$189		$38,633	1.071	$41,376	$2.37
Radiology	$213,949		$213,949	$1,502		$215,451	1.039	$223,764	$12.82
Transportation/Ambulance	$180,762		$180,762	$933	$1,600	$183,295	1.039	$190,368	$10.91
Provider Incentive Payment Adjustment									$5.68
Total	$11,538,942	$7,294	$11,546,236	$87,573	$6,794	$11,640,603		$12,594,656	$727.35
Admin Cost Adjustment									$70.57
Medallion II Capitation Rate									**$797.92**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age Under 1									
Tidewater	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$654,064		$654,064	$6,061	($5,066)	$655,058	1.021	$668,848	$3.32
FQHC / RHC	$89,199		$89,199	$504		$89,703	1.119	$100,339	$0.50
Home Health	$159,873		$159,873	$2,200		$162,073	1.026	$166,364	$0.82
IP - Maternity	$4,624	($99)	$4,525	$185	$302	$5,012	1.065	$5,340	$0.03
IP - Newborn	$41,694,081	($892,209)	$40,801,872	$1,668,012	$2,726,535	$45,196,420	1.065	$48,150,707	$238.69
IP - Other	$6,935,076	($147,484)	$6,787,592	$275,726	$453,460	$7,516,778	1.065	$8,008,116	$39.70
IP - Psych	$241,569		$241,569	$0	($9,562)	$232,007	1.146	$265,877	$1.32
Lab	$410,416		$410,416	$1,926		$412,342	1.021	$421,023	$2.09
OP - Emergency Room & Related	$4,320,396		$4,320,396	$59,451	($94,698)	$4,285,149	1.026	$4,398,620	$21.80
OP - Other	$4,946,265		$4,946,265	$68,063	($125,339)	$4,888,989	1.026	$5,018,449	$24.88
Pharmacy	$3,343,371		$3,343,371	$145	($112,887)	$3,230,629	1.267	$4,093,317	$20.29
Prof - Anesthesia	$358,070		$358,070	$2,024		$360,094	1.119	$402,786	$2.00
Prof - Child EPSDT	$1,049,560		$1,049,560	$5,931		$1,055,491	1.119	$1,180,630	$5.85
Prof - Evaluation & Management	$20,468,647		$20,468,647	$115,500		$20,584,147	1.119	$23,024,600	$114.13
Prof - Maternity	$1,112		$1,112	$6		$1,118	1.119	$1,251	$0.01
Prof - Other	$3,039,638		$3,039,638	$17,465		$3,057,103	1.119	$3,419,553	$16.95
Prof - Psych	$282,128		$282,128	$8		$282,135	1.119	$315,585	$1.56
Prof - Specialist	$1,801,669		$1,801,669	$10,182		$1,811,851	1.119	$2,026,664	$10.05
Prof - Vision	$309,647		$309,647	$442		$310,089	1.119	$346,853	$1.72
Radiology	$295,793		$295,793	$2,741		$298,534	1.021	$304,818	$1.51
Transportation/Ambulance	$765,670		$765,670	$1,665	$11,631	$778,966	1.021	$795,365	$3.94
Provider Incentive Payment Adjustment									$4.02
Total	$91,170,868	($1,039,792)	$90,131,076	$2,238,237	$2,844,376	$95,213,689		$103,115,106	$515.17
Admin Cost Adjustment									$57.30
Medallion II Capitation Rate									**$572.47**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 1-5									
Tidewater	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$1,217,956		$1,217,956	$11,286	($9,434)	$1,219,808	1.021	$1,245,487	$1.55
FQHC / RHC	$208,549		$208,549	$1,179		$209,727	1.119	$234,592	$0.29
Home Health	$37,229		$37,229	$512		$37,741	1.026	$38,741	$0.05
IP - Maternity	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$6,648,114	($123,405)	$6,524,708	$258,676	$435,488	$7,218,872	1.065	$7,690,738	$9.60
IP - Psych	$1,095,786		$1,095,786	$505	($43,396)	$1,052,895	1.146	$1,206,605	$1.51
Lab	$1,641,192		$1,641,192	$7,594		$1,648,786	1.021	$1,683,497	$2.10
OP - Emergency Room & Related	$11,760,304		$11,760,304	$161,828	($257,772)	$11,664,360	1.026	$11,973,233	$14.94
OP - Other	$15,734,875		$15,734,875	$216,520	($398,725)	$15,552,670	1.026	$15,964,505	$19.92
Pharmacy	$11,781,844		$11,781,844	$511	($397,806)	$11,384,549	1.267	$14,424,611	$18.00
Prof - Anesthesia	$745,459		$745,459	$4,213		$749,672	1.119	$838,553	$1.05
Prof - Child EPSDT	$1,189,602		$1,189,602	$6,723		$1,196,325	1.119	$1,338,161	$1.67
Prof - Evaluation & Management	$20,729,230		$20,729,230	$116,489		$20,845,720	1.119	$23,317,184	$29.10
Prof - Maternity	$0		$0	$0		$0	1.119	$0	$0.00
Prof - Other	$4,895,360		$4,895,360	$28,906		$4,924,266	1.119	$5,508,087	$6.87
Prof - Psych	$1,460,253		$1,460,253	$1,522		$1,461,775	1.119	$1,635,083	$2.04
Prof - Specialist	$2,128,930		$2,128,930	$12,031		$2,140,962	1.119	$2,394,794	$2.99
Prof - Vision	$1,102,699		$1,102,699	$1,029		$1,103,728	1.119	$1,234,586	$1.54
Radiology	$377,848		$377,848	$3,501		$381,349	1.021	$389,377	$0.49
Transportation/Ambulance	$2,676,256		$2,676,256	$2,947	$40,611	$2,719,814	1.021	$2,777,071	$3.47
Provider Incentive Payment Adjustment									$0.92
Total	$85,431,487	($123,405)	$85,308,082	$835,971	($631,034)	$85,513,019		$93,894,904	$118.10
Admin Cost Adjustment									$13.14
Medallion II Capitation Rate									**$131.24**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 6-14									
Tidewater	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$1,273,746		$1,273,746	$11,803	($2,687)	$1,282,862	1.021	$1,309,869	$1.22
FQHC / RHC	$166,619		$166,619	$942		$167,560	1.119	$187,426	$0.17
Home Health	$33,153		$33,153	$456		$33,609	1.026	$34,499	$0.03
IP - Maternity	$86,198	$4,320	$90,518	$3,448	$6,033	$99,999	1.065	$106,536	$0.10
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$5,999,593	$287,593	$6,287,186	$229,566	$418,371	$6,935,123	1.065	$7,388,440	$6.87
IP - Psych	$2,266,932		$2,266,932	$5,540	($89,955)	$2,182,517	1.146	$2,501,138	$2.33
Lab	$1,884,740		$1,884,740	$6,922		$1,891,663	1.021	$1,931,486	$1.80
OP - Emergency Room & Related	$10,714,162		$10,714,162	$147,433	($234,842)	$10,626,753	1.026	$10,908,150	$10.14
OP - Other	$14,257,432		$14,257,432	$196,190	($361,286)	$14,092,335	1.026	$14,465,501	$13.45
Pharmacy	$32,118,727		$32,118,727	$1,392	($1,084,467)	$31,035,653	1.267	$39,323,228	$36.56
Prof - Anesthesia	$517,924		$517,924	$2,927		$520,851	1.119	$582,603	$0.54
Prof - Child EPSDT	$402,585		$402,585	$2,275		$404,860	1.119	$452,860	$0.42
Prof - Evaluation & Management	$17,262,387		$17,262,387	$96,742		$17,359,129	1.119	$19,417,225	$18.05
Prof - Maternity	$42,397		$42,397	$240		$42,636	1.119	$47,691	$0.04
Prof - Other	$7,265,361		$7,265,361	$42,903		$7,308,264	1.119	$8,174,730	$7.60
Prof - Psych	$3,758,337		$3,758,337	$11,474	$149,927	$3,919,738	1.119	$4,384,461	$4.08
Prof - Specialist	$2,405,034		$2,405,034	$13,592		$2,418,625	1.119	$2,705,377	$2.52
Prof - Vision	$1,520,964		$1,520,964	$1,611		$1,522,574	1.119	$1,703,091	$1.58
Radiology	$741,915		$741,915	$6,875		$748,790	1.021	$764,553	$0.71
Transportation/Ambulance	$3,506,860		$3,506,860	$2,574	$53,195	$3,562,629	1.021	$3,637,630	$3.38
Provider Incentive Payment Adjustment									$0.88
Total	$106,225,066	$291,913	$106,516,979	$784,904	($1,145,712)	$106,156,172		$120,026,495	$112.47
Admin Cost Adjustment									$12.51
Medallion II Capitation Rate									**$124.98**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 15-20 Female									
Tidewater	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$250,050		$250,050	$2,317	($527)	$251,839	1.021	$257,141	$1.19
FQHC / RHC	$151,311		$151,311	$855		$152,166	1.119	$170,206	$0.78
Home Health	$24,328		$24,328	$335		$24,663	1.026	$25,316	$0.12
IP - Maternity	$6,765,290	$352,464	$7,117,754	$270,652	$474,330	$7,862,737	1.065	$8,376,688	$38.62
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$1,339,990	$66,883	$1,406,873	$51,359	$93,617	$1,551,849	1.065	$1,653,287	$7.62
IP - Psych	$603,000		$603,000	$2,076	($23,952)	$581,124	1.146	$665,962	$3.07
Lab	$765,554		$765,554	$4,930		$770,484	1.021	$786,705	$3.63
OP - Emergency Room & Related	$6,262,254		$6,262,254	$86,172	($137,261)	$6,211,165	1.026	$6,375,637	$29.39
OP - Other	$5,103,561		$5,103,561	$70,228	($129,325)	$5,044,464	1.026	$5,178,042	$23.87
Pharmacy	$6,347,969		$6,347,969	$275	($214,335)	$6,133,910	1.267	$7,771,872	$35.83
Prof - Anesthesia	$649,231		$649,231	$3,669		$652,900	1.119	$730,308	$3.37
Prof - Child EPSDT	$341,288		$341,288	$1,929		$343,217	1.119	$383,909	$1.77
Prof - Evaluation & Management	$4,955,012		$4,955,012	$27,846		$4,982,858	1.119	$5,573,625	$25.69
Prof - Maternity	$3,986,731		$3,986,731	$22,530		$4,009,261	1.119	$4,484,598	$20.67
Prof - Other	$1,726,073		$1,726,073	$10,154		$1,736,227	1.119	$1,942,074	$8.95
Prof - Psych	$737,380		$737,380	$2,127	$29,410	$768,917	1.119	$860,080	$3.97
Prof - Specialist	$913,723		$913,723	$5,164		$918,887	1.119	$1,027,830	$4.74
Prof - Vision	$307,663		$307,663	$333		$307,996	1.119	$344,511	$1.59
Radiology	$1,196,459		$1,196,459	$11,086		$1,207,546	1.021	$1,232,967	$5.68
Transportation/Ambulance	$846,399		$846,399	$1,740	$12,856	$860,995	1.021	$879,120	$4.05
Provider Incentive Payment Adjustment									$1.77
Total	$43,273,266	$419,348	$43,692,614	$575,777	$104,813	$44,373,204		$48,719,877	$226.37
Admin Cost Adjustment									$25.18
Medallion II Capitation Rate									**$251.55**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 21-44 Female									
Tidewater	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$1,800,950		$1,800,950	$12,642		$1,813,593	1.039	$1,883,574	$4.32
FQHC / RHC	$1,246,576		$1,246,576	$8,809		$1,255,385	1.071	$1,344,526	$3.08
Home Health	$257,377		$257,377	$3,454		$260,831	0.994	$259,269	$0.59
IP - Maternity	$27,468,792	$71,842	$27,540,634	$286,799	$1,786,501	$29,613,934	0.990	$29,326,618	$67.24
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$12,261,722	$31,804	$12,293,525	$126,963	$797,386	$13,217,875	0.990	$13,089,635	$30.01
IP - Psych	$1,246,362		$1,246,362	$1,886	($49,412)	$1,198,837	1.024	$1,227,928	$2.82
Lab	$2,251,105		$2,251,105	$12,609		$2,263,714	1.039	$2,351,064	$5.39
OP - Emergency Room & Related	$26,445,622		$26,445,622	$354,885	($579,462)	$26,221,045	0.994	$26,064,021	$59.76
OP - Other	$21,613,728		$21,613,728	$290,044	($547,512)	$21,356,260	0.994	$21,228,368	$48.67
Pharmacy	$26,279,665		$26,279,665	$1,404	($887,324)	$25,393,745	1.289	$32,730,130	$75.04
Prof - Anesthesia	$2,668,309		$2,668,309	$18,857		$2,687,165	1.071	$2,877,972	$6.60
Prof - Child EPSDT	$548,514		$548,514	$3,876		$552,390	1.071	$591,614	$1.36
Prof - Evaluation & Management	$15,394,269		$15,394,269	$108,360		$15,502,629	1.071	$16,603,421	$38.07
Prof - Maternity	$15,897,536		$15,897,536	$112,346		$16,009,881	1.071	$17,146,692	$39.31
Prof - Other	$6,204,395		$6,204,395	$44,734		$6,249,129	1.071	$6,692,860	$15.34
Prof - Psych	$1,753,329		$1,753,329	$7,668		$1,760,997	1.071	$1,886,039	$4.32
Prof - Specialist	$6,328,661		$6,328,661	$44,724		$6,373,385	1.071	$6,825,939	$15.65
Prof - Vision	$436,565		$436,565	$1,210		$437,775	1.071	$468,860	$1.07
Radiology	$6,085,392		$6,085,392	$42,718		$6,128,110	1.039	$6,364,576	$14.59
Transportation/Ambulance	$1,973,695		$1,973,695	$4,737	$17,426	$1,995,858	1.039	$2,072,872	$4.75
Provider Incentive Payment Adjustment									$3.45
Total	$178,162,563	$103,646	$178,266,209	$1,488,725	$537,603	$180,292,537		$191,035,977	$441.44
Admin Cost Adjustment									$42.83
Medallion II Capitation Rate									**$484.27**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 15-20 Male									
Tidewater	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$306,473		$306,473	$2,840	($646)	$308,666	1.021	$315,164	$1.87
FQHC / RHC	$29,011		$29,011	$164		$29,175	1.119	$32,634	$0.19
Home Health	$14,854		$14,854	$204		$15,058	1.026	$15,457	$0.09
IP - Maternity	$2,285	$119	$2,404	$91	$160	$2,656	1.065	$2,830	$0.02
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$1,624,074	$82,344	$1,706,418	$63,230	$113,610	$1,883,258	1.065	$2,006,358	$11.91
IP - Psych	$461,224		$461,224	$1,547	($18,319)	$444,452	1.146	$509,337	$3.02
Lab	$265,992		$265,992	$776		$266,768	1.021	$272,384	$1.62
OP - Emergency Room & Related	$2,465,920		$2,465,920	$33,932	($54,050)	$2,445,802	1.026	$2,510,567	$14.90
OP - Other	$3,270,265		$3,270,265	$45,001	($82,869)	$3,232,396	1.026	$3,317,990	$19.69
Pharmacy	$4,264,549		$4,264,549	$185	($143,990)	$4,120,744	1.267	$5,221,123	$30.99
Prof - Anesthesia	$108,608		$108,608	$614		$109,222	1.119	$122,171	$0.73
Prof - Child EPSDT	$37,568		$37,568	$212		$37,781	1.119	$42,260	$0.25
Prof - Evaluation & Management	$2,219,426		$2,219,426	$12,424		$2,231,850	1.119	$2,496,457	$14.82
Prof - Maternity	$1,875		$1,875	$11		$1,885	1.119	$2,109	$0.01
Prof - Other	$1,734,735		$1,734,735	$10,117		$1,744,852	1.119	$1,951,721	$11.58
Prof - Psych	$559,891		$559,891	$1,566	$22,329	$583,785	1.119	$652,999	$3.88
Prof - Specialist	$635,399		$635,399	$3,591		$638,990	1.119	$714,749	$4.24
Prof - Vision	$229,429		$229,429	$206		$229,636	1.119	$256,861	$1.52
Radiology	$202,193		$202,193	$1,874		$204,067	1.021	$208,363	$1.24
Transportation/Ambulance	$591,670		$591,670	$722	$8,979	$601,372	1.021	$614,032	$3.64
Provider Incentive Payment Adjustment									$0.99
Total	$19,025,440	$82,463	$19,107,902	$179,307	($154,795)	$19,132,414		$21,265,565	$127.22
Admin Cost Adjustment									$14.15
Medallion II Capitation Rate									**$141.37**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 21-44 Male									
Tidewater	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$228,302		$228,302	$1,603		$229,904	1.039	$238,776	$7.98
FQHC / RHC	$30,284		$30,284	$214		$30,498	1.071	$32,664	$1.09
Home Health	$8,458		$8,458	$114		$8,571	0.994	$8,520	$0.28
IP - Maternity	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$1,720,333	$4,483	$1,724,817	$17,897	$111,881	$1,854,594	0.990	$1,836,601	$61.36
IP - Psych	$106,841		$106,841	$197	($4,237)	$102,801	1.024	$105,295	$3.52
Lab	$63,481		$63,481	$232		$63,713	1.039	$66,171	$2.21
OP - Emergency Room & Related	$1,240,421		$1,240,421	$16,646	($27,179)	$1,229,887	0.994	$1,222,522	$40.84
OP - Other	$1,433,181		$1,433,181	$19,232	($36,305)	$1,416,109	0.994	$1,407,628	$47.02
Pharmacy	$1,762,855		$1,762,855	$94	($59,522)	$1,703,427	1.289	$2,195,556	$73.35
Prof - Anesthesia	$54,634		$54,634	$386		$55,020	1.071	$58,926	$1.97
Prof - Child EPSDT	$5,020		$5,020	$35		$5,056	1.071	$5,415	$0.18
Prof - Evaluation & Management	$809,581		$809,581	$5,690		$815,271	1.071	$873,161	$29.17
Prof - Maternity	$0		$0	$0		$0	1.071	$0	$0.00
Prof - Other	$329,384		$329,384	$2,382		$331,766	1.071	$355,324	$11.87
Prof - Psych	$94,972		$94,972	$370		$95,341	1.071	$102,111	$3.41
Prof - Specialist	$363,455		$363,455	$2,568		$366,024	1.071	$392,014	$13.10
Prof - Vision	$33,261		$33,261	$103		$33,364	1.071	$35,733	$1.19
Radiology	$148,677		$148,677	$1,044		$149,720	1.039	$155,498	$5.19
Transportation/Ambulance	$122,535		$122,535	$243	$1,081	$123,859	1.039	$128,639	$4.30
Provider Incentive Payment Adjustment									$2.42
Total	$8,555,675	$4,483	$8,560,158	$69,050	($14,281)	$8,614,926		$9,220,554	$310.45
Admin Cost Adjustment									$30.12
Medallion II Capitation Rate									**$340.57**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 45 and Over									
Tidewater	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$557,965		$557,965	$3,917		$561,882	1.039	$583,564	$14.68
FQHC / RHC	$274,494		$274,494	$1,940		$276,434	1.071	$296,063	$7.45
Home Health	$112,681		$112,681	$1,512		$114,193	0.994	$113,509	$2.86
IP - Maternity	$13,668	$36	$13,704	$143	$889	$14,735	0.990	$14,592	$0.37
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$4,119,640	$10,751	$4,130,391	$42,919	$267,923	$4,441,233	0.990	$4,398,144	$110.63
IP - Psych	$133,356		$133,356	$229	($5,288)	$128,297	1.024	$131,410	$3.31
Lab	$189,385		$189,385	$1,037		$190,422	1.039	$197,770	$4.97
OP - Emergency Room & Related	$2,089,654		$2,089,654	$28,042	($45,787)	$2,071,908	0.994	$2,059,501	$51.80
OP - Other	$4,574,405		$4,574,405	$61,386	($115,877)	$4,519,913	0.994	$4,492,846	$113.01
Pharmacy	$5,827,186		$5,827,186	$311	($196,753)	$5,630,744	1.289	$7,257,496	$182.55
Prof - Anesthesia	$168,104		$168,104	$1,188		$169,292	1.071	$181,313	$4.56
Prof - Child EPSDT	$27,054		$27,054	$191		$27,245	1.071	$29,180	$0.73
Prof - Evaluation & Management	$2,043,880		$2,043,880	$14,405		$2,058,285	1.071	$2,204,437	$55.45
Prof - Maternity	$7,012		$7,012	$50		$7,062	1.071	$7,563	$0.19
Prof - Other	$1,009,971		$1,009,971	$7,218		$1,017,188	1.071	$1,089,416	$27.40
Prof - Psych	$170,464		$170,464	$778		$171,242	1.071	$183,402	$4.61
Prof - Specialist	$1,111,265		$1,111,265	$7,853		$1,119,118	1.071	$1,198,583	$30.15
Prof - Vision	$72,548		$72,548	$344		$72,892	1.071	$78,068	$1.96
Radiology	$604,225		$604,225	$4,242		$608,467	1.039	$631,946	$15.90
Transportation/Ambulance	$189,498		$189,498	$496	$1,673	$191,668	1.039	$199,064	$5.01
Provider Incentive Payment Adjustment									$5.02
Total	$23,296,455	$10,787	$23,307,242	$178,199	($93,220)	$23,392,221		$25,347,865	$642.59
Admin Cost Adjustment									$62.35
Medallion II Capitation Rate									**$704.93**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age Under 1									
Roanoke/Alleghany	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$192,490		$192,490	$1,784	($1,491)	$192,782	1.021	$196,841	$2.85
FQHC / RHC	$103,714		$103,714	$586		$104,300	1.119	$116,666	$1.69
Home Health	$50,112		$50,112	$690		$50,802	1.026	$52,147	$0.75
IP - Maternity	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Newborn	$10,921,567	$569,002	$11,490,569	$436,928	$765,737	$12,693,233	1.065	$13,522,933	$195.67
IP - Other	$1,596,942	$83,199	$1,680,141	$63,888	$111,965	$1,855,994	1.065	$1,977,312	$28.61
IP - Psych	$18,582		$18,582	$0	($736)	$17,847	1.146	$20,452	$0.30
Lab	$185,052		$185,052	$1,505		$186,557	1.021	$190,484	$2.76
OP - Emergency Room & Related	$658,440		$658,440	$9,060	($14,432)	$653,068	1.026	$670,362	$9.70
OP - Other	$724,547		$724,547	$9,970	($18,360)	$716,157	1.026	$735,121	$10.64
Pharmacy	$1,822,121		$1,822,121	$79	($61,523)	$1,760,677	1.267	$2,230,838	$32.28
Prof - Anesthesia	$55,864		$55,864	$316		$56,180	1.119	$62,840	$0.91
Prof - Child EPSDT	$277,334		$277,334	$1,567		$278,901	1.119	$311,967	$4.51
Prof - Evaluation & Management	$5,849,388		$5,849,388	$32,930		$5,882,318	1.119	$6,579,724	$95.21
Prof - Maternity	$139		$139	$1		$139	1.119	$156	$0.00
Prof - Other	$1,111,245		$1,111,245	$6,190		$1,117,435	1.119	$1,249,918	$18.09
Prof - Psych	$22,391		$22,391	$4		$22,396	1.119	$25,051	$0.36
Prof - Specialist	$390,650		$390,650	$2,208		$392,858	1.119	$439,435	$6.36
Prof - Vision	$112,345		$112,345	$147		$112,492	1.119	$125,829	$1.82
Radiology	$79,172		$79,172	$734		$79,906	1.021	$81,588	$1.18
Transportation/Ambulance	$260,893		$260,893	$1,265	$3,974	$266,132	1.021	$271,734	$3.93
Provider Incentive Payment Adjustment									$3.29
Total	$24,432,987	$652,201	$25,085,188	$569,850	$785,134	$26,440,172		$28,861,397	$420.90
Admin Cost Adjustment									$46.82
Medallion II Capitation Rate									**$467.71**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 1-5									
Roanoke/Alleghany	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$366,839		$366,839	$3,399	($2,841)	$367,396	1.021	$375,131	$1.26
FQHC / RHC	$224,543		$224,543	$1,269		$225,812	1.119	$252,585	$0.85
Home Health	$17,083		$17,083	$235		$17,318	1.026	$17,776	$0.06
IP - Maternity	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$2,193,135	$114,261	$2,307,395	$87,739	$153,766	$2,548,900	1.065	$2,715,511	$9.10
IP - Psych	$76,694		$76,694	$336	($3,049)	$73,981	1.146	$84,781	$0.28
Lab	$742,718		$742,718	$5,940		$748,657	1.021	$764,418	$2.56
OP - Emergency Room & Related	$2,193,939		$2,193,939	$30,190	($48,089)	$2,176,040	1.026	$2,233,662	$7.48
OP - Other	$3,551,155		$3,551,155	$48,866	($89,987)	$3,510,033	1.026	$3,602,979	$12.07
Pharmacy	$4,511,967		$4,511,967	$196	($152,343)	$4,359,819	1.267	$5,524,039	$18.51
Prof - Anesthesia	$226,102		$226,102	$1,278		$227,379	1.119	$254,337	$0.85
Prof - Child EPSDT	$368,292		$368,292	$2,081		$370,374	1.119	$414,285	$1.39
Prof - Evaluation & Management	$7,930,323		$7,930,323	$44,194		$7,974,517	1.119	$8,919,974	$29.89
Prof - Maternity	$0		$0	$0		$0	1.119	$0	$0.00
Prof - Other	$2,042,520		$2,042,520	$11,072		$2,053,592	1.119	$2,297,066	$7.70
Prof - Psych	$303,444		$303,444	$1,522		$304,966	1.119	$341,123	$1.14
Prof - Specialist	$978,766		$978,766	$5,531		$984,298	1.119	$1,100,996	$3.69
Prof - Vision	$499,194		$499,194	$644		$499,838	1.119	$559,099	$1.87
Radiology	$136,501		$136,501	$1,265		$137,766	1.021	$140,666	$0.47
Transportation/Ambulance	$711,666		$711,666	$2,095	$10,819	$724,580	1.021	$739,834	$2.48
Provider Incentive Payment Adjustment									$0.80
Total	$27,074,880	$114,261	$27,189,141	$247,850	($131,725)	$27,305,266		$30,338,260	$102.45
Admin Cost Adjustment									$11.40
Medallion II Capitation Rate									**$113.84**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 6-14									
Roanoke/Alleghany	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$385,209		$385,209	$3,569	($813)	$387,966	1.021	$396,133	$1.10
FQHC / RHC	$272,008		$272,008	$1,537		$273,546	1.119	$305,977	$0.85
Home Health	$21,506		$21,506	$296		$21,802	1.026	$22,379	$0.06
IP - Maternity	$10,617	$553	$11,170	$425	$744	$12,339	1.065	$13,146	$0.04
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$1,747,871	$91,064	$1,838,935	$69,926	$122,547	$2,031,409	1.065	$2,164,193	$6.02
IP - Psych	$1,079,586		$1,079,586	$7,333	($43,025)	$1,043,894	1.146	$1,196,290	$3.33
Lab	$819,071		$819,071	$6,478		$825,549	1.021	$842,929	$2.35
OP - Emergency Room & Related	$2,212,294		$2,212,294	$30,442	($48,491)	$2,194,245	1.026	$2,252,349	$6.27
OP - Other	$2,334,027		$2,334,027	$32,117	($59,145)	$2,306,999	1.026	$2,368,089	$6.59
Pharmacy	$13,321,230		$13,321,230	$578	($449,782)	$12,872,025	1.267	$16,309,294	$45.38
Prof - Anesthesia	$126,079		$126,079	$713		$126,791	1.119	$141,824	$0.39
Prof - Child EPSDT	$99,162		$99,162	$560		$99,722	1.119	$111,545	$0.31
Prof - Evaluation & Management	$6,397,548		$6,397,548	$35,425		$6,432,973	1.119	$7,195,665	$20.02
Prof - Maternity	$10,026		$10,026	$57		$10,083	1.119	$11,278	$0.03
Prof - Other	$1,312,291		$1,312,291	$6,871		$1,319,163	1.119	$1,475,562	$4.11
Prof - Psych	$1,469,826		$1,469,826	$7,998	$58,773	$1,536,597	1.119	$1,718,776	$4.78
Prof - Specialist	$924,280		$924,280	$5,223		$929,503	1.119	$1,039,705	$2.89
Prof - Vision	$590,505		$590,505	$731		$591,236	1.119	$661,333	$1.84
Radiology	$278,156		$278,156	$2,577		$280,734	1.021	$286,644	$0.80
Transportation/Ambulance	$883,163		$883,163	$2,630	$13,427	$899,219	1.021	$918,150	$2.55
Provider Incentive Payment Adjustment									$0.86
Total	$34,294,455	$91,617	$34,386,071	$215,487	($405,764)	$34,195,795		$39,431,259	$110.58
Admin Cost Adjustment									$12.30
Medallion II Capitation Rate									**$122.88**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 15-20 Female									
Roanoke/Alleghany	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$53,811		$53,811	$499	($114)	$54,196	1.021	$55,337	$0.80
FQHC / RHC	$99,290		$99,290	$561		$99,851	1.119	$111,690	$1.62
Home Health	$43,436		$43,436	$598		$44,033	1.026	$45,199	$0.66
IP - Maternity	$2,197,464	$114,486	$2,311,949	$87,912	$154,069	$2,553,930	1.065	$2,720,869	$39.44
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$619,698	$32,286	$651,984	$24,792	$43,449	$720,225	1.065	$767,303	$11.12
IP - Psych	$530,309		$530,309	$3,683	($21,138)	$512,854	1.146	$587,725	$8.52
Lab	$711,451		$711,451	$6,381		$717,832	1.021	$732,944	$10.62
OP - Emergency Room & Related	$1,256,120		$1,256,120	$17,285	($27,533)	$1,245,872	1.026	$1,278,863	$18.54
OP - Other	$1,211,117		$1,211,117	$16,666	($30,690)	$1,197,093	1.026	$1,228,792	$17.81
Pharmacy	$2,610,334		$2,610,334	$113	($88,136)	$2,522,311	1.267	$3,195,854	$46.33
Prof - Anesthesia	$195,585		$195,585	$1,105		$196,690	1.119	$220,010	$3.19
Prof - Child EPSDT	$72,307		$72,307	$409		$72,715	1.119	$81,336	$1.18
Prof - Evaluation & Management	$1,977,806		$1,977,806	$11,042		$1,988,848	1.119	$2,224,646	$32.25
Prof - Maternity	$1,367,268		$1,367,268	$7,727		$1,374,995	1.119	$1,538,014	$22.29
Prof - Other	$490,963		$490,963	$2,675		$493,639	1.119	$552,164	$8.00
Prof - Psych	$329,086		$329,086	$1,782	$13,159	$344,027	1.119	$384,815	$5.58
Prof - Specialist	$306,676		$306,676	$1,733		$308,409	1.119	$344,974	$5.00
Prof - Vision	$105,214		$105,214	$98		$105,312	1.119	$117,798	$1.71
Radiology	$432,566		$432,566	$4,008		$436,574	1.021	$445,765	$6.46
Transportation/Ambulance	$244,130		$244,130	$1,163	$3,718	$249,011	1.021	$254,253	$3.69
Provider Incentive Payment Adjustment									$1.93
Total	$14,854,631	$146,772	$15,001,402	$190,232	$46,785	$15,238,419		$16,888,350	$246.73
Admin Cost Adjustment									$27.44
Medallion II Capitation Rate									**$274.18**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 21-44 Female									
Roanoke/Alleghany	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$469,517		$469,517	$3,296		$472,813	1.039	$491,057	$3.88
FQHC / RHC	$231,515		$231,515	$1,636		$233,151	1.071	$249,706	$1.97
Home Health	$193,787		$193,787	$2,601		$196,387	0.994	$195,211	$1.54
IP - Maternity	$6,967,945	$18,224	$6,986,169	$72,752	$453,178	$7,512,098	0.990	$7,439,215	$58.72
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$5,698,942	$14,905	$5,713,847	$59,502	$370,645	$6,143,994	0.990	$6,084,385	$48.02
IP - Psych	$973,946		$973,946	$2,666	($38,659)	$937,953	1.024	$960,713	$7.58
Lab	$2,132,900		$2,132,900	$14,680		$2,147,580	1.039	$2,230,449	$17.60
OP - Emergency Room & Related	$4,432,733		$4,432,733	$59,485	($97,128)	$4,395,090	0.994	$4,368,770	$34.48
OP - Other	$6,245,509		$6,245,509	$83,811	($158,209)	$6,171,111	0.994	$6,134,155	$48.42
Pharmacy	$13,019,637		$13,019,637	$695	($439,603)	$12,580,729	1.289	$16,215,367	$127.99
Prof - Anesthesia	$638,321		$638,321	$4,511		$642,831	1.071	$688,477	$5.43
Prof - Child EPSDT	$139,718		$139,718	$987		$140,706	1.071	$150,697	$1.19
Prof - Evaluation & Management	$5,039,977		$5,039,977	$35,311		$5,075,288	1.071	$5,435,668	$42.90
Prof - Maternity	$4,116,180		$4,116,180	$29,088		$4,145,269	1.071	$4,439,611	$35.04
Prof - Other	$1,435,824		$1,435,824	$9,924		$1,445,747	1.071	$1,548,405	$12.22
Prof - Psych	$775,909		$775,909	$5,276		$781,184	1.071	$836,654	$6.60
Prof - Specialist	$1,942,180		$1,942,180	$13,725		$1,955,905	1.071	$2,094,787	$16.53
Prof - Vision	$196,152		$196,152	$297		$196,450	1.071	$210,399	$1.66
Radiology	$1,541,951		$1,541,951	$10,824		$1,552,775	1.039	$1,612,692	$12.73
Transportation/Ambulance	$756,323		$756,323	$3,764	$6,695	$766,782	1.039	$796,370	$6.29
Provider Incentive Payment Adjustment									$3.86
Total	$56,948,965	$33,129	$56,982,094	$414,831	$96,918	$57,493,843		$62,182,789	$494.67
Admin Cost Adjustment									$47.99
Medallion II Capitation Rate									**$542.66**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 15-20 Male									
Roanoke/Alleghany	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$81,445		$81,445	$755	($172)	$82,028	1.021	$83,755	$1.48
FQHC / RHC	$39,674		$39,674	$224		$39,898	1.119	$44,629	$0.79
Home Health	$12,569		$12,569	$173		$12,742	1.026	$13,080	$0.23
IP - Maternity	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Newborn	$0	$0	$0	$0		$0	1.065	$0	$0.00
IP - Other	$711,251	$37,056	$748,307	$28,455	$49,868	$826,629	1.065	$880,662	$15.52
IP - Psych	$324,664		$324,664	$2,235	($12,940)	$313,958	1.146	$359,793	$6.34
Lab	$150,660		$150,660	$1,223		$151,883	1.021	$155,081	$2.73
OP - Emergency Room & Related	$603,011		$603,011	$8,298	($13,217)	$598,092	1.026	$613,929	$10.82
OP - Other	$770,763		$770,763	$10,606	($19,531)	$761,838	1.026	$782,012	$13.78
Pharmacy	$1,994,472		$1,994,472	$86	($67,342)	$1,927,217	1.267	$2,441,849	$43.02
Prof - Anesthesia	$31,504		$31,504	$178		$31,682	1.119	$35,438	$0.62
Prof - Child EPSDT	$13,238		$13,238	$75		$13,313	1.119	$14,891	$0.26
Prof - Evaluation & Management	$929,798		$929,798	$5,143		$934,941	1.119	$1,045,787	$18.43
Prof - Maternity	$0		$0	$0		$0	1.119	$0	$0.00
Prof - Other	$177,911		$177,911	$923		$178,834	1.119	$200,036	$3.52
Prof - Psych	$222,690		$222,690	$1,193	$8,904	$232,786	1.119	$260,386	$4.59
Prof - Specialist	$265,624		$265,624	$1,501		$267,125	1.119	$298,795	$5.26
Prof - Vision	$83,583		$83,583	$64		$83,647	1.119	$93,564	$1.65
Radiology	$80,175		$80,175	$743		$80,918	1.021	$82,621	$1.46
Transportation/Ambulance	$167,689		$167,689	$651	$2,552	$170,892	1.021	$174,489	$3.07
Provider Incentive Payment Adjustment									$1.05
Total	$6,660,720	$37,056	$6,697,776	$62,525	($51,880)	$6,708,422		$7,580,796	$134.62
Admin Cost Adjustment									$14.97
Medallion II Capitation Rate									**$149.59**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 21-44 Male									
Roanoke/Alleghany	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$139,474		$139,474	$979		$140,453	1.039	$145,872	$6.95
FQHC / RHC	$35,113		$35,113	$248		$35,361	1.071	$37,872	$1.80
Home Health	$21,355		$21,355	$287		$21,642	0.994	$21,512	$1.02
IP - Maternity	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$1,180,981	$3,089	$1,184,070	$12,331	$76,808	$1,273,208	0.990	$1,260,856	$60.04
IP - Psych	$146,176		$146,176	$399	($5,802)	$140,773	1.024	$144,189	$6.87
Lab	$147,264		$147,264	$985		$148,249	1.039	$153,969	$7.33
OP - Emergency Room & Related	$639,961		$639,961	$8,588	($14,022)	$634,527	0.994	$630,727	$30.03
OP - Other	$872,713		$872,713	$11,711	($22,107)	$862,317	0.994	$857,153	$40.81
Pharmacy	$1,955,159		$1,955,159	$104	($66,015)	$1,889,248	1.289	$2,435,061	$115.94
Prof - Anesthesia	$28,503		$28,503	$201		$28,704	1.071	$30,742	$1.46
Prof - Child EPSDT	$3,459		$3,459	$24		$3,484	1.071	$3,731	$0.18
Prof - Evaluation & Management	$637,997		$637,997	$4,458		$642,455	1.071	$688,074	$32.76
Prof - Maternity	$0		$0	$0		$0	1.071	$0	$0.00
Prof - Other	$149,421		$149,421	$1,019		$150,440	1.071	$161,122	$7.67
Prof - Psych	$96,728		$96,728	$649		$97,377	1.071	$104,292	$4.97
Prof - Specialist	$277,972		$277,972	$1,964		$279,937	1.071	$299,814	$14.28
Prof - Vision	$33,468		$33,468	$58		$33,525	1.071	$35,906	$1.71
Radiology	$108,632		$108,632	$763		$109,394	1.039	$113,616	$5.41
Transportation/Ambulance	$96,435		$96,435	$421	$853	$97,709	1.039	$101,479	$4.83
Provider Incentive Payment Adjustment									$2.71
Total	$6,570,810	$3,089	$6,573,899	$45,189	($30,286)	$6,588,802		###########	$346.77
Admin Cost Adjustment									$33.64
Medallion II Capitation Rate									**$380.41**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4a

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Age 45 and Over									
Roanoke/Alleghany	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$132,329		$132,329	$929		$133,258	1.039	$138,400	$10.75
FQHC / RHC	$39,689		$39,689	$280		$39,969	1.071	$42,807	$3.33
Home Health	$59,575		$59,575	$799		$60,374	0.994	$60,013	$4.66
IP - Maternity	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Newborn	$0	$0	$0	$0		$0	0.990	$0	$0.00
IP - Other	$1,834,808	$4,799	$1,839,607	$19,157	$119,331	$1,978,095	0.990	$1,958,903	$152.17
IP - Psych	$89,774		$89,774	$245	($3,563)	$86,456	1.024	$88,554	$6.88
Lab	$170,998		$170,998	$1,171		$172,168	1.039	$178,812	$13.89
OP - Emergency Room & Related	$347,424		$347,424	$4,662	($7,613)	$344,473	0.994	$342,410	$26.60
OP - Other	$1,071,870		$1,071,870	$14,384	($27,152)	$1,059,101	0.994	$1,052,759	$81.78
Pharmacy	$2,571,783		$2,571,783	$137	($86,835)	$2,485,085	1.289	$3,203,039	$248.82
Prof - Anesthesia	$40,501		$40,501	$286		$40,787	1.071	$43,683	$3.39
Prof - Child EPSDT	$5,103		$5,103	$36		$5,139	1.071	$5,504	$0.43
Prof - Evaluation & Management	$575,370		$575,370	$4,035		$579,405	1.071	$620,547	$48.21
Prof - Maternity	$0		$0	$0		$0	1.071	$0	$0.00
Prof - Other	$230,855		$230,855	$1,609		$232,464	1.071	$248,970	$19.34
Prof - Psych	$77,527		$77,527	$526		$78,054	1.071	$83,596	$6.49
Prof - Specialist	$342,454		$342,454	$2,420		$344,874	1.071	$369,362	$28.69
Prof - Vision	$29,767		$29,767	$101		$29,867	1.071	$31,988	$2.48
Radiology	$127,909		$127,909	$898		$128,807	1.039	$133,778	$10.39
Transportation/Ambulance	$79,435		$79,435	$401	$703	$80,538	1.039	$83,646	$6.50
Provider Incentive Payment Adjustment									$5.31
Total	$7,827,169	$4,799	$7,831,968	$52,077	($5,129)	$7,878,916		$8,686,771	$680.12
Admin Cost Adjustment									$65.99
Medallion II Capitation Rate									**$746.10**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age Under 1									
Statewide	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$101,675		$101,675	$1,301	($1,642)	$101,334	1.104	$111,894	$68.99
FQHC / RHC	$8,523		$8,523	$91		$8,614	1.194	$10,287	$6.34
Home Health	$17,144		$17,144	$250		$17,395	1.032	$17,944	$11.06
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$737,235	($39,025)	$698,210	$20,347	$46,131	$764,688	1.078	$824,245	$508.17
IP - Other	$1,346,456	($293,526)	$1,052,929	$37,159	$69,983	$1,160,072	1.078	$1,250,424	$770.91
IP - Psych	$17,377		$17,377		($688)	$16,689	0.949	$15,843	$9.77
Lab	$7,955		$7,955	$92		$8,046	1.104	$8,885	$5.48
OP - Emergency Room & Related	$64,316		$64,316	$939	($1,280)	$63,976	1.032	$65,996	$40.69
OP - Other	$373,763		$373,763	$5,459	($9,468)	$369,754	1.032	$381,429	$235.16
Pharmacy	$639,089		$639,089	$58	($19,804)	$619,342	1.215	$752,782	$464.11
Prof - Anesthesia	$26,292		$26,292	$279		$26,572	1.194	$31,735	$19.57
Prof - Child EPSDT	$7,085		$7,085	$75		$7,160	1.194	$8,551	$5.27
Prof - Evaluation & Management	$398,911		$398,911	$4,234		$403,144	1.194	$481,481	$296.84
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$294,876		$294,876	$3,133		$298,008	1.194	$355,916	$219.43
Prof - Psych	$6,265		$6,265	$3		$6,268	1.194	$7,486	$4.62
Prof - Specialist	$96,356		$96,356	$1,023		$97,379	1.194	$116,301	$71.70
Prof - Vision	$11,108		$11,108	$99		$11,207	1.194	$13,385	$8.25
Radiology	$11,628		$11,628	$149		$11,777	1.104	$13,004	$8.02
Transportation/Ambulance	$19,904		$19,904	$204	$79	$20,188	1.104	$22,291	$13.74
Provider Incentive Payment Adjustment									$21.78
Total	$4,185,956	($332,551)	$3,853,405	$74,896	$83,312	$4,011,612		$4,489,879	$2,789.90
Admin Cost Adjustment									$230.83
Medallion II Capitation Rate									**$3,020.73**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 1-5									
Northern Virginia	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$634,637		$634,637	$8,123	($10,249)	$632,511	1.104	$698,422	$107.96
FQHC / RHC	$1,681		$1,681	$18		$1,699	1.194	$2,029	$0.31
Home Health	$134,528		$134,528	$1,965		$136,493	1.032	$140,803	$21.77
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$2,494,009	($620,199)	$1,873,810	$68,833	$124,716	$2,067,360	1.078	$2,228,375	$344.47
IP - Psych	$196		$196		($8)	$189	0.949	$179	$0.03
Lab	$20,143		$20,143	$207		$20,350	1.104	$22,471	$3.47
OP - Emergency Room & Related	$181,600		$181,600	$2,653	($3,613)	$180,639	1.032	$186,343	$28.81
OP - Other	$1,220,949		$1,220,949	$17,834	($30,928)	$1,207,855	1.032	$1,245,992	$192.61
Pharmacy	$839,452		$839,452	$76	($26,013)	$813,515	1.215	$988,790	$152.85
Prof - Anesthesia	$62,461		$62,461	$663		$63,124	1.194	$75,390	$11.65
Prof - Child EPSDT	$9,652		$9,652	$103		$9,755	1.194	$11,650	$1.80
Prof - Evaluation & Management	$517,714		$517,714	$5,485		$523,198	1.194	$624,864	$96.59
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$1,296,733		$1,296,733	$13,771		$1,310,504	1.194	$1,565,155	$241.95
Prof - Psych	$6,105		$6,105	$64		$6,170	1.194	$7,368	$1.14
Prof - Specialist	$100,498		$100,498	$1,067		$101,565	1.194	$121,301	$18.75
Prof - Vision	$28,147		$28,147	$228		$28,375	1.194	$33,888	$5.24
Radiology	$30,982		$30,982	$397		$31,378	1.104	$34,648	$5.36
Transportation/Ambulance	$52,068		$52,068	$467	$207	$52,742	1.104	$58,238	$9.00
Provider Incentive Payment Adjustment									$9.79
Total	$7,631,556	($620,199)	$7,011,357	$121,953	$54,113	$7,187,422		$8,045,907	$1,253.55
Admin Cost Adjustment									$103.72
Medallion II Capitation Rate									**$1,357.27**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 6-20									
Northern Virginia	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$939,115		$939,115	$12,020	($9,600)	$941,535	1.104	$1,039,649	$30.44
FQHC / RHC	$3,342		$3,342	$36		$3,378	1.194	$4,034	$0.12
Home Health	$15,831		$15,831	$231		$16,063	1.032	$16,570	$0.49
IP - Maternity	$59,476	($13,968)	$45,508	$1,641	$3,027	$50,176	1.078	$54,084	$1.58
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$4,935,869	($1,159,215)	$3,776,654	$136,227	$251,204	$4,164,085	1.078	$4,488,404	$131.40
IP - Psych	$356,609		$356,609	$3,347	($14,249)	$345,707	0.949	$328,192	$9.61
Lab	$64,561		$64,561	$566		$65,127	1.104	$71,914	$2.11
OP - Emergency Room & Related	$746,875		$746,875	$10,909	($14,861)	$742,924	1.032	$766,381	$22.44
OP - Other	$2,120,102		$2,120,102	$30,967	($53,705)	$2,097,365	1.032	$2,163,587	$63.34
Pharmacy	$4,941,171		$4,941,171	$445	($153,115)	$4,788,501	1.215	$5,820,203	$170.39
Prof - Anesthesia	$125,320		$125,320	$1,331		$126,651	1.194	$151,261	$4.43
Prof - Child EPSDT	$10,739		$10,739	$114		$10,854	1.194	$12,963	$0.38
Prof - Evaluation & Management	$1,451,683		$1,451,683	$15,348		$1,467,031	1.194	$1,752,097	$51.29
Prof - Maternity	$27,667		$27,667	$294		$27,961	1.194	$33,394	$0.98
Prof - Other	$829,247		$829,247	$8,798		$838,045	1.194	$1,000,889	$29.30
Prof - Psych	$237,842		$237,842	$2,525	$8,795	$249,162	1.194	$297,578	$8.71
Prof - Specialist	$339,012		$339,012	$3,601		$342,613	1.194	$409,187	$11.98
Prof - Vision	$75,225		$75,225	$427		$75,652	1.194	$90,352	$2.65
Radiology	$115,169		$115,169	$1,474		$116,643	1.104	$128,798	$3.77
Transportation/Ambulance	$168,461		$168,461	$1,105	$669	$170,234	1.104	$187,973	$5.50
Provider Incentive Payment Adjustment									$4.34
Total	$17,563,316	($1,173,183)	$16,390,133	$231,406	$18,165	$16,639,704		$18,817,509	$555.23
Admin Cost Adjustment									$45.94
Medallion II Capitation Rate									**$601.17**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Female									
Northern Virginia	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$299,964		$299,964	$3,839		$303,803	1.104	$335,461	$15.04
FQHC / RHC	$2,528		$2,528	$27		$2,555	1.194	$3,052	$0.14
Home Health	$38,182		$38,182	$558		$38,740	1.032	$39,963	$1.79
IP - Maternity	$337,469	$7,174	$344,643	$9,314	$22,724	$376,681	1.078	$406,019	$18.20
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$3,934,156	$83,631	$4,017,787	$108,580	$264,910	$4,391,277	1.078	$4,733,290	$212.14
IP - Psych	$1,153,701		$1,153,701	$10,837	($46,098)	$1,118,439	0.949	$1,061,775	$47.59
Lab	$122,125		$122,125	$1,401		$123,526	1.104	$136,398	$6.11
OP - Emergency Room & Related	$2,101,421		$2,101,421	$30,694	($41,812)	$2,090,303	1.032	$2,156,302	$96.64
OP - Other	$1,786,699		$1,786,699	$26,097	($45,259)	$1,767,537	1.032	$1,823,345	$81.72
Pharmacy	$6,623,038		$6,623,038	$596	($205,232)	$6,418,402	1.215	$7,801,274	$349.64
Prof - Anesthesia	$99,236		$99,236	$1,054		$100,290	1.194	$119,778	$5.37
Prof - Child EPSDT	$7,602		$7,602	$81		$7,683	1.194	$9,176	$0.41
Prof - Evaluation & Management	$1,661,227		$1,661,227	$17,602		$1,678,829	1.194	$2,005,050	$89.86
Prof - Maternity	$120,245		$120,245	$1,277		$121,522	1.194	$145,135	$6.50
Prof - Other	$578,710		$578,710	$6,142		$584,851	1.194	$698,497	$31.31
Prof - Psych	$294,720		$294,720	$3,130		$297,850	1.194	$355,726	$15.94
Prof - Specialist	$406,035		$406,035	$4,313		$410,348	1.194	$490,084	$21.97
Prof - Vision	$57,310		$57,310	$452		$57,761	1.194	$68,985	$3.09
Radiology	$359,976		$359,976	$4,607		$364,584	1.104	$402,575	$18.04
Transportation/Ambulance	$192,185		$192,185	$1,774	$765	$194,724	1.104	$215,015	$9.64
Provider Incentive Payment Adjustment									$8.11
Total	$20,176,528	$90,805	$20,267,333	$232,375	($50,003)	$20,449,705		$23,006,902	$1,039.26
Admin Cost Adjustment									$85.99
Medallion II Capitation Rate									**$1,125.25**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Male									
Northern Virginia	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$496,096		$496,096	$6,350		$502,445	1.104	$554,803	$24.20
FQHC / RHC	$1,115		$1,115	$12		$1,126	1.194	$1,345	$0.06
Home Health	$56,347		$56,347	$823		$57,170	1.032	$58,975	$2.57
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$3,734,333	($33,206)	$3,701,127	$103,065	$244,226	$4,048,419	1.078	$4,363,729	$190.31
IP - Psych	$1,089,773		$1,089,773	$10,236	($43,544)	$1,056,466	0.949	$1,002,942	$43.74
Lab	$65,484		$65,484	$683		$66,166	1.104	$73,061	$3.19
OP - Emergency Room & Related	$771,916		$771,916	$11,275	($15,359)	$767,833	1.032	$792,076	$34.54
OP - Other	$1,268,095		$1,268,095	$18,522	($32,123)	$1,254,495	1.032	$1,294,104	$56.44
Pharmacy	$6,843,240		$6,843,240	$616	($212,056)	$6,631,800	1.215	$8,060,649	$351.55
Prof - Anesthesia	$43,673		$43,673	$464		$44,137	1.194	$52,714	$2.30
Prof - Child EPSDT	$4,385		$4,385	$47		$4,431	1.194	$5,292	$0.23
Prof - Evaluation & Management	$913,299		$913,299	$9,660		$922,958	1.194	$1,102,303	$48.07
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$473,302		$473,302	$5,023		$478,325	1.194	$571,271	$24.91
Prof - Psych	$244,466		$244,466	$2,596		$247,062	1.194	$295,070	$12.87
Prof - Specialist	$220,105		$220,105	$2,338		$222,443	1.194	$265,667	$11.59
Prof - Vision	$26,351		$26,351	$122		$26,473	1.194	$31,617	$1.38
Radiology	$122,846		$122,846	$1,572		$124,418	1.104	$137,383	$5.99
Transportation/Ambulance	$220,116		$220,116	$2,120	$877	$223,112	1.104	$246,362	$10.74
Provider Incentive Payment Adjustment									$6.49
Total	$16,594,941	($33,206)	$16,561,735	$175,524	($57,978)	$16,679,281		$18,909,364	$831.18
Admin Cost Adjustment									$68.77
Medallion II Capitation Rate									**$899.95**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 45 and Over									
Northern Virginia	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$2,175,423		$2,175,423	$27,844		$2,203,267	1.104	$2,432,860	$25.28
FQHC / RHC	$27,455		$27,455	$292		$27,746	1.194	$33,138	$0.34
Home Health	$642,120		$642,120	$9,379		$651,499	1.032	$672,069	$6.98
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$28,410,793	$603,948	$29,014,742	$784,121	$1,913,065	$31,711,928	1.078	$34,181,803	$355.18
IP - Psych	$1,851,244		$1,851,244	$17,386	($73,969)	$1,794,661	0.949	$1,703,737	$17.70
Lab	$533,558		$533,558	$6,169		$539,727	1.104	$595,970	$6.19
OP - Emergency Room & Related	$4,902,310		$4,902,310	$71,606	($97,541)	$4,876,375	1.032	$5,030,341	$52.27
OP - Other	$9,569,482		$9,569,482	$139,777	($242,408)	$9,466,851	1.032	$9,765,758	$101.47
Pharmacy	$34,353,012		$34,353,012	$3,094	($1,064,519)	$33,291,586	1.215	$40,464,397	$420.46
Prof - Anesthesia	$483,622		$483,622	$5,137		$488,759	1.194	$583,732	$6.07
Prof - Child EPSDT	$35,292		$35,292	$375		$35,666	1.194	$42,597	$0.44
Prof - Evaluation & Management	$7,608,065		$7,608,065	$80,640		$7,688,705	1.194	$9,182,735	$95.42
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$3,418,166		$3,418,166	$36,292		$3,454,457	1.194	$4,125,710	$42.87
Prof - Psych	$609,150		$609,150	$6,468		$615,618	1.194	$735,242	$7.64
Prof - Specialist	$2,727,458		$2,727,458	$28,970		$2,756,428	1.194	$3,292,043	$34.21
Prof - Vision	$490,980		$490,980	$4,563		$495,543	1.194	$591,834	$6.15
Radiology	$1,761,084		$1,761,084	$22,541		$1,783,625	1.104	$1,969,489	$20.46
Transportation/Ambulance	$805,142		$805,142	$7,357	$3,205	$815,704	1.104	$900,705	$9.36
Provider Incentive Payment Adjustment									$9.51
Total	$100,404,353	$603,948	$101,008,301	$1,252,010	$437,833	$102,698,144		$116,304,161	$1,218.00
Admin Cost Adjustment									$100.78
Medallion II Capitation Rate									**$1,318.78**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age Under 1									
Statewide	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$101,675		$101,675	$1,301	($1,642)	$101,334	1.104	$111,894	$68.99
FQHC / RHC	$8,523		$8,523	$91		$8,614	1.194	$10,287	$6.34
Home Health	$17,144		$17,144	$250		$17,395	1.032	$17,944	$11.06
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$737,235	($39,025)	$698,210	$20,347	$46,131	$764,688	1.078	$824,245	$508.17
IP - Other	$1,346,456	($293,526)	$1,052,929	$37,159	$69,983	$1,160,072	1.078	$1,250,424	$770.91
IP - Psych	$17,377		$17,377		($688)	$16,689	0.949	$15,843	$9.77
Lab	$7,955		$7,955	$92		$8,046	1.104	$8,885	$5.48
OP - Emergency Room & Related	$64,316		$64,316	$939	($1,280)	$63,976	1.032	$65,996	$40.69
OP - Other	$373,763		$373,763	$5,459	($9,468)	$369,754	1.032	$381,429	$235.16
Pharmacy	$639,089		$639,089	$58	($19,804)	$619,342	1.215	$752,782	$464.11
Prof - Anesthesia	$26,292		$26,292	$279		$26,572	1.194	$31,735	$19.57
Prof - Child EPSDT	$7,085		$7,085	$75		$7,160	1.194	$8,551	$5.27
Prof - Evaluation & Management	$398,911		$398,911	$4,234		$403,144	1.194	$481,481	$296.84
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$294,876		$294,876	$3,133		$298,008	1.194	$355,916	$219.43
Prof - Psych	$6,265		$6,265	$3		$6,268	1.194	$7,486	$4.62
Prof - Specialist	$96,356		$96,356	$1,023		$97,379	1.194	$116,301	$71.70
Prof - Vision	$11,108		$11,108	$99		$11,207	1.194	$13,385	$8.25
Radiology	$11,628		$11,628	$149		$11,777	1.104	$13,004	$8.02
Transportation/Ambulance	$19,904		$19,904	$204	$79	$20,188	1.104	$22,291	$13.74
Provider Incentive Payment Adjustment									$21.78
Total	$4,185,956	($332,551)	$3,853,405	$74,896	$83,312	$4,011,612		$4,489,879	$2,789.90
Admin Cost Adjustment									$230.83
Medallion II Capitation Rate									**$3,020.73**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 1-5									
Other MSA	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$272,145		$272,145	$3,483	($4,395)	$271,234	1.104	$299,498	$48.91
FQHC / RHC	$51,596		$51,596	$548		$52,144	1.194	$62,276	$10.17
Home Health	$1,251		$1,251	$18		$1,270	1.032	$1,310	$0.21
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$695,243	$14,779	$710,022	$19,188	$46,815	$776,025	1.078	$836,466	$136.61
IP - Psych	$107,797		$107,797	$37	($4,269)	$103,565	0.949	$98,318	$16.06
Lab	$27,583		$27,583	$337		$27,920	1.104	$30,830	$5.04
OP - Emergency Room & Related	$100,562		$100,562	$1,469	($2,001)	$100,030	1.032	$103,188	$16.85
OP - Other	$618,603		$618,603	$9,036	($15,670)	$611,969	1.032	$631,291	$103.10
Pharmacy	$552,539		$552,539	$50	($17,122)	$535,467	1.215	$650,836	$106.29
Prof - Anesthesia	$22,043		$22,043	$234		$22,277	1.194	$26,606	$4.35
Prof - Child EPSDT	$13,054		$13,054	$139		$13,193	1.194	$15,756	$2.57
Prof - Evaluation & Management	$274,625		$274,625	$2,904		$277,529	1.194	$331,457	$54.13
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$853,578		$853,578	$9,074		$862,652	1.194	$1,030,278	$168.26
Prof - Psych	$43,352		$43,352	$81		$43,432	1.194	$51,872	$8.47
Prof - Specialist	$51,760		$51,760	$550		$52,309	1.194	$62,474	$10.20
Prof - Vision	$14,009		$14,009	$73		$14,082	1.194	$16,818	$2.75
Radiology	$22,608		$22,608	$289		$22,897	1.104	$25,283	$4.13
Transportation/Ambulance	$46,914		$46,914	$403	$187	$47,504	1.104	$52,454	$8.57
Provider Incentive Payment Adjustment									$5.56
Total	$3,769,261	$14,779	$3,784,040	$47,913	$3,545	$3,835,499		$4,327,011	$712.24
Admin Cost Adjustment									$58.93
Medallion II Capitation Rate									**$771.17**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 6-20									
Other MSA	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$431,940		$431,940	$5,529	($4,416)	$433,053	1.104	$478,180	$13.05
FQHC / RHC	$166,927		$166,927	$1,773		$168,700	1.194	$201,481	$5.50
Home Health	$15,817		$15,817	$231		$16,048	1.032	$16,555	$0.45
IP - Maternity	$85,245	$1,812	$87,057	$2,353	$5,740	$95,150	1.078	$102,561	$2.80
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$1,506,739	$32,030	$1,538,769	$41,586	$101,458	$1,681,813	1.078	$1,812,800	$49.49
IP - Psych	$861,197		$861,197	$2,106	($34,174)	$829,129	0.949	$787,123	$21.49
Lab	$136,572		$136,572	$1,657		$138,229	1.104	$152,633	$4.17
OP - Emergency Room & Related	$505,648		$505,648	$7,386	($10,061)	$502,973	1.032	$518,854	$14.16
OP - Other	$1,222,541		$1,222,541	$17,857	($30,969)	$1,209,429	1.032	$1,247,616	$34.06
Pharmacy	$4,773,755		$4,773,755	$430	($147,927)	$4,626,257	1.215	$5,623,004	$153.50
Prof - Anesthesia	$49,423		$49,423	$525		$49,948	1.194	$59,653	$1.63
Prof - Child EPSDT	$12,301		$12,301	$131		$12,432	1.194	$14,847	$0.41
Prof - Evaluation & Management	$915,691		$915,691	$9,650		$925,341	1.194	$1,105,149	$30.17
Prof - Maternity	$33,829		$33,829	$359		$34,188	1.194	$40,832	$1.11
Prof - Other	$650,908		$650,908	$6,970		$657,877	1.194	$785,713	$21.45
Prof - Psych	$459,882		$459,882	$2,554	$16,921	$479,357	1.194	$572,503	$15.63
Prof - Specialist	$163,598		$163,598	$1,738		$165,336	1.194	$197,463	$5.39
Prof - Vision	$68,859		$68,859	$270		$69,129	1.194	$82,561	$2.25
Radiology	$115,388		$115,388	$1,477		$116,865	1.104	$129,043	$3.52
Transportation/Ambulance	$293,317		$293,317	$2,552	$1,167	$297,035	1.104	$327,988	$8.95
Provider Incentive Payment Adjustment									$3.06
Total	$12,469,577	$33,842	$12,503,419	$107,131	($102,261)	$12,508,289		$14,256,558	$392.26
Admin Cost Adjustment									$32.46
Medallion II Capitation Rate									**$424.71**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Female									
Other MSA	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$342,392		$342,392	$4,382		$346,775	1.104	$382,910	$17.56
FQHC / RHC	$176,613		$176,613	$1,876		$178,489	1.194	$213,172	$9.77
Home Health	$42,925		$42,925	$627		$43,551	1.032	$44,927	$2.06
IP - Maternity	$306,778	$6,521	$313,299	$8,467	$20,657	$342,424	1.078	$369,093	$16.92
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$3,527,295	$74,982	$3,602,277	$97,352	$237,513	$3,937,142	1.078	$4,243,786	$194.57
IP - Psych	$690,222		$690,222	$3,253	($27,451)	$666,024	0.949	$632,280	$28.99
Lab	$349,945		$349,945	$4,418		$354,364	1.104	$391,291	$17.94
OP - Emergency Room & Related	$1,262,238		$1,262,238	$18,437	($25,115)	$1,255,560	1.032	$1,295,203	$59.38
OP - Other	$1,629,697		$1,629,697	$23,804	($41,282)	$1,612,219	1.032	$1,663,123	$76.25
Pharmacy	$5,744,111		$5,744,111	$517	($177,997)	$5,566,632	1.215	$6,765,986	$310.21
Prof - Anesthesia	$54,835		$54,835	$582		$55,417	1.194	$66,186	$3.03
Prof - Child EPSDT	$29,166		$29,166	$310		$29,476	1.194	$35,203	$1.61
Prof - Evaluation & Management	$1,299,037		$1,299,037	$13,748		$1,312,785	1.194	$1,567,879	$71.88
Prof - Maternity	$138,934		$138,934	$1,476		$140,410	1.194	$167,694	$7.69
Prof - Other	$428,290		$428,290	$4,570		$432,859	1.194	$516,970	$23.70
Prof - Psych	$244,103		$244,103	$1,334		$245,437	1.194	$293,129	$13.44
Prof - Specialist	$379,475		$379,475	$4,031		$383,506	1.194	$458,027	$21.00
Prof - Vision	$43,919		$43,919	$267		$44,186	1.194	$52,772	$2.42
Radiology	$309,694		$309,694	$3,964		$313,658	1.104	$346,343	$15.88
Transportation/Ambulance	$485,143		$485,143	$5,523	$1,935	$492,602	1.104	$543,934	$24.94
Provider Incentive Payment Adjustment									$7.23
Total	$17,484,812	$81,504	$17,566,315	$198,938	($11,739)	$17,753,515		$20,049,908	$926.49
Admin Cost Adjustment									$76.66
Medallion II Capitation Rate									**$1,003.15**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Male									
Other MSA	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$402,666		$402,666	$5,154		$407,820	1.104	$450,317	$25.44
FQHC / RHC	$63,060		$63,060	$670		$63,730	1.194	$76,114	$4.30
Home Health	$24,396		$24,396	$356		$24,752	1.032	$25,533	$1.44
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$3,983,145	($502,119)	$3,481,026	$109,933	$230,537	$3,821,496	1.078	$4,119,132	$232.73
IP - Psych	$680,748		$680,748	$3,426	($27,083)	$657,092	0.949	$623,801	$35.24
Lab	$116,947		$116,947	$1,450		$118,397	1.104	$130,735	$7.39
OP - Emergency Room & Related	$628,268		$628,268	$9,177	($12,501)	$624,945	1.032	$644,677	$36.42
OP - Other	$1,085,670		$1,085,670	$15,858	($27,501)	$1,074,026	1.032	$1,107,938	$62.60
Pharmacy	$3,776,188		$3,776,188	$340	($117,015)	$3,659,513	1.215	$4,447,970	$251.31
Prof - Anesthesia	$16,769		$16,769	$178		$16,947	1.194	$20,240	$1.14
Prof - Child EPSDT	$5,225		$5,225	$55		$5,280	1.194	$6,306	$0.36
Prof - Evaluation & Management	$717,545		$717,545	$7,586		$725,131	1.194	$866,035	$48.93
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$530,827		$530,827	$5,663		$536,490	1.194	$640,738	$36.20
Prof - Psych	$179,583		$179,583	$751		$180,334	1.194	$215,376	$12.17
Prof - Specialist	$163,139		$163,139	$1,733		$164,872	1.194	$196,909	$11.13
Prof - Vision	$32,408		$32,408	$194		$32,602	1.194	$38,937	$2.20
Radiology	$117,575		$117,575	$1,505		$119,080	1.104	$131,489	$7.43
Transportation/Ambulance	$219,266		$219,266	$2,221	$874	$222,360	1.104	$245,531	$13.87
Provider Incentive Payment Adjustment									$6.22
Total	$12,743,425	($502,119)	$12,241,306	$166,251	$47,310	$12,454,867		$13,987,778	$796.53
Admin Cost Adjustment									$65.90
Medallion II Capitation Rate									**$862.44**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 45 and Over									
Other MSA	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$1,646,626		$1,646,626	$21,076		$1,667,701	1.104	$1,841,486	$32.16
FQHC / RHC	$661,205		$661,205	$7,023		$668,228	1.194	$798,075	$13.94
Home Health	$364,204		$364,204	$5,320		$369,524	1.032	$381,191	$6.66
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$18,100,290	$179,783	$18,280,073	$499,558	$1,205,639	$19,985,269	1.078	$21,541,817	$376.19
IP - Psych	$1,597,380		$1,597,380	$6,638	($63,495)	$1,540,523	0.949	$1,462,475	$25.54
Lab	$902,354		$902,354	$11,392		$913,746	1.104	$1,008,964	$17.62
OP - Emergency Room & Related	$2,558,201		$2,558,201	$37,366	($50,900)	$2,544,667	1.032	$2,625,013	$45.84
OP - Other	$6,621,641		$6,621,641	$96,719	($167,735)	$6,550,626	1.032	$6,757,455	$118.01
Pharmacy	$21,738,349		$21,738,349	$1,958	($673,621)	$21,066,686	1.215	$25,605,592	$447.16
Prof - Anesthesia	$140,564		$140,564	$1,493		$142,057	1.194	$169,661	$2.96
Prof - Child EPSDT	$46,150		$46,150	$490		$46,640	1.194	$55,703	$0.97
Prof - Evaluation & Management	$3,877,217		$3,877,217	$41,050		$3,918,268	1.194	$4,679,646	$81.72
Prof - Maternity	$240		$240	$3		$243	1.194	$290	$0.01
Prof - Other	$2,342,117		$2,342,117	$24,926		$2,367,043	1.194	$2,826,995	$49.37
Prof - Psych	$507,168		$507,168	$2,128		$509,296	1.194	$608,260	$10.62
Prof - Specialist	$1,566,191		$1,566,191	$16,636		$1,582,826	1.194	$1,890,393	$33.01
Prof - Vision	$195,181		$195,181	$1,543		$196,724	1.194	$234,950	$4.10
Radiology	$998,083		$998,083	$12,775		$1,010,858	1.104	$1,116,195	$19.49
Transportation/Ambulance	$1,216,356		$1,216,356	$13,781	$4,852	$1,234,989	1.104	$1,363,682	$23.81
Provider Incentive Payment Adjustment									$10.30
Total	$65,079,518	$179,783	$65,259,300	$801,874	$254,740	$66,315,915		$74,967,842	$1,319.49
Admin Cost Adjustment									$109.17
Medallion II Capitation Rate									**$1,428.66**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age Under 1									
Statewide	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$101,675		$101,675	$1,301	($1,642)	$101,334	1.104	$111,894	$68.99
FQHC / RHC	$8,523		$8,523	$91		$8,614	1.194	$10,287	$6.34
Home Health	$17,144		$17,144	$250		$17,395	1.032	$17,944	$11.06
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$737,235	($39,025)	$698,210	$20,347	$46,131	$764,688	1.078	$824,245	$508.17
IP - Other	$1,346,456	($293,526)	$1,052,929	$37,159	$69,983	$1,160,072	1.078	$1,250,424	$770.91
IP - Psych	$17,377		$17,377		($688)	$16,689	0.949	$15,843	$9.77
Lab	$7,955		$7,955	$92		$8,046	1.104	$8,885	$5.48
OP - Emergency Room & Related	$64,316		$64,316	$939	($1,280)	$63,976	1.032	$65,996	$40.69
OP - Other	$373,763		$373,763	$5,459	($9,468)	$369,754	1.032	$381,429	$235.16
Pharmacy	$639,089		$639,089	$58	($19,804)	$619,342	1.215	$752,782	$464.11
Prof - Anesthesia	$26,292		$26,292	$279		$26,572	1.194	$31,735	$19.57
Prof - Child EPSDT	$7,085		$7,085	$75		$7,160	1.194	$8,551	$5.27
Prof - Evaluation & Management	$398,911		$398,911	$4,234		$403,144	1.194	$481,481	$296.84
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$294,876		$294,876	$3,133		$298,008	1.194	$355,916	$219.43
Prof - Psych	$6,265		$6,265	$3		$6,268	1.194	$7,486	$4.62
Prof - Specialist	$96,356		$96,356	$1,023		$97,379	1.194	$116,301	$71.70
Prof - Vision	$11,108		$11,108	$99		$11,207	1.194	$13,385	$8.25
Radiology	$11,628		$11,628	$149		$11,777	1.104	$13,004	$8.02
Transportation/Ambulance	$19,904		$19,904	$204	$79	$20,188	1.104	$22,291	$13.74
Provider Incentive Payment Adjustment									$21.78
Total	$4,185,956	($332,551)	$3,853,405	$74,896	$83,312	$4,011,612		$4,489,879	$2,789.90
Admin Cost Adjustment									$230.83
Medallion II Capitation Rate									**$3,020.73**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 1-5									
Richmond/Charlottesville	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$643,740		$643,740	$8,239	($10,396)	$641,584	1.104	$708,441	$70.28
FQHC / RHC	$3,517		$3,517	$37		$3,554	1.194	$4,244	$0.42
Home Health	$434,416		$434,416	$6,345		$440,762	1.032	$454,678	$45.11
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$1,322,816	$28,120	$1,350,936	$36,509	$89,073	$1,476,518	1.078	$1,591,517	$157.89
IP - Psych	$150,599		$150,599	$39	($5,963)	$144,676	0.949	$137,346	$13.63
Lab	$22,482		$22,482	$237		$22,719	1.104	$25,086	$2.49
OP - Emergency Room & Related	$224,010		$224,010	$3,272	($4,457)	$222,825	1.032	$229,860	$22.80
OP - Other	$1,661,409		$1,661,409	$24,267	($42,086)	$1,643,590	1.032	$1,695,485	$168.20
Pharmacy	$1,077,932		$1,077,932	$97	($33,403)	$1,044,627	1.215	$1,269,696	$125.96
Prof - Anesthesia	$43,339		$43,339	$460		$43,799	1.194	$52,310	$5.19
Prof - Child EPSDT	$14,529		$14,529	$154		$14,683	1.194	$17,537	$1.74
Prof - Evaluation & Management	$527,805		$527,805	$5,587		$533,393	1.194	$637,039	$63.20
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$677,721		$677,721	$7,208		$684,929	1.194	$818,021	$81.15
Prof - Psych	$75,115		$75,115	$262		$75,378	1.194	$90,025	$8.93
Prof - Specialist	$105,918		$105,918	$1,125		$107,044	1.194	$127,844	$12.68
Prof - Vision	$20,999		$20,999	$114		$21,113	1.194	$25,216	$2.50
Radiology	$23,736		$23,736	$304		$24,040	1.104	$26,545	$2.63
Transportation/Ambulance	$53,984		$53,984	$345	$214	$54,544	1.104	$60,228	$5.97
Provider Incentive Payment Adjustment									$6.22
Total	$7,084,068	$28,120	$7,112,188	$94,605	($7,017)	$7,199,776		$7,971,116	$797.01
Admin Cost Adjustment									$65.94
Medallion II Capitation Rate									**$862.95**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 6-20									
Richmond/Charlottesville	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$1,422,189		$1,422,189	$18,203	($14,539)	$1,425,854	1.104	$1,574,436	$14.40
FQHC / RHC	$140,016		$140,016	$1,487		$141,503	1.194	$168,999	$1.55
Home Health	$228,802		$228,802	$3,342		$232,144	1.032	$239,474	$2.19
IP - Maternity	$378,261	$8,041	$386,302	$10,440	$25,471	$422,212	1.078	$455,096	$4.16
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$5,816,966	$123,656	$5,940,622	$160,546	$391,691	$6,492,859	1.078	$6,998,553	$64.00
IP - Psych	$2,571,904		$2,571,904	$9,865	($102,199)	$2,479,570	0.949	$2,353,947	$21.53
Lab	$239,784		$239,784	$2,505		$242,289	1.104	$267,537	$2.45
OP - Emergency Room & Related	$1,963,029		$1,963,029	$28,673	($39,058)	$1,952,644	1.032	$2,014,296	$18.42
OP - Other	$4,811,757		$4,811,757	$70,283	($121,888)	$4,760,152	1.032	$4,910,449	$44.91
Pharmacy	$12,488,091		$12,488,091	$1,125	($386,977)	$12,102,239	1.215	$14,709,717	$134.52
Prof - Anesthesia	$162,580		$162,580	$1,727		$164,307	1.194	$196,234	$1.79
Prof - Child EPSDT	$35,952		$35,952	$382		$36,334	1.194	$43,394	$0.40
Prof - Evaluation & Management	$2,752,467		$2,752,467	$29,023		$2,781,490	1.194	$3,321,976	$30.38
Prof - Maternity	$186,137		$186,137	$1,977		$188,114	1.194	$224,668	$2.05
Prof - Other	$2,151,915		$2,151,915	$22,940		$2,174,854	1.194	$2,597,461	$23.75
Prof - Psych	$1,254,330		$1,254,330	$7,756	$46,180	$1,308,266	1.194	$1,562,481	$14.29
Prof - Specialist	$534,016		$534,016	$5,672		$539,688	1.194	$644,557	$5.89
Prof - Vision	$174,180		$174,180	$675		$174,856	1.194	$208,833	$1.91
Radiology	$238,613		$238,613	$3,054		$241,667	1.104	$266,850	$2.44
Transportation/Ambulance	$624,890		$624,890	$4,307	$2,482	$631,679	1.104	$697,504	$6.38
Provider Incentive Payment Adjustment									$3.13
Total	$38,175,880	$131,697	$38,307,577	$383,981	($198,838)	$38,492,720		$43,456,462	$400.55
Admin Cost Adjustment									$33.14
Medallion II Capitation Rate									**$433.69**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Female									
Richmond/Charlottesville	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$910,922		$910,922	$11,659		$922,581	1.104	$1,018,719	$19.57
FQHC / RHC	$177,974		$177,974	$1,890		$179,864	1.194	$214,815	$4.13
Home Health	$119,450		$119,450	$1,745		$121,194	1.032	$125,021	$2.40
IP - Maternity	$1,098,633	($1,113)	$1,097,520	$30,322	$72,407	$1,200,248	1.078	$1,293,729	$24.85
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$9,837,492	($9,967)	$9,827,525	$271,509	$648,351	$10,747,385	1.078	$11,584,443	$222.55
IP - Psych	$2,536,527		$2,536,527	$16,815	($101,073)	$2,452,268	0.949	$2,328,028	$44.72
Lab	$404,791		$404,791	$4,922		$409,713	1.104	$452,408	$8.69
OP - Emergency Room & Related	$4,403,062		$4,403,062	$64,313	($87,607)	$4,379,768	1.032	$4,518,055	$86.80
OP - Other	$5,332,217		$5,332,217	$77,885	($135,072)	$5,275,030	1.032	$5,441,584	$104.54
Pharmacy	$13,079,024		$13,079,024	$1,178	($405,288)	$12,674,914	1.215	$15,405,777	$295.96
Prof - Anesthesia	$174,644		$174,644	$1,855		$176,499	1.194	$210,796	$4.05
Prof - Child EPSDT	$28,603		$28,603	$304		$28,907	1.194	$34,524	$0.66
Prof - Evaluation & Management	$3,463,904		$3,463,904	$36,692		$3,500,596	1.194	$4,180,814	$80.32
Prof - Maternity	$361,493		$361,493	$3,840		$365,333	1.194	$436,323	$8.38
Prof - Other	$1,243,763		$1,243,763	$13,255		$1,257,018	1.194	$1,501,275	$28.84
Prof - Psych	$709,224		$709,224	$4,802		$714,026	1.194	$852,772	$16.38
Prof - Specialist	$997,279		$997,279	$10,593		$1,007,872	1.194	$1,203,717	$23.12
Prof - Vision	$84,951		$84,951	$521		$85,472	1.194	$102,081	$1.96
Radiology	$629,244		$629,244	$8,054		$637,298	1.104	$703,708	$13.52
Transportation/Ambulance	$985,826		$985,826	$10,857	$3,931	$1,000,614	1.104	$1,104,884	$21.23
Provider Incentive Payment Adjustment									$7.97
Total	$46,579,023	($11,080)	$46,567,943	$573,011	($4,353)	$47,136,601		$52,713,471	$1,020.66
Admin Cost Adjustment									$84.45
Medallion II Capitation Rate									**$1,105.11**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Male									
Richmond/Charlottesville	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$812,563		$812,563	$10,400		$822,963	1.104	$908,721	$22.13
FQHC / RHC	$132,739		$132,739	$1,410		$134,149	1.194	$160,216	$3.90
Home Health	$96,680		$96,680	$1,412		$98,093	1.032	$101,190	$2.46
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$6,556,847	$139,254	$6,696,101	$180,966	$441,503	$7,318,570	1.078	$7,888,574	$192.07
IP - Psych	$2,244,563		$2,244,563	$15,444	($89,462)	$2,170,545	0.949	$2,060,578	$50.17
Lab	$119,706		$119,706	$1,334		$121,040	1.104	$133,653	$3.25
OP - Emergency Room & Related	$2,048,921		$2,048,921	$29,928	($40,767)	$2,038,081	1.032	$2,102,432	$51.19
OP - Other	$2,881,773		$2,881,773	$42,093	($72,999)	$2,850,867	1.032	$2,940,880	$71.60
Pharmacy	$8,518,383		$8,518,383	$767	($263,965)	$8,255,185	1.215	$10,033,799	$244.30
Prof - Anesthesia	$63,395		$63,395	$673		$64,068	1.194	$76,518	$1.86
Prof - Child EPSDT	$11,736		$11,736	$125		$11,860	1.194	$14,165	$0.34
Prof - Evaluation & Management	$1,654,272		$1,654,272	$17,493		$1,671,765	1.194	$1,996,613	$48.61
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$1,348,111		$1,348,111	$14,359		$1,362,469	1.194	$1,627,218	$39.62
Prof - Psych	$467,563		$467,563	$2,769		$470,332	1.194	$561,725	$13.68
Prof - Specialist	$545,101		$545,101	$5,790		$550,891	1.194	$657,938	$16.02
Prof - Vision	$62,719		$62,719	$364		$63,083	1.194	$75,341	$1.83
Radiology	$245,644		$245,644	$3,144		$248,788	1.104	$274,713	$6.69
Transportation/Ambulance	$738,458		$738,458	$8,055	$2,944	$749,457	1.104	$827,555	$20.15
Provider Incentive Payment Adjustment									$6.22
Total	$28,549,175	$139,254	$28,688,429	$336,524	($22,746)	$29,002,207		$32,441,829	$796.11
Admin Cost Adjustment									$65.87
Medallion II Capitation Rate									**$861.98**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 45 and Over									
Richmond/Charlottesville	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$4,109,199		$4,109,199	$52,595		$4,161,795	1.104	$4,595,478	$34.94
FQHC / RHC	$610,055		$610,055	$6,480		$616,535	1.194	$736,337	$5.60
Home Health	$887,911		$887,911	$12,969		$900,881	1.032	$929,325	$7.07
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$47,136,277	$603,959	$47,740,236	$1,300,934	$3,148,407	$52,189,577	1.078	$56,254,349	$427.74
IP - Psych	$5,912,328		$5,912,328	$37,561	($235,525)	$5,714,365	0.949	$5,424,855	$41.25
Lab	$927,605		$927,605	$11,246		$938,851	1.104	$1,036,685	$7.88
OP - Emergency Room & Related	$8,462,366		$8,462,366	$123,606	($168,375)	$8,417,596	1.032	$8,683,374	$66.03
OP - Other	$21,582,119		$21,582,119	$315,239	($546,704)	$21,350,655	1.032	$22,024,781	$167.47
Pharmacy	$48,895,665		$48,895,665	$4,403	($1,515,162)	$47,384,906	1.215	$57,594,181	$437.93
Prof - Anesthesia	$519,219		$519,219	$5,515		$524,734	1.194	$626,698	$4.77
Prof - Child EPSDT	$58,114		$58,114	$617		$58,731	1.194	$70,144	$0.53
Prof - Evaluation & Management	$9,949,943		$9,949,943	$105,429		$10,055,373	1.194	$12,009,282	$91.31
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$6,157,052		$6,157,052	$65,519		$6,222,572	1.194	$7,431,711	$56.51
Prof - Psych	$1,491,017		$1,491,017	$8,835		$1,499,852	1.194	$1,791,296	$13.62
Prof - Specialist	$4,115,678		$4,115,678	$43,715		$4,159,394	1.194	$4,967,626	$37.77
Prof - Vision	$444,478		$444,478	$3,741		$448,218	1.194	$535,314	$4.07
Radiology	$1,938,132		$1,938,132	$24,807		$1,962,939	1.104	$2,167,488	$16.48
Transportation/Ambulance	$2,700,898		$2,700,898	$30,123	$10,772	$2,741,793	1.104	$3,027,504	$23.02
Provider Incentive Payment Adjustment									$11.36
Total	$165,898,057	$603,959	$166,502,016	$2,153,336	$693,413	$169,348,766		$189,906,429	$1,455.35
Admin Cost Adjustment									$120.41
Medallion II Capitation Rate									**$1,575.77**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age Under 1									
Statewide	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$101,675		$101,675	$1,301	($1,642)	$101,334	1.104	$111,894	$68.99
FQHC / RHC	$8,523		$8,523	$91		$8,614	1.194	$10,287	$6.34
Home Health	$17,144		$17,144	$250		$17,395	1.032	$17,944	$11.06
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$737,235	($39,025)	$698,210	$20,347	$46,131	$764,688	1.078	$824,245	$508.17
IP - Other	$1,346,456	($293,526)	$1,052,929	$37,159	$69,983	$1,160,072	1.078	$1,250,424	$770.91
IP - Psych	$17,377		$17,377		($688)	$16,689	0.949	$15,843	$9.77
Lab	$7,955		$7,955	$92		$8,046	1.104	$8,885	$5.48
OP - Emergency Room & Related	$64,316		$64,316	$939	($1,280)	$63,976	1.032	$65,996	$40.69
OP - Other	$373,763		$373,763	$5,459	($9,468)	$369,754	1.032	$381,429	$235.16
Pharmacy	$639,089		$639,089	$58	($19,804)	$619,342	1.215	$752,782	$464.11
Prof - Anesthesia	$26,292		$26,292	$279		$26,572	1.194	$31,735	$19.57
Prof - Child EPSDT	$7,085		$7,085	$75		$7,160	1.194	$8,551	$5.27
Prof - Evaluation & Management	$398,911		$398,911	$4,234		$403,144	1.194	$481,481	$296.84
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$294,876		$294,876	$3,133		$298,008	1.194	$355,916	$219.43
Prof - Psych	$6,265		$6,265	$3		$6,268	1.194	$7,486	$4.62
Prof - Specialist	$96,356		$96,356	$1,023		$97,379	1.194	$116,301	$71.70
Prof - Vision	$11,108		$11,108	$99		$11,207	1.194	$13,385	$8.25
Radiology	$11,628		$11,628	$149		$11,777	1.104	$13,004	$8.02
Transportation/Ambulance	$19,904		$19,904	$204	$79	$20,188	1.104	$22,291	$13.74
Provider Incentive Payment Adjustment									$21.78
Total	$4,185,956	($332,551)	$3,853,405	$74,896	$83,312	$4,011,612		$4,489,879	$2,789.90
Admin Cost Adjustment									$230.83
Medallion II Capitation Rate									**$3,020.73**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 1-5									
Rural	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$421,631		$421,631	$5,397	($6,809)	$420,219	1.104	$464,008	$63.85
FQHC / RHC	$58,683		$58,683	$623		$59,306	1.194	$70,830	$9.75
Home Health	$141,121		$141,121	$2,061		$143,182	1.032	$147,703	$20.33
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$1,566,110	($97,736)	$1,468,374	$43,224	$97,043	$1,608,642	1.078	$1,733,930	$238.60
IP - Psych	$118,729		$118,729		($4,700)	$114,029	0.949	$108,252	$14.90
Lab	$22,297		$22,297	$260		$22,557	1.104	$24,908	$3.43
OP - Emergency Room & Related	$162,531		$162,531	$2,374	($3,234)	$161,671	1.032	$166,776	$22.95
OP - Other	$1,076,096		$1,076,096	$15,718	($27,259)	$1,064,555	1.032	$1,098,167	$151.12
Pharmacy	$784,528		$784,528	$71	($24,311)	$760,288	1.215	$924,095	$127.16
Prof - Anesthesia	$41,179		$41,179	$437		$41,617	1.194	$49,703	$6.84
Prof - Child EPSDT	$10,448		$10,448	$111		$10,559	1.194	$12,611	$1.74
Prof - Evaluation & Management	$456,194		$456,194	$4,834		$461,028	1.194	$550,612	$75.77
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$513,011		$513,011	$5,467		$518,478	1.194	$619,226	$85.21
Prof - Psych	$53,265		$53,265	$131		$53,396	1.194	$63,772	$8.78
Prof - Specialist	$80,043		$80,043	$850		$80,893	1.194	$96,612	$13.29
Prof - Vision	$18,848		$18,848	$113		$18,960	1.194	$22,644	$3.12
Radiology	$20,034		$20,034	$256		$20,291	1.104	$22,405	$3.08
Transportation/Ambulance	$69,418		$69,418	$629	$276	$70,323	1.104	$77,652	$10.69
Provider Incentive Payment Adjustment									$6.77
Total	$5,614,166	($97,736)	$5,516,430	$82,556	$31,008	$5,629,994		$6,253,907	$867.36
Admin Cost Adjustment									$71.76
Medallion II Capitation Rate									**$939.13**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 6-20									
Rural	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$739,005		$739,005	$9,459	($7,555)	$740,909	1.104	$818,116	$16.23
FQHC / RHC	$174,191		$174,191	$1,850		$176,041	1.194	$210,248	$4.17
Home Health	$32,318		$32,318	$472		$32,790	1.032	$33,825	$0.67
IP - Maternity	$80,787	$1,717	$82,504	$2,230	$5,440	$90,173	1.078	$97,196	$1.93
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$2,361,304	$50,197	$2,411,501	$65,172	$159,001	$2,635,673	1.078	$2,840,952	$56.35
IP - Psych	$1,160,051		$1,160,051	$1,805	($45,992)	$1,115,864	0.949	$1,059,331	$21.01
Lab	$136,207		$136,207	$1,590		$137,797	1.104	$152,156	$3.02
OP - Emergency Room & Related	$886,815		$886,815	$12,953	($17,645)	$882,123	1.032	$909,976	$18.05
OP - Other	$2,204,836		$2,204,836	$32,205	($55,851)	$2,181,190	1.032	$2,250,059	$44.63
Pharmacy	$6,980,360		$6,980,360	$629	($216,305)	$6,764,683	1.215	$8,222,162	$163.09
Prof - Anesthesia	$79,837		$79,837	$848		$80,685	1.194	$96,364	$1.91
Prof - Child EPSDT	$22,005		$22,005	$234		$22,239	1.194	$26,560	$0.53
Prof - Evaluation & Management	$1,337,031		$1,337,031	$14,134		$1,351,165	1.194	$1,613,716	$32.01
Prof - Maternity	$46,365		$46,365	$492		$46,857	1.194	$55,963	$1.11
Prof - Other	$645,569		$645,569	$7,014		$652,583	1.194	$779,389	$15.46
Prof - Psych	$580,120		$580,120	$2,621	$21,323	$604,064	1.194	$721,443	$14.31
Prof - Specialist	$231,129		$231,129	$2,455		$233,584	1.194	$278,973	$5.53
Prof - Vision	$91,320		$91,320	$363		$91,682	1.194	$109,497	$2.17
Radiology	$110,399		$110,399	$1,413		$111,812	1.104	$123,463	$2.45
Transportation/Ambulance	$372,909		$372,909	$2,887	$1,482	$377,278	1.104	$416,593	$8.26
Provider Incentive Payment Adjustment									$3.25
Total	$18,272,557	$51,914	$18,324,471	$160,825	($156,102)	$18,329,194		$20,815,983	$416.13
Admin Cost Adjustment									$34.43
Medallion II Capitation Rate									**$450.56**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Female									
Rural	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$604,984		$604,984	$7,743		$612,728	1.104	$676,578	$24.55
FQHC / RHC	$227,260		$227,260	$2,414		$229,674	1.194	$274,303	$9.95
Home Health	$125,451		$125,451	$1,832		$127,284	1.032	$131,302	$4.76
IP - Maternity	$288,450	($2,564)	$285,886	$7,961	$18,865	$312,712	1.078	$337,067	$12.23
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$4,505,197	($40,045)	$4,465,152	$124,341	$294,642	$4,884,136	1.078	$5,264,535	$191.01
IP - Psych	$817,971		$817,971	$3,105	($32,502)	$788,574	0.949	$748,622	$27.16
Lab	$250,835		$250,835	$3,117		$253,952	1.104	$280,415	$10.17
OP - Emergency Room & Related	$1,890,914		$1,890,914	$27,620	($37,623)	$1,880,910	1.032	$1,940,298	$70.40
OP - Other	$2,797,346		$2,797,346	$40,859	($70,860)	$2,767,345	1.032	$2,854,721	$103.58
Pharmacy	$7,264,412		$7,264,412	$654	($225,107)	$7,039,959	1.215	$8,556,748	$310.47
Prof - Anesthesia	$88,899		$88,899	$944		$89,843	1.194	$107,301	$3.89
Prof - Child EPSDT	$46,131		$46,131	$490		$46,621	1.194	$55,680	$2.02
Prof - Evaluation & Management	$1,629,702		$1,629,702	$17,269		$1,646,971	1.194	$1,967,002	$71.37
Prof - Maternity	$158,415		$158,415	$1,683		$160,097	1.194	$191,207	$6.94
Prof - Other	$567,025		$567,025	$6,096		$573,121	1.194	$684,487	$24.84
Prof - Psych	$327,723		$327,723	$1,698		$329,420	1.194	$393,431	$14.27
Prof - Specialist	$498,202		$498,202	$5,292		$503,493	1.194	$601,330	$21.82
Prof - Vision	$41,422		$41,422	$251		$41,673	1.194	$49,771	$1.81
Radiology	$318,211		$318,211	$4,073		$322,284	1.104	$355,868	$12.91
Transportation/Ambulance	$438,858		$438,858	$4,608	$1,749	$445,215	1.104	$491,609	$17.84
Provider Incentive Payment Adjustment									$7.41
Total	$22,887,407	($42,609)	$22,844,798	$262,051	($50,837)	$23,056,012		$25,962,276	$949.41
Admin Cost Adjustment									$78.55
Medallion II Capitation Rate									**$1,027.96**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Male									
Rural	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$415,416		$415,416	$5,317		$420,733	1.104	$464,576	$22.14
FQHC / RHC	$167,849		$167,849	$1,783		$169,632	1.194	$202,594	$9.66
Home Health	$88,232		$88,232	$1,289		$89,521	1.032	$92,347	$4.40
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$3,019,329	$64,184	$3,083,513	$83,332	$203,309	$3,370,155	1.078	$3,632,638	$173.14
IP - Psych	$703,477		$703,477	$3,256	($27,976)	$678,757	0.949	$644,369	$30.71
Lab	$73,310		$73,310	$868		$74,178	1.104	$81,907	$3.90
OP - Emergency Room & Related	$744,216		$744,216	$10,870	($14,808)	$740,279	1.032	$763,652	$36.40
OP - Other	$1,270,097		$1,270,097	$18,552	($32,173)	$1,256,476	1.032	$1,296,148	$61.78
Pharmacy	$4,277,534		$4,277,534	$385	($132,551)	$4,145,369	1.215	$5,038,506	$240.15
Prof - Anesthesia	$40,780		$40,780	$433		$41,214	1.194	$49,222	$2.35
Prof - Child EPSDT	$8,821		$8,821	$94		$8,915	1.194	$10,647	$0.51
Prof - Evaluation & Management	$696,256		$696,256	$7,363		$703,619	1.194	$840,343	$40.05
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$376,312		$376,312	$4,048		$380,360	1.194	$454,270	$21.65
Prof - Psych	$211,153		$211,153	$937		$212,090	1.194	$253,303	$12.07
Prof - Specialist	$240,013		$240,013	$2,549		$242,563	1.194	$289,696	$13.81
Prof - Vision	$30,855		$30,855	$181		$31,036	1.194	$37,067	$1.77
Radiology	$104,805		$104,805	$1,341		$106,146	1.104	$117,207	$5.59
Transportation/Ambulance	$285,405		$285,405	$2,898	$1,137	$289,441	1.104	$319,602	$15.23
Provider Incentive Payment Adjustment									$5.47
Total	$12,753,861	$64,184	$12,818,046	$145,498	($3,061)	$12,960,482		$14,588,095	$700.77
Admin Cost Adjustment									$57.98
Medallion II Capitation Rate									**$758.75**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 45 and Over									
Rural	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$2,571,630		$2,571,630	$32,915		$2,604,546	1.104	$2,875,955	$34.72
FQHC / RHC	$775,811		$775,811	$8,240		$784,051	1.194	$936,404	$11.31
Home Health	$523,819		$523,819	$7,651		$531,470	1.032	$548,251	$6.62
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$24,425,495	$243,075	$24,668,570	$674,131	$1,626,983	$26,969,683	1.078	$29,070,210	$350.97
IP - Psych	$2,236,795		$2,236,795	$8,323	($88,872)	$2,156,246	0.949	$2,047,003	$24.71
Lab	$728,851		$728,851	$9,038		$737,889	1.104	$814,782	$9.84
OP - Emergency Room & Related	$3,771,845		$3,771,845	$55,093	($75,048)	$3,751,891	1.032	$3,870,353	$46.73
OP - Other	$13,404,123		$13,404,123	$195,787	($339,544)	$13,260,367	1.032	$13,679,050	$165.15
Pharmacy	$28,396,154		$28,396,154	$2,557	($879,930)	$27,518,781	1.215	$33,447,816	$403.82
Prof - Anesthesia	$358,037		$358,037	$3,803		$361,840	1.194	$432,150	$5.22
Prof - Child EPSDT	$51,138		$51,138	$543		$51,681	1.194	$61,723	$0.75
Prof - Evaluation & Management	$5,361,230		$5,361,230	$56,815		$5,418,044	1.194	$6,470,852	$78.12
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$2,881,792		$2,881,792	$30,798		$2,912,590	1.194	$3,478,550	$42.00
Prof - Psych	$756,624		$756,624	$3,095		$759,719	1.194	$907,343	$10.95
Prof - Specialist	$2,284,378		$2,284,378	$24,264		$2,308,642	1.194	$2,757,246	$33.29
Prof - Vision	$294,606		$294,606	$2,543		$297,148	1.194	$354,888	$4.28
Radiology	$1,263,999		$1,263,999	$16,178		$1,280,178	1.104	$1,413,580	$17.07
Transportation/Ambulance	$1,601,793		$1,601,793	$17,555	$6,387	$1,625,735	1.104	$1,795,147	$21.67
Provider Incentive Payment Adjustment									$9.97
Total	$91,688,119	$243,075	$91,931,194	$1,149,331	$249,975	$93,330,499		$104,961,302	$1,277.19
Admin Cost Adjustment									$105.67
Medallion II Capitation Rate									**$1,382.87**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age Under 1									
Statewide	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$101,675		$101,675	$1,301	($1,642)	$101,334	1.104	$111,894	$68.99
FQHC / RHC	$8,523		$8,523	$91		$8,614	1.194	$10,287	$6.34
Home Health	$17,144		$17,144	$250		$17,395	1.032	$17,944	$11.06
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$737,235	($39,025)	$698,210	$20,347	$46,131	$764,688	1.078	$824,245	$508.17
IP - Other	$1,346,456	($293,526)	$1,052,929	$37,159	$69,983	$1,160,072	1.078	$1,250,424	$770.91
IP - Psych	$17,377		$17,377		($688)	$16,689	0.949	$15,843	$9.77
Lab	$7,955		$7,955	$92		$8,046	1.104	$8,885	$5.48
OP - Emergency Room & Related	$64,316		$64,316	$939	($1,280)	$63,976	1.032	$65,996	$40.69
OP - Other	$373,763		$373,763	$5,459	($9,468)	$369,754	1.032	$381,429	$235.16
Pharmacy	$639,089		$639,089	$58	($19,804)	$619,342	1.215	$752,782	$464.11
Prof - Anesthesia	$26,292		$26,292	$279		$26,572	1.194	$31,735	$19.57
Prof - Child EPSDT	$7,085		$7,085	$75		$7,160	1.194	$8,551	$5.27
Prof - Evaluation & Management	$398,911		$398,911	$4,234		$403,144	1.194	$481,481	$296.84
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$294,876		$294,876	$3,133		$298,008	1.194	$355,916	$219.43
Prof - Psych	$6,265		$6,265	$3		$6,268	1.194	$7,486	$4.62
Prof - Specialist	$96,356		$96,356	$1,023		$97,379	1.194	$116,301	$71.70
Prof - Vision	$11,108		$11,108	$99		$11,207	1.194	$13,385	$8.25
Radiology	$11,628		$11,628	$149		$11,777	1.104	$13,004	$8.02
Transportation/Ambulance	$19,904		$19,904	$204	$79	$20,188	1.104	$22,291	$13.74
Provider Incentive Payment Adjustment									$21.78
Total	$4,185,956	($332,551)	$3,853,405	$74,896	$83,312	$4,011,612		$4,489,879	$2,789.90
Admin Cost Adjustment									$230.83
Medallion II Capitation Rate									**$3,020.73**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 1-5									
Tidewater	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$730,060		$730,060	$9,344	($11,790)	$727,615	1.104	$803,436	$58.38
FQHC / RHC	$2,422		$2,422	$26		$2,447	1.194	$2,923	$0.21
Home Health	$134,423		$134,423	$1,963		$136,387	1.032	$140,693	$10.22
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$1,557,119	($121,597)	$1,435,522	$42,881	$94,912	$1,573,315	1.078	$1,695,852	$123.22
IP - Psych	$252,012		$252,012	$198	($9,984)	$242,226	0.949	$229,954	$16.71
Lab	$42,979		$42,979	$368		$43,348	1.104	$47,865	$3.48
OP - Emergency Room & Related	$405,206		$405,206	$5,919	($8,062)	$403,062	1.032	$415,788	$30.21
OP - Other	$2,721,144		$2,721,144	$39,746	($68,930)	$2,691,960	1.032	$2,776,956	$201.77
Pharmacy	$1,261,835		$1,261,835	$114	($39,101)	$1,222,847	1.215	$1,486,315	$107.99
Prof - Anesthesia	$70,837		$70,837	$752		$71,589	1.194	$85,500	$6.21
Prof - Child EPSDT	$18,796		$18,796	$200		$18,995	1.194	$22,686	$1.65
Prof - Evaluation & Management	$836,932		$836,932	$8,869		$845,801	1.194	$1,010,153	$73.40
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$1,657,929		$1,657,929	$17,653		$1,675,582	1.194	$2,001,173	$145.40
Prof - Psych	$91,055		$91,055	$122		$91,177	1.194	$108,895	$7.91
Prof - Specialist	$193,351		$193,351	$2,054		$195,405	1.194	$233,375	$16.96
Prof - Vision	$39,503		$39,503	$252		$39,755	1.194	$47,480	$3.45
Radiology	$29,561		$29,561	$378		$29,939	1.104	$33,059	$2.40
Transportation/Ambulance	$56,693		$56,693	$205	$224	$57,123	1.104	$63,075	$4.58
Provider Incentive Payment Adjustment									$6.41
Total	$10,101,857	($121,597)	$9,980,260	$131,044	($42,730)	$10,068,573		$11,205,178	$820.56
Admin Cost Adjustment									$67.89
Medallion II Capitation Rate									**$888.45**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 6-20									
Tidewater	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$1,581,773		$1,581,773	$20,246	($16,170)	$1,585,849	1.104	$1,751,104	$15.40
FQHC / RHC	$52,102		$52,102	$553		$52,655	1.194	$62,887	$0.55
Home Health	$89,202		$89,202	$1,303		$90,505	1.032	$93,362	$0.82
IP - Maternity	$355,950	($5,529)	$350,422	$9,824	$23,128	$383,373	1.078	$413,232	$3.63
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$6,129,942	($94,757)	$6,035,185	$168,381	$398,264	$6,601,829	1.078	$7,116,011	$62.56
IP - Psych	$2,661,677		$2,661,677	$5,676	($105,586)	$2,561,766	0.949	$2,431,978	$21.38
Lab	$278,551		$278,551	$2,015		$280,566	1.104	$309,802	$2.72
OP - Emergency Room & Related	$2,743,000		$2,743,000	$40,066	($54,577)	$2,728,488	1.032	$2,814,638	$24.75
OP - Other	$7,252,180		$7,252,180	$105,929	($183,707)	$7,174,402	1.032	$7,400,927	$65.07
Pharmacy	$14,422,671		$14,422,671	$1,299	($446,925)	$13,977,045	1.215	$16,988,458	$149.36
Prof - Anesthesia	$210,406		$210,406	$2,235		$212,641	1.194	$253,960	$2.23
Prof - Child EPSDT	$70,118		$70,118	$745		$70,862	1.194	$84,632	$0.74
Prof - Evaluation & Management	$3,219,001		$3,219,001	$34,032		$3,253,033	1.194	$3,885,146	$34.16
Prof - Maternity	$176,632		$176,632	$1,876		$178,509	1.194	$213,195	$1.87
Prof - Other	$4,482,021		$4,482,021	$47,988		$4,530,009	1.194	$5,410,258	$47.57
Prof - Psych	$1,246,290		$1,246,290	$5,711	$45,811	$1,297,811	1.194	$1,549,996	$13.63
Prof - Specialist	$598,413		$598,413	$6,356		$604,769	1.194	$722,284	$6.35
Prof - Vision	$195,123		$195,123	$681		$195,805	1.194	$233,852	$2.06
Radiology	$257,432		$257,432	$3,295		$260,727	1.104	$287,897	$2.53
Transportation/Ambulance	$479,156		$479,156	$1,752	$1,897	$482,805	1.104	$533,116	$4.69
Provider Incentive Payment Adjustment									$3.64
Total	$46,501,640	($100,285)	$46,401,355	$459,961	($337,866)	$46,523,449		$52,556,735	$465.72
Admin Cost Adjustment									$38.53
Medallion II Capitation Rate									**$504.25**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Female									
Tidewater	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$1,195,137		$1,195,137	$15,297		$1,210,434	1.104	$1,336,569	$22.98
FQHC / RHC	$211,422		$211,422	$2,246		$213,668	1.194	$255,187	$4.39
Home Health	$129,423		$129,423	$1,890		$131,313	1.032	$135,459	$2.33
IP - Maternity	$1,062,469	$22,094	$1,084,563	$29,323	$71,511	$1,185,397	1.078	$1,277,721	$21.97
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$6,932,573	$143,870	$7,076,444	$190,946	$466,561	$7,733,950	1.078	$8,336,307	$143.35
IP - Psych	$1,804,014		$1,804,014	$7,499	($71,708)	$1,739,805	0.949	$1,651,661	$28.40
Lab	$293,650		$293,650	$2,972		$296,622	1.104	$327,532	$5.63
OP - Emergency Room & Related	$5,841,545		$5,841,545	$85,325	($116,229)	$5,810,641	1.032	$5,994,107	$103.07
OP - Other	$5,353,000		$5,353,000	$78,189	($135,599)	$5,295,590	1.032	$5,462,793	$93.94
Pharmacy	$13,772,601		$13,772,601	$1,240	($426,781)	$13,347,061	1.215	$16,222,740	$278.96
Prof - Anesthesia	$220,813		$220,813	$2,345		$223,158	1.194	$266,521	$4.58
Prof - Child EPSDT	$91,233		$91,233	$969		$92,202	1.194	$110,118	$1.89
Prof - Evaluation & Management	$3,565,950		$3,565,950	$37,793		$3,603,744	1.194	$4,304,005	$74.01
Prof - Maternity	$431,200		$431,200	$4,580		$435,780	1.194	$520,458	$8.95
Prof - Other	$2,155,555		$2,155,555	$23,083		$2,178,638	1.194	$2,601,980	$44.74
Prof - Psych	$701,961		$701,961	$3,777		$705,738	1.194	$842,874	$14.49
Prof - Specialist	$1,044,894		$1,044,894	$11,098		$1,055,992	1.194	$1,261,187	$21.69
Prof - Vision	$98,997		$98,997	$683		$99,680	1.194	$119,049	$2.05
Radiology	$666,605		$666,605	$8,532		$675,137	1.104	$745,490	$12.82
Transportation/Ambulance	$553,461		$553,461	$4,848	$2,202	$560,512	1.104	$618,921	$10.64
Provider Incentive Payment Adjustment									$7.09
Total	$46,126,503	$165,965	$46,292,468	$512,637	($210,042)	$46,595,062		$52,390,679	$907.97
Admin Cost Adjustment									$75.12
Medallion II Capitation Rate									**$983.09**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Male									
Tidewater	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$1,110,826		$1,110,826	$14,218		$1,125,044	1.104	$1,242,280	$26.22
FQHC / RHC	$211,022		$211,022	$2,241		$213,264	1.194	$254,704	$5.38
Home Health	$278,658		$278,658	$4,070		$282,728	1.032	$291,655	$6.16
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$6,397,230	$128,910	$6,526,140	$176,275	$430,290	$7,132,705	1.078	$7,688,233	$162.29
IP - Psych	$1,689,687		$1,689,687	$8,768	($67,233)	$1,631,222	0.949	$1,548,579	$32.69
Lab	$131,173		$131,173	$1,059		$132,231	1.104	$146,011	$3.08
OP - Emergency Room & Related	$2,864,280		$2,864,280	$41,837	($56,990)	$2,849,127	1.032	$2,939,085	$62.04
OP - Other	$3,357,591		$3,357,591	$49,043	($85,052)	$3,321,581	1.032	$3,426,457	$72.33
Pharmacy	$10,022,966		$10,022,966	$903	($310,588)	$9,713,280	1.215	$11,806,047	$249.22
Prof - Anesthesia	$93,296		$93,296	$991		$94,287	1.194	$112,608	$2.38
Prof - Child EPSDT	$49,939		$49,939	$530		$50,470	1.194	$60,277	$1.27
Prof - Evaluation & Management	$1,976,781		$1,976,781	$20,923		$1,997,704	1.194	$2,385,888	$50.36
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$2,451,294		$2,451,294	$26,171		$2,477,465	1.194	$2,958,873	$62.46
Prof - Psych	$471,826		$471,826	$2,245		$474,070	1.194	$566,189	$11.95
Prof - Specialist	$536,326		$536,326	$5,697		$542,023	1.194	$647,346	$13.67
Prof - Vision	$70,944		$70,944	$441		$71,385	1.194	$85,256	$1.80
Radiology	$230,448		$230,448	$2,950		$233,397	1.104	$257,719	$5.44
Transportation/Ambulance	$423,582		$423,582	$3,637	$1,685	$428,904	1.104	$473,598	$10.00
Provider Incentive Payment Adjustment									$6.13
Total	$32,367,867	$128,910	$32,496,777	$361,999	($87,889)	$32,770,887		$36,890,806	$784.88
Admin Cost Adjustment									$64.94
Medallion II Capitation Rate									**$849.82**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 45 and Over									
Tidewater	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$5,750,052		$5,750,052	$73,597		$5,823,649	1.104	$6,430,507	$40.91
FQHC / RHC	$1,380,722		$1,380,722	$14,666		$1,395,388	1.194	$1,666,533	$10.60
Home Health	$1,332,738		$1,332,738	$19,467		$1,352,205	1.032	$1,394,899	$8.87
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$42,277,654	$99,205	$42,376,858	$1,165,846	$2,795,410	$46,338,114	1.078	$49,947,147	$317.73
IP - Psych	$4,244,541		$4,244,541	$15,616	($168,637)	$4,091,520	0.949	$3,884,230	$24.71
Lab	$870,744		$870,744	$9,058		$879,802	1.104	$971,483	$6.18
OP - Emergency Room & Related	$12,837,790		$12,837,790	$187,515	($255,433)	$12,769,873	1.032	$13,173,069	$83.80
OP - Other	$27,101,244		$27,101,244	$395,855	($686,510)	$26,810,588	1.032	$27,657,107	$175.93
Pharmacy	$60,127,130		$60,127,130	$5,415	($1,863,199)	$58,269,346	1.215	$70,823,718	$450.53
Prof - Anesthesia	$772,829		$772,829	$8,209		$781,037	1.194	$932,805	$5.93
Prof - Child EPSDT	$170,543		$170,543	$1,811		$172,355	1.194	$205,846	$1.31
Prof - Evaluation & Management	$12,775,194		$12,775,194	$135,458		$12,910,652	1.194	$15,419,385	$98.09
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$11,185,212		$11,185,212	$119,277		$11,304,490	1.194	$13,501,121	$85.88
Prof - Psych	$1,530,263		$1,530,263	$6,808		$1,537,071	1.194	$1,835,747	$11.68
Prof - Specialist	$5,165,393		$5,165,393	$54,865		$5,220,258	1.194	$6,234,632	$39.66
Prof - Vision	$563,791		$563,791	$4,971		$568,763	1.194	$679,282	$4.32
Radiology	$2,760,945		$2,760,945	$35,338		$2,796,284	1.104	$3,087,673	$19.64
Transportation/Ambulance	$1,587,999		$1,587,999	$14,349	$6,320	$1,608,668	1.104	$1,776,300	$11.30
Provider Incentive Payment Adjustment									$10.99
Total	$192,434,783	$99,205	$192,533,988	$2,268,121	($172,049)	$194,630,059		$219,621,482	$1,408.06
Admin Cost Adjustment									$116.50
Medallion II Capitation Rate									**$1,524.56**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age Under 1									
Statewide	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$101,675		$101,675	$1,301	($1,642)	$101,334	1.104	$111,894	$68.99
FQHC / RHC	$8,523		$8,523	$91		$8,614	1.194	$10,287	$6.34
Home Health	$17,144		$17,144	$250		$17,395	1.032	$17,944	$11.06
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$737,235	($39,025)	$698,210	$20,347	$46,131	$764,688	1.078	$824,245	$508.17
IP - Other	$1,346,456	($293,526)	$1,052,929	$37,159	$69,983	$1,160,072	1.078	$1,250,424	$770.91
IP - Psych	$17,377		$17,377		($688)	$16,689	0.949	$15,843	$9.77
Lab	$7,955		$7,955	$92		$8,046	1.104	$8,885	$5.48
OP - Emergency Room & Related	$64,316		$64,316	$939	($1,280)	$63,976	1.032	$65,996	$40.69
OP - Other	$373,763		$373,763	$5,459	($9,468)	$369,754	1.032	$381,429	$235.16
Pharmacy	$639,089		$639,089	$58	($19,804)	$619,342	1.215	$752,782	$464.11
Prof - Anesthesia	$26,292		$26,292	$279		$26,572	1.194	$31,735	$19.57
Prof - Child EPSDT	$7,085		$7,085	$75		$7,160	1.194	$8,551	$5.27
Prof - Evaluation & Management	$398,911		$398,911	$4,234		$403,144	1.194	$481,481	$296.84
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$294,876		$294,876	$3,133		$298,008	1.194	$355,916	$219.43
Prof - Psych	$6,265		$6,265	$3		$6,268	1.194	$7,486	$4.62
Prof - Specialist	$96,356		$96,356	$1,023		$97,379	1.194	$116,301	$71.70
Prof - Vision	$11,108		$11,108	$99		$11,207	1.194	$13,385	$8.25
Radiology	$11,628		$11,628	$149		$11,777	1.104	$13,004	$8.02
Transportation/Ambulance	$19,904		$19,904	$204	$79	$20,188	1.104	$22,291	$13.74
Provider Incentive Payment Adjustment									$21.78
Total	$4,185,956	($332,551)	$3,853,405	$74,896	$83,312	$4,011,612		$4,489,879	$2,789.90
Admin Cost Adjustment									$230.83
Medallion II Capitation Rate									**$3,020.73**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 1-5									
Roanoke/Alleghany	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$336,367		$336,367	$4,305	($5,432)	$335,240	1.104	$370,174	$45.13
FQHC / RHC	$4,148		$4,148	$44		$4,192	1.194	$5,007	$0.61
Home Health	$19,345		$19,345	$283		$19,628	1.032	$20,247	$2.47
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$1,067,706	$22,697	$1,090,403	$29,468	$71,895	$1,191,766	1.078	$1,284,586	$156.60
IP - Psych	$7,123		$7,123		($282)	$6,841	0.949	$6,494	$0.79
Lab	$49,648		$49,648	$600		$50,247	1.104	$55,483	$6.76
OP - Emergency Room & Related	$118,333		$118,333	$1,728	($2,354)	$117,707	1.032	$121,423	$14.80
OP - Other	$1,387,944		$1,387,944	$20,273	($35,158)	$1,373,059	1.032	$1,416,412	$172.67
Pharmacy	$1,168,354		$1,168,354	$105	($36,205)	$1,132,255	1.215	$1,376,204	$167.77
Prof - Anesthesia	$35,864		$35,864	$381		$36,245	1.194	$43,288	$5.28
Prof - Child EPSDT	$10,228		$10,228	$109		$10,337	1.194	$12,345	$1.50
Prof - Evaluation & Management	$465,134		$465,134	$4,908		$470,041	1.194	$561,378	$68.44
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$785,807		$785,807	$8,322		$794,129	1.194	$948,440	$115.62
Prof - Psych	$25,051		$25,051	$240		$25,291	1.194	$30,206	$3.68
Prof - Specialist	$99,037		$99,037	$1,052		$100,089	1.194	$119,538	$14.57
Prof - Vision	$33,554		$33,554	$243		$33,797	1.194	$40,365	$4.92
Radiology	$21,199		$21,199	$271		$21,471	1.104	$23,708	$2.89
Transportation/Ambulance	$57,919		$57,919	$573	$231	$58,722	1.104	$64,842	$7.90
Provider Incentive Payment Adjustment									$6.24
Total	$5,692,760	$22,697	$5,715,457	$72,905	($7,306)	$5,781,057		$6,500,139	$798.65
Admin Cost Adjustment									$66.08
Medallion II Capitation Rate									**$864.72**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 6-20									
Roanoke/Alleghany	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$510,315		$510,315	$6,532	($5,217)	$511,630	1.104	$564,945	$18.73
FQHC / RHC	$39,439		$39,439	$419		$39,858	1.194	$47,603	$1.58
Home Health	$17,094		$17,094	$250		$17,343	1.032	$17,891	$0.59
IP - Maternity	$46,117	($2,995)	$43,122	$1,273	$2,850	$47,245	1.078	$50,924	$1.69
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$1,744,236	($113,273)	$1,630,963	$48,140	$107,797	$1,786,900	1.078	$1,926,073	$63.86
IP - Psych	$539,348		$539,348	$4,423	($21,525)	$522,246	0.949	$495,787	$16.44
Lab	$171,111		$171,111	$2,065		$173,177	1.104	$191,223	$6.34
OP - Emergency Room & Related	$418,212		$418,212	$6,109	($8,321)	$415,999	1.032	$429,134	$14.23
OP - Other	$1,127,073		$1,127,073	$16,463	($28,550)	$1,114,985	1.032	$1,150,190	$38.13
Pharmacy	$5,044,270		$5,044,270	$454	($156,310)	$4,888,414	1.215	$5,941,644	$196.98
Prof - Anesthesia	$46,889		$46,889	$498		$47,387	1.194	$56,595	$1.88
Prof - Child EPSDT	$11,711		$11,711	$124		$11,836	1.194	$14,135	$0.47
Prof - Evaluation & Management	$908,387		$908,387	$9,538		$917,925	1.194	$1,096,292	$36.35
Prof - Maternity	$27,499		$27,499	$292		$27,791	1.194	$33,191	$1.10
Prof - Other	$1,785,800		$1,785,800	$18,887		$1,804,687	1.194	$2,155,364	$71.46
Prof - Psych	$363,745		$363,745	$3,613	$13,442	$380,800	1.194	$454,795	$15.08
Prof - Specialist	$164,025		$164,025	$1,742		$165,767	1.194	$197,978	$6.56
Prof - Vision	$62,518		$62,518	$258		$62,776	1.194	$74,975	$2.49
Radiology	$73,597		$73,597	$942		$74,539	1.104	$82,306	$2.73
Transportation/Ambulance	$232,926		$232,926	$2,317	$928	$236,171	1.104	$260,782	$8.65
Provider Incentive Payment Adjustment									$3.98
Total	$13,334,310	($116,267)	$13,218,043	$124,339	($94,906)	$13,247,475		$15,241,825	$509.29
Admin Cost Adjustment									$42.14
Medallion II Capitation Rate									**$551.43**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Female									
Roanoke/Alleghany	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$496,712		$496,712	$6,358		$503,070	1.104	$555,493	$22.39
FQHC / RHC	$67,874		$67,874	$721		$68,595	1.194	$81,925	$3.30
Home Health	$111,137		$111,137	$1,623		$112,760	1.032	$116,320	$4.69
IP - Maternity	$278,181	$5,913	$284,095	$7,678	$18,732	$310,504	1.078	$334,688	$13.49
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$3,026,573	$64,338	$3,090,911	$83,532	$203,797	$3,378,240	1.078	$3,641,353	$146.76
IP - Psych	$1,057,337		$1,057,337	$9,457	($42,229)	$1,024,565	0.949	$972,657	$39.20
Lab	$479,546		$479,546	$6,033		$485,579	1.104	$536,179	$21.61
OP - Emergency Room & Related	$1,371,905		$1,371,905	$20,039	($27,297)	$1,364,647	1.032	$1,407,734	$56.74
OP - Other	$1,831,194		$1,831,194	$26,747	($46,387)	$1,811,555	1.032	$1,868,753	$75.32
Pharmacy	$7,586,258		$7,586,258	$683	($235,080)	$7,351,861	1.215	$8,935,850	$360.16
Prof - Anesthesia	$72,947		$72,947	$775		$73,722	1.194	$88,047	$3.55
Prof - Child EPSDT	$25,984		$25,984	$276		$26,260	1.194	$31,363	$1.26
Prof - Evaluation & Management	$1,513,270		$1,513,270	$15,981		$1,529,251	1.194	$1,826,407	$73.61
Prof - Maternity	$143,239		$143,239	$1,521		$144,760	1.194	$172,889	$6.97
Prof - Other	$497,076		$497,076	$5,211		$502,287	1.194	$599,888	$24.18
Prof - Psych	$340,141		$340,141	$3,427		$343,568	1.194	$410,328	$16.54
Prof - Specialist	$493,927		$493,927	$5,246		$499,174	1.194	$596,170	$24.03
Prof - Vision	$52,962		$52,962	$236		$53,197	1.194	$63,534	$2.56
Radiology	$291,919		$291,919	$3,736		$295,656	1.104	$326,465	$13.16
Transportation/Ambulance	$440,044		$440,044	$5,091	$1,756	$446,891	1.104	$493,459	$19.89
Provider Incentive Payment Adjustment									$7.31
Total	$20,178,227	$70,252	$20,248,478	$204,371	($126,708)	$20,326,141		$23,059,504	$936.72
Admin Cost Adjustment									$77.50
Medallion II Capitation Rate									**$1,014.22**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 21-44 Male									
Roanoke/Alleghany	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$340,433		$340,433	$4,357		$344,790	1.104	$380,719	$21.80
FQHC / RHC	$25,303		$25,303	$269		$25,572	1.194	$30,541	$1.75
Home Health	$77,964		$77,964	$1,139		$79,103	1.032	$81,601	$4.67
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$2,037,238	$43,307	$2,080,545	$56,227	$137,179	$2,273,951	1.078	$2,451,057	$140.32
IP - Psych	$551,703		$551,703	$4,805	($22,029)	$534,479	0.949	$507,400	$29.05
Lab	$159,173		$159,173	$1,964		$161,137	1.104	$177,928	$10.19
OP - Emergency Room & Related	$575,060		$575,060	$8,400	($11,442)	$572,018	1.032	$590,079	$33.78
OP - Other	$739,415		$739,415	$10,800	($18,730)	$731,485	1.032	$754,581	$43.20
Pharmacy	$4,388,487		$4,388,487	$395	($135,989)	$4,252,893	1.215	$5,169,196	$295.92
Prof - Anesthesia	$28,422		$28,422	$302		$28,723	1.194	$34,305	$1.96
Prof - Child EPSDT	$5,216		$5,216	$55		$5,272	1.194	$6,296	$0.36
Prof - Evaluation & Management	$636,564		$636,564	$6,697		$643,261	1.194	$768,257	$43.98
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$294,275		$294,275	$3,079		$297,354	1.194	$355,134	$20.33
Prof - Psych	$152,382		$152,382	$1,471		$153,854	1.194	$183,750	$10.52
Prof - Specialist	$236,454		$236,454	$2,512		$238,965	1.194	$285,400	$16.34
Prof - Vision	$32,785		$32,785	$121		$32,905	1.194	$39,299	$2.25
Radiology	$98,903		$98,903	$1,266		$100,169	1.104	$110,607	$6.33
Transportation/Ambulance	$225,557		$225,557	$2,501	$900	$228,958	1.104	$252,816	$14.47
Provider Incentive Payment Adjustment									$5.49
Total	$10,605,333	$43,307	$10,648,640	$106,360	($50,112)	$10,704,888		$12,178,966	$702.70
Admin Cost Adjustment									$58.14
Medallion II Capitation Rate									**$760.84**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4b

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD non-ALTC)

Age 45 and Over									
Roanoke/Alleghany	Total Base Claims FY11-12	Base Claims Redistribution FY11-12	Total Redistributed Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type									
DME/Supplies	$1,586,988		$1,586,988	$20,312		$1,607,301	1.104	$1,774,791	$27.96
FQHC / RHC	$251,784		$251,784	$2,674		$254,459	1.194	$303,904	$4.79
Home Health	$556,970		$556,970	$8,135		$565,106	1.032	$582,948	$9.18
IP - Maternity	$0	$0	$0			$0	1.078	$0	$0.00
IP - Newborn	$0	$0	$0			$0	1.078	$0	$0.00
IP - Other	$19,606,441	$353,633	$19,960,075	$541,126	$1,316,162	$21,817,363	1.078	$23,516,603	$370.43
IP - Psych	$1,763,881		$1,763,881	$15,344	($70,430)	$1,708,795	0.949	$1,622,222	$25.55
Lab	$1,121,183		$1,121,183	$14,083		$1,135,265	1.104	$1,253,567	$19.75
OP - Emergency Room & Related	$2,507,890		$2,507,890	$36,632	($49,899)	$2,494,622	1.032	$2,573,388	$40.54
OP - Other	$6,129,995		$6,129,995	$89,538	($155,281)	$6,064,252	1.032	$6,255,725	$98.54
Pharmacy	$25,045,500		$25,045,500	$2,255	($776,101)	$24,271,654	1.215	$29,501,083	$464.69
Prof - Anesthesia	$211,564		$211,564	$2,247		$213,812	1.194	$255,358	$4.02
Prof - Child EPSDT	$37,606		$37,606	$399		$38,005	1.194	$45,390	$0.71
Prof - Evaluation & Management	$4,250,405		$4,250,405	$44,911		$4,295,316	1.194	$5,129,960	$80.81
Prof - Maternity	$0		$0			$0	1.194	$0	$0.00
Prof - Other	$2,651,821		$2,651,821	$27,992		$2,679,813	1.194	$3,200,541	$50.41
Prof - Psych	$439,328		$439,328	$4,189		$443,517	1.194	$529,699	$8.34
Prof - Specialist	$1,922,086		$1,922,086	$20,416		$1,942,502	1.194	$2,319,959	$36.54
Prof - Vision	$204,026		$204,026	$1,334		$205,360	1.194	$245,265	$3.86
Radiology	$788,934		$788,934	$10,098		$799,032	1.104	$882,296	$13.90
Transportation/Ambulance	$1,159,849		$1,159,849	$13,460	$4,628	$1,177,937	1.104	$1,300,685	$20.49
Provider Incentive Payment Adjustment									$10.08
Total	$70,236,251	$353,633	$70,589,884	$855,147	$269,078	$71,714,109		$81,293,381	$1,290.59
Admin Cost Adjustment									$106.78
Medallion II Capitation Rate									**$1,397.37**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age Under 1							
Statewide	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$11,008	$111	($126)	$10,993	1.017	$11,181	$447.23
FQHC / RHC	$0			$0	1.017	$0	$0.00
Home Health	$0			$0	1.017	$0	$0.00
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$251,133	$2,534	$16,356	$270,024	1.017	$274,627	$10,985.08
IP - Psych	$455		($19)	$436	1.017	$444	$17.76
Lab	$142	$1		$143	1.017	$146	$5.82
OP - Emergency Room & Related	$207	$2	($3)	$206	1.017	$210	$8.38
OP - Other	$6,354	$64	($152)	$6,266	1.017	$6,373	$254.92
Pharmacy	$26,228	$265	($805)	$25,688	1.017	$26,126	$1,045.03
Prof - Anesthesia	$416	$4		$421	1.017	$428	$17.11
Prof - Child EPSDT	$188	$2		$190	1.017	$193	$7.73
Prof - Evaluation & Management	$27,555	$278		$27,833	1.017	$28,307	$1,132.29
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$39,873	$402		$40,275	1.017	$40,962	$1,638.47
Prof - Psych	$157			$157	1.017	$159	$6.38
Prof - Specialist	$1,867	$19		$1,886	1.017	$1,918	$76.73
Prof - Vision	$99	$1		$100	1.017	$102	$4.08
Radiology	$788	$8		$796	1.017	$809	$32.38
Transportation/Ambulance	$73		$0	$74	1.017	$75	$2.99
Provider Incentive Payment Adjustment							$17.20
Total	$366,544	$3,692	$15,251	$385,488		$392,060	$15,699.58
Admin Cost Adjustment							$1,124.79
Medallion II Capitation Rate							**$16,824.37**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 1-5							
Northern Virginia	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$528,072	$5,329	($6,046)	$527,355	1.017	$536,346	$436.41
FQHC / RHC	$0			$0	1.017	$0	$0.00
Home Health	$99,758	$1,007		$100,765	1.017	$102,483	$83.39
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$543,333	$5,483	$35,386	$584,203	1.017	$594,163	$483.45
IP - Psych	$0			$0	1.017	$0	$0.00
Lab	$8,667	$79		$8,746	1.017	$8,895	$7.24
OP - Emergency Room & Related	$78,665	$794	($1,134)	$78,325	1.017	$79,660	$64.82
OP - Other	$547,420	$5,525	($13,128)	$539,817	1.017	$549,020	$446.72
Pharmacy	$459,447	$4,637	($14,095)	$449,989	1.017	$457,661	$372.38
Prof - Anesthesia	$18,788	$190		$18,978	1.017	$19,301	$15.70
Prof - Child EPSDT	$1,851	$19		$1,870	1.017	$1,902	$1.55
Prof - Evaluation & Management	$176,932	$1,783		$178,715	1.017	$181,762	$147.89
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$1,306,358	$13,184		$1,319,541	1.017	$1,342,038	$1,091.98
Prof - Psych	$5,465	$55		$5,520	1.017	$5,614	$4.57
Prof - Specialist	$35,750	$361		$36,111	1.017	$36,727	$29.88
Prof - Vision	$6,528	$53		$6,580	1.017	$6,693	$5.45
Radiology	$12,139	$123		$12,261	1.017	$12,470	$10.15
Transportation/Ambulance	$8,149	$51	$17	$8,218	1.017	$8,358	$6.80
Provider Incentive Payment Adjustment							$3.52
Total	$3,837,322	$38,671	$1,001	$3,876,995		$3,943,092	$3,211.89
Admin Cost Adjustment							$230.12
Medallion II Capitation Rate							**$3,442.01**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 6-20							
Northern Virginia	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$718,815	$7,254	($9,362)	$716,708	1.017	$728,927	$260.05
FQHC / RHC	$3,489	$35		$3,524	1.017	$3,584	$1.28
Home Health	$2,690	$27		$2,717	1.017	$2,763	$0.99
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$1,018,356	$10,277	$66,324	$1,094,957	1.017	$1,113,624	$397.30
IP - Psych	$17,845	$179	($743)	$17,281	1.017	$17,576	$6.27
Lab	$7,272	$56		$7,328	1.017	$7,453	$2.66
OP - Emergency Room & Related	$101,907	$1,028	($1,469)	$101,467	1.017	$103,197	$36.82
OP - Other	$761,032	$7,680	($18,250)	$750,462	1.017	$763,256	$272.30
Pharmacy	$842,834	$8,506	($25,856)	$825,483	1.017	$839,557	$299.52
Prof - Anesthesia	$22,626	$228		$22,854	1.017	$23,244	$8.29
Prof - Child EPSDT	$1,214	$12		$1,226	1.017	$1,247	$0.44
Prof - Evaluation & Management	$217,378	$2,188		$219,566	1.017	$223,309	$79.67
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$690,917	$6,972		$697,889	1.017	$709,787	$253.22
Prof - Psych	$13,337	$134		$13,472	1.017	$13,701	$4.89
Prof - Specialist	$54,665	$552		$55,217	1.017	$56,158	$20.04
Prof - Vision	$9,211	$63		$9,274	1.017	$9,432	$3.37
Radiology	$14,216	$143		$14,359	1.017	$14,604	$5.21
Transportation/Ambulance	$26,278	$197	$56	$26,531	1.017	$26,983	$9.63
Provider Incentive Payment Adjustment							$1.82
Total	$4,524,082	$45,533	$10,700	$4,580,315		$4,658,403	$1,663.76
Admin Cost Adjustment							$119.20
Medallion II Capitation Rate							**$1,782.96**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Female							
Northern Virginia	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$90,883	$917		$91,800	1.017	$93,365	$79.32
FQHC / RHC	$934	$9		$943	1.017	$959	$0.82
Home Health	$14,690	$148		$14,839	1.017	$15,092	$12.82
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$276,090	$2,786	$17,981	$296,858	1.017	$301,919	$256.52
IP - Psych	$11,670	$117	($486)	$11,301	1.017	$11,494	$9.77
Lab	$3,700	$31		$3,730	1.017	$3,794	$3.22
OP - Emergency Room & Related	$75,622	$763	($1,090)	$75,295	1.017	$76,579	$65.06
OP - Other	$48,081	$485	($1,153)	$47,414	1.017	$48,222	$40.97
Pharmacy	$564,130	$5,693	($17,306)	$552,517	1.017	$561,937	$477.43
Prof - Anesthesia	$3,514	$35		$3,550	1.017	$3,610	$3.07
Prof - Child EPSDT	$1,302	$13		$1,316	1.017	$1,338	$1.14
Prof - Evaluation & Management	$78,159	$787		$78,946	1.017	$80,291	$68.22
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$36,394	$367		$36,762	1.017	$37,388	$31.77
Prof - Psych	$8,653	$87		$8,740	1.017	$8,889	$7.55
Prof - Specialist	$13,288	$134		$13,422	1.017	$13,651	$11.60
Prof - Vision	$2,630	$19		$2,649	1.017	$2,694	$2.29
Radiology	$9,221	$93		$9,314	1.017	$9,473	$8.05
Transportation/Ambulance	$8,113	$53	$17	$8,183	1.017	$8,323	$7.07
Provider Incentive Payment Adjustment							$1.19
Total	$1,247,075	$12,539	($2,037)	$1,257,578		$1,279,018	$1,087.87
Admin Cost Adjustment							$77.94
Medallion II Capitation Rate							**$1,165.81**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Male							
Northern Virginia	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$72,888	$736		$73,623	1.017	$74,878	$55.92
FQHC / RHC	$0			$0	1.017	$0	$0.00
Home Health	$6,615	$67		$6,682	1.017	$6,796	$5.08
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$331,535	$3,346	$21,592	$356,473	1.017	$362,550	$270.76
IP - Psych	$7,489	$76	($312)	$7,252	1.017	$7,376	$5.51
Lab	$2,230	$15		$2,245	1.017	$2,283	$1.70
OP - Emergency Room & Related	$38,814	$392	($560)	$38,646	1.017	$39,305	$29.35
OP - Other	$33,877	$342	($812)	$33,406	1.017	$33,976	$25.37
Pharmacy	$311,767	$3,146	($9,564)	$305,349	1.017	$310,555	$231.93
Prof - Anesthesia	$3,060	$31		$3,091	1.017	$3,144	$2.35
Prof - Child EPSDT	$270	$3		$272	1.017	$277	$0.21
Prof - Evaluation & Management	$77,547	$780		$78,327	1.017	$79,663	$59.49
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$13,129	$132		$13,261	1.017	$13,487	$10.07
Prof - Psych	$9,507	$96		$9,603	1.017	$9,767	$7.29
Prof - Specialist	$9,330	$94		$9,424	1.017	$9,584	$7.16
Prof - Vision	$1,695	$8		$1,702	1.017	$1,731	$1.29
Radiology	$7,742	$78		$7,820	1.017	$7,954	$5.94
Transportation/Ambulance	$10,558	$75	$23	$10,655	1.017	$10,837	$8.09
Provider Incentive Payment Adjustment							$0.80
Total	$938,051	$9,415	$10,367	$957,832		$974,162	$728.33
Admin Cost Adjustment							$52.18
Medallion II Capitation Rate							**$780.51**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 45 and Over							
Northern Virginia	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$330,545	$3,336		$333,881	1.017	$339,574	$112.78
FQHC / RHC	$1,167	$12		$1,178	1.017	$1,198	$0.40
Home Health	$171,785	$1,734		$173,518	1.017	$176,477	$58.61
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$2,152,100	$21,719	$140,163	$2,313,982	1.017	$2,353,432	$781.61
IP - Psych	$23,195	$234	($966)	$22,463	1.017	$22,846	$7.59
Lab	$19,082	$176		$19,258	1.017	$19,586	$6.50
OP - Emergency Room & Related	$213,627	$2,156	($3,080)	$212,703	1.017	$216,330	$71.85
OP - Other	$418,308	$4,222	($10,031)	$412,498	1.017	$419,531	$139.33
Pharmacy	$1,465,166	$14,787	($44,948)	$1,435,004	1.017	$1,459,469	$484.71
Prof - Anesthesia	$21,879	$221		$22,100	1.017	$22,477	$7.46
Prof - Child EPSDT	$1,359	$14		$1,373	1.017	$1,396	$0.46
Prof - Evaluation & Management	$454,265	$4,579		$458,845	1.017	$466,667	$154.99
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$178,489	$1,801		$180,290	1.017	$183,364	$60.90
Prof - Psych	$16,469	$166		$16,635	1.017	$16,919	$5.62
Prof - Specialist	$132,055	$1,333		$133,388	1.017	$135,662	$45.06
Prof - Vision	$21,370	$196		$21,566	1.017	$21,934	$7.28
Radiology	$74,965	$757		$75,722	1.017	$77,012	$25.58
Transportation/Ambulance	$38,735	$318	$83	$39,136	1.017	$39,803	$13.22
Provider Incentive Payment Adjustment							$2.18
Total	$5,734,562	$57,759	$81,221	$5,873,541		$5,973,677	$1,986.13
Admin Cost Adjustment							$142.30
Medallion II Capitation Rate							**$2,128.42**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age Under 1							
Statewide	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$11,008	$111	($126)	$10,993	1.017	$11,181	$447.23
FQHC / RHC	$0			$0	1.017	$0	$0.00
Home Health	$0			$0	1.017	$0	$0.00
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$251,133	$2,534	$16,356	$270,024	1.017	$274,627	$10,985.08
IP - Psych	$455		($19)	$436	1.017	$444	$17.76
Lab	$142	$1		$143	1.017	$146	$5.82
OP - Emergency Room & Related	$207	$2	($3)	$206	1.017	$210	$8.38
OP - Other	$6,354	$64	($152)	$6,266	1.017	$6,373	$254.92
Pharmacy	$26,228	$265	($805)	$25,688	1.017	$26,126	$1,045.03
Prof - Anesthesia	$416	$4		$421	1.017	$428	$17.11
Prof - Child EPSDT	$188	$2		$190	1.017	$193	$7.73
Prof - Evaluation & Management	$27,555	$278		$27,833	1.017	$28,307	$1,132.29
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$39,873	$402		$40,275	1.017	$40,962	$1,638.47
Prof - Psych	$157			$157	1.017	$159	$6.38
Prof - Specialist	$1,867	$19		$1,886	1.017	$1,918	$76.73
Prof - Vision	$99	$1		$100	1.017	$102	$4.08
Radiology	$788	$8		$796	1.017	$809	$32.38
Transportation/Ambulance	$73		$0	$74	1.017	$75	$2.99
Provider Incentive Payment Adjustment							$17.20
Total	$366,544	$3,692	$15,251	$385,488		$392,060	$15,699.58
Admin Cost Adjustment							$1,124.79
Medallion II Capitation Rate							**$16,824.37**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 1-5							
Other MSA	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$134,561	$1,358	($1,541)	$134,378	1.017	$136,669	$208.66
FQHC / RHC	$32,689	$330		$33,019	1.017	$33,582	$51.27
Home Health	$0			$0	1.017	$0	$0.00
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$119,153	$1,203	$7,760	$128,116	1.017	$130,300	$198.93
IP - Psych	$15,084	$42	($624)	$14,502	1.017	$14,749	$22.52
Lab	$3,990	$39		$4,029	1.017	$4,098	$6.26
OP - Emergency Room & Related	$15,952	$161	($230)	$15,883	1.017	$16,154	$24.66
OP - Other	$141,880	$1,432	($3,402)	$139,910	1.017	$142,295	$217.24
Pharmacy	$126,912	$1,281	($3,893)	$124,299	1.017	$126,418	$193.01
Prof - Anesthesia	$7,061	$71		$7,132	1.017	$7,254	$11.07
Prof - Child EPSDT	$477	$5		$482	1.017	$490	$0.75
Prof - Evaluation & Management	$49,493	$498		$49,991	1.017	$50,844	$77.62
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$50,817	$514		$51,331	1.017	$52,206	$79.70
Prof - Psych	$4,787	$10		$4,798	1.017	$4,879	$7.45
Prof - Specialist	$14,898	$150		$15,049	1.017	$15,305	$23.37
Prof - Vision	$2,506	$18		$2,524	1.017	$2,567	$3.92
Radiology	$6,198	$63		$6,261	1.017	$6,367	$9.72
Transportation/Ambulance	$23,901	$225	$51	$24,177	1.017	$24,589	$37.54
Provider Incentive Payment Adjustment							$1.29
Total	$750,361	$7,398	($1,878)	$755,881		$768,767	$1,174.98
Admin Cost Adjustment							$84.18
Medallion II Capitation Rate							**$1,259.16**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 6-20							
Other MSA	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$168,412	$1,700	($2,193)	$167,919	1.017	$170,781	$122.78
FQHC / RHC	$2,095	$21		$2,116	1.017	$2,153	$1.55
Home Health	$3,090	$31		$3,121	1.017	$3,174	$2.28
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$186,730	$1,884	$12,161	$200,776	1.017	$204,199	$146.80
IP - Psych	$72,000	$532	($2,990)	$69,542	1.017	$70,727	$50.85
Lab	$7,260	$70		$7,330	1.017	$7,455	$5.36
OP - Emergency Room & Related	$21,452	$216	($309)	$21,359	1.017	$21,723	$15.62
OP - Other	$126,096	$1,273	($3,024)	$124,345	1.017	$126,465	$90.92
Pharmacy	$332,575	$3,356	($10,203)	$325,728	1.017	$331,281	$238.16
Prof - Anesthesia	$4,157	$42		$4,199	1.017	$4,270	$3.07
Prof - Child EPSDT	$366	$4		$369	1.017	$376	$0.27
Prof - Evaluation & Management	$59,766	$600		$60,366	1.017	$61,395	$44.14
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$194,932	$1,967		$196,900	1.017	$200,257	$143.97
Prof - Psych	$12,339	$57		$12,397	1.017	$12,608	$9.06
Prof - Specialist	$15,972	$161		$16,133	1.017	$16,408	$11.80
Prof - Vision	$4,746	$32		$4,777	1.017	$4,859	$3.49
Radiology	$4,234	$43		$4,277	1.017	$4,350	$3.13
Transportation/Ambulance	$33,382	$304	$72	$33,758	1.017	$34,333	$24.68
Provider Incentive Payment Adjustment							$1.01
Total	$1,249,604	$12,294	($6,486)	$1,255,412		$1,276,815	$918.92
Admin Cost Adjustment							$65.84
Medallion II Capitation Rate							**$984.75**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Female							
Other MSA	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$75,591	$763		$76,354	1.017	$77,655	$120.02
FQHC / RHC	$29,367	$296		$29,663	1.017	$30,169	$46.63
Home Health	$8,682	$88		$8,770	1.017	$8,919	$13.79
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$297,172	$2,999	$19,354	$319,526	1.017	$324,973	$502.28
IP - Psych	$20,970	$94	($868)	$20,195	1.017	$20,540	$31.75
Lab	$11,084	$111		$11,194	1.017	$11,385	$17.60
OP - Emergency Room & Related	$40,300	$407	($581)	$40,126	1.017	$40,810	$63.08
OP - Other	$199,821	$2,017	($4,792)	$197,045	1.017	$200,405	$309.74
Pharmacy	$278,347	$2,809	($8,539)	$272,617	1.017	$277,265	$428.54
Prof - Anesthesia	$3,205	$32		$3,238	1.017	$3,293	$5.09
Prof - Child EPSDT	$1,313	$13		$1,326	1.017	$1,349	$2.08
Prof - Evaluation & Management	$50,433	$508		$50,940	1.017	$51,809	$80.08
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$29,262	$296		$29,558	1.017	$30,062	$46.46
Prof - Psych	$8,575	$46		$8,620	1.017	$8,767	$13.55
Prof - Specialist	$15,943	$161		$16,104	1.017	$16,378	$25.31
Prof - Vision	$1,454	$10		$1,464	1.017	$1,489	$2.30
Radiology	$12,249	$124		$12,372	1.017	$12,583	$19.45
Transportation/Ambulance	$32,427	$310	$70	$32,807	1.017	$33,366	$51.57
Provider Incentive Payment Adjustment							$1.95
Total	$1,116,194	$11,082	$4,644	$1,131,920		$1,151,218	$1,781.27
Admin Cost Adjustment							$127.62
Medallion II Capitation Rate							**$1,908.89**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Male							
Other MSA	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$27,980	$282		$28,263	1.017	$28,745	$37.53
FQHC / RHC	$86,670	$875		$87,545	1.017	$89,037	$116.24
Home Health	$1,902	$19		$1,922	1.017	$1,954	$2.55
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$37,208	$376	$2,423	$40,007	1.017	$40,689	$53.12
IP - Psych	$12,770		($527)	$12,244	1.017	$12,453	$16.26
Lab	$3,927	$38		$3,965	1.017	$4,033	$5.26
OP - Emergency Room & Related	$13,848	$140	($200)	$13,788	1.017	$14,024	$18.31
OP - Other	$44,632	$450	($1,070)	$44,012	1.017	$44,762	$58.44
Pharmacy	$206,223	$2,081	($6,326)	$201,977	1.017	$205,421	$268.17
Prof - Anesthesia	$489	$5		$494	1.017	$502	$0.66
Prof - Child EPSDT	$2,670	$27		$2,696	1.017	$2,742	$3.58
Prof - Evaluation & Management	$18,184	$182		$18,366	1.017	$18,679	$24.39
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$21,122	$214		$21,336	1.017	$21,700	$28.33
Prof - Psych	$7,650	$33		$7,682	1.017	$7,813	$10.20
Prof - Specialist	$2,565	$26		$2,591	1.017	$2,635	$3.44
Prof - Vision	$1,217	$6		$1,224	1.017	$1,244	$1.62
Radiology	$1,793	$18		$1,811	1.017	$1,842	$2.41
Transportation/Ambulance	$6,283	$43	$13	$6,340	1.017	$6,448	$8.42
Provider Incentive Payment Adjustment							$0.72
Total	$497,134	$4,815	($5,686)	$496,263		$504,723	$659.63
Admin Cost Adjustment							$47.26
Medallion II Capitation Rate							**$706.89**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 45 and Over							
Other MSA	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$272,240	$2,747		$274,988	1.017	$279,676	$160.92
FQHC / RHC	$14,236	$144		$14,379	1.017	$14,625	$8.41
Home Health	$90,690	$915		$91,606	1.017	$93,167	$53.61
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$2,002,654	$20,211	$130,430	$2,153,295	1.017	$2,190,005	$1,260.07
IP - Psych	$60,460	$373	($2,508)	$58,325	1.017	$59,319	$34.13
Lab	$43,750	$437		$44,188	1.017	$44,941	$25.86
OP - Emergency Room & Related	$125,633	$1,268	($1,811)	$125,090	1.017	$127,223	$73.20
OP - Other	$759,064	$7,661	($18,203)	$748,521	1.017	$761,283	$438.02
Pharmacy	$1,124,062	$11,344	($34,484)	$1,100,923	1.017	$1,119,692	$644.24
Prof - Anesthesia	$10,411	$105		$10,516	1.017	$10,695	$6.15
Prof - Child EPSDT	$1,152	$12		$1,163	1.017	$1,183	$0.68
Prof - Evaluation & Management	$260,112	$2,621		$262,733	1.017	$267,213	$153.75
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$120,204	$1,214		$121,418	1.017	$123,488	$71.05
Prof - Psych	$17,966	$100		$18,066	1.017	$18,374	$10.57
Prof - Specialist	$91,530	$924		$92,454	1.017	$94,030	$54.10
Prof - Vision	$7,480	$59		$7,539	1.017	$7,668	$4.41
Radiology	$52,763	$532		$53,296	1.017	$54,204	$31.19
Transportation/Ambulance	$119,627	$1,166	$258	$121,051	1.017	$123,114	$70.84
Provider Incentive Payment Adjustment							$3.40
Total	$5,174,036	$51,833	$73,681	$5,299,550		$5,389,900	$3,104.61
Admin Cost Adjustment							$222.43
Medallion II Capitation Rate							**$3,327.04**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age Under 1							
Statewide	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$11,008	$111	($126)	$10,993	1.017	$11,181	$447.23
FQHC / RHC	$0			$0	1.017	$0	$0.00
Home Health	$0			$0	1.017	$0	$0.00
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$251,133	$2,534	$16,356	$270,024	1.017	$274,627	$10,985.08
IP - Psych	$455		($19)	$436	1.017	$444	$17.76
Lab	$142	$1		$143	1.017	$146	$5.82
OP - Emergency Room & Related	$207	$2	($3)	$206	1.017	$210	$8.38
OP - Other	$6,354	$64	($152)	$6,266	1.017	$6,373	$254.92
Pharmacy	$26,228	$265	($805)	$25,688	1.017	$26,126	$1,045.03
Prof - Anesthesia	$416	$4		$421	1.017	$428	$17.11
Prof - Child EPSDT	$188	$2		$190	1.017	$193	$7.73
Prof - Evaluation & Management	$27,555	$278		$27,833	1.017	$28,307	$1,132.29
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$39,873	$402		$40,275	1.017	$40,962	$1,638.47
Prof - Psych	$157			$157	1.017	$159	$6.38
Prof - Specialist	$1,867	$19		$1,886	1.017	$1,918	$76.73
Prof - Vision	$99	$1		$100	1.017	$102	$4.08
Radiology	$788	$8		$796	1.017	$809	$32.38
Transportation/Ambulance	$73		$0	$74	1.017	$75	$2.99
Provider Incentive Payment Adjustment							$17.20
Total	$366,544	$3,692	$15,251	$385,488		$392,060	$15,699.58
Admin Cost Adjustment							$1,124.79
Medallion II Capitation Rate							**$16,824.37**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 1-5							
Richmond/Charlottesville	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$254,874	$2,572	($2,918)	$254,528	1.017	$258,867	$494.97
FQHC / RHC	$0			$0	1.017	$0	$0.00
Home Health	$77,748	$785		$78,533	1.017	$79,872	$152.72
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$151,864	$1,533	$9,891	$163,287	1.017	$166,071	$317.54
IP - Psych	$8,443	$51	($350)	$8,143	1.017	$8,282	$15.84
Lab	$3,583	$34		$3,616	1.017	$3,678	$7.03
OP - Emergency Room & Related	$27,318	$276	($394)	$27,200	1.017	$27,664	$52.89
OP - Other	$296,141	$2,989	($7,102)	$292,028	1.017	$297,007	$567.89
Pharmacy	$151,596	$1,530	($4,651)	$148,476	1.017	$151,007	$288.73
Prof - Anesthesia	$6,986	$71		$7,056	1.017	$7,177	$13.72
Prof - Child EPSDT	$828	$8		$837	1.017	$851	$1.63
Prof - Evaluation & Management	$60,834	$613		$61,447	1.017	$62,495	$119.49
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$90,768	$916		$91,684	1.017	$93,247	$178.29
Prof - Psych	$3,219	$21		$3,240	1.017	$3,295	$6.30
Prof - Specialist	$24,103	$243		$24,346	1.017	$24,761	$47.34
Prof - Vision	$2,189	$16		$2,205	1.017	$2,243	$4.29
Radiology	$3,522	$36		$3,557	1.017	$3,618	$6.92
Transportation/Ambulance	$3,311	$21	$7	$3,339	1.017	$3,396	$6.49
Provider Incentive Payment Adjustment							$2.50
Total	$1,167,329	$11,712	($5,517)	$1,173,524		$1,193,531	$2,284.59
Admin Cost Adjustment							$163.68
Medallion II Capitation Rate							**$2,448.27**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 6-20							
Richmond/Charlottesville	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$566,982	$5,722	($7,384)	$565,319	1.017	$574,957	$195.36
FQHC / RHC	$4,597	$46		$4,644	1.017	$4,723	$1.60
Home Health	$20,883	$211		$21,094	1.017	$21,453	$7.29
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$709,748	$7,163	$46,225	$763,135	1.017	$776,146	$263.73
IP - Psych	$49,729	$53	($2,052)	$47,729	1.017	$48,543	$16.49
Lab	$7,035	$59		$7,094	1.017	$7,215	$2.45
OP - Emergency Room & Related	$82,556	$833	($1,190)	$82,199	1.017	$83,600	$28.41
OP - Other	$607,235	$6,128	($14,562)	$598,801	1.017	$609,010	$206.93
Pharmacy	$729,306	$7,360	($22,374)	$714,293	1.017	$726,470	$246.85
Prof - Anesthesia	$14,988	$151		$15,139	1.017	$15,397	$5.23
Prof - Child EPSDT	$1,563	$16		$1,578	1.017	$1,605	$0.55
Prof - Evaluation & Management	$140,775	$1,416		$142,190	1.017	$144,615	$49.14
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$494,392	$4,992		$499,383	1.017	$507,897	$172.58
Prof - Psych	$34,988	$198		$35,186	1.017	$35,786	$12.16
Prof - Specialist	$47,569	$480		$48,049	1.017	$48,868	$16.60
Prof - Vision	$7,491	$46		$7,537	1.017	$7,666	$2.60
Radiology	$11,136	$112		$11,248	1.017	$11,440	$3.89
Transportation/Ambulance	$22,016	$142	$47	$22,206	1.017	$22,584	$7.67
Provider Incentive Payment Adjustment							$1.36
Total	$3,552,987	$35,129	($1,291)	$3,586,826		$3,647,976	$1,240.90
Admin Cost Adjustment							$88.90
Medallion II Capitation Rate							**$1,329.81**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Female							
Richmond/Charlottesville	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$233,666	$2,358		$236,024	1.017	$240,048	$154.57
FQHC / RHC	$6,380	$64		$6,444	1.017	$6,554	$4.22
Home Health	$49,189	$496		$49,686	1.017	$50,533	$32.54
IP - Maternity	$6,950	$70	$453	$7,472	1.017	$7,600	$4.89
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$789,743	$7,970	$51,435	$849,148	1.017	$863,625	$556.10
IP - Psych	$27,922	$22	($1,152)	$26,793	1.017	$27,249	$17.55
Lab	$7,812	$74		$7,886	1.017	$8,021	$5.16
OP - Emergency Room & Related	$55,790	$563	($804)	$55,548	1.017	$56,495	$36.38
OP - Other	$168,547	$1,701	($4,042)	$166,206	1.017	$169,039	$108.85
Pharmacy	$623,445	$6,292	($19,126)	$610,611	1.017	$621,021	$399.88
Prof - Anesthesia	$10,580	$107		$10,687	1.017	$10,869	$7.00
Prof - Child EPSDT	$6,184	$62		$6,247	1.017	$6,353	$4.09
Prof - Evaluation & Management	$105,935	$1,066		$107,002	1.017	$108,826	$70.07
Prof - Maternity	$1,875	$19		$1,894	1.017	$1,926	$1.24
Prof - Other	$51,680	$523		$52,203	1.017	$53,093	$34.19
Prof - Psych	$19,540	$108		$19,648	1.017	$19,983	$12.87
Prof - Specialist	$39,186	$395		$39,582	1.017	$40,257	$25.92
Prof - Vision	$3,510	$24		$3,534	1.017	$3,594	$2.31
Radiology	$17,045	$172		$17,217	1.017	$17,510	$11.28
Transportation/Ambulance	$22,838	$189	$49	$23,076	1.017	$23,470	$15.11
Provider Incentive Payment Adjustment							$1.65
Total	$2,247,818	$22,277	$26,812	$2,296,908		$2,336,067	$1,505.88
Admin Cost Adjustment							$107.89
Medallion II Capitation Rate							**$1,613.77**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Male							
Richmond/Charlottesville	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$295,713	$2,984		$298,698	1.017	$303,790	$178.07
FQHC / RHC	$177,910	$1,795		$179,705	1.017	$182,769	$107.13
Home Health	$34,673	$350		$35,023	1.017	$35,620	$20.88
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$1,142,756	$11,533	$74,426	$1,228,715	1.017	$1,249,663	$732.51
IP - Psych	$39,638	$91	($1,638)	$38,092	1.017	$38,741	$22.71
Lab	$5,363	$48		$5,411	1.017	$5,503	$3.23
OP - Emergency Room & Related	$51,292	$518	($739)	$51,071	1.017	$51,941	$30.45
OP - Other	$788,558	$7,958	($18,910)	$777,606	1.017	$790,863	$463.58
Pharmacy	$434,731	$4,387	($13,337)	$425,782	1.017	$433,041	$253.83
Prof - Anesthesia	$5,056	$51		$5,107	1.017	$5,194	$3.04
Prof - Child EPSDT	$702	$7		$709	1.017	$721	$0.42
Prof - Evaluation & Management	$104,622	$1,053		$105,675	1.017	$107,477	$63.00
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$71,101	$720		$71,821	1.017	$73,045	$42.82
Prof - Psych	$20,575	$101		$20,676	1.017	$21,029	$12.33
Prof - Specialist	$41,527	$419		$41,946	1.017	$42,661	$25.01
Prof - Vision	$1,552	$5		$1,557	1.017	$1,584	$0.93
Radiology	$11,285	$114		$11,399	1.017	$11,593	$6.80
Transportation/Ambulance	$34,230	$297	$74	$34,600	1.017	$35,190	$20.63
Provider Incentive Payment Adjustment							$2.18
Total	$3,261,285	$32,433	$39,875	$3,333,592		$3,390,425	$1,989.53
Admin Cost Adjustment							$142.54
Medallion II Capitation Rate							**$2,132.07**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 45 and Over							
Richmond/Charlottesville	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$1,040,338	$10,499		$1,050,837	1.017	$1,068,752	$235.05
FQHC / RHC	$47,458	$479		$47,937	1.017	$48,755	$10.72
Home Health	$279,549	$2,821		$282,370	1.017	$287,184	$63.16
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$5,037,645	$50,840	$328,094	$5,416,580	1.017	$5,508,925	$1,211.55
IP - Psych	$152,560	$979	($6,330)	$147,209	1.017	$149,718	$32.93
Lab	$35,861	$344		$36,204	1.017	$36,821	$8.10
OP - Emergency Room & Related	$450,671	$4,548	($6,497)	$448,722	1.017	$456,372	$100.37
OP - Other	$1,594,926	$16,096	($38,248)	$1,572,774	1.017	$1,599,587	$351.79
Pharmacy	$2,513,289	$25,364	($77,103)	$2,461,550	1.017	$2,503,516	$550.59
Prof - Anesthesia	$31,202	$315		$31,517	1.017	$32,054	$7.05
Prof - Child EPSDT	$12,278	$124		$12,402	1.017	$12,614	$2.77
Prof - Evaluation & Management	$719,767	$7,255		$727,022	1.017	$739,416	$162.62
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$753,330	$7,605		$760,935	1.017	$773,908	$170.20
Prof - Psych	$45,192	$263		$45,455	1.017	$46,230	$10.17
Prof - Specialist	$282,987	$2,856		$285,843	1.017	$290,716	$63.94
Prof - Vision	$20,578	$173		$20,751	1.017	$21,105	$4.64
Radiology	$128,818	$1,300		$130,118	1.017	$132,336	$29.10
Transportation/Ambulance	$174,340	$1,642	$375	$176,357	1.017	$179,363	$39.45
Provider Incentive Payment Adjustment							$3.35
Total	$13,320,789	$133,502	$200,292	$13,654,583		$13,887,374	$3,057.53
Admin Cost Adjustment							$219.06
Medallion II Capitation Rate							**$3,276.59**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age Under 1							
Statewide	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$11,008	$111	($126)	$10,993	1.017	$11,181	$447.23
FQHC / RHC	$0			$0	1.017	$0	$0.00
Home Health	$0			$0	1.017	$0	$0.00
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$251,133	$2,534	$16,356	$270,024	1.017	$274,627	$10,985.08
IP - Psych	$455		($19)	$436	1.017	$444	$17.76
Lab	$142	$1		$143	1.017	$146	$5.82
OP - Emergency Room & Related	$207	$2	($3)	$206	1.017	$210	$8.38
OP - Other	$6,354	$64	($152)	$6,266	1.017	$6,373	$254.92
Pharmacy	$26,228	$265	($805)	$25,688	1.017	$26,126	$1,045.03
Prof - Anesthesia	$416	$4		$421	1.017	$428	$17.11
Prof - Child EPSDT	$188	$2		$190	1.017	$193	$7.73
Prof - Evaluation & Management	$27,555	$278		$27,833	1.017	$28,307	$1,132.29
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$39,873	$402		$40,275	1.017	$40,962	$1,638.47
Prof - Psych	$157			$157	1.017	$159	$6.38
Prof - Specialist	$1,867	$19		$1,886	1.017	$1,918	$76.73
Prof - Vision	$99	$1		$100	1.017	$102	$4.08
Radiology	$788	$8		$796	1.017	$809	$32.38
Transportation/Ambulance	$73		$0	$74	1.017	$75	$2.99
Provider Incentive Payment Adjustment							$17.20
Total	$366,544	$3,692	$15,251	$385,488		$392,060	$15,699.58
Admin Cost Adjustment							$1,124.79
Medallion II Capitation Rate							**$16,824.37**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 1-5							
Rural	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$134,453	$1,357	($1,539)	$134,270	1.017	$136,559	$314.65
FQHC / RHC	$2,403	$24		$2,427	1.017	$2,469	$5.69
Home Health	$6,108	$62		$6,170	1.017	$6,275	$14.46
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$383,811	$3,873	$24,997	$412,682	1.017	$419,718	$967.09
IP - Psych	$6,766		($279)	$6,487	1.017	$6,597	$15.20
Lab	$4,235	$42		$4,277	1.017	$4,349	$10.02
OP - Emergency Room & Related	$21,564	$218	($311)	$21,471	1.017	$21,837	$50.32
OP - Other	$181,646	$1,833	($4,356)	$179,123	1.017	$182,177	$419.76
Pharmacy	$158,335	$1,598	($4,857)	$155,076	1.017	$157,719	$363.41
Prof - Anesthesia	$6,872	$69		$6,941	1.017	$7,060	$16.27
Prof - Child EPSDT	$639	$6		$646	1.017	$657	$1.51
Prof - Evaluation & Management	$43,649	$440		$44,088	1.017	$44,840	$103.32
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$45,744	$462		$46,206	1.017	$46,994	$108.28
Prof - Psych	$3,527	$12		$3,539	1.017	$3,599	$8.29
Prof - Specialist	$12,857	$130		$12,987	1.017	$13,208	$30.43
Prof - Vision	$1,170	$6		$1,176	1.017	$1,196	$2.76
Radiology	$7,041	$71		$7,112	1.017	$7,233	$16.67
Transportation/Ambulance	$4,267	$32	$9	$4,308	1.017	$4,381	$10.09
Provider Incentive Payment Adjustment							$2.70
Total	$1,025,086	$10,235	$13,664	$1,048,985		$1,066,868	$2,460.92
Admin Cost Adjustment							$176.31
Medallion II Capitation Rate							**$2,637.23**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 6-20							
Rural	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$294,553	$2,973	($3,836)	$293,689	1.017	$298,696	$205.43
FQHC / RHC	$90,042	$909		$90,951	1.017	$92,501	$63.62
Home Health	$29,811	$301		$30,111	1.017	$30,625	$21.06
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$338,351	$3,415	$22,036	$363,802	1.017	$370,004	$254.47
IP - Psych	$33,161	$91	($1,371)	$31,881	1.017	$32,425	$22.30
Lab	$5,278	$50		$5,328	1.017	$5,418	$3.73
OP - Emergency Room & Related	$17,537	$177	($253)	$17,461	1.017	$17,759	$12.21
OP - Other	$163,308	$1,648	($3,916)	$161,040	1.017	$163,785	$112.64
Pharmacy	$393,719	$3,973	($12,078)	$385,614	1.017	$392,188	$269.73
Prof - Anesthesia	$6,781	$68		$6,850	1.017	$6,966	$4.79
Prof - Child EPSDT	$689	$7		$696	1.017	$708	$0.49
Prof - Evaluation & Management	$68,292	$687		$68,979	1.017	$70,155	$48.25
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$39,255	$400		$39,654	1.017	$40,330	$27.74
Prof - Psych	$13,841	$56		$13,897	1.017	$14,134	$9.72
Prof - Specialist	$24,121	$243		$24,364	1.017	$24,779	$17.04
Prof - Vision	$3,054	$14		$3,068	1.017	$3,120	$2.15
Radiology	$5,388	$54		$5,443	1.017	$5,535	$3.81
Transportation/Ambulance	$19,070	$152	$41	$19,263	1.017	$19,591	$13.47
Provider Incentive Payment Adjustment							$1.20
Total	$1,546,252	$15,217	$623	$1,562,091		$1,588,722	$1,093.85
Admin Cost Adjustment							$78.37
Medallion II Capitation Rate							**$1,172.22**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Female							
Rural	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$73,413	$741		$74,154	1.017	$75,418	$89.78
FQHC / RHC	$15,505	$156		$15,662	1.017	$15,929	$18.96
Home Health	$4,980	$50		$5,030	1.017	$5,116	$6.09
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$356,390	$3,597	$23,211	$383,197	1.017	$389,730	$463.96
IP - Psych	$15,705		($647)	$15,057	1.017	$15,314	$18.23
Lab	$4,600	$44		$4,644	1.017	$4,724	$5.62
OP - Emergency Room & Related	$57,353	$579	($827)	$57,105	1.017	$58,079	$69.14
OP - Other	$248,434	$2,507	($5,958)	$244,984	1.017	$249,160	$296.62
Pharmacy	$441,667	$4,457	($13,549)	$432,575	1.017	$439,950	$523.75
Prof - Anesthesia	$4,030	$41		$4,071	1.017	$4,140	$4.93
Prof - Child EPSDT	$263	$3		$266	1.017	$270	$0.32
Prof - Evaluation & Management	$67,551	$681		$68,232	1.017	$69,395	$82.61
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$19,603	$200		$19,803	1.017	$20,141	$23.98
Prof - Psych	$5,918	$5		$5,923	1.017	$6,024	$7.17
Prof - Specialist	$19,996	$202		$20,198	1.017	$20,543	$24.46
Prof - Vision	$1,048	$5		$1,053	1.017	$1,071	$1.28
Radiology	$7,503	$76		$7,579	1.017	$7,708	$9.18
Transportation/Ambulance	$52,576	$506	$113	$53,195	1.017	$54,102	$64.41
Provider Incentive Payment Adjustment							$1.88
Total	$1,396,536	$13,850	$2,343	$1,412,729		$1,436,814	$1,712.37
Admin Cost Adjustment							$122.68
Medallion II Capitation Rate							**$1,835.05**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Male							
Rural	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$71,808	$725		$72,532	1.017	$73,769	$84.89
FQHC / RHC	$27,809	$281		$28,090	1.017	$28,569	$32.88
Home Health	$1,098	$11		$1,109	1.017	$1,127	$1.30
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$197,002	$1,988	$12,830	$211,820	1.017	$215,431	$247.91
IP - Psych	$44,531	$326	($1,849)	$43,007	1.017	$43,740	$50.33
Lab	$5,032	$48		$5,080	1.017	$5,167	$5.95
OP - Emergency Room & Related	$22,554	$228	($325)	$22,457	1.017	$22,840	$26.28
OP - Other	$194,025	$1,958	($4,653)	$191,330	1.017	$194,592	$223.93
Pharmacy	$232,495	$2,346	($7,132)	$227,709	1.017	$231,591	$266.50
Prof - Anesthesia	$1,027	$10		$1,038	1.017	$1,055	$1.21
Prof - Child EPSDT	$153	$2		$154	1.017	$157	$0.18
Prof - Evaluation & Management	$38,784	$390		$39,174	1.017	$39,842	$45.85
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$5,843	$60		$5,903	1.017	$6,004	$6.91
Prof - Psych	$11,011	$68		$11,080	1.017	$11,269	$12.97
Prof - Specialist	$5,229	$53		$5,282	1.017	$5,372	$6.18
Prof - Vision	$862	$2		$865	1.017	$879	$1.01
Radiology	$4,563	$46		$4,609	1.017	$4,688	$5.39
Transportation/Ambulance	$8,861	$66	$19	$8,946	1.017	$9,099	$10.47
Provider Incentive Payment Adjustment							$1.13
Total	$872,688	$8,608	($1,110)	$880,186		$895,192	$1,031.27
Admin Cost Adjustment							$73.89
Medallion II Capitation Rate							**$1,105.16**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 45 and Over							
Rural	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$362,292	$3,656		$365,948	1.017	$372,187	$159.26
FQHC / RHC	$58,251	$588		$58,839	1.017	$59,842	$25.61
Home Health	$154,841	$1,563		$156,404	1.017	$159,070	$68.07
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$2,046,171	$20,650	$133,264	$2,200,085	1.017	$2,237,594	$957.46
IP - Psych	$59,879	$219	($2,478)	$57,620	1.017	$58,603	$25.08
Lab	$21,612	$211		$21,823	1.017	$22,195	$9.50
OP - Emergency Room & Related	$215,868	$2,179	($3,112)	$214,935	1.017	$218,599	$93.54
OP - Other	$800,911	$8,083	($19,207)	$789,787	1.017	$803,252	$343.71
Pharmacy	$1,332,437	$13,447	($40,876)	$1,305,007	1.017	$1,327,256	$567.93
Prof - Anesthesia	$16,086	$162		$16,248	1.017	$16,525	$7.07
Prof - Child EPSDT	$1,403	$14		$1,417	1.017	$1,442	$0.62
Prof - Evaluation & Management	$309,784	$3,123		$312,907	1.017	$318,242	$136.18
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$130,587	$1,323		$131,910	1.017	$134,159	$57.41
Prof - Psych	$19,262	$62		$19,324	1.017	$19,653	$8.41
Prof - Specialist	$123,354	$1,245		$124,599	1.017	$126,723	$54.22
Prof - Vision	$10,603	$92		$10,695	1.017	$10,877	$4.65
Radiology	$61,187	$618		$61,805	1.017	$62,858	$26.90
Transportation/Ambulance	$82,098	$761	$177	$83,036	1.017	$84,452	$36.14
Provider Incentive Payment Adjustment							$2.83
Total	$5,806,627	$57,994	$67,768	$5,932,389		$6,033,527	$2,584.57
Admin Cost Adjustment							$185.17
Medallion II Capitation Rate							**$2,769.74**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age Under 1							
Statewide	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$11,008	$111	($126)	$10,993	1.017	$11,181	$447.23
FQHC / RHC	$0			$0	1.017	$0	$0.00
Home Health	$0			$0	1.017	$0	$0.00
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$251,133	$2,534	$16,356	$270,024	1.017	$274,627	$10,985.08
IP - Psych	$455		($19)	$436	1.017	$444	$17.76
Lab	$142	$1		$143	1.017	$146	$5.82
OP - Emergency Room & Related	$207	$2	($3)	$206	1.017	$210	$8.38
OP - Other	$6,354	$64	($152)	$6,266	1.017	$6,373	$254.92
Pharmacy	$26,228	$265	($805)	$25,688	1.017	$26,126	$1,045.03
Prof - Anesthesia	$416	$4		$421	1.017	$428	$17.11
Prof - Child EPSDT	$188	$2		$190	1.017	$193	$7.73
Prof - Evaluation & Management	$27,555	$278		$27,833	1.017	$28,307	$1,132.29
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$39,873	$402		$40,275	1.017	$40,962	$1,638.47
Prof - Psych	$157			$157	1.017	$159	$6.38
Prof - Specialist	$1,867	$19		$1,886	1.017	$1,918	$76.73
Prof - Vision	$99	$1		$100	1.017	$102	$4.08
Radiology	$788	$8		$796	1.017	$809	$32.38
Transportation/Ambulance	$73		$0	$74	1.017	$75	$2.99
Provider Incentive Payment Adjustment							$17.20
Total	$366,544	$3,692	$15,251	$385,488		$392,060	$15,699.58
Admin Cost Adjustment							$1,124.79
Medallion II Capitation Rate							**$16,824.37**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 1-5							
Tidewater	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$287,049	$2,897	($3,286)	$286,660	1.017	$291,547	$315.87
FQHC / RHC	$0			$0	1.017	$0	$0.00
Home Health	$199,352	$2,012		$201,364	1.017	$204,797	$221.88
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$344,086	$3,470	$22,410	$369,966	1.017	$376,273	$407.66
IP - Psych	$15,061		($621)	$14,440	1.017	$14,686	$15.91
Lab	$5,125	$42		$5,167	1.017	$5,256	$5.69
OP - Emergency Room & Related	$51,190	$517	($738)	$50,969	1.017	$51,838	$56.16
OP - Other	$490,600	$4,951	($11,765)	$483,786	1.017	$492,034	$533.08
Pharmacy	$435,094	$4,391	($13,348)	$426,137	1.017	$433,402	$469.56
Prof - Anesthesia	$9,021	$91		$9,112	1.017	$9,267	$10.04
Prof - Child EPSDT	$1,169	$12		$1,180	1.017	$1,200	$1.30
Prof - Evaluation & Management	$106,715	$1,076		$107,791	1.017	$109,628	$118.77
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$595,697	$6,014		$601,711	1.017	$611,969	$663.02
Prof - Psych	$5,450	$3		$5,452	1.017	$5,545	$6.01
Prof - Specialist	$23,200	$234		$23,434	1.017	$23,834	$25.82
Prof - Vision	$4,575	$35		$4,610	1.017	$4,689	$5.08
Radiology	$4,445	$45		$4,489	1.017	$4,566	$4.95
Transportation/Ambulance	$10,130	$75	$22	$10,227	1.017	$10,401	$11.27
Provider Incentive Payment Adjustment							$3.15
Total	$2,587,957	$25,865	($7,327)	$2,606,496		$2,650,933	$2,875.23
Admin Cost Adjustment							$206.00
Medallion II Capitation Rate							**$3,081.23**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 6-20							
Tidewater	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$600,069	$6,056	($7,815)	$598,310	1.017	$608,510	$193.67
FQHC / RHC	$6,002	$61		$6,063	1.017	$6,166	$1.96
Home Health	$122,479	$1,236		$123,715	1.017	$125,825	$40.05
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$536,716	$5,408	$34,955	$577,079	1.017	$586,917	$186.80
IP - Psych	$134,055	$694	($5,555)	$129,193	1.017	$131,395	$41.82
Lab	$8,322	$49		$8,370	1.017	$8,513	$2.71
OP - Emergency Room & Related	$136,603	$1,379	($1,969)	$136,013	1.017	$138,331	$44.03
OP - Other	$873,948	$8,820	($20,958)	$861,810	1.017	$876,502	$278.96
Pharmacy	$811,310	$8,188	($24,889)	$794,609	1.017	$808,156	$257.21
Prof - Anesthesia	$20,318	$205		$20,523	1.017	$20,873	$6.64
Prof - Child EPSDT	$2,674	$27		$2,701	1.017	$2,747	$0.87
Prof - Evaluation & Management	$184,534	$1,859		$186,392	1.017	$189,570	$60.33
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$468,491	$4,739		$473,230	1.017	$481,298	$153.18
Prof - Psych	$38,216	$159		$38,374	1.017	$39,028	$12.42
Prof - Specialist	$68,585	$692		$69,278	1.017	$70,459	$22.42
Prof - Vision	$8,948	$53		$9,001	1.017	$9,155	$2.91
Radiology	$10,082	$102		$10,184	1.017	$10,358	$3.30
Transportation/Ambulance	$27,772	$183	$60	$28,014	1.017	$28,492	$9.07
Provider Incentive Payment Adjustment							$1.45
Total	$4,059,124	$39,908	($26,173)	$4,072,859		$4,142,295	$1,319.81
Admin Cost Adjustment							$94.56
Medallion II Capitation Rate							**$1,414.37**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Female							
Tidewater	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$163,377	$1,649		$165,026	1.017	$167,839	$95.69
FQHC / RHC	$57,141	$577		$57,718	1.017	$58,702	$33.47
Home Health	$20,855	$210		$21,066	1.017	$21,425	$12.21
IP - Maternity	$3,134	$32	$204	$3,370	1.017	$3,427	$1.95
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$454,949	$4,588	$29,630	$489,167	1.017	$497,507	$283.64
IP - Psych	$67,620	$376	($2,803)	$65,193	1.017	$66,304	$37.80
Lab	$7,674	$59		$7,733	1.017	$7,865	$4.48
OP - Emergency Room & Related	$245,420	$2,477	($3,538)	$244,358	1.017	$248,524	$141.69
OP - Other	$355,044	$3,583	($8,514)	$350,113	1.017	$356,081	$203.01
Pharmacy	$958,082	$9,669	($29,392)	$938,359	1.017	$954,357	$544.10
Prof - Anesthesia	$6,032	$61		$6,093	1.017	$6,197	$3.53
Prof - Child EPSDT	$4,663	$47		$4,710	1.017	$4,790	$2.73
Prof - Evaluation & Management	$145,664	$1,468		$147,132	1.017	$149,640	$85.31
Prof - Maternity	$2,211	$22		$2,233	1.017	$2,271	$1.29
Prof - Other	$56,235	$572		$56,807	1.017	$57,776	$32.94
Prof - Psych	$23,590	$133		$23,722	1.017	$24,127	$13.76
Prof - Specialist	$24,827	$251		$25,078	1.017	$25,505	$14.54
Prof - Vision	$2,655	$16		$2,671	1.017	$2,717	$1.55
Radiology	$15,791	$159		$15,950	1.017	$16,222	$9.25
Transportation/Ambulance	$32,348	$274	$70	$32,692	1.017	$33,249	$18.96
Provider Incentive Payment Adjustment							$1.69
Total	$2,647,313	$26,222	($14,344)	$2,659,191		$2,704,526	$1,543.61
Admin Cost Adjustment							$110.59
Medallion II Capitation Rate							**$1,654.20**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Male							
Tidewater	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$306,764	$3,096		$309,860	1.017	$315,142	$205.17
FQHC / RHC	$1,316	$13		$1,329	1.017	$1,352	$0.88
Home Health	$115,611	$1,167		$116,778	1.017	$118,769	$77.32
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$345,536	$3,484	$22,504	$371,524	1.017	$377,858	$246.00
IP - Psych	$26,397	$16	($1,089)	$25,323	1.017	$25,755	$16.77
Lab	$2,893	$13		$2,906	1.017	$2,956	$1.92
OP - Emergency Room & Related	$91,079	$919	($1,313)	$90,686	1.017	$92,232	$60.05
OP - Other	$320,065	$3,230	($7,675)	$315,620	1.017	$321,000	$208.98
Pharmacy	$406,466	$4,102	($12,470)	$398,099	1.017	$404,886	$263.60
Prof - Anesthesia	$7,342	$74		$7,416	1.017	$7,542	$4.91
Prof - Child EPSDT	$671	$7		$678	1.017	$690	$0.45
Prof - Evaluation & Management	$86,243	$868		$87,111	1.017	$88,596	$57.68
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$354,832	$3,585		$358,417	1.017	$364,528	$237.32
Prof - Psych	$16,155	$77		$16,232	1.017	$16,509	$10.75
Prof - Specialist	$41,698	$421		$42,119	1.017	$42,837	$27.89
Prof - Vision	$3,365	$24		$3,389	1.017	$3,447	$2.24
Radiology	$9,247	$93		$9,341	1.017	$9,500	$6.18
Transportation/Ambulance	$18,481	$141	$40	$18,661	1.017	$18,979	$12.36
Provider Incentive Payment Adjustment							$1.58
Total	$2,154,160	$21,330	($3)	$2,175,486		$2,212,575	$1,442.06
Admin Cost Adjustment							$103.32
Medallion II Capitation Rate							**$1,545.37**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 45 and Over							
Tidewater	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$898,334	$9,066		$907,400	1.017	$922,870	$195.69
FQHC / RHC	$75,466	$762		$76,228	1.017	$77,527	$16.44
Home Health	$260,991	$2,634		$263,625	1.017	$268,119	$56.85
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$4,129,585	$41,667	$268,953	$4,440,205	1.017	$4,515,905	$957.57
IP - Psych	$118,642	$424	($4,909)	$114,157	1.017	$116,103	$24.62
Lab	$40,940	$363		$41,303	1.017	$42,007	$8.91
OP - Emergency Room & Related	$807,831	$8,153	($11,647)	$804,338	1.017	$818,050	$173.46
OP - Other	$1,593,172	$16,078	($38,206)	$1,571,044	1.017	$1,597,828	$338.81
Pharmacy	$2,787,714	$28,134	($85,521)	$2,730,326	1.017	$2,776,874	$588.82
Prof - Anesthesia	$44,288	$447		$44,735	1.017	$45,498	$9.65
Prof - Child EPSDT	$9,370	$95		$9,465	1.017	$9,626	$2.04
Prof - Evaluation & Management	$905,650	$9,133		$914,783	1.017	$930,379	$197.28
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$735,285	$7,433		$742,718	1.017	$755,380	$160.17
Prof - Psych	$43,254	$170		$43,424	1.017	$44,164	$9.36
Prof - Specialist	$283,766	$2,864		$286,630	1.017	$291,517	$61.81
Prof - Vision	$23,816	$212		$24,028	1.017	$24,437	$5.18
Radiology	$132,269	$1,335		$133,604	1.017	$135,882	$28.81
Transportation/Ambulance	$191,179	$1,787	$412	$193,377	1.017	$196,674	$41.70
Provider Incentive Payment Adjustment							$3.16
Total	$13,081,552	$130,755	$129,082	$13,341,389		$13,568,841	$2,880.35
Admin Cost Adjustment							$206.36
Medallion II Capitation Rate							**$3,086.71**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age Under 1							
Statewide	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$11,008	$111	($126)	$10,993	1.017	$11,181	$447.23
FQHC / RHC	$0			$0	1.017	$0	$0.00
Home Health	$0			$0	1.017	$0	$0.00
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$251,133	$2,534	$16,356	$270,024	1.017	$274,627	$10,985.08
IP - Psych	$455		($19)	$436	1.017	$444	$17.76
Lab	$142	$1		$143	1.017	$146	$5.82
OP - Emergency Room & Related	$207	$2	($3)	$206	1.017	$210	$8.38
OP - Other	$6,354	$64	($152)	$6,266	1.017	$6,373	$254.92
Pharmacy	$26,228	$265	($805)	$25,688	1.017	$26,126	$1,045.03
Prof - Anesthesia	$416	$4		$421	1.017	$428	$17.11
Prof - Child EPSDT	$188	$2		$190	1.017	$193	$7.73
Prof - Evaluation & Management	$27,555	$278		$27,833	1.017	$28,307	$1,132.29
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$39,873	$402		$40,275	1.017	$40,962	$1,638.47
Prof - Psych	$157			$157	1.017	$159	$6.38
Prof - Specialist	$1,867	$19		$1,886	1.017	$1,918	$76.73
Prof - Vision	$99	$1		$100	1.017	$102	$4.08
Radiology	$788	$8		$796	1.017	$809	$32.38
Transportation/Ambulance	$73		$0	$74	1.017	$75	$2.99
Provider Incentive Payment Adjustment							$17.20
Total	$366,544	$3,692	$15,251	$385,488		$392,060	$15,699.58
Admin Cost Adjustment							$1,124.79
Medallion II Capitation Rate							**$16,824.37**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 1-5							
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$106,216	$1,072	($1,216)	$106,072	1.017	$107,880	$246.30
FQHC / RHC	$394	$4		$398	1.017	$405	$0.92
Home Health	$60,992	$616		$61,608	1.017	$62,658	$143.05
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$95,505	$964	$6,220	$102,689	1.017	$104,440	$238.45
IP - Psych	$300		($12)	$288	1.017	$293	$0.67
Lab	$5,459	$54		$5,512	1.017	$5,606	$12.80
OP - Emergency Room & Related	$9,744	$98	($140)	$9,702	1.017	$9,867	$22.53
OP - Other	$69,257	$699	($1,661)	$68,295	1.017	$69,460	$158.58
Pharmacy	$575,827	$5,811	($17,665)	$563,973	1.017	$573,588	$1,309.56
Prof - Anesthesia	$3,242	$33		$3,275	1.017	$3,331	$7.60
Prof - Child EPSDT	$667	$7		$674	1.017	$685	$1.57
Prof - Evaluation & Management	$39,577	$398		$39,975	1.017	$40,656	$92.82
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$86,443	$871		$87,314	1.017	$88,802	$202.74
Prof - Psych	$1,286	$12		$1,297	1.017	$1,320	$3.01
Prof - Specialist	$7,811	$79		$7,890	1.017	$8,024	$18.32
Prof - Vision	$3,232	$27		$3,259	1.017	$3,314	$7.57
Radiology	$1,692	$17		$1,709	1.017	$1,739	$3.97
Transportation/Ambulance	$5,577	$49	$12	$5,639	1.017	$5,735	$13.09
Provider Incentive Payment Adjustment							$2.72
Total	$1,073,222	$10,810	($14,463)	$1,069,569		$1,087,804	$2,486.29
Admin Cost Adjustment							$178.13
Medallion II Capitation Rate							**$2,664.42**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 6-20							
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$109,156	$1,102	($1,422)	$108,836	1.017	$110,692	$144.51
FQHC / RHC	$734	$7		$742	1.017	$754	$0.98
Home Health	$2,358	$24		$2,382	1.017	$2,423	$3.16
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$127,495	$1,287	$8,304	$137,085	1.017	$139,422	$182.01
IP - Psych	$29,567	$296	($1,231)	$28,631	1.017	$29,120	$38.02
Lab	$6,518	$63		$6,581	1.017	$6,693	$8.74
OP - Emergency Room & Related	$10,801	$109	($156)	$10,755	1.017	$10,938	$14.28
OP - Other	$125,111	$1,263	($3,000)	$123,373	1.017	$125,477	$163.81
Pharmacy	$277,043	$2,796	($8,499)	$271,339	1.017	$275,965	$360.27
Prof - Anesthesia	$3,561	$36		$3,597	1.017	$3,659	$4.78
Prof - Child EPSDT	$346	$3		$349	1.017	$355	$0.46
Prof - Evaluation & Management	$37,192	$372		$37,564	1.017	$38,205	$49.88
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$136,157	$1,372		$137,529	1.017	$139,874	$182.60
Prof - Psych	$7,144	$71		$7,215	1.017	$7,338	$9.58
Prof - Specialist	$11,824	$119		$11,943	1.017	$12,147	$15.86
Prof - Vision	$1,446	$5		$1,451	1.017	$1,475	$1.93
Radiology	$1,800	$18		$1,818	1.017	$1,850	$2.41
Transportation/Ambulance	$6,763	$56	$15	$6,834	1.017	$6,950	$9.07
Provider Incentive Payment Adjustment							$1.31
Total	$895,017	$8,999	($5,990)	$898,026		$913,336	$1,193.65
Admin Cost Adjustment							$85.52
Medallion II Capitation Rate							**$1,279.17**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Female							
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$44,058	$445		$44,503	1.017	$45,261	$117.26
FQHC / RHC	$1,301	$13		$1,314	1.017	$1,337	$3.46
Home Health	$21,071	$213		$21,283	1.017	$21,646	$56.08
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$21,391	$216	$1,393	$23,000	1.017	$23,392	$60.60
IP - Psych	$14,015	$139	($584)	$13,570	1.017	$13,802	$35.76
Lab	$4,991	$49		$5,040	1.017	$5,126	$13.28
OP - Emergency Room & Related	$10,104	$102	($146)	$10,060	1.017	$10,232	$26.51
OP - Other	$25,181	$254	($604)	$24,831	1.017	$25,254	$65.43
Pharmacy	$224,291	$2,264	($6,881)	$219,674	1.017	$223,419	$578.80
Prof - Anesthesia	$1,290	$13		$1,303	1.017	$1,325	$3.43
Prof - Child EPSDT	$339	$3		$342	1.017	$348	$0.90
Prof - Evaluation & Management	$15,621	$156		$15,777	1.017	$16,046	$41.57
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$13,318	$133		$13,451	1.017	$13,681	$35.44
Prof - Psych	$2,972	$29		$3,001	1.017	$3,052	$7.91
Prof - Specialist	$10,021	$101		$10,122	1.017	$10,294	$26.67
Prof - Vision	$934	$4		$938	1.017	$954	$2.47
Radiology	$1,699	$17		$1,716	1.017	$1,746	$4.52
Transportation/Ambulance	$32,194	$319	$69	$32,582	1.017	$33,138	$85.85
Provider Incentive Payment Adjustment							$1.28
Total	$444,788	$4,470	($6,751)	$442,507		$450,051	$1,167.21
Admin Cost Adjustment							$83.62
Medallion II Capitation Rate							**$1,250.84**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 21-44 Male							
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$29,341	$296		$29,637	1.017	$30,142	$123.53
FQHC / RHC	$699	$7		$706	1.017	$719	$2.94
Home Health	$16,248	$164		$16,412	1.017	$16,692	$68.41
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$94,779	$957	$6,173	$101,908	1.017	$103,646	$424.78
IP - Psych	$15,006	$146	($625)	$14,527	1.017	$14,775	$60.55
Lab	$1,512	$14		$1,527	1.017	$1,553	$6.36
OP - Emergency Room & Related	$5,545	$56	($80)	$5,521	1.017	$5,615	$23.01
OP - Other	$10,299	$104	($247)	$10,156	1.017	$10,329	$42.33
Pharmacy	$103,310	$1,043	($3,169)	$101,183	1.017	$102,908	$421.76
Prof - Anesthesia	$1,173	$12		$1,185	1.017	$1,205	$4.94
Prof - Child EPSDT	$449	$5		$454	1.017	$461	$1.89
Prof - Evaluation & Management	$10,531	$105		$10,637	1.017	$10,818	$44.34
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$40,942	$412		$41,354	1.017	$42,059	$172.37
Prof - Psych	$1,411	$12		$1,424	1.017	$1,448	$5.93
Prof - Specialist	$13,963	$141		$14,104	1.017	$14,345	$58.79
Prof - Vision	$639	$3		$642	1.017	$653	$2.68
Radiology	$2,579	$26		$2,605	1.017	$2,649	$10.86
Transportation/Ambulance	$2,305	$19	$5	$2,330	1.017	$2,369	$9.71
Provider Incentive Payment Adjustment							$1.63
Total	$350,732	$3,523	$2,057	$356,312		$362,387	$1,486.82
Admin Cost Adjustment							$106.52
Medallion II Capitation Rate							**$1,593.34**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4c

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD ALTC)

Age 45 and Over							
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments[1]	Policy and Program Adjustments[2]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	PMPM FY14
Service Type							
DME/Supplies	$221,944	$2,240		$224,184	1.017	$228,006	$220.94
FQHC / RHC	$4,446	$45		$4,491	1.017	$4,568	$4.43
Home Health	$83,249	$840		$84,090	1.017	$85,523	$82.87
IP - Maternity	$0			$0	1.017	$0	$0.00
IP - Newborn	$0			$0	1.017	$0	$0.00
IP - Other	$1,386,725	$13,995	$90,315	$1,491,035	1.017	$1,516,455	$1,469.43
IP - Psych	$26,378	$264	($1,098)	$25,544	1.017	$25,979	$25.17
Lab	$31,782	$317		$32,099	1.017	$32,647	$31.63
OP - Emergency Room & Related	$111,830	$1,129	($1,612)	$111,347	1.017	$113,245	$109.73
OP - Other	$133,464	$1,347	($3,201)	$131,611	1.017	$133,854	$129.70
Pharmacy	$687,745	$6,941	($21,099)	$673,587	1.017	$685,071	$663.83
Prof - Anesthesia	$3,658	$37		$3,695	1.017	$3,758	$3.64
Prof - Child EPSDT	$1,429	$14		$1,443	1.017	$1,468	$1.42
Prof - Evaluation & Management	$170,061	$1,712		$171,773	1.017	$174,702	$169.28
Prof - Maternity	$0			$0	1.017	$0	$0.00
Prof - Other	$124,412	$1,252		$125,665	1.017	$127,807	$123.84
Prof - Psych	$4,442	$44		$4,486	1.017	$4,562	$4.42
Prof - Specialist	$50,903	$514		$51,417	1.017	$52,294	$50.67
Prof - Vision	$4,522	$32		$4,554	1.017	$4,632	$4.49
Radiology	$21,350	$215		$21,566	1.017	$21,933	$21.25
Transportation/Ambulance	$80,395	$795	$173	$81,363	1.017	$82,751	$80.18
Provider Incentive Payment Adjustment							$3.51
Total	$3,148,736	$31,734	$63,479	$3,243,949		$3,299,254	$3,200.46
Admin Cost Adjustment							$229.30
Medallion II Capitation Rate							**$3,429.75**

[1] Completion Factor Adjustment is applied to non-capitated claims only

[2] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4d

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Low Income Families with Children (LIFC)
PCCM Roanoke-Alleghany

Age Under 1								
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$395,147	$467	($3,036)	$392,578	1.087	$426,767	0.915	$16.60
FQHC / RHC	$52,678	$41		$52,719	1.109	$58,475	0.915	$2.27
Home Health	$113	$1		$114	1.012	$115	0.915	$0.00
IP - Maternity	$0	$0		$0	1.009	$0	0.915	$0.00
IP - Newborn	$8,248,006	$6,422	$529,928	$8,784,355	1.009	$8,859,363	0.915	$344.68
IP - Other	$610,287	$475	$39,210	$649,972	1.009	$655,522	0.915	$25.50
IP - Psych	$0	$0		$0	1.043	$0	0.915	$0.00
Lab	$70,750	$84		$70,834	1.087	$77,002	0.915	$3.00
OP - Emergency Room & Related	$131,505	$1,381	($2,873)	$130,013	1.012	$131,561	0.915	$5.12
OP - Other	$314,766	$3,306	($7,951)	$310,121	1.012	$313,814	0.915	$12.21
Pharmacy	$807,363	$1	($109,404)	$697,960	1.147	$800,656	1.000	$34.04
Prof - Anesthesia	$22,917	$18		$22,935	1.109	$25,439	0.915	$0.99
Prof - Child EPSDT	$82,913	$64		$82,977	1.109	$92,037	0.915	$3.58
Prof - Evaluation & Management	$2,980,744	$2,303		$2,983,046	1.109	$3,308,758	0.915	$128.73
Prof - Maternity	$0	$0		$0	1.109	$0	0.915	$0.00
Prof - Other	$404,022	$312		$404,334	1.109	$448,482	0.915	$17.45
Prof - Psych	$0	$0		$0	1.109	$0	0.915	$0.00
Prof - Specialist	$182,166	$141		$182,306	1.109	$202,212	0.915	$7.87
Prof - Vision	$11,031	$9		$11,039	1.109	$12,244	0.915	$0.48
Radiology	$97,629	$115		$97,744	1.087	$106,257	0.915	$4.13
Transportation/Ambulance	$40,248	$48	$15,465	$55,760	1.087	$60,616	0.915	$2.36
Non-ER Transportation	$0	$0		$0	1.000	$0	1.000	$1.04
Provider Incentive Payment Adjustment								$1.63
Total	$14,452,281	$15,186	$461,340	$14,928,807		$15,579,320		$611.68
Admin Cost Adjustment								$68.04
Medallion II Capitation Rate								**$679.71**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4d

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Low Income Families with Children (LIFC)
PCCM Roanoke-Alleghany

Age 1-5								
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$148,300	$175	($1,140)	$147,336	1.087	$160,167	0.915	$2.18
FQHC / RHC	$104,859	$81		$104,940	1.109	$116,398	0.915	$1.59
Home Health	$0	$0		$0	1.012	$0	0.915	$0.00
IP - Maternity	$0	$0		$0	1.009	$0	0.915	$0.00
IP - Newborn	$4,075	$3	$262	$4,340	1.009	$4,377	0.915	$0.06
IP - Other	$443,327	$345	$28,483	$472,155	1.009	$476,187	0.915	$6.49
IP - Psych	$16,769	$6	($664)	$16,111	1.043	$16,810	0.915	$0.23
Lab	$178,315	$211		$178,526	1.087	$194,074	0.915	$2.64
OP - Emergency Room & Related	$383,189	$4,024	($8,372)	$378,841	1.012	$383,352	0.915	$5.22
OP - Other	$769,524	$8,082	($19,437)	$758,169	1.012	$767,197	0.915	$10.45
Pharmacy	$1,173,158	$1	($158,972)	$1,014,188	1.147	$1,163,413	1.000	$17.32
Prof - Anesthesia	$53,565	$41		$53,606	1.109	$59,459	0.915	$0.81
Prof - Child EPSDT	$75,085	$58		$75,143	1.109	$83,347	0.915	$1.14
Prof - Evaluation & Management	$1,658,363	$1,281		$1,659,644	1.109	$1,840,857	0.915	$25.08
Prof - Maternity	$0	$0		$0	1.109	$0	0.915	$0.00
Prof - Other	$339,272	$262		$339,534	1.109	$376,607	0.915	$5.13
Prof - Psych	$69,666	$54		$69,720	1.109	$77,332	0.915	$1.05
Prof - Specialist	$225,548	$174		$225,722	1.109	$250,368	0.915	$3.41
Prof - Vision	$54,890	$42		$54,932	1.109	$60,930	0.915	$0.83
Radiology	$190,840	$226		$191,066	1.087	$207,706	0.915	$2.83
Transportation/Ambulance	$26,459	$31	$10,167	$36,657	1.087	$39,849	0.915	$0.54
Non-ER Transportation	$0	$0		$0	1.000	$0	1.000	$1.04
Provider Incentive Payment Adjustment								$0.23
Total	$5,915,204	$15,099	($149,673)	$5,780,631		$6,278,432		$88.29
Admin Cost Adjustment								$9.82
Medallion II Capitation Rate								**$98.11**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4d

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Low Income Families with Children (LIFC)
PCCM Roanoke-Alleghany

Age 6-14								
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$155,650	$184	($326)	$155,509	1.087	$169,052	0.915	$1.20
FQHC / RHC	$172,890	$134		$173,023	1.109	$191,916	0.915	$1.36
Home Health	$4,064	$43		$4,107	1.012	$4,156	0.915	$0.03
IP - Maternity	$5,600	$4	$360	$5,964	1.009	$6,015	0.915	$0.04
IP - Newborn	$57,698	$45	$3,707	$61,449	1.009	$61,974	0.915	$0.44
IP - Other	$684,298	$533	$43,966	$728,797	1.009	$735,020	0.915	$5.21
IP - Psych	$450,103	$162	($17,824)	$432,442	1.043	$451,208	0.915	$3.20
Lab	$340,779	$403		$341,182	1.087	$370,895	0.915	$2.63
OP - Emergency Room & Related	$725,976	$7,625	($15,861)	$717,739	1.012	$726,285	0.915	$5.15
OP - Other	$984,118	$10,336	($24,858)	$969,596	1.012	$981,141	0.915	$6.95
Pharmacy	$5,457,374	$6	($739,515)	$4,717,865	1.147	$5,412,040	1.000	$41.90
Prof - Anesthesia	$47,432	$37		$47,468	1.109	$52,651	0.915	$0.37
Prof - Child EPSDT	$36,678	$28		$36,706	1.109	$40,714	0.915	$0.29
Prof - Evaluation & Management	$2,217,662	$1,713		$2,219,375	1.109	$2,461,703	0.915	$17.44
Prof - Maternity	$4,405	$3		$4,409	1.109	$4,890	0.915	$0.03
Prof - Other	$394,686	$305		$394,991	1.109	$438,119	0.915	$3.10
Prof - Psych	$668,775	$517	$30,912	$700,203	1.109	$776,656	0.915	$5.50
Prof - Specialist	$337,487	$261		$337,747	1.109	$374,625	0.915	$2.65
Prof - Vision	$407,312	$315		$407,627	1.109	$452,135	0.915	$3.20
Radiology	$94,525	$112		$94,637	1.087	$102,879	0.915	$0.73
Transportation/Ambulance	$36,722	$43	$14,110	$50,876	1.087	$55,306	0.915	$0.39
Non-ER Transportation	$0	$0		$0	1.000	$0	1.000	$1.04
Provider Incentive Payment Adjustment								$0.27
Total	$13,284,232	$22,808	($705,329)	$12,601,711		$13,869,380		$103.13
Admin Cost Adjustment								$11.47
Medallion II Capitation Rate								**$114.60**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4d

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Low Income Families with Children (LIFC)
PCCM Roanoke-Alleghany

Age 15-20 Female								
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$38,842	$46	($81)	$38,807	1.087	$42,186	0.915	$1.13
FQHC / RHC	$69,212	$53		$69,266	1.109	$76,829	0.915	$2.05
Home Health	$0	$0		$0	1.012	$0	0.915	$0.00
IP - Maternity	$1,094,033	$852	$70,291	$1,165,175	1.009	$1,175,124	0.915	$31.39
IP - Newborn	$3,398	$3	$218	$3,619	1.009	$3,650	0.915	$0.10
IP - Other	$493,890	$385	$31,732	$526,006	1.009	$530,497	0.915	$14.17
IP - Psych	$274,680	$99	($10,877)	$263,901	1.043	$275,354	0.915	$7.36
Lab	$565,052	$668		$565,721	1.087	$614,988	0.915	$16.43
OP - Emergency Room & Related	$533,431	$5,602	($11,655)	$527,379	1.012	$533,658	0.915	$14.26
OP - Other	$880,445	$9,247	($22,239)	$867,453	1.012	$877,782	0.915	$23.45
Pharmacy	$1,260,019	$1	($170,742)	$1,089,279	1.147	$1,249,552	1.000	$36.48
Prof - Anesthesia	$63,969	$49		$64,018	1.109	$71,008	0.915	$1.90
Prof - Child EPSDT	$21,346	$16		$21,362	1.109	$23,695	0.915	$0.63
Prof - Evaluation & Management	$916,659	$708		$917,367	1.109	$1,017,533	0.915	$27.18
Prof - Maternity	$759,410	$587		$759,996	1.109	$842,978	0.915	$22.52
Prof - Other	$217,335	$168		$217,503	1.109	$241,251	0.915	$6.44
Prof - Psych	$237,064	$183	$10,957	$248,205	1.109	$275,306	0.915	$7.35
Prof - Specialist	$166,931	$129		$167,060	1.109	$185,301	0.915	$4.95
Prof - Vision	$135,170	$104		$135,274	1.109	$150,045	0.915	$4.01
Radiology	$256,527	$303		$256,831	1.087	$279,197	0.915	$7.46
Transportation/Ambulance	$39,849	$47	$15,312	$55,208	1.087	$60,016	0.915	$1.60
Non-ER Transportation	$0	$0		$0	1.000	$0	1.000	$1.04
Provider Incentive Payment Adjustment								$0.62
Total	$8,027,261	$19,252	($87,083)	$7,959,429		$8,525,951		$232.51
Admin Cost Adjustment								$25.86
Medallion II Capitation Rate								**$258.38**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4d

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Low Income Families with Children (LIFC)
PCCM Roanoke-Alleghany

Age 21-44 Female								
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$183,606	$213		$183,818	1.098	$201,878	0.915	$3.30
FQHC / RHC	$179,145	$133		$179,278	1.113	$199,472	0.915	$3.26
Home Health	$0	$0		$0	0.965	$0	0.915	$0.00
IP - Maternity	$2,984,329	$67	$191,596	$3,175,991	1.036	$3,289,417	0.915	$53.75
IP - Newborn	$0	$0		$0	1.036	$0	0.915	$0.00
IP - Other	$2,317,671	$52	$148,796	$2,466,519	1.036	$2,554,606	0.915	$41.74
IP - Psych	$381,926	$571	($15,141)	$367,356	0.770	$282,810	0.915	$4.62
Lab	$1,423,264	$1,648		$1,424,912	1.098	$1,564,905	0.915	$25.57
OP - Emergency Room & Related	$1,634,356	$22,204	($35,817)	$1,620,744	0.965	$1,564,677	0.915	$25.57
OP - Other	$2,942,897	$39,982	($74,561)	$2,908,319	0.965	$2,807,711	0.915	$45.88
Pharmacy	$4,076,266	$1	($268,322)	$3,807,944	1.060	$4,038,228	1.000	$72.11
Prof - Anesthesia	$190,028	$141		$190,169	1.113	$211,590	0.915	$3.46
Prof - Child EPSDT	$27,075	$20		$27,095	1.113	$30,147	0.915	$0.49
Prof - Evaluation & Management	$1,848,100	$1,368		$1,849,468	1.113	$2,057,798	0.915	$33.62
Prof - Maternity	$1,765,086	$1,306		$1,766,393	1.113	$1,965,365	0.915	$32.11
Prof - Other	$450,976	$334		$451,310	1.113	$502,147	0.915	$8.20
Prof - Psych	$258,361	$191		$258,552	1.113	$287,677	0.915	$4.70
Prof - Specialist	$769,559	$570		$770,128	1.113	$856,878	0.915	$14.00
Prof - Vision	$73,975	$55		$74,029	1.113	$82,368	0.915	$1.35
Radiology	$742,885	$860		$743,745	1.098	$816,816	0.915	$13.35
Transportation/Ambulance	$109,336	$127	$42,011	$151,473	1.098	$166,355	0.915	$2.72
Non-ER Transportation	$0	$0		$0	1.000	$0	1.000	$2.00
Provider Incentive Payment Adjustment								$1.05
Total	$22,358,840	$69,841	($11,438)	$22,417,244		$23,480,846		$392.83
Admin Cost Adjustment								$38.11
Medallion II Capitation Rate								**$430.95**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4d

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Low Income Families with Children (LIFC)
PCCM Roanoke-Alleghany

Age 15-20 Male								
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$36,395	$43	($76)	$36,361	1.087	$39,528	0.915	$1.41
FQHC / RHC	$28,899	$22		$28,921	1.109	$32,079	0.915	$1.14
Home Health	$0	$0		$0	1.012	$0	0.915	$0.00
IP - Maternity	$0	$0		$0	1.009	$0	0.915	$0.00
IP - Newborn	$13,507	$11	$868	$14,386	1.009	$14,508	0.915	$0.52
IP - Other	$538,349	$419	$34,589	$573,357	1.009	$578,253	0.915	$20.58
IP - Psych	$213,242	$77	($8,444)	$204,875	1.043	$213,766	0.915	$7.61
Lab	$107,630	$127		$107,757	1.087	$117,141	0.915	$4.17
OP - Emergency Room & Related	$294,143	$3,089	($6,427)	$290,806	1.012	$294,269	0.915	$10.47
OP - Other	$394,896	$4,147	($9,975)	$389,069	1.012	$393,701	0.915	$14.01
Pharmacy	$1,369,073	$2	($185,520)	$1,183,555	1.147	$1,357,701	1.000	$52.80
Prof - Anesthesia	$16,662	$13		$16,675	1.109	$18,495	0.915	$0.66
Prof - Child EPSDT	$4,583	$4		$4,587	1.109	$5,087	0.915	$0.18
Prof - Evaluation & Management	$473,695	$366		$474,061	1.109	$525,823	0.915	$18.71
Prof - Maternity	$0	$0		$0	1.109	$0	0.915	$0.00
Prof - Other	$101,179	$78		$101,258	1.109	$112,314	0.915	$4.00
Prof - Psych	$209,831	$162	$9,699	$219,692	1.109	$243,679	0.915	$8.67
Prof - Specialist	$128,938	$100		$129,037	1.109	$143,127	0.915	$5.09
Prof - Vision	$67,809	$52		$67,862	1.109	$75,271	0.915	$2.68
Radiology	$42,712	$51		$42,763	1.087	$46,487	0.915	$1.65
Transportation/Ambulance	$22,416	$27	$8,613	$31,055	1.087	$33,760	0.915	$1.20
Non-ER Transportation	$0	$0		$0	1.000	$0	1.000	$1.04
Provider Incentive Payment Adjustment								$0.42
Total	$4,063,959	$8,789	($156,673)	$3,916,075		$4,244,989		$157.01
Admin Cost Adjustment								$17.46
Medallion II Capitation Rate								**$174.47**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4d

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Low Income Families with Children (LIFC)
PCCM Roanoke-Alleghany

Age 21-44 Male								
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$22,274	$26		$22,300	1.098	$24,491	0.915	$2.56
FQHC / RHC	$21,106	$16		$21,122	1.113	$23,501	0.915	$2.45
Home Health	$0	$0		$0	0.965	$0	0.915	$0.00
IP - Maternity	$0	$0		$0	1.036	$0	0.915	$0.00
IP - Newborn	$0	$0		$0	1.036	$0	0.915	$0.00
IP - Other	$1,113,621	$25	$71,495	$1,185,141	1.036	$1,227,467	0.915	$128.15
IP - Psych	$56,654	$85	($2,246)	$54,492	0.770	$41,951	0.915	$4.38
Lab	$72,001	$83		$72,084	1.098	$79,166	0.915	$8.26
OP - Emergency Room & Related	$239,527	$3,254	($5,249)	$237,532	0.965	$229,315	0.915	$23.94
OP - Other	$376,534	$5,116	($9,540)	$372,109	0.965	$359,237	0.915	$37.50
Pharmacy	$575,753	$0	($37,899)	$537,854	1.060	$570,381	1.000	$65.08
Prof - Anesthesia	$17,469	$13		$17,482	1.113	$19,451	0.915	$2.03
Prof - Child EPSDT	$1,208	$1		$1,209	1.113	$1,345	0.915	$0.14
Prof - Evaluation & Management	$238,419	$176		$238,596	1.113	$265,472	0.915	$27.72
Prof - Maternity	$0	$0		$0	1.113	$0	0.915	$0.00
Prof - Other	$53,305	$39		$53,344	1.113	$59,353	0.915	$6.20
Prof - Psych	$30,541	$23		$30,564	1.113	$34,007	0.915	$3.55
Prof - Specialist	$141,270	$105		$141,374	1.113	$157,299	0.915	$16.42
Prof - Vision	$7,506	$6		$7,512	1.113	$8,358	0.915	$0.87
Radiology	$37,769	$44		$37,813	1.098	$41,528	0.915	$4.34
Transportation/Ambulance	$13,189	$15	$5,068	$18,272	1.098	$20,067	0.915	$2.10
Non-ER Transportation	$0	$0		$0	1.000	$0	1.000	$2.00
Provider Incentive Payment Adjustment								$0.90
Total	$3,018,145	$9,026	$21,629	$3,048,800		$3,162,388		$338.59
Admin Cost Adjustment								$32.85
Medallion II Capitation Rate								**$371.44**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4d

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Low Income Families with Children (LIFC)
PCCM Roanoke-Alleghany

Age 45 and Over								
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$34,244	$40		$34,284	1.098	$37,652	0.915	$6.85
FQHC / RHC	$26,989	$20		$27,009	1.113	$30,052	0.915	$5.47
Home Health	$0	$0		$0	0.965	$0	0.915	$0.00
IP - Maternity	$0	$0		$0	1.036	$0	0.915	$0.00
IP - Newborn	$0	$0		$0	1.036	$0	0.915	$0.00
IP - Other	$547,750	$12	$35,166	$582,928	1.036	$603,746	0.915	$109.91
IP - Psych	$49,405	$74	($1,959)	$47,520	0.770	$36,584	0.915	$6.66
Lab	$82,516	$96		$82,612	1.098	$90,728	0.915	$16.52
OP - Emergency Room & Related	$107,168	$1,456	($2,349)	$106,275	0.965	$102,599	0.915	$18.68
OP - Other	$431,123	$5,857	($10,923)	$426,057	0.965	$411,318	0.915	$74.88
Pharmacy	$599,322	$0	($39,451)	$559,871	1.060	$593,729	1.000	$118.13
Prof - Anesthesia	$13,632	$10		$13,642	1.113	$15,179	0.915	$2.76
Prof - Child EPSDT	$1,695	$1		$1,696	1.113	$1,888	0.915	$0.34
Prof - Evaluation & Management	$174,516	$129		$174,646	1.113	$194,318	0.915	$35.38
Prof - Maternity	$0	$0		$0	1.113	$0	0.915	$0.00
Prof - Other	$70,967	$53		$71,020	1.113	$79,020	0.915	$14.39
Prof - Psych	$22,520	$17		$22,536	1.113	$25,075	0.915	$4.56
Prof - Specialist	$121,755	$90		$121,845	1.113	$135,570	0.915	$24.68
Prof - Vision	$10,789	$8		$10,797	1.113	$12,013	0.915	$2.19
Radiology	$45,814	$53		$45,867	1.098	$50,373	0.915	$9.17
Transportation/Ambulance	$9,481	$11	$3,643	$13,134	1.098	$14,425	0.915	$2.63
Non-ER Transportation	$0	$0		$0	1.000	$0	1.000	$2.00
Provider Incentive Payment Adjustment								$1.21
Total	$2,349,686	$7,926	($15,872)	$2,341,741		$2,434,269		$456.42
Admin Cost Adjustment								$44.28
Medallion II Capitation Rate								**$500.71**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4d

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Low Income Families with Children (LIFC)
PCCM Far Southwest

Age Under 1								
Far Southwest	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$749,759	$887	($5,761)	$744,884	1.087	$809,755	0.915	$18.05
FQHC / RHC	$514,887	$398		$515,285	1.109	$571,548	0.915	$12.74
Home Health	$15,863	$167		$16,029	1.012	$16,220	0.915	$0.36
IP - Maternity	$0	$0		$0	1.009	$0	0.915	$0.00
IP - Newborn	$345,594	$269	$22,204	$368,067	1.009	$371,210	0.915	$8.28
IP - Other	$1,255,733	$978	$80,680	$1,337,390	1.009	$1,348,810	0.915	$30.07
IP - Psych	$0	$0		$0	1.043	$0	0.915	$0.00
Lab	$210,328	$249		$210,576	1.087	$228,915	0.915	$5.10
OP - Emergency Room & Related	$405,599	$4,260	($8,862)	$400,997	1.012	$405,772	0.915	$9.05
OP - Other	$488,192	$5,127	($12,331)	$480,988	1.012	$486,715	0.915	$10.85
Pharmacy	$1,916,178	$2	($259,656)	$1,656,523	1.147	$1,900,260	1.000	$46.30
Prof - Anesthesia	$30,552	$24		$30,575	1.109	$33,914	0.915	$0.76
Prof - Child EPSDT	$147,538	$114		$147,652	1.109	$163,774	0.915	$3.65
Prof - Evaluation & Management	$2,181,164	$1,685		$2,182,849	1.109	$2,421,189	0.915	$53.97
Prof - Maternity	$0	$0		$0	1.109	$0	0.915	$0.00
Prof - Other	$817,670	$632		$818,301	1.109	$907,650	0.915	$20.23
Prof - Psych	$201	$0		$201	1.109	$223	0.915	$0.00
Prof - Specialist	$156,137	$121		$156,257	1.109	$173,319	0.915	$3.86
Prof - Vision	$16,014	$12		$16,026	1.109	$17,776	0.915	$0.40
Radiology	$98,047	$116		$98,163	1.087	$106,712	0.915	$2.38
Transportation/Ambulance	$73,578	$87	$28,272	$101,937	1.087	$110,814	0.915	$2.47
Non-ER Transportation	$0	$0		$0	1.000	$0	1.000	$1.04
Provider Incentive Payment Adjustment								$0.61
Total	$9,423,032	$15,126	($155,454)	$9,282,704		$10,074,577		$230.17
Admin Cost Adjustment								$25.60
Medallion II Capitation Rate								**$255.77**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4d

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Low Income Families with Children (LIFC)
PCCM Far Southwest

Age 1-5								
Far Southwest	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$375,180	$444	($2,883)	$372,741	1.087	$405,202	0.915	$1.87
FQHC / RHC	$1,498,249	$1,157		$1,499,406	1.109	$1,663,123	0.915	$7.67
Home Health	$50,213	$527		$50,740	1.012	$51,344	0.915	$0.24
IP - Maternity	$0	$0		$0	1.009	$0	0.915	$0.00
IP - Newborn	$41,014	$32	$2,635	$43,682	1.009	$44,055	0.915	$0.20
IP - Other	$2,299,436	$1,790	$147,737	$2,448,963	1.009	$2,469,874	0.915	$11.39
IP - Psych	$3,165	$1	($125)	$3,041	1.043	$3,173	0.915	$0.01
Lab	$832,974	$985		$833,960	1.087	$906,588	0.915	$4.18
OP - Emergency Room & Related	$1,549,793	$16,277	($33,860)	$1,532,209	1.012	$1,550,454	0.915	$7.15
OP - Other	$2,163,213	$22,719	($54,640)	$2,131,292	1.012	$2,156,670	0.915	$9.95
Pharmacy	$5,902,001	$7	($799,765)	$5,102,243	1.147	$5,852,974	1.000	$29.51
Prof - Anesthesia	$229,673	$177		$229,851	1.109	$254,947	0.915	$1.18
Prof - Child EPSDT	$183,737	$142		$183,879	1.109	$203,956	0.915	$0.94
Prof - Evaluation & Management	$5,320,424	$4,110		$5,324,534	1.109	$5,905,907	0.915	$27.25
Prof - Maternity	$0	$0		$0	1.109	$0	0.915	$0.00
Prof - Other	$1,438,897	$1,112		$1,440,009	1.109	$1,597,240	0.915	$7.37
Prof - Psych	$200,820	$155		$200,975	1.109	$222,919	0.915	$1.03
Prof - Specialist	$641,728	$496		$642,224	1.109	$712,347	0.915	$3.29
Prof - Vision	$265,525	$205		$265,730	1.109	$294,745	0.915	$1.36
Radiology	$559,329	$662		$559,990	1.087	$608,759	0.915	$2.81
Transportation/Ambulance	$150,298	$178	$57,752	$208,228	1.087	$226,362	0.915	$1.04
Non-ER Transportation	$0	$0		$0	1.000	$0	1.000	$1.04
Provider Incentive Payment Adjustment								$0.32
Total	$23,705,669	$51,176	($683,150)	$23,073,695		$25,130,638		$119.80
Admin Cost Adjustment								$13.33
Medallion II Capitation Rate								**$133.12**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4d

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Low Income Families with Children (LIFC)
PCCM Far Southwest

Age 6-14								
Far Southwest	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$513,455	$607	($1,074)	$512,988	1.087	$557,663	0.915	$1.69
FQHC / RHC	$2,065,261	$1,595		$2,066,857	1.109	$2,292,532	0.915	$6.97
Home Health	$0	$0		$0	1.012	$0	0.915	$0.00
IP - Maternity	$35,701	$28	$2,294	$38,022	1.009	$38,347	0.915	$0.12
IP - Newborn	$72,900	$57	$4,684	$77,641	1.009	$78,304	0.915	$0.24
IP - Other	$1,909,212	$1,486	$122,665	$2,033,363	1.009	$2,050,726	0.915	$6.23
IP - Psych	$288,558	$104	($11,427)	$277,235	1.043	$289,266	0.915	$0.88
Lab	$1,109,807	$1,313		$1,111,120	1.087	$1,207,885	0.915	$3.67
OP - Emergency Room & Related	$2,396,259	$25,167	($52,354)	$2,369,072	1.012	$2,397,281	0.915	$7.29
OP - Other	$2,680,448	$28,151	($67,705)	$2,640,895	1.012	$2,672,341	0.915	$8.12
Pharmacy	$15,923,019	$18	($2,157,688)	$13,765,349	1.147	$15,790,749	1.000	$52.45
Prof - Anesthesia	$157,695	$122		$157,817	1.109	$175,049	0.915	$0.53
Prof - Child EPSDT	$56,057	$43		$56,100	1.109	$62,226	0.915	$0.19
Prof - Evaluation & Management	$5,532,706	$4,274		$5,536,980	1.109	$6,141,550	0.915	$18.67
Prof - Maternity	$24,380	$19		$24,399	1.109	$27,063	0.915	$0.08
Prof - Other	$1,579,308	$1,220		$1,580,528	1.109	$1,753,103	0.915	$5.33
Prof - Psych	$1,485,762	$1,148	$68,674	$1,555,584	1.109	$1,725,434	0.915	$5.24
Prof - Specialist	$905,380	$699		$906,079	1.109	$1,005,012	0.915	$3.05
Prof - Vision	$1,074,488	$830		$1,075,318	1.109	$1,192,729	0.915	$3.63
Radiology	$432,660	$512		$433,172	1.087	$470,896	0.915	$1.43
Transportation/Ambulance	$117,927	$139	$45,313	$163,380	1.087	$177,609	0.915	$0.54
Non-ER Transportation	$0	$0		$0	1.000	$0	1.000	$1.04
Provider Incentive Payment Adjustment								$0.34
Total	$38,360,983	$67,533	($2,046,618)	$36,381,898		$40,105,762		$127.73
Admin Cost Adjustment								$14.21
Medallion II Capitation Rate								**$141.94**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4d

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Low Income Families with Children (LIFC)
PCCM Far Southwest

Age 15-20 Female								
Far Southwest	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$94,448	$112	($198)	$94,362	1.087	$102,579	0.915	$1.41
FQHC / RHC	$687,098	$531		$687,629	1.109	$762,710	0.915	$10.45
Home Health	$0	$0		$0	1.012	$0	0.915	$0.00
IP - Maternity	$2,373,341	$1,848	$152,485	$2,527,675	1.009	$2,549,258	0.915	$34.94
IP - Newborn	$15,321	$12	$984	$16,317	1.009	$16,456	0.915	$0.23
IP - Other	$857,858	$668	$55,117	$913,643	1.009	$921,444	0.915	$12.63
IP - Psych	$249,756	$90	($9,890)	$239,955	1.043	$250,369	0.915	$3.43
Lab	$983,761	$1,164		$984,925	1.087	$1,070,700	0.915	$14.67
OP - Emergency Room & Related	$1,359,540	$14,278	($29,704)	$1,344,115	1.012	$1,360,120	0.915	$18.64
OP - Other	$1,507,355	$15,831	($38,074)	$1,485,112	1.012	$1,502,795	0.915	$20.60
Pharmacy	$3,025,325	$3	($409,954)	$2,615,374	1.147	$3,000,194	1.000	$44.94
Prof - Anesthesia	$187,207	$145		$187,352	1.109	$207,808	0.915	$2.85
Prof - Child EPSDT	$34,665	$27		$34,692	1.109	$38,480	0.915	$0.53
Prof - Evaluation & Management	$1,768,175	$1,366		$1,769,541	1.109	$1,962,753	0.915	$26.90
Prof - Maternity	$1,626,452	$1,256		$1,627,708	1.109	$1,805,434	0.915	$24.74
Prof - Other	$557,879	$431		$558,310	1.109	$619,271	0.915	$8.49
Prof - Psych	$265,224	$205	$12,259	$277,688	1.109	$308,008	0.915	$4.22
Prof - Specialist	$348,766	$269		$349,036	1.109	$387,146	0.915	$5.31
Prof - Vision	$280,072	$216		$280,289	1.109	$310,893	0.915	$4.26
Radiology	$629,150	$744		$629,894	1.087	$684,750	0.915	$9.38
Transportation/Ambulance	$93,992	$111	$36,116	$130,220	1.087	$141,560	0.915	$1.94
Non-ER Transportation	$0	$0		$0	1.000	$0	1.000	$1.04
Provider Incentive Payment Adjustment								$0.67
Total	$16,945,385	$39,307	($230,858)	$16,753,835		$18,002,728		$252.25
Admin Cost Adjustment								$28.06
Medallion II Capitation Rate								**$280.31**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4d

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Low Income Families with Children (LIFC)
PCCM Far Southwest

Age 21-44 Female								
Far Southwest	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$407,805	$472		$408,277	1.098	$448,389	0.915	$3.64
FQHC / RHC	$1,487,856	$1,101		$1,488,957	1.113	$1,656,679	0.915	$13.46
Home Health	$0	$0		$0	0.965	$0	0.915	$0.00
IP - Maternity	$5,645,666	$126	$362,456	$6,008,247	1.036	$6,222,822	0.915	$50.54
IP - Newborn	$3,202	$0	$206	$3,407	1.036	$3,529	0.915	$0.03
IP - Other	$5,455,368	$122	$350,238	$5,805,729	1.036	$6,013,071	0.915	$48.84
IP - Psych	$643,955	$962	($25,529)	$619,388	0.770	$476,838	0.915	$3.87
Lab	$3,107,885	$3,600		$3,111,485	1.098	$3,417,177	0.915	$27.75
OP - Emergency Room & Related	$3,955,527	$53,740	($86,686)	$3,922,581	0.965	$3,786,886	0.915	$30.76
OP - Other	$5,228,876	$71,039	($132,478)	$5,167,437	0.965	$4,988,678	0.915	$40.52
Pharmacy	$15,231,415	$3	($1,002,614)	$14,228,804	1.060	$15,089,282	1.000	$133.94
Prof - Anesthesia	$520,923	$386		$521,309	1.113	$580,031	0.915	$4.71
Prof - Child EPSDT	$72,489	$54		$72,542	1.113	$80,714	0.915	$0.66
Prof - Evaluation & Management	$3,873,546	$2,867		$3,876,413	1.113	$4,313,067	0.915	$35.03
Prof - Maternity	$3,639,287	$2,694		$3,641,981	1.113	$4,052,227	0.915	$32.91
Prof - Other	$928,138	$687		$928,825	1.113	$1,033,451	0.915	$8.39
Prof - Psych	$441,317	$327		$441,644	1.113	$491,392	0.915	$3.99
Prof - Specialist	$1,591,761	$1,178		$1,592,939	1.113	$1,772,373	0.915	$14.40
Prof - Vision	$111,524	$83		$111,606	1.113	$124,178	0.915	$1.01
Radiology	$1,631,010	$1,889		$1,632,899	1.098	$1,793,326	0.915	$14.57
Transportation/Ambulance	$305,748	$354	$117,480	$423,582	1.098	$465,198	0.915	$3.78
Non-ER Transportation	$0	$0		$0	1.000	$0	1.000	$2.00
Provider Incentive Payment Adjustment								$1.27
Total	$54,283,296	$141,682	($416,927)	$54,008,052		$56,809,308		$476.05
Admin Cost Adjustment								$46.19
Medallion II Capitation Rate								**$522.24**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4d

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Low Income Families with Children (LIFC)
PCCM Far Southwest

Age 15-20 Male								
Far Southwest	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$147,580	$175	($309)	$147,446	1.087	$160,286	0.915	$2.54
FQHC / RHC	$348,870	$270		$349,139	1.109	$387,261	0.915	$6.14
Home Health	$0	$0		$0	1.012	$0	0.915	$0.00
IP - Maternity	$0	$0		$0	1.009	$0	0.915	$0.00
IP - Newborn	$40,230	$31	$2,585	$42,846	1.009	$43,212	0.915	$0.69
IP - Other	$1,015,436	$791	$65,241	$1,081,468	1.009	$1,090,702	0.915	$17.30
IP - Psych	$172,677	$62	($6,838)	$165,901	1.043	$173,101	0.915	$2.75
Lab	$248,543	$294		$248,837	1.087	$270,507	0.915	$4.29
OP - Emergency Room & Related	$854,629	$8,976	($18,672)	$844,932	1.012	$854,993	0.915	$13.56
OP - Other	$994,837	$10,448	($25,128)	$980,157	1.012	$991,828	0.915	$15.73
Pharmacy	$2,673,244	$3	($362,245)	$2,311,003	1.147	$2,651,038	1.000	$45.95
Prof - Anesthesia	$31,551	$24		$31,575	1.109	$35,023	0.915	$0.56
Prof - Child EPSDT	$6,879	$5		$6,884	1.109	$7,636	0.915	$0.12
Prof - Evaluation & Management	$999,772	$772		$1,000,544	1.109	$1,109,791	0.915	$17.60
Prof - Maternity	$0	$0		$0	1.109	$0	0.915	$0.00
Prof - Other	$269,227	$208		$269,435	1.109	$298,854	0.915	$4.74
Prof - Psych	$211,450	$163	$9,773	$221,387	1.109	$245,560	0.915	$3.89
Prof - Specialist	$283,771	$219		$283,990	1.109	$314,999	0.915	$5.00
Prof - Vision	$169,529	$131		$169,660	1.109	$188,184	0.915	$2.98
Radiology	$144,576	$171		$144,747	1.087	$157,352	0.915	$2.50
Transportation/Ambulance	$50,099	$59	$19,250	$69,409	1.087	$75,454	0.915	$1.20
Non-ER Transportation	$0	$0		$0	1.000	$0	1.000	$1.04
Provider Incentive Payment Adjustment								$0.40
Total	$8,662,898	$22,803	($316,342)	$8,369,359		$9,055,781		$148.97
Admin Cost Adjustment								$16.57
Medallion II Capitation Rate								**$165.54**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4d

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Low Income Families with Children (LIFC)
PCCM Far Southwest

Age 21-44 Male								
Far Southwest	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$163,525	$189		$163,714	1.098	$179,799	0.915	$6.94
FQHC / RHC	$253,235	$187		$253,422	1.113	$281,969	0.915	$10.88
Home Health	$0	$0		$0	0.965	$0	0.915	$0.00
IP - Maternity	$0	$0		$0	1.036	$0	0.915	$0.00
IP - Newborn	$0	$0		$0	1.036	$0	0.915	$0.00
IP - Other	$1,397,093	$31	$89,694	$1,486,818	1.036	$1,539,918	0.915	$59.41
IP - Psych	$125,101	$187	($4,959)	$120,328	0.770	$92,635	0.915	$3.57
Lab	$463,084	$536		$463,621	1.098	$509,170	0.915	$19.64
OP - Emergency Room & Related	$773,307	$10,506	($16,947)	$766,866	0.965	$740,337	0.915	$28.56
OP - Other	$1,020,755	$13,868	($25,862)	$1,008,762	0.965	$973,865	0.915	$37.57
Pharmacy	$3,179,580	$1	($209,297)	$2,970,284	1.060	$3,149,910	1.000	$132.81
Prof - Anesthesia	$32,071	$24		$32,095	1.113	$35,710	0.915	$1.38
Prof - Child EPSDT	$2,459	$2		$2,461	1.113	$2,738	0.915	$0.11
Prof - Evaluation & Management	$705,466	$522		$705,988	1.113	$785,513	0.915	$30.31
Prof - Maternity	$0	$0		$0	1.113	$0	0.915	$0.00
Prof - Other	$147,184	$109		$147,293	1.113	$163,885	0.915	$6.32
Prof - Psych	$89,545	$66		$89,611	1.113	$99,706	0.915	$3.85
Prof - Specialist	$292,172	$216		$292,388	1.113	$325,324	0.915	$12.55
Prof - Vision	$16,936	$13		$16,949	1.113	$18,858	0.915	$0.73
Radiology	$157,912	$183		$158,095	1.098	$173,627	0.915	$6.70
Transportation/Ambulance	$51,787	$60	$19,899	$71,746	1.098	$78,794	0.915	$3.04
Non-ER Transportation	$0	$0		$0	1.000	$0	1.000	$2.00
Provider Incentive Payment Adjustment								$0.98
Total	$8,871,211	$26,701	($147,472)	$8,750,439		$9,151,756		$367.35
Admin Cost Adjustment								$35.64
Medallion II Capitation Rate								**$402.99**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4d

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Low Income Families with Children (LIFC)
PCCM Far Southwest

Age 45 and Over								
Far Southwest	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$149,430	$173		$149,603	1.098	$164,301	0.915	$13.37
FQHC / RHC	$185,876	$138		$186,014	1.113	$206,967	0.915	$16.84
Home Health	$0	$0		$0	0.965	$0	0.915	$0.00
IP - Maternity	$0	$0		$0	1.036	$0	0.915	$0.00
IP - Newborn	$0	$0		$0	1.036	$0	0.915	$0.00
IP - Other	$1,009,781	$23	$64,829	$1,074,632	1.036	$1,113,011	0.915	$90.55
IP - Psych	$83,446	$125	($3,308)	$80,262	0.770	$61,790	0.915	$5.03
Lab	$234,588	$272		$234,860	1.098	$257,934	0.915	$20.98
OP - Emergency Room & Related	$321,046	$4,362	($7,036)	$318,372	0.965	$307,358	0.915	$25.01
OP - Other	$825,810	$11,219	($20,923)	$816,107	0.965	$787,875	0.915	$64.10
Pharmacy	$2,279,057	$0	($150,020)	$2,129,038	1.060	$2,257,790	1.000	$200.75
Prof - Anesthesia	$23,999	$18		$24,017	1.113	$26,722	0.915	$2.17
Prof - Child EPSDT	$3,004	$2		$3,007	1.113	$3,345	0.915	$0.27
Prof - Evaluation & Management	$439,422	$325		$439,748	1.113	$489,282	0.915	$39.81
Prof - Maternity	$0	$0		$0	1.113	$0	0.915	$0.00
Prof - Other	$194,562	$144		$194,706	1.113	$216,639	0.915	$17.62
Prof - Psych	$74,946	$55		$75,002	1.113	$83,450	0.915	$6.79
Prof - Specialist	$222,659	$165		$222,824	1.113	$247,924	0.915	$20.17
Prof - Vision	$18,714	$14		$18,728	1.113	$20,837	0.915	$1.70
Radiology	$122,895	$142		$123,037	1.098	$135,125	0.915	$10.99
Transportation/Ambulance	$23,398	$27	$8,990	$32,415	1.098	$35,599	0.915	$2.90
Non-ER Transportation	$0	$0		$0	1.000	$0	1.000	$2.00
Provider Incentive Payment Adjustment								$1.44
Total	$6,212,634	$17,204	($107,467)	$6,122,370		$6,415,951		$542.49
Admin Cost Adjustment								$52.63
Medallion II Capitation Rate								**$595.12**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4e

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Aged, Blind, and Disabled (ABAD)
PCCM Roanoke-Alleghany

Age Under 1								
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$17,885	$35	($286)	$17,634	1.102	$19,433	0.915	$126.45
FQHC / RHC	$0			$0	1.138	$0	0.915	$0.00
Home Health	$263	$3		$265	1.117	$296	0.915	$1.93
IP - Maternity	$0			$0	0.970	$0	0.915	$0.00
IP - Newborn	$150,482	$84	$9,666	$160,232	0.970	$155,478	0.915	$1,011.67
IP - Other	$42,100	$24	$2,704	$44,828	0.970	$43,498	0.915	$283.03
IP - Psych	$0			$0	0.989	$0	0.915	$0.00
Lab	$913	$2		$914	1.102	$1,008	0.915	$6.56
OP - Emergency Room & Related	$1,872	$21	($37)	$1,856	1.117	$2,073	0.915	$13.49
OP - Other	$6,177	$68	($156)	$6,089	1.117	$6,802	0.915	$44.26
Pharmacy	$92,930	$0	($8,529)	$84,401	1.135	$95,787	1.000	$681.17
Prof - Anesthesia	$456	$0		$456	1.138	$519	0.915	$3.38
Prof - Child EPSDT	$352	$0		$352	1.138	$401	0.915	$2.61
Prof - Evaluation & Management	$50,659	$46		$50,705	1.138	$57,690	0.915	$375.38
Prof - Maternity	$0			$0	1.138	$0	0.915	$0.00
Prof - Other	$6,336	$6		$6,342	1.138	$7,216	0.915	$46.95
Prof - Psych	$0			$0	1.138	$0	0.915	$0.00
Prof - Specialist	$2,855	$3		$2,858	1.138	$3,251	0.915	$21.16
Prof - Vision	$289	$0		$290	1.138	$330	0.915	$2.14
Radiology	$8,675	$17		$8,692	1.102	$9,578	0.915	$62.33
Transportation/Ambulance	$530	$1	$204	$735	1.102	$810	0.915	$5.27
Non-ER Transportation	$0			$0	1.000	$0	1.000	$14.64
Provider Incentive Payment Adjustment								$7.21
Total	$382,773	$309	$3,566	$386,648		$404,169		$2,709.61
Admin Cost Adjustment								$224.19
Medallion II Capitation Rate								**$2,933.80**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4e

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Aged, Blind, and Disabled (ABAD)
PCCM Roanoke-Alleghany

Age 1-5								
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$151,742	$293	($2,424)	$149,611	1.102	$164,875	0.915	$87.83
FQHC / RHC	$3,451	$3		$3,454	1.138	$3,930	0.915	$2.09
Home Health	$0			$0	1.117	$0	0.915	$0.00
IP - Maternity	$0			$0	0.970	$0	0.915	$0.00
IP - Newborn	$106,602	$60	$6,848	$113,510	0.970	$110,142	0.915	$58.67
IP - Other	$109,952	$62	$7,063	$117,076	0.970	$113,602	0.915	$60.52
IP - Psych	$0			$0	0.989	$0	0.915	$0.00
Lab	$13,425	$26		$13,451	1.102	$14,823	0.915	$7.90
OP - Emergency Room & Related	$16,279	$178	($323)	$16,134	1.117	$18,024	0.915	$9.60
OP - Other	$137,301	$1,505	($3,466)	$135,341	1.117	$151,187	0.915	$80.54
Pharmacy	$318,555	$1	($29,238)	$289,318	1.135	$328,350	1.000	$191.16
Prof - Anesthesia	$7,027	$6		$7,033	1.138	$8,002	0.915	$4.26
Prof - Child EPSDT	$1,942	$2		$1,944	1.138	$2,212	0.915	$1.18
Prof - Evaluation & Management	$91,881	$84		$91,965	1.138	$104,632	0.915	$55.74
Prof - Maternity	$0			$0	1.138	$0	0.915	$0.00
Prof - Other	$109,868	$100		$109,968	1.138	$125,115	0.915	$66.65
Prof - Psych	$6,762	$6		$6,769	1.138	$7,701	0.915	$4.10
Prof - Specialist	$21,857	$20		$21,876	1.138	$24,890	0.915	$13.26
Prof - Vision	$4,875	$4		$4,879	1.138	$5,551	0.915	$2.96
Radiology	$80,520	$156		$80,675	1.102	$88,906	0.915	$47.36
Transportation/Ambulance	$2,638	$5	$1,014	$3,657	1.102	$4,030	0.915	$2.15
Non-ER Transportation	$0			$0	1.000	$0	1.000	$14.64
Provider Incentive Payment Adjustment								$1.90
Total	$1,184,675	$2,511	($20,526)	$1,166,660		$1,275,972		$712.50
Admin Cost Adjustment								$58.95
Medallion II Capitation Rate								**$771.45**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4e

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Aged, Blind, and Disabled (ABAD)
PCCM Roanoke-Alleghany

Age 6-20								
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$497,204	$962	($5,028)	$493,138	1.102	$543,451	0.915	$29.89
FQHC / RHC	$20,149	$18		$20,167	1.138	$22,945	0.915	$1.26
Home Health	$7,625	$84		$7,709	1.117	$8,612	0.915	$0.47
IP - Maternity	$49,575	$28	$3,184	$52,787	0.970	$51,221	0.915	$2.82
IP - Newborn	$75,945	$42	$4,878	$80,866	0.970	$78,466	0.915	$4.32
IP - Other	$691,175	$387	$44,398	$735,960	0.970	$714,124	0.915	$39.28
IP - Psych	$358,996	$1,339	($14,264)	$346,071	0.989	$342,315	0.915	$18.83
Lab	$130,333	$252		$130,585	1.102	$143,909	0.915	$7.92
OP - Emergency Room & Related	$171,044	$1,874	($3,391)	$169,528	1.117	$189,378	0.915	$10.42
OP - Other	$580,364	$6,360	($14,649)	$572,075	1.117	$639,059	0.915	$35.15
Pharmacy	$6,373,223	$18	($584,954)	$5,788,286	1.135	$6,569,188	1.000	$394.90
Prof - Anesthesia	$19,744	$18		$19,762	1.138	$22,484	0.915	$1.24
Prof - Child EPSDT	$5,391	$5		$5,395	1.138	$6,139	0.915	$0.34
Prof - Evaluation & Management	$480,797	$438		$481,235	1.138	$547,523	0.915	$30.12
Prof - Maternity	$28,542	$26		$28,568	1.138	$32,503	0.915	$1.79
Prof - Other	$290,062	$264		$290,327	1.138	$330,317	0.915	$18.17
Prof - Psych	$327,009	$298	$17,647	$344,954	1.138	$392,469	0.915	$21.59
Prof - Specialist	$83,889	$76		$83,965	1.138	$95,531	0.915	$5.25
Prof - Vision	$59,177	$54		$59,231	1.138	$67,390	0.915	$3.71
Radiology	$40,347	$78		$40,425	1.102	$44,549	0.915	$2.45
Transportation/Ambulance	$22,450	$43	$8,633	$31,126	1.102	$34,302	0.915	$1.89
Non-ER Transportation	$0			$0	1.000	$0	1.000	$14.64
Provider Incentive Payment Adjustment								$1.72
Total	$10,313,041	$12,665	($543,545)	$9,782,160		$10,875,872		$648.15
Admin Cost Adjustment								$53.63
Medallion II Capitation Rate								**$701.78**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4e

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Aged, Blind, and Disabled (ABAD)
PCCM Roanoke-Alleghany

Age 21-44 Female								
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$253,107	$490		$253,597	1.102	$279,470	0.915	$23.06
FQHC / RHC	$42,892	$39		$42,931	1.138	$48,845	0.915	$4.03
Home Health	$29,478	$323		$29,801	1.117	$33,290	0.915	$2.75
IP - Maternity	$117,482	$66	$7,546	$125,094	0.970	$121,382	0.915	$10.02
IP - Newborn	$0			$0	0.970	$0	0.915	$0.00
IP - Other	$1,659,341	$928	$106,588	$1,766,857	0.970	$1,714,434	0.915	$141.46
IP - Psych	$310,968	$1,160	($12,355)	$299,772	0.989	$296,518	0.915	$24.47
Lab	$274,372	$531		$274,903	1.102	$302,950	0.915	$25.00
OP - Emergency Room & Related	$399,011	$4,373	($7,911)	$395,473	1.117	$441,778	0.915	$36.45
OP - Other	$878,890	$9,631	($22,183)	$866,338	1.117	$967,777	0.915	$79.85
Pharmacy	$2,985,638	$8	($274,031)	$2,711,615	1.135	$3,077,441	1.000	$277.51
Prof - Anesthesia	$33,051	$30		$33,081	1.138	$37,638	0.915	$3.11
Prof - Child EPSDT	$5,986	$5		$5,991	1.138	$6,816	0.915	$0.56
Prof - Evaluation & Management	$564,403	$514		$564,917	1.138	$642,731	0.915	$53.03
Prof - Maternity	$47,062	$43		$47,105	1.138	$53,593	0.915	$4.42
Prof - Other	$310,638	$283		$310,921	1.138	$353,748	0.915	$29.19
Prof - Psych	$131,823	$120		$131,943	1.138	$150,117	0.915	$12.39
Prof - Specialist	$196,942	$179		$197,121	1.138	$224,274	0.915	$18.51
Prof - Vision	$21,475	$20		$21,494	1.138	$24,455	0.915	$2.02
Radiology	$101,003	$195		$101,199	1.102	$111,524	0.915	$9.20
Transportation/Ambulance	$48,407	$94	$18,614	$67,115	1.102	$73,963	0.915	$6.10
Non-ER Transportation	$0			$0	1.000	$0	1.000	$29.26
Provider Incentive Payment Adjustment								$2.11
Total	$8,411,967	$19,033	($183,732)	$8,247,268		$8,962,744		$794.49
Admin Cost Adjustment								$65.74
Medallion II Capitation Rate								**$860.23**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4e

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Aged, Blind, and Disabled (ABAD)
PCCM Roanoke-Alleghany

Age 21-44 Male								
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$278,581	$539		$279,119	1.102	$307,597	0.915	$34.21
FQHC / RHC	$16,661	$15		$16,676	1.138	$18,973	0.915	$2.11
Home Health	$6,732	$74		$6,806	1.117	$7,603	0.915	$0.85
IP - Maternity	$0			$0	0.970	$0	0.915	$0.00
IP - Newborn	$0			$0	0.970	$0	0.915	$0.00
IP - Other	$1,563,411	$875	$100,426	$1,664,711	0.970	$1,615,319	0.915	$179.64
IP - Psych	$284,931	$1,063	($11,321)	$274,673	0.989	$271,691	0.915	$30.21
Lab	$96,677	$187		$96,864	1.102	$106,747	0.915	$11.87
OP - Emergency Room & Related	$247,691	$2,714	($4,911)	$245,495	1.117	$274,240	0.915	$30.50
OP - Other	$424,221	$4,649	($10,707)	$418,163	1.117	$467,125	0.915	$51.95
Pharmacy	$2,008,254	$6	($184,324)	$1,823,936	1.135	$2,070,004	1.000	$251.59
Prof - Anesthesia	$16,479	$15		$16,494	1.138	$18,766	0.915	$2.09
Prof - Child EPSDT	$1,076	$1		$1,077	1.138	$1,226	0.915	$0.14
Prof - Evaluation & Management	$300,317	$274		$300,590	1.138	$341,995	0.915	$38.03
Prof - Maternity	$0			$0	1.138	$0	0.915	$0.00
Prof - Other	$279,108	$254		$279,363	1.138	$317,843	0.915	$35.35
Prof - Psych	$59,009	$54		$59,062	1.138	$67,198	0.915	$7.47
Prof - Specialist	$104,351	$95		$104,447	1.138	$118,833	0.915	$13.22
Prof - Vision	$12,149	$11		$12,160	1.138	$13,835	0.915	$1.54
Radiology	$39,189	$76		$39,265	1.102	$43,271	0.915	$4.81
Transportation/Ambulance	$25,012	$48	$9,618	$34,678	1.102	$38,216	0.915	$4.25
Non-ER Transportation	$0			$0	1.000	$0	1.000	$29.26
Provider Incentive Payment Adjustment								$1.95
Total	$5,763,849	$10,949	($101,219)	$5,673,580		$6,100,481		$731.01
Admin Cost Adjustment								$60.48
Medallion II Capitation Rate								**$791.50**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4e

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Aged, Blind, and Disabled (ABAD)
PCCM Roanoke-Alleghany

Age 45 and Over								
Roanoke/Alleghany	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$1,130,721	$2,187		$1,132,908	1.102	$1,248,493	0.915	$40.58
FQHC / RHC	$115,121	$105		$115,226	1.138	$131,097	0.915	$4.26
Home Health	$152,010	$1,666		$153,675	1.117	$171,669	0.915	$5.58
IP - Maternity	$0			$0	0.970	$0	0.915	$0.00
IP - Newborn	$0			$0	0.970	$0	0.915	$0.00
IP - Other	$8,788,708	$4,917	$564,544	$9,358,169	0.970	$9,080,508	0.915	$295.14
IP - Psych	$571,838	$2,134	($22,720)	$551,251	0.989	$545,267	0.915	$17.72
Lab	$656,481	$1,270		$657,750	1.102	$724,858	0.915	$23.56
OP - Emergency Room & Related	$758,538	$8,312	($15,038)	$751,812	1.117	$839,841	0.915	$27.30
OP - Other	$3,292,151	$36,077	($83,095)	$3,245,134	1.117	$3,625,103	0.915	$117.83
Pharmacy	$11,367,851	$31	($1,043,377)	$10,324,505	1.135	$11,717,392	1.000	$416.23
Prof - Anesthesia	$100,264	$91		$100,356	1.138	$114,179	0.915	$3.71
Prof - Child EPSDT	$21,356	$19		$21,375	1.138	$24,320	0.915	$0.79
Prof - Evaluation & Management	$1,692,796	$1,543		$1,694,339	1.138	$1,927,723	0.915	$62.66
Prof - Maternity	$0			$0	1.138	$0	0.915	$0.00
Prof - Other	$923,441	$842		$924,282	1.138	$1,051,596	0.915	$34.18
Prof - Psych	$171,172	$156		$171,328	1.138	$194,927	0.915	$6.34
Prof - Specialist	$843,623	$769		$844,392	1.138	$960,702	0.915	$31.23
Prof - Vision	$77,386	$71		$77,457	1.138	$88,126	0.915	$2.86
Radiology	$362,148	$700		$362,848	1.102	$399,868	0.915	$13.00
Transportation/Ambulance	$158,335	$306	$60,885	$219,526	1.102	$241,924	0.915	$7.86
Non-ER Transportation	$0			$0	1.000	$0	1.000	$29.26
Provider Incentive Payment Adjustment								$3.04
Total	$31,183,939	$61,196	($538,801)	$30,706,334		$33,087,595		$1,143.13
Admin Cost Adjustment								$94.58
Medallion II Capitation Rate								**$1,237.72**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4e

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Aged, Blind, and Disabled (ABAD)
PCCM Far Southwest

Age Under 1								
Far Southwest	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$16,757	$32	($268)	$16,521	1.102	$18,207	0.915	$126.21
FQHC / RHC	$2,208	$2		$2,210	1.138	$2,515	0.915	$17.43
Home Health	$863	$9		$872	1.117	$974	0.915	$6.75
IP - Maternity	$0			$0	0.970	$0	0.915	$0.00
IP - Newborn	$24,056	$13	$1,545	$25,614	0.970	$24,854	0.915	$172.29
IP - Other	$52,135	$29	$3,349	$55,513	0.970	$53,866	0.915	$373.39
IP - Psych	$0			$0	0.989	$0	0.915	$0.00
Lab	$463	$1		$464	1.102	$511	0.915	$3.54
OP - Emergency Room & Related	$1,527	$17	($30)	$1,513	1.117	$1,691	0.915	$11.72
OP - Other	$5,481	$60	($138)	$5,402	1.117	$6,035	0.915	$41.83
Pharmacy	$60,917	$0	($5,591)	$55,326	1.135	$62,790	1.000	$475.68
Prof - Anesthesia	$1,676	$2		$1,677	1.138	$1,908	0.915	$13.23
Prof - Child EPSDT	$253	$0		$253	1.138	$288	0.915	$2.00
Prof - Evaluation & Management	$21,201	$19		$21,220	1.138	$24,143	0.915	$167.36
Prof - Maternity	$0			$0	1.138	$0	0.915	$0.00
Prof - Other	$6,696	$6		$6,702	1.138	$7,625	0.915	$52.85
Prof - Psych	$0			$0	1.138	$0	0.915	$0.00
Prof - Specialist	$5,775	$5		$5,780	1.138	$6,577	0.915	$45.59
Prof - Vision	$1,354	$1		$1,355	1.138	$1,542	0.915	$10.69
Radiology	$3,471	$7		$3,478	1.102	$3,833	0.915	$26.57
Transportation/Ambulance	$3,394	$7	$1,305	$4,706	1.102	$5,186	0.915	$35.95
Non-ER Transportation	$0			$0	1.000	$0	1.000	$14.64
Provider Incentive Payment Adjustment								$4.26
Total	$208,226	$211	$172	$208,609		$222,546		$1,601.98
Admin Cost Adjustment								$132.55
Medallion II Capitation Rate								**$1,734.53**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4e

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Aged, Blind, and Disabled (ABAD)
PCCM Far Southwest

Age 1-5								
Far Southwest	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$425,423	$823	($6,796)	$419,450	1.102	$462,245	0.915	$95.54
FQHC / RHC	$28,407	$26		$28,433	1.138	$32,349	0.915	$6.69
Home Health	$10,163	$111		$10,274	1.117	$11,477	0.915	$2.37
IP - Maternity	$0			$0	0.970	$0	0.915	$0.00
IP - Newborn	$104,875	$59	$6,737	$111,670	0.970	$108,357	0.915	$22.40
IP - Other	$1,196,500	$669	$76,857	$1,274,027	0.970	$1,236,226	0.915	$255.52
IP - Psych	$0			$0	0.989	$0	0.915	$0.00
Lab	$44,980	$87		$45,067	1.102	$49,665	0.915	$10.27
OP - Emergency Room & Related	$66,842	$732	($1,325)	$66,249	1.117	$74,006	0.915	$15.30
OP - Other	$323,024	$3,540	($8,153)	$318,410	1.117	$355,693	0.915	$73.52
Pharmacy	$1,131,391	$3	($103,843)	$1,027,551	1.135	$1,166,179	1.000	$263.43
Prof - Anesthesia	$20,551	$19		$20,570	1.138	$23,403	0.915	$4.84
Prof - Child EPSDT	$3,839	$3		$3,842	1.138	$4,371	0.915	$0.90
Prof - Evaluation & Management	$307,580	$280		$307,861	1.138	$350,267	0.915	$72.40
Prof - Maternity	$0			$0	1.138	$0	0.915	$0.00
Prof - Other	$188,092	$171		$188,263	1.138	$214,195	0.915	$44.27
Prof - Psych	$18,368	$17		$18,385	1.138	$20,917	0.915	$4.32
Prof - Specialist	$55,403	$50		$55,453	1.138	$63,091	0.915	$13.04
Prof - Vision	$13,711	$12		$13,724	1.138	$15,614	0.915	$3.23
Radiology	$118,327	$229		$118,556	1.102	$130,651	0.915	$27.00
Transportation/Ambulance	$21,997	$43	$8,459	$30,498	1.102	$33,610	0.915	$6.95
Non-ER Transportation	$0			$0	1.000	$0	1.000	$14.64
Provider Incentive Payment Adjustment								$2.50
Total	$4,079,471	$6,876	($28,065)	$4,058,283		$4,352,316		$939.13
Admin Cost Adjustment								$77.70
Medallion II Capitation Rate								**$1,016.83**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4e

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Aged, Blind, and Disabled (ABAD)
PCCM Far Southwest

Age 6-20								
Far Southwest	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$639,002	$1,236	($6,462)	$633,776	1.102	$698,437	0.915	$24.26
FQHC / RHC	$259,419	$236		$259,655	1.138	$295,421	0.915	$10.26
Home Health	$0			$0	1.117	$0	0.915	$0.00
IP - Maternity	$55,429	$31	$3,560	$59,020	0.970	$57,269	0.915	$1.99
IP - Newborn	$47,901	$27	$3,077	$51,004	0.970	$49,491	0.915	$1.72
IP - Other	$949,506	$531	$60,992	$1,011,028	0.970	$981,031	0.915	$34.07
IP - Psych	$385,011	$1,437	($15,297)	$371,150	0.989	$367,121	0.915	$12.75
Lab	$247,582	$479		$248,061	1.102	$273,369	0.915	$9.50
OP - Emergency Room & Related	$401,300	$4,398	($7,956)	$397,741	1.117	$444,312	0.915	$15.43
OP - Other	$921,794	$10,102	($23,266)	$908,629	1.117	$1,015,019	0.915	$35.26
Pharmacy	$8,173,488	$22	($750,188)	$7,423,322	1.135	$8,424,808	1.000	$319.81
Prof - Anesthesia	$30,571	$28		$30,598	1.138	$34,813	0.915	$1.21
Prof - Child EPSDT	$7,007	$6		$7,014	1.138	$7,980	0.915	$0.28
Prof - Evaluation & Management	$797,686	$727		$798,413	1.138	$908,389	0.915	$31.55
Prof - Maternity	$28,748	$26		$28,774	1.138	$32,738	0.915	$1.14
Prof - Other	$633,313	$577		$633,890	1.138	$721,204	0.915	$25.05
Prof - Psych	$360,053	$328	$19,430	$379,811	1.138	$432,128	0.915	$15.01
Prof - Specialist	$134,379	$122		$134,501	1.138	$153,028	0.915	$5.32
Prof - Vision	$104,313	$95		$104,408	1.138	$118,790	0.915	$4.13
Radiology	$89,467	$173		$89,640	1.102	$98,786	0.915	$3.43
Transportation/Ambulance	$42,712	$83	$16,424	$59,218	1.102	$65,260	0.915	$2.27
Non-ER Transportation	$0			$0	1.000	$0	1.000	$14.64
Provider Incentive Payment Adjustment								$1.52
Total	$14,308,677	$20,664	($699,687)	$13,629,654		$15,179,394		$570.58
Admin Cost Adjustment								$47.21
Medallion II Capitation Rate								**$617.79**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4e

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Aged, Blind, and Disabled (ABAD)
PCCM Far Southwest

Age 21-44 Female								
Far Southwest	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$869,579	$1,682		$871,261	1.102	$960,152	0.915	$21.72
FQHC / RHC	$704,777	$642		$705,419	1.138	$802,586	0.915	$18.16
Home Health	$1,329	$15		$1,344	1.117	$1,501	0.915	$0.03
IP - Maternity	$236,408	$132	$15,186	$251,726	0.970	$244,257	0.915	$5.53
IP - Newborn	$7,042	$4	$452	$7,498	0.970	$7,276	0.915	$0.16
IP - Other	$4,742,389	$2,653	$304,628	$5,049,671	0.970	$4,899,845	0.915	$110.86
IP - Psych	$601,150	$2,243	($23,885)	$579,507	0.989	$573,217	0.915	$12.97
Lab	$1,069,874	$2,069		$1,071,943	1.102	$1,181,309	0.915	$26.73
OP - Emergency Room & Related	$1,983,873	$21,740	($39,331)	$1,966,282	1.117	$2,196,512	0.915	$49.69
OP - Other	$2,866,618	$31,414	($72,354)	$2,825,678	1.117	$3,156,534	0.915	$71.41
Pharmacy	$12,188,869	$34	($1,118,732)	$11,070,170	1.135	$12,563,655	1.000	$310.65
Prof - Anesthesia	$96,409	$88		$96,497	1.138	$109,789	0.915	$2.48
Prof - Child EPSDT	$13,346	$12		$13,358	1.138	$15,198	0.915	$0.34
Prof - Evaluation & Management	$2,039,458	$1,859		$2,041,316	1.138	$2,322,495	0.915	$52.54
Prof - Maternity	$120,660	$110		$120,770	1.138	$137,405	0.915	$3.11
Prof - Other	$489,891	$446		$490,338	1.138	$557,879	0.915	$12.62
Prof - Psych	$284,820	$260		$285,079	1.138	$324,347	0.915	$7.34
Prof - Specialist	$760,023	$693		$760,715	1.138	$865,499	0.915	$19.58
Prof - Vision	$63,128	$58		$63,186	1.138	$71,889	0.915	$1.63
Radiology	$488,863	$946		$489,808	1.102	$539,781	0.915	$12.21
Transportation/Ambulance	$230,225	$445	$88,530	$319,200	1.102	$351,767	0.915	$7.96
Non-ER Transportation	$0			$0	1.000	$0	1.000	$29.26
Provider Incentive Payment Adjustment								$2.07
Total	$29,858,731	$67,544	($845,507)	$29,080,768		$31,882,894		$779.06
Admin Cost Adjustment								$64.46
Medallion II Capitation Rate								**$843.52**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4e

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Aged, Blind, and Disabled (ABAD)
PCCM Far Southwest

Age 21-44 Male								
Far Southwest	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$538,068	$1,041		$539,108	1.102	$594,111	0.915	$20.56
FQHC / RHC	$337,187	$307		$337,494	1.138	$383,982	0.915	$13.29
Home Health	$0			$0	1.117	$0	0.915	$0.00
IP - Maternity	$0			$0	0.970	$0	0.915	$0.00
IP - Newborn	$40,325	$23	$2,590	$42,938	0.970	$41,664	0.915	$1.44
IP - Other	$3,305,184	$1,849	$212,309	$3,519,342	0.970	$3,414,922	0.915	$118.20
IP - Psych	$447,154	$1,668	($17,766)	$431,056	0.989	$426,376	0.915	$14.76
Lab	$434,267	$840		$435,107	1.102	$479,499	0.915	$16.60
OP - Emergency Room & Related	$831,384	$9,111	($16,483)	$824,012	1.117	$920,494	0.915	$31.86
OP - Other	$1,119,423	$12,267	($28,255)	$1,103,436	1.117	$1,232,636	0.915	$42.67
Pharmacy	$5,978,136	$16	($548,692)	$5,429,461	1.135	$6,161,953	1.000	$233.10
Prof - Anesthesia	$29,757	$27		$29,784	1.138	$33,886	0.915	$1.17
Prof - Child EPSDT	$3,222	$3		$3,225	1.138	$3,669	0.915	$0.13
Prof - Evaluation & Management	$933,178	$850		$934,028	1.138	$1,062,685	0.915	$36.78
Prof - Maternity	$0			$0	1.138	$0	0.915	$0.00
Prof - Other	$196,341	$179		$196,520	1.138	$223,590	0.915	$7.74
Prof - Psych	$125,085	$114		$125,199	1.138	$142,445	0.915	$4.93
Prof - Specialist	$261,910	$239		$262,149	1.138	$298,258	0.915	$10.32
Prof - Vision	$25,966	$24		$25,990	1.138	$29,569	0.915	$1.02
Radiology	$154,774	$299		$155,073	1.102	$170,894	0.915	$5.92
Transportation/Ambulance	$140,188	$271	$53,907	$194,366	1.102	$214,197	0.915	$7.41
Non-ER Transportation	$0			$0	1.000	$0	1.000	$29.26
Provider Incentive Payment Adjustment								$1.59
Total	$14,901,548	$29,129	($342,389)	$14,588,288		$15,834,832		$598.77
Admin Cost Adjustment								$49.54
Medallion II Capitation Rate								**$648.31**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 4e

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Aged, Blind, and Disabled (ABAD)
PCCM Far Southwest

Age 45 and Over								
Far Southwest	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$5,496,040	$10,630		$5,506,670	1.102	$6,068,493	0.915	$45.51
FQHC / RHC	$2,313,934	$2,109		$2,316,043	1.138	$2,635,063	0.915	$19.76
Home Health	$2,237	$25		$2,261	1.117	$2,526	0.915	$0.02
IP - Maternity	$0			$0	0.970	$0	0.915	$0.00
IP - Newborn	$76,411	$43	$4,908	$81,362	0.970	$78,948	0.915	$0.59
IP - Other	$28,097,817	$15,718	$1,804,868	$29,918,403	0.970	$29,030,712	0.915	$217.71
IP - Psych	$1,248,383	$4,658	($49,601)	$1,203,440	0.989	$1,190,376	0.915	$8.93
Lab	$3,234,413	$6,256		$3,240,669	1.102	$3,571,301	0.915	$26.78
OP - Emergency Room & Related	$3,905,482	$42,799	($77,428)	$3,870,853	1.117	$4,324,087	0.915	$32.43
OP - Other	$11,982,701	$131,313	($302,446)	$11,811,568	1.117	$13,194,571	0.915	$98.95
Pharmacy	$49,044,561	$135	($4,501,462)	$44,543,233	1.135	$50,552,594	1.000	$414.33
Prof - Anesthesia	$265,453	$242		$265,695	1.138	$302,293	0.915	$2.27
Prof - Child EPSDT	$52,567	$48		$52,615	1.138	$59,862	0.915	$0.45
Prof - Evaluation & Management	$6,737,801	$6,140		$6,743,941	1.138	$7,672,876	0.915	$57.54
Prof - Maternity	$0			$0	1.138	$0	0.915	$0.00
Prof - Other	$2,620,014	$2,388		$2,622,401	1.138	$2,983,621	0.915	$22.38
Prof - Psych	$551,707	$503		$552,210	1.138	$628,273	0.915	$4.71
Prof - Specialist	$2,859,848	$2,606		$2,862,454	1.138	$3,256,739	0.915	$24.42
Prof - Vision	$282,434	$257		$282,691	1.138	$321,630	0.915	$2.41
Radiology	$1,482,232	$2,867		$1,485,099	1.102	$1,636,618	0.915	$12.27
Transportation/Ambulance	$776,735	$1,502	$298,682	$1,076,919	1.102	$1,186,793	0.915	$8.90
Non-ER Transportation	$0			$0	1.000	$0	1.000	$29.26
Provider Incentive Payment Adjustment								$2.75
Total	$121,030,768	$230,238	($2,822,479)	$118,438,526		$128,697,375		$1,032.36
Admin Cost Adjustment								$85.42
Medallion II Capitation Rate								**$1,117.78**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Exhibit 5a

FY 2014 Capitation Rate Development
Fee-for-Service and Health Plan Encounter Data
Blending of FY 2014 Base Capitation Rates - PCCM and MCO Roanoke-Alleghany
Before CDPS Adjustment

		FY 2014 Base Capitation Rates			FY2011-12 Member Month Distribution	
Aid Category	**Age Group**	**PCCM Roanoke-Alleghany**	**MCO Roanoke-Alleghany**	**Blended FY 2014 Average**	**PCCM Roanoke-Alleghany**	**MCO Roanoke-Alleghany**
Aged, Blind, and Disabled	Under 1	$2,933.80	$3,020.73	$2,996.11	141	356
	1-5	$771.45	$864.72	$848.57	1,718	8,203
	6-14	$701.78	$551.43	$590.42	9,006	18,696
	Female 15-20	$701.78	$551.43	$590.42	2,929	4,010
	Female 21-44	$860.23	$1,014.22	$922.14	11,089	7,457
	Male 15-20	$701.78	$551.43	$590.42	4,700	24,811
	Male 21-44	$791.50	$760.84	$770.66	8,228	17,468
	Over 44	$1,237.72	$1,397.37	$1,348.32	28,151	63,485
	Average	$968.61	$1,006.73	$989.52	65,962	144,486
Low Income Families with Children	Under 1	$679.71	$467.71	$521.54	23,519	69,111
	1-5	$98.11	$113.84	$110.95	67,155	298,460
	6-14	$114.60	$122.88	$120.69	129,152	359,392
	Female 15-20	$258.38	$274.18	$268.94	34,252	68,986
	Female 21-44	$430.95	$542.66	$507.83	25,712	56,756
	Male 15-20	$174.47	$149.59	$157.22	56,000	126,696
	Male 21-44	$371.44	$380.41	$377.77	8,764	21,002
	Over 44	$500.71	$746.10	$677.20	5,026	12,873
	Average	$197.33	$198.15	$197.80	349,580	1,013,276
Weighted Average		$300.50	$306.30	$303.70	415,542	1,157,762

Note:
Average is weighted by PCCM and MCO combined enrollment distribution as of FY2011-12.

Virginia Medicaid

Exhibit 5b

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Blending of FY 2014 Base Capitation Rates - Medically Needy and ABAD
Before CDPS Adjustment

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Medically Needy	Under 1	$826.37	$826.37	$826.37	$826.37	$826.37	$826.37	$826.37	$826.37
	1-5	$826.37	$826.37	$826.37	$826.37	$826.37	$826.37	$826.37	$826.37
	6-14	$826.37	$826.37	$826.37	$826.37	$826.37	$826.37	$826.37	$826.37
	Female 15-20	$826.37	$826.37	$826.37	$826.37	$826.37	$826.37	$826.37	$826.37
	Female 21-44	$1,847.75	$1,847.75	$1,847.75	$1,847.75	$1,847.75	$1,847.75	$1,847.75	$1,847.75
	Male 15-20	$826.37	$826.37	$826.37	$826.37	$826.37	$826.37	$826.37	$826.37
	Male 21-44	$1,847.75	$1,847.75	$1,847.75	$1,847.75	$1,847.75	$1,847.75	$1,847.75	$1,847.75
	Over 44	$1,847.75	$1,847.75	$1,847.75	$1,847.75	$1,847.75	$1,847.75	$1,847.75	$1,847.75
	Average	$1,630.86	$1,540.74	$1,529.86	$1,558.69	$1,535.58	$1,572.19	$1,710.85	$1,574.87
Aged, Blind, and Disabled without ALTC	Under 1	$3,020.73	$3,020.73	$3,020.73	$3,020.73	$3,020.73	$2,996.11	$1,734.53	$2,982.29
	1-5	$1,357.27	$771.17	$862.95	$939.13	$888.45	$848.57	$1,016.83	$938.03
	6-14	$601.17	$424.71	$433.69	$450.56	$504.25	$590.42	$617.79	$499.49
	Female 15-20	$601.17	$424.71	$433.69	$450.56	$504.25	$590.42	$617.79	$493.23
	Female 21-44	$1,125.25	$1,003.15	$1,105.11	$1,027.96	$983.09	$922.14	$843.52	$1,001.60
	Male 15-20	$601.17	$424.71	$433.69	$450.56	$504.25	$590.42	$617.79	$496.89
	Male 21-44	$899.95	$862.44	$861.98	$758.75	$849.82	$770.66	$648.31	$817.37
	Over 44	$1,318.78	$1,428.66	$1,575.77	$1,382.87	$1,524.56	$1,348.32	$1,117.78	$1,397.88
	Average	$1,123.68	$1,006.07	$1,066.93	$1,008.21	$1,064.02	$1,020.72	$953.74	$1,041.81
Blended Medically Need and Aged, Blind, and Disabled without ALTC	Under 1	$2,300.96	$2,300.96	$2,300.96	$2,300.96	$2,300.96	$2,284.42	$1,436.65	$2,275.13
	1-5	$1,355.50	$771.60	$862.88	$939.13	$888.24	$848.47	$1,015.67	$937.70
	6-14	$603.73	$426.14	$433.95	$451.07	$504.76	$590.05	$614.11	$499.85
	Female 15-20	$603.73	$426.14	$433.95	$451.07	$504.76	$590.05	$614.11	$493.61
	Female 21-44	$1,137.42	$1,010.63	$1,110.28	$1,035.55	$988.33	$928.86	$850.33	$1,008.36
	Male 15-20	$603.73	$426.14	$433.95	$451.07	$504.76	$590.05	$614.11	$497.25
	Male 21-44	$946.58	$875.37	$881.10	$778.91	$862.54	$791.28	$662.44	$837.50
	Over 44	$1,371.00	$1,439.22	$1,584.35	$1,394.46	$1,530.77	$1,363.44	$1,124.63	$1,413.21
	Average	$1,157.50	$1,012.81	$1,073.24	$1,016.32	$1,067.86	$1,029.85	$959.97	$1,051.43

Note:
Average is weighted by health plan enrollment distribution as of February 2013.
Medically Needy PMPM is statewide split by Child and Adult based on FY2012 data.

Virginia Medicaid

Exhibit 5c

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Redistribution of ALTC Base Capitation Rates
Based on FY2013 Statewide Relativities

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Acute and Long Term Care	Under 1	$16,824.37	$16,824.37	$16,824.37	$16,824.37	$16,824.37	$16,824.37	$16,824.37	$16,824.37
	1-5	$3,442.01	$1,259.16	$2,448.27	$2,637.23	$3,081.23	$2,664.42	$2,734.64	$2,637.92
	6-14	$1,782.96	$984.75	$1,329.81	$1,172.22	$1,414.37	$1,279.17	$1,388.11	$1,377.23
	Female 15-20	$1,782.96	$984.75	$1,329.81	$1,172.22	$1,414.37	$1,279.17	$1,424.06	$1,398.48
	Female 21-44	$1,165.81	$1,908.89	$1,613.77	$1,835.05	$1,654.20	$1,250.84	$1,579.22	$1,581.02
	Male 15-20	$1,782.96	$984.75	$1,329.81	$1,172.22	$1,414.37	$1,279.17	$1,387.11	$1,411.46
	Male 21-44	$780.51	$706.89	$2,132.07	$1,105.16	$1,545.37	$1,593.34	$1,384.94	$1,435.29
	Over 44	$2,128.42	$3,327.04	$3,276.59	$2,769.74	$3,086.71	$3,429.75	$2,971.96	$2,976.55
	Average	$1,916.44	$1,994.93	$2,297.22	$2,043.07	$2,243.33	$2,303.13	$2,506.31	$2,150.33
Redistribtion Factors	Under 1	2.77	2.67	2.31	2.60	2.37	2.31	2.12	
	1-5	1.14	1.20	1.21	1.17	1.20	1.18	1.02	
	6-14	0.61	0.64	0.65	0.62	0.64	0.63	0.55	
	Female 15-20	0.61	0.64	0.65	0.62	0.64	0.63	0.55	
	Female 21-44	0.64	0.67	0.68	0.65	0.67	0.66	0.57	
	Male 15-20	0.61	0.64	0.65	0.62	0.64	0.63	0.55	
	Male 21-44	0.66	0.70	0.70	0.68	0.70	0.68	0.59	
	Over 44	1.38	1.45	1.46	1.41	1.45	1.42	1.23	
Redistributed Acute and Long Term Care	Under 1	$5,317.80	$5,317.80	$5,317.80	$5,317.80	$5,317.80	$5,317.80	$5,317.80	$5,317.80
	1-5	$2,188.86	$2,399.42	$2,783.88	$2,382.36	$2,691.07	$2,712.28	$2,559.50	$2,514.72
	6-14	$1,171.95	$1,284.68	$1,490.53	$1,275.55	$1,440.84	$1,452.19	$1,370.39	$1,354.08
	Female 15-20	$1,171.95	$1,284.68	$1,490.53	$1,275.55	$1,440.84	$1,452.19	$1,370.39	$1,374.72
	Female 21-44	$1,219.42	$1,336.72	$1,550.91	$1,327.22	$1,499.20	$1,511.02	$1,425.90	$1,421.07
	Male 15-20	$1,171.95	$1,284.68	$1,490.53	$1,275.55	$1,440.84	$1,452.19	$1,370.39	$1,372.45
	Male 21-44	$1,272.77	$1,395.21	$1,618.77	$1,385.29	$1,564.80	$1,577.13	$1,488.30	$1,487.77
	Over 44	$2,643.71	$2,898.03	$3,362.39	$2,877.43	$3,250.28	$3,275.91	$3,091.38	$3,085.30
	Average	$1,807.91	$2,038.79	$2,305.26	$2,066.13	$2,276.51	$2,330.45	$2,552.86	$2,150.33

Note:
Average is weighted by health plan enrollment distribution as of February 2013.

Virginia Medicaid

Exhibit 5d

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Blending of FY 2014 Base Capitation Rates - Redistributed ALTC and Blended ABAD and Medically Needy Before CDPS Adjustment

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Redistributed Acute and Long Term Care	Under 1	$5,317.80	$5,317.80	$5,317.80	$5,317.80	$5,317.80	$5,317.80	$5,317.80	$5,317.80
	1-5	$2,188.86	$2,399.42	$2,783.88	$2,382.36	$2,691.07	$2,712.28	$2,559.50	$2,571.06
	6-14	$1,171.95	$1,284.68	$1,490.53	$1,275.55	$1,440.84	$1,452.19	$1,370.39	$1,389.22
	Female 15-20	$1,171.95	$1,284.68	$1,490.53	$1,275.55	$1,440.84	$1,452.19	$1,370.39	$1,394.22
	Female 21-44	$1,219.42	$1,336.72	$1,550.91	$1,327.22	$1,499.20	$1,511.02	$1,425.90	$1,441.03
	Male 15-20	$1,171.95	$1,284.68	$1,490.53	$1,275.55	$1,440.84	$1,452.19	$1,370.39	$1,395.04
	Male 21-44	$1,272.77	$1,395.21	$1,618.77	$1,385.29	$1,564.80	$1,577.13	$1,488.30	$1,500.02
	Over 44	$2,643.71	$2,898.03	$3,362.39	$2,877.43	$3,250.28	$3,275.91	$3,091.38	$3,093.90
	Average	$2,035.74	$2,029.37	$2,309.14	$2,051.32	$2,272.60	$2,357.45	$2,397.88	$2,231.50
Blended Medically Need and Aged, Blind, and Disabled without ALTC	Under 1	$2,300.96	$2,300.96	$2,300.96	$2,300.96	$2,300.96	$2,284.42	$1,436.65	$2,275.13
	1-5	$1,355.50	$771.60	$862.88	$939.13	$888.24	$848.47	$1,015.67	$937.70
	6-14	$603.73	$426.14	$433.95	$451.07	$504.76	$590.05	$614.11	$499.85
	Female 15-20	$603.73	$426.14	$433.95	$451.07	$504.76	$590.05	$614.11	$493.61
	Female 21-44	$1,137.42	$1,010.63	$1,110.28	$1,035.55	$988.33	$928.86	$850.33	$1,008.36
	Male 15-20	$603.73	$426.14	$433.95	$451.07	$504.76	$590.05	$614.11	$497.25
	Male 21-44	$946.58	$875.37	$881.10	$778.91	$862.54	$791.28	$662.44	$837.50
	Over 44	$1,371.00	$1,439.22	$1,584.35	$1,394.46	$1,530.77	$1,363.44	$1,124.63	$1,413.21
	Average	$1,157.50	$1,012.81	$1,073.24	$1,016.32	$1,067.86	$1,029.85	$959.97	$1,051.43
Blended Aged, Blind, and Disabled with Medically Needy and ALTC	Under 1	$2,659.40	$2,659.40	$2,659.40	$2,659.40	$2,659.40	$2,644.83	$1,897.78	$2,636.64
	1-5	$1,513.02	$1,045.67	$1,057.97	$1,072.00	$1,039.91	$1,017.08	$1,039.65	$1,104.36
	6-14	$669.97	$475.08	$485.51	$489.13	$544.35	$618.64	$621.77	$542.09
	Female 15-20	$669.97	$475.08	$485.51	$489.13	$544.35	$618.64	$624.77	$536.89
	Female 21-44	$1,143.55	$1,027.73	$1,130.88	$1,048.99	$1,010.68	$941.40	$852.28	$1,023.14
	Male 15-20	$669.97	$475.08	$485.51	$489.13	$544.35	$618.64	$616.55	$539.75
	Male 21-44	$972.84	$900.14	$924.64	$811.89	$904.42	$808.22	$663.17	$867.87
	Over 44	$1,432.39	$1,515.06	$1,673.03	$1,468.42	$1,611.30	$1,408.36	$1,136.15	$1,476.58
	Average	$1,212.89	$1,074.30	$1,138.23	$1,069.72	$1,126.58	$1,068.71	$968.30	$1,102.14

Note:
Average is weighted by health plan enrollment distribution as of February 2013.
Medically Needy enrollment distribution as of June 2012

Virginia Medicaid

Exhibit 5e

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Summary of FY 2014 Base Capitation Rates
Before CDPS Adjustment
Including Far Southwest

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Blended Aged, Blind, and Disabled with Medically Needy and ALTC	Under 1	$2,659.40	$2,659.40	$2,659.40	$2,659.40	$2,659.40	$2,644.83	$1,897.78	$2,636.64
	1-5	$1,513.02	$1,045.67	$1,057.97	$1,072.00	$1,039.91	$1,017.08	$1,039.65	$1,104.36
	6-14	$669.97	$475.08	$485.51	$489.13	$544.35	$618.64	$621.77	$542.09
	Female 15-20	$669.97	$475.08	$485.51	$489.13	$544.35	$618.64	$624.77	$536.89
	Female 21-44	$1,143.55	$1,027.73	$1,130.88	$1,048.99	$1,010.68	$941.40	$852.28	$1,023.14
	Male 15-20	$669.97	$475.08	$485.51	$489.13	$544.35	$618.64	$616.55	$539.75
	Male 21-44	$972.84	$900.14	$924.64	$811.89	$904.42	$808.22	$663.17	$867.87
	Over 44	$1,432.39	$1,515.06	$1,673.03	$1,468.42	$1,611.30	$1,408.36	$1,136.15	$1,476.58
	Average	$1,212.89	$1,074.30	$1,138.23	$1,069.72	$1,126.58	$1,068.71	$968.30	$1,102.14
Low Income Families with Children	Under 1	$392.97	$493.52	$536.21	$584.18	$572.47	$521.54	$255.77	$490.50
	1-5	$126.39	$120.88	$135.40	$131.34	$131.24	$110.95	$133.12	$128.22
	6-14	$109.82	$111.42	$120.05	$119.84	$124.98	$120.69	$141.94	$119.52
	Female 15-20	$197.69	$279.31	$248.54	$267.82	$251.55	$268.94	$280.31	$248.09
	Female 21-44	$560.62	$503.16	$515.24	$546.45	$484.27	$507.83	$522.24	$514.84
	Male 15-20	$133.21	$136.01	$140.73	$140.56	$141.37	$157.22	$165.54	$142.58
	Male 21-44	$333.17	$367.13	$361.02	$398.99	$340.57	$377.77	$402.99	$366.78
	Over 44	$647.31	$676.48	$688.77	$797.92	$704.93	$677.20	$595.12	$687.41
	Average	$184.86	$214.48	$226.96	$233.61	$228.28	$223.44	$228.87	$217.25
Weighted Average		$256.03	$332.18	$343.52	$346.94	$336.42	$343.62	$382.60	$325.57

Note:
Average is weighted by health plan enrollment distribution as of February 2013.

Virginia Medicaid

Exhibit 5f

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Comparison of FY 2013 and FY 2014 Base Capitation Rates
Before CDPS Adjustment

		Region											
		FY 2013	FY 2014		FY 2013	FY 2014		FY 2013	FY 2014		FY 2013	FY 2014	
Aid Category	**Age Group**	**Northern Virginia**		**% Change 2013-2014**	**Other MSA**		**% Change 2013-2014**	**Richmond/ Charlottesville**		**% Change 2013-2014**	**Rural**		**% Change 2013-2014**
Blended Aged, Blind, and Disabled with Medically Needy and ALTC	Under 1	$3,082.42	$2,659.40	-13.72%	$3,082.42	$2,659.40	-13.72%	$3,082.42	$2,659.40	-13.72%	$3,082.42	$2,659.40	-13.72%
	1-5	$1,404.45	$1,513.02	7.73%	$751.21	$1,045.67	39.20%	$784.81	$1,057.97	34.81%	$1,070.36	$1,072.00	0.15%
	6-14	$621.75	$669.97	7.75%	$406.20	$475.08	16.96%	$419.72	$485.51	15.68%	$470.20	$489.13	4.03%
	Female 15-20	$621.75	$669.97	7.75%	$406.20	$475.08	16.96%	$419.72	$485.51	15.68%	$470.20	$489.13	4.03%
	Female 21-44	$1,042.53	$1,143.55	9.69%	$947.79	$1,027.73	8.43%	$1,045.38	$1,130.88	8.18%	$969.56	$1,048.99	8.19%
	Male 15-20	$621.75	$669.97	7.75%	$406.20	$475.08	16.96%	$419.72	$485.51	15.68%	$470.20	$489.13	4.03%
	Male 21-44	$880.00	$972.84	10.55%	$747.71	$900.14	20.39%	$891.82	$924.64	3.68%	$807.03	$811.89	0.60%
	Over 44	$1,250.29	$1,432.39	14.56%	$1,399.17	$1,515.06	8.28%	$1,560.32	$1,673.03	7.22%	$1,335.60	$1,468.42	9.94%
	Average	$1,079.54	$1,212.89	12.35%	$965.15	$1,074.30	11.31%	$1,049.51	$1,138.23	8.45%	$994.19	$1,069.72	7.60%
Low Income Families with Children	Under 1	$369.22	$392.97	6.43%	$533.34	$493.52	-7.47%	$478.03	$536.21	12.17%	$552.45	$584.18	5.74%
	1-5	$116.19	$126.39	8.78%	$116.27	$120.88	3.96%	$130.40	$135.40	3.83%	$128.96	$131.34	1.84%
	6-14	$103.69	$109.82	5.91%	$106.28	$111.42	4.83%	$111.74	$120.05	7.44%	$109.29	$119.84	9.65%
	Female 15-20	$190.21	$197.69	3.93%	$265.20	$279.31	5.32%	$240.61	$248.54	3.29%	$265.21	$267.82	0.98%
	Female 21-44	$547.47	$560.62	2.40%	$487.93	$503.16	3.12%	$498.31	$515.24	3.40%	$524.13	$546.45	4.26%
	Male 15-20	$121.91	$133.21	9.27%	$128.42	$136.01	5.91%	$131.78	$140.73	6.79%	$129.31	$140.56	8.70%
	Male 21-44	$333.62	$333.17	-0.14%	$362.63	$367.13	1.24%	$330.26	$361.02	9.31%	$390.06	$398.99	2.29%
	Over 44	$583.14	$647.31	11.00%	$686.27	$676.48	-1.43%	$682.31	$688.77	0.95%	$758.86	$797.92	5.15%
	Average	$174.62	$184.86	5.86%	$210.40	$214.48	1.94%	$215.14	$226.96	5.49%	$222.50	$233.61	4.99%
Weighted Average		$237.27	$256.03	7.91%	$313.72	$332.18	5.89%	$321.87	$343.52	6.73%	$327.10	$346.94	6.06%

Note:
Averages are weighted by health plan enrollment distribution as of February 2013.

Virginia Medicaid

Exhibit 5f

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Comparison of FY 2013 and FY 2014 Base Capitation Rates
Before CDPS Adjustment

		Region											
		FY 2013	FY 2014		FY 2013	FY 2014		FY 2013	FY 2014		FY 2013	FY 2014	
Aid Category	**Age Group**	**Tidewater**		**% Change 2013-2014**	**Roanoke-Alleghany**		**% Change 2013-2014**	**Far Southwest**		**% Change 2013-2014**	**Weighted Average**		**% Change 2013-2014**
Blended Aged, Blind, and Disabled with Medically Needy and ALTC	Under 1	$3,082.42	$2,659.40	-13.72%	$2,999.38	$2,644.83	-11.82%	$3,710.33	$1,897.78	-48.85%	$3,088.22	$2,636.64	-14.62%
	1-5	$1,081.30	$1,039.91	-3.83%	$1,143.90	$1,017.08	-11.09%	$811.27	$1,039.65	28.15%	$1,025.25	$1,104.36	7.72%
	6-14	$495.35	$544.35	9.89%	$545.64	$618.64	13.38%	$545.92	$621.77	13.89%	$486.16	$542.09	11.50%
	Female 15-20	$495.35	$544.35	9.89%	$545.64	$618.64	13.38%	$545.92	$624.77	14.44%	$481.03	$536.89	11.61%
	Female 21-44	$964.87	$1,010.68	4.75%	$955.70	$941.40	-1.50%	$819.74	$852.28	3.97%	$966.36	$1,023.14	5.88%
	Male 15-20	$495.35	$544.35	9.89%	$545.64	$618.64	13.38%	$545.92	$616.55	12.94%	$483.99	$539.75	11.52%
	Male 21-44	$852.60	$904.42	6.08%	$761.39	$808.22	6.15%	$637.41	$663.17	4.04%	$815.59	$867.87	6.41%
	Over 44	$1,490.69	$1,611.30	8.09%	$1,309.99	$1,408.36	7.51%	$1,102.28	$1,136.15	3.07%	$1,363.68	$1,476.58	8.28%
	Average	$1,051.33	$1,126.58	7.16%	$1,011.41	$1,068.71	5.67%	$928.35	$968.30	4.30%	$1,020.58	$1,102.14	7.99%
Low Income Families with Children	Under 1	$531.08	$572.47	7.79%	$363.59	$521.54	43.44%	$255.91	$255.77	-0.05%	$448.13	$490.50	9.45%
	1-5	$127.13	$131.24	3.23%	$108.69	$110.95	2.09%	$131.74	$133.12	1.05%	$122.81	$128.22	4.40%
	6-14	$114.65	$124.98	9.01%	$116.56	$120.69	3.54%	$128.25	$141.94	10.67%	$111.34	$119.52	7.34%
	Female 15-20	$244.46	$251.55	2.90%	$280.76	$268.94	-4.21%	$274.55	$280.31	2.10%	$242.85	$248.09	2.16%
	Female 21-44	$466.39	$484.27	3.83%	$513.06	$507.83	-1.02%	$505.79	$522.24	3.25%	$500.16	$514.84	2.94%
	Male 15-20	$133.97	$141.37	5.53%	$144.10	$157.22	9.11%	$145.53	$165.54	13.76%	$132.01	$142.58	8.01%
	Male 21-44	$336.20	$340.57	1.30%	$388.14	$377.77	-2.67%	$376.39	$402.99	7.07%	$356.28	$366.78	2.95%
	Over 44	$679.45	$704.93	3.75%	$702.23	$677.20	-3.56%	$582.46	$595.12	2.17%	$665.25	$687.41	3.33%
	Average	$216.86	$228.28	5.27%	$212.81	$223.44	5.00%	$218.26	$228.87	4.86%	$206.73	$217.25	5.09%
Weighted Average		$317.31	$336.42	6.02%	$326.35	$343.62	5.29%	$365.89	$382.60	4.57%	$306.35	$325.57	6.27%

Note:
Averages are weighted by health plan enrollment distribution as of February 2013.

Virginia Medicaid

Exhibit 5g

FY 2014 Capitation Rate Development
Health Plan Encounter Data
February 2013 Member Month Distribution

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**Regional Total**
Medically Needy	Under 1	18	5	6	0	7	1	1	38
	1-5	1	2	1	0	2	2	1	9
	6-14	1	8	2	2	1	1	0	15
	Female 15-20	9	2	5	1	6	4	0	27
	Female 21-44	20	10	19	13	17	12	13	104
	Male 15-20	9	3	3	5	6	4	1	31
	Male 21-44	61	12	46	22	31	24	15	211
	Over 44	541	76	226	105	155	139	58	1,300
Aid Category Total		660	118	308	148	225	187	89	1,735
Acute and Long Term Care	Under 1	3	0	0	0	0	0	0	3
	1-5	54	40	42	25	42	34	2	239
	6-14	112	69	114	63	116	45	6	525
	Female 15-20	19	6	32	12	25	3	2	99
	Female 21-44	73	48	103	52	99	28	5	408
	Male 15-20	38	12	54	13	38	12	0	167
	Male 21-44	80	35	113	52	118	21	0	419
	Over 44	194	125	282	167	301	83	28	1,180
Aid Category Total		573	335	740	384	739	226	43	3,040
Aged, Blind, and Disabled	Under 1	8	3	7	10	25	14	2	69
	1-5	265	226	425	282	523	391	145	2,257
	6-14	855	1,006	2,410	1,226	2,693	1,257	671	10,118
	Female 15-20	210	247	745	318	703	242	160	2,625
	Female 21-44	1,034	992	2,402	1,232	2,475	1,455	1,688	11,278
	Male 15-20	400	393	1,304	536	1,241	502	302	4,678
	Male 21-44	1,045	800	2,061	1,034	2,128	1,090	1,115	9,273
	Over 44	4,378	2,607	6,145	3,639	7,008	3,947	5,432	33,156
Aid Category Total		8,195	6,274	15,499	8,277	16,796	8,898	9,515	73,454
Low Income Families with Children	Under 1	8,700	2,617	6,461	3,298	7,583	3,520	2,107	34,286
	1-5	40,170	11,706	30,644	14,744	34,346	14,654	8,709	154,973
	6-14	50,860	15,989	42,236	21,593	48,620	20,745	13,541	213,584
	Female 15-20	7,443	2,848	7,527	3,917	8,782	4,069	2,804	37,390
	Female 21-44	9,769	5,664	16,123	7,449	19,902	7,760	5,361	72,028
	Male 15-20	6,955	2,332	6,326	3,313	7,147	3,377	2,531	31,981
	Male 21-44	1,171	663	1,695	1,005	1,505	1,228	1,173	8,440
	Over 44	1,672	596	1,799	861	1,886	821	528	8,163
Aid Category Total		126,740	42,415	112,811	56,180	129,771	56,174	36,754	560,845
Total		136,168	49,142	129,358	64,989	147,531	65,485	46,401	639,074

Notes:
Medically Needy member month distribution as of June 2012

Virginia Medicaid

Exhibit 6

FY 2014 Capitation Rate Development
CDPS Rates Summary of Difference in Implied Cost
FY 2012 Diagnosis Codes and NDC Codes using CDPS v5.3 and VA Specific Weights
Including Far Southwest

	Aged, Blind, and Disabled						
	Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest
InTotal Health	-12.7%	-0.4%	0.0%	0.9%	0.0%	-0.3%	3.5%
Anthem Blue Cross and Blue Shield	3.1%	-0.4%	0.0%	-2.3%	2.1%	5.3%	-3.7%
CareNet/Southern Health Services	0.0%	-0.4%	-1.6%	0.9%	0.0%	-8.1%	-1.3%
Optima Family Care	0.0%	-4.6%	-4.2%	-1.6%	1.2%	-6.7%	-10.7%
Virginia Premier Health Plan	19.8%	3.4%	4.8%	5.0%	-10.1%	1.1%	3.5%
MajestaCare	0.0%	0.0%	0.0%	0.0%	0.0%	-0.7%	-0.7%

	Low Income Families with Children						
	Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest
InTotal Health	-9.3%	-0.1%	0.0%	10.2%	0.0%	-3.7%	1.5%
Anthem Blue Cross and Blue Shield	3.1%	-0.6%	2.1%	-1.3%	1.3%	0.6%	-2.6%
CareNet/Southern Health Services	0.2%	-1.6%	-3.4%	6.9%	0.0%	-3.3%	-3.7%
Optima Family Care	0.2%	-2.9%	-1.5%	-1.2%	1.2%	-5.2%	-7.9%
Virginia Premier Health Plan	3.3%	2.5%	0.2%	-1.1%	-7.7%	1.0%	5.0%
MajestaCare	0.0%	0.0%	0.0%	0.0%	0.0%	1.3%	-1.1%

Note:
Health plan enrollment distribution as of February 2013 is used in plan assignment and weighting.
Far Southwest region was not risk adjusted in FY 2013.

Virginia Medicaid

Exhibit 7a

FY 2014 Capitation Rate Development
InTotal Health Medallion II Capitation Rates
With CDPS Adjustment and Far Southwest

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,320.40	$2,650.06	$2,659.65	$2,683.35	$2,659.40	$2,637.17	$1,964.77	$2,320.67
	1-5	$1,320.15	$1,041.99	$1,058.07	$1,081.65	$1,039.91	$1,014.14	$1,076.35	$1,196.56
	6-14	$584.56	$473.41	$485.56	$493.54	$544.35	$616.85	$643.71	$591.90
	Female 15-20	$584.56	$473.41	$485.56	$493.54	$544.35	$616.85	$646.82	$589.99
	Female 21-44	$997.78	$1,024.12	$1,130.98	$1,058.43	$1,010.68	$938.67	$882.36	$949.37
	Male 15-20	$584.56	$473.41	$485.56	$493.54	$544.35	$616.85	$638.31	$591.79
	Male 21-44	$848.83	$896.98	$924.72	$819.20	$904.42	$805.88	$686.58	$793.37
	Over 44	$1,249.80	$1,509.74	$1,673.19	$1,481.64	$1,611.30	$1,404.29	$1,176.26	$1,260.77
	Average	$1,085.27	$1,125.94	$1,668.74	$1,134.92	$1,107.34	$1,060.71	$1,007.40	$1,062.64
Low Income Families with Children	Under 1	$356.31	$493.16	$536.16	$643.87	$572.69	$502.04	$259.65	$384.13
	1-5	$114.60	$120.79	$135.39	$144.76	$131.29	$106.81	$135.14	$119.08
	6-14	$99.58	$111.34	$120.04	$132.08	$125.03	$116.18	$144.09	$110.18
	Female 15-20	$179.24	$279.11	$248.51	$295.19	$251.64	$258.88	$284.56	$216.34
	Female 21-44	$508.32	$502.79	$515.19	$602.29	$484.45	$488.84	$530.17	$524.25
	Male 15-20	$120.78	$135.91	$140.71	$154.92	$141.42	$151.34	$168.05	$134.37
	Male 21-44	$302.09	$366.86	$360.98	$439.75	$340.70	$363.65	$409.10	$363.25
	Over 44	$586.93	$675.99	$688.70	$879.45	$705.20	$651.87	$604.15	$628.58
	Average	$165.98	$243.25	$142.32	$253.26	$221.06	$238.25	$231.75	$188.85
Weighted Average		$227.32	$344.66	$908.69	$331.77	$221.86	$365.76	$391.85	$273.00

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.

Virginia Medicaid

Exhibit 7b

FY 2014 Capitation Rate Development
Anthem Blue Cross and Blue Shield Medallion II Capitation Rates
With CDPS Adjustment and Far Southwest

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,740.66	$2,650.06	$2,659.72	$2,597.39	$2,715.50	$2,783.71	$1,828.51	$2,714.63
	1-5	$1,559.25	$1,041.99	$1,058.10	$1,047.00	$1,061.85	$1,070.49	$1,001.70	$1,222.01
	6-14	$690.44	$473.41	$485.57	$477.73	$555.83	$651.13	$599.07	$559.62
	Female 15-20	$690.44	$473.41	$485.57	$477.73	$555.83	$651.13	$601.96	$550.34
	Female 21-44	$1,178.49	$1,024.12	$1,131.01	$1,024.53	$1,032.00	$990.83	$821.16	$1,072.99
	Male 15-20	$690.44	$473.41	$485.57	$477.73	$555.83	$651.13	$594.05	$553.69
	Male 21-44	$1,002.56	$896.98	$924.75	$792.96	$923.50	$850.66	$638.96	$913.15
	Over 44	$1,476.16	$1,509.74	$1,673.23	$1,434.18	$1,645.28	$1,482.32	$1,094.68	$1,530.84
	Average	$1,230.76	$1,045.90	$1,109.94	$1,068.71	$1,175.95	$1,168.76	$939.41	$1,146.52
Low Income Families with Children	Under 1	$405.00	$490.48	$547.67	$576.68	$580.10	$524.50	$249.22	$485.75
	1-5	$130.26	$120.13	$138.29	$129.65	$132.99	$111.59	$129.71	$131.99
	6-14	$113.18	$110.73	$122.62	$118.30	$126.65	$121.38	$138.30	$119.16
	Female 15-20	$203.74	$277.59	$253.85	$264.38	$254.90	$270.47	$273.13	$236.43
	Female 21-44	$577.78	$500.06	$526.25	$539.43	$490.73	$510.72	$508.87	$528.88
	Male 15-20	$137.28	$135.17	$143.73	$138.76	$143.25	$158.11	$161.30	$141.39
	Male 21-44	$343.37	$364.86	$368.73	$393.86	$345.12	$379.92	$392.67	$360.64
	Over 44	$667.13	$672.32	$703.49	$787.67	$714.33	$681.05	$579.88	$694.61
	Average	$189.25	$218.97	$236.66	$236.33	$234.99	$241.96	$221.63	$215.50
Weighted Average		$256.19	$301.55	$342.31	$348.42	$348.85	$380.87	$373.81	$310.32

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.

Virginia Medicaid

Exhibit 7c

FY 2014 Capitation Rate Development
CareNet/Southern Health Services Medallion II Capitation Rates
With CDPS Adjustment and Far Southwest

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,659.40	$2,650.06	$2,615.66	$2,683.35	$2,660.32	$2,429.32	$1,872.63	$2,569.00
	1-5	$1,513.02	$1,041.99	$1,040.57	$1,081.65	$1,040.27	$934.21	$1,025.88	$1,028.33
	6-14	$669.97	$473.41	$477.53	$493.54	$544.53	$568.23	$613.53	$503.96
	Female 15-20	$669.97	$473.41	$477.53	$493.54	$544.53	$568.23	$616.49	$505.99
	Female 21-44	$1,143.55	$1,024.12	$1,112.28	$1,058.43	$1,011.03	$864.69	$840.98	$999.43
	Male 15-20	$669.97	$473.41	$477.53	$493.54	$544.53	$568.23	$608.38	$506.35
	Male 21-44	$972.84	$896.98	$909.43	$819.20	$904.73	$742.37	$654.38	$822.25
	Over 44	$1,432.39	$1,509.74	$1,645.51	$1,481.64	$1,611.85	$1,293.61	$1,121.10	$1,420.43
	Average	$1,216.39	$1,124.10	$1,096.26	$1,091.58	$1,284.41	$1,000.00	$946.61	$1,050.66
Low Income Families with Children	Under 1	$393.64	$485.51	$517.91	$624.66	$572.69	$504.33	$246.37	$481.08
	1-5	$126.61	$118.92	$130.78	$140.44	$131.29	$107.29	$128.23	$127.37
	6-14	$110.01	$109.61	$115.96	$128.14	$125.03	$116.71	$136.72	$119.60
	Female 15-20	$198.02	$274.78	$240.06	$286.38	$251.64	$260.06	$270.00	$253.82
	Female 21-44	$561.57	$494.99	$497.65	$584.32	$484.45	$491.07	$503.04	$501.58
	Male 15-20	$133.43	$133.80	$135.92	$150.30	$141.42	$152.03	$159.45	$143.80
	Male 21-44	$333.74	$361.17	$348.70	$426.63	$340.70	$365.31	$388.17	$368.09
	Over 44	$648.42	$665.50	$665.26	$853.21	$705.20	$654.85	$573.24	$658.28
	Average	$335.70	$222.12	$214.81	$248.78	$225.27	$236.40	$219.76	$220.43
Weighted Average		$339.20	$355.44	$320.30	$372.54	$423.92	$355.76	$365.25	$337.65

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.

Virginia Medicaid

Exhibit 7d

FY 2014 Capitation Rate Development
Optima Family Care Medallion II Capitation Rates
With CDPS Adjustment and Far Southwest

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,659.40	$2,538.28	$2,547.98	$2,616.05	$2,690.83	$2,466.85	$1,694.16	$2,597.29
	1-5	$1,513.02	$998.04	$1,013.64	$1,054.53	$1,052.20	$948.64	$928.11	$1,033.09
	6-14	$669.97	$453.45	$465.17	$481.16	$550.78	$577.01	$555.06	$509.76
	Female 15-20	$669.97	$453.45	$465.17	$481.16	$550.78	$577.01	$557.74	$508.88
	Female 21-44	$1,143.55	$980.92	$1,083.50	$1,031.89	$1,022.62	$878.05	$760.83	$1,013.30
	Male 15-20	$669.97	$453.45	$465.17	$481.16	$550.78	$577.01	$550.40	$510.06
	Male 21-44	$972.84	$859.14	$885.89	$798.66	$915.11	$753.83	$592.02	$860.32
	Over 44	$1,432.39	$1,446.06	$1,602.93	$1,444.48	$1,630.34	$1,313.59	$1,014.25	$1,523.51
	Average	$1,216.39	$993.96	$1,111.02	$1,018.41	$1,114.91	$1,006.68	$848.07	$1,066.08
Low Income Families with Children	Under 1	$393.64	$479.36	$528.39	$577.12	$579.57	$494.56	$235.65	$543.17
	1-5	$126.61	$117.41	$133.42	$129.75	$132.87	$105.22	$122.65	$129.56
	6-14	$110.01	$108.22	$118.30	$118.39	$126.53	$114.45	$130.77	$121.22
	Female 15-20	$198.02	$271.30	$244.91	$264.59	$254.67	$255.03	$258.26	$256.60
	Female 21-44	$561.57	$488.72	$507.72	$539.84	$490.28	$481.56	$481.16	$500.21
	Male 15-20	$133.43	$132.11	$138.67	$138.86	$143.12	$149.09	$152.52	$140.90
	Male 21-44	$333.74	$356.59	$355.75	$394.16	$344.80	$358.23	$371.29	$359.78
	Over 44	$648.42	$657.07	$678.72	$788.27	$713.68	$642.17	$548.31	$706.27
	Average	$231.25	$210.79	$219.73	$227.32	$228.10	$229.38	$209.14	$223.77
Weighted Average		$232.13	$319.25	$331.59	$344.03	$334.05	$338.38	$323.43	$333.27

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.

Virginia Medicaid

Exhibit 7e

FY 2014 Capitation Rate Development
Virginia Premier Health Plan Medallion II Capitation Rates
With CDPS Adjustment and Far Southwest

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$3,184.71	$2,750.96	$2,787.54	$2,791.59	$2,390.46	$2,674.42	$1,964.37	$2,702.74
	1-5	$1,811.89	$1,081.67	$1,108.94	$1,125.29	$934.75	$1,028.46	$1,076.13	$1,072.45
	6-14	$802.30	$491.44	$508.91	$513.44	$489.30	$625.56	$643.58	$560.98
	Female 15-20	$802.30	$491.44	$508.91	$513.44	$489.30	$625.56	$646.69	$550.83
	Female 21-44	$1,369.43	$1,063.11	$1,185.36	$1,101.13	$908.47	$951.93	$882.18	$1,021.14
	Male 15-20	$802.30	$491.44	$508.91	$513.44	$489.30	$625.56	$638.19	$554.43
	Male 21-44	$1,165.00	$931.13	$969.19	$852.25	$812.96	$817.26	$686.44	$863.87
	Over 44	$1,715.33	$1,567.22	$1,753.64	$1,541.41	$1,448.35	$1,424.12	$1,176.02	$1,479.93
	Average	$1,335.21	$1,125.08	$1,208.48	$1,136.98	$1,007.86	$1,065.45	$1,000.31	$1,100.91
Low Income Families with Children	Under 1	$406.07	$505.93	$537.23	$577.85	$528.49	$526.87	$268.44	$502.02
	1-5	$130.60	$123.92	$135.66	$129.91	$121.16	$112.09	$139.72	$124.58
	6-14	$113.48	$114.22	$120.28	$118.54	$115.38	$121.93	$148.97	$120.96
	Female 15-20	$204.27	$286.34	$249.01	$264.92	$232.22	$271.69	$294.20	$262.75
	Female 21-44	$579.30	$515.81	$516.22	$540.53	$447.06	$513.02	$548.11	$513.72
	Male 15-20	$137.65	$139.43	$141.00	$139.04	$130.51	$158.83	$173.74	$147.53
	Male 21-44	$344.27	$376.36	$361.71	$394.66	$314.41	$381.63	$422.95	$377.30
	Over 44	$668.88	$693.49	$690.08	$789.27	$650.77	$684.12	$624.60	$688.02
	Average	$210.87	$215.42	$226.78	$232.51	$211.35	$215.63	$240.28	$220.59
Weighted Average		$291.50	$339.28	$365.68	$345.92	$303.08	$329.73	$403.00	$340.55

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.

Virginia Medicaid

Exhibit 7f

FY 2014 Capitation Rate Development
MajestaCare Medallion II Capitation Rates
With CDPS Adjustment and Far Southwest

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,659.40	$2,659.40	$2,659.40	$2,659.40	$2,659.40	$2,625.35	$1,884.72	$2,378.94
	1-5	$1,513.02	$1,045.67	$1,057.97	$1,072.00	$1,039.91	$1,009.59	$1,032.49	$1,019.73
	6-14	$669.97	$475.08	$485.51	$489.13	$544.35	$614.08	$617.49	$615.98
	Female 15-20	$669.97	$475.08	$485.51	$489.13	$544.35	$614.08	$620.47	$617.58
	Female 21-44	$1,143.55	$1,027.73	$1,130.88	$1,048.99	$1,010.68	$934.46	$846.41	$878.66
	Male 15-20	$669.97	$475.08	$485.51	$489.13	$544.35	$614.08	$612.31	$613.33
	Male 21-44	$972.84	$900.14	$924.64	$811.89	$904.42	$802.27	$658.60	$709.18
	Over 44	$1,432.39	$1,515.06	$1,673.03	$1,468.42	$1,611.30	$1,397.99	$1,128.33	$1,210.12
	Average	$1,216.39	$1,071.66	$1,112.81	$1,066.01	$1,107.34	$1,084.49	$968.69	$1,009.34
Low Income Families with Children	Under 1	$392.97	$493.52	$536.21	$584.18	$572.47	$528.48	$252.99	$390.95
	1-5	$126.39	$120.88	$135.40	$131.34	$131.24	$112.43	$131.67	$123.21
	6-14	$109.82	$111.42	$120.05	$119.84	$124.98	$122.30	$140.39	$133.76
	Female 15-20	$197.69	$279.31	$248.54	$267.82	$251.55	$272.52	$277.26	$275.36
	Female 21-44	$560.62	$503.16	$515.24	$546.45	$484.27	$514.59	$516.55	$515.65
	Male 15-20	$133.21	$136.01	$140.73	$140.56	$141.37	$159.31	$163.74	$161.96
	Male 21-44	$333.17	$367.13	$361.02	$398.99	$340.57	$382.80	$398.60	$393.35
	Over 44	$647.31	$676.48	$688.77	$797.92	$704.93	$686.21	$588.64	$637.75
	Average	$312.65	$335.99	$343.24	$373.39	$343.92	$258.34	$230.54	$242.09
Weighted Average		$764.52	$1,251.24	$1,294.27	$1,279.47	$1,290.01	$398.27	$386.63	$391.33

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.

Virginia Medicaid

Exhibit 7g

FY 2014 Capitation Rate Development
All Health Plan Medallion II Capitation Rates
With CDPS Adjustment and Far Southwest

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,590.73	$2,683.61	$2,643.90	$2,700.89	$2,663.99	$2,643.86	$1,793.26	$2,620.58
	1-5	$1,534.70	$1,046.62	$1,056.63	$1,073.31	$1,037.36	$1,021.75	$1,045.56	$1,107.72
	6-14	$686.15	$474.03	$485.03	$488.57	$544.17	$620.42	$622.33	$543.47
	Female 15-20	$682.60	$473.71	$486.33	$488.46	$542.93	$616.24	$624.93	$537.42
	Female 21-44	$1,152.67	$1,027.87	$1,131.17	$1,046.55	$1,012.28	$942.18	$852.13	$1,024.25
	Male 15-20	$680.78	$472.18	$485.99	$488.27	$544.34	$616.76	$615.97	$540.30
	Male 21-44	$973.71	$896.94	$924.21	$812.54	$903.33	$807.28	$660.76	$867.05
	Over 44	$1,423.63	$1,516.84	$1,673.17	$1,469.22	$1,611.46	$1,407.67	$1,136.53	$1,475.58
	Average	$1,212.35	$1,074.33	$1,138.23	$1,069.73	$1,126.59	$1,068.70	$968.29	$1,102.08
Low Income Families with Children	Under 1	$389.97	$493.87	$535.65	$585.41	$571.49	$520.38	$256.01	$489.46
	1-5	$125.77	$120.99	$135.22	$131.49	$131.11	$111.09	$133.02	$128.03
	6-14	$110.12	$111.49	$119.99	$119.86	$125.01	$120.95	$142.02	$119.62
	Female 15-20	$198.09	$279.34	$248.82	$267.34	$251.98	$269.07	$279.97	$248.27
	Female 21-44	$563.06	$502.42	$515.64	$546.03	$484.34	$507.46	$522.56	$515.16
	Male 15-20	$133.46	$136.17	$140.84	$140.41	$141.69	$157.17	$165.26	$142.69
	Male 21-44	$335.21	$367.22	$361.23	$398.61	$340.58	$377.36	$402.62	$366.96
	Over 44	$650.28	$676.84	$689.82	$796.91	$706.37	$676.97	$594.47	$688.43
	Average	$184.86	$214.48	$226.96	$233.61	$228.28	$223.44	$228.87	$217.25
Weighted Average		$256.00	$332.18	$343.52	$346.94	$336.42	$343.62	$382.60	$325.56

Note:
Average is weighted by health plan enrollment distribution as of February 2013. Overall weighted averages include Medically Needy.

Virginia Medicaid

Exhibit 8

FY 2014 Capitation Rate Development
Kalydeco Reinsurance Adjustment

		Adjustment Value	Source
1.	Drug cost per year	$357,700	Provided by DMAS
2.	Number of patients	4	Provided by DMAS
3.	Annualized Member Months based on February 2013 snapshot	5,366,400	Age 6 and over
4.	**Estimated PMPM**	**$0.27**	**= (1.) * (2.) / (3.)**

Virginia Medicaid

Exhibit 9a

FY 2014 Capitation Rate Development
InTotal Health Medallion II Capitation Rates Net of Kalydeco Reinsurance Adjustment
With CDPS Adjustment and Far Southwest

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,320.40	$2,650.06	$2,659.65	$2,683.35	$2,659.40	$2,637.17	$1,964.77	$2,320.67
	1-5	$1,320.15	$1,041.99	$1,058.07	$1,081.65	$1,039.91	$1,014.14	$1,076.35	$1,196.56
	6-14	$584.30	$473.15	$485.29	$493.27	$544.08	$616.58	$643.45	$591.63
	Female 15-20	$584.30	$473.15	$485.29	$493.27	$544.08	$616.58	$646.56	$589.72
	Female 21-44	$997.51	$1,023.85	$1,130.72	$1,058.16	$1,010.41	$938.41	$882.09	$949.10
	Male 15-20	$584.30	$473.15	$485.29	$493.27	$544.08	$616.58	$638.05	$591.52
	Male 21-44	$848.56	$896.71	$924.46	$818.94	$904.15	$805.61	$686.31	$793.10
	Over 44	$1,249.53	$1,509.47	$1,672.92	$1,481.37	$1,611.03	$1,404.02	$1,175.99	$1,260.51
	Average	$1,085.01	$1,125.68	$1,668.47	$1,134.66	$1,107.14	$1,060.45	$1,007.14	$1,062.38
Low Income Families with Children	Under 1	$356.31	$493.16	$536.16	$643.87	$572.69	$502.04	$259.65	$384.13
	1-5	$114.60	$120.79	$135.39	$144.76	$131.29	$106.81	$135.14	$119.08
	6-14	$99.31	$111.07	$119.77	$131.81	$124.76	$115.91	$143.82	$109.91
	Female 15-20	$178.98	$278.84	$248.25	$294.92	$251.38	$258.61	$284.30	$216.07
	Female 21-44	$508.05	$502.52	$514.92	$602.02	$484.18	$488.57	$529.90	$523.98
	Male 15-20	$120.51	$135.64	$140.45	$154.66	$141.16	$151.07	$167.79	$134.10
	Male 21-44	$301.82	$366.59	$360.72	$439.49	$340.44	$363.38	$408.83	$362.99
	Over 44	$586.66	$675.72	$688.44	$879.18	$704.93	$651.61	$603.88	$628.31
	Average	$165.83	$243.09	$142.06	$253.09	$220.90	$238.07	$231.56	$188.69
Weighted Average		$227.16	$344.49	$908.42	$331.59	$221.70	$365.57	$391.64	$272.83

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.
Kalydeco adjustment not applied to ages under 6 and indicated by shaded rate cells

Virginia Medicaid

Exhibit 9b

FY 2014 Capitation Rate Development

Anthem Blue Cross and Blue Shield Medallion II Capitation Rates Net of Kalydeco Reinsurance Adjustment With CDPS Adjustment and Far Southwest

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,740.66	$2,650.06	$2,659.72	$2,597.39	$2,715.50	$2,783.71	$1,828.51	$2,714.63
	1-5	$1,559.25	$1,041.99	$1,058.10	$1,047.00	$1,061.85	$1,070.49	$1,001.70	$1,222.01
	6-14	$690.17	$473.15	$485.31	$477.46	$555.56	$650.86	$598.80	$559.36
	Female 15-20	$690.17	$473.15	$485.31	$477.46	$555.56	$650.86	$601.70	$550.07
	Female 21-44	$1,178.22	$1,023.85	$1,130.75	$1,024.26	$1,031.73	$990.57	$820.90	$1,072.72
	Male 15-20	$690.17	$473.15	$485.31	$477.46	$555.56	$650.86	$593.78	$553.42
	Male 21-44	$1,002.30	$896.71	$924.48	$792.69	$923.23	$850.39	$638.69	$912.89
	Over 44	$1,475.89	$1,509.47	$1,672.97	$1,433.91	$1,645.02	$1,482.05	$1,094.41	$1,530.57
	Average	$1,230.51	$1,045.64	$1,109.68	$1,068.45	$1,175.70	$1,168.50	$939.15	$1,146.26
Low Income Families with Children	Under 1	$405.00	$490.48	$547.67	$576.68	$580.10	$524.50	$249.22	$485.75
	1-5	$130.26	$120.13	$138.29	$129.65	$132.99	$111.59	$129.71	$131.99
	6-14	$112.92	$110.46	$122.35	$118.03	$126.38	$121.11	$138.04	$118.89
	Female 15-20	$203.47	$277.33	$253.58	$264.12	$254.64	$270.20	$272.87	$236.16
	Female 21-44	$577.51	$499.79	$525.98	$539.17	$490.46	$510.45	$508.61	$528.61
	Male 15-20	$137.02	$134.91	$143.47	$138.49	$142.99	$157.85	$161.04	$141.12
	Male 21-44	$343.10	$364.60	$368.47	$393.60	$344.85	$379.65	$392.40	$360.37
	Over 44	$666.86	$672.05	$703.22	$787.40	$714.06	$680.78	$579.62	$694.35
	Average	$189.08	$218.79	$236.48	$236.15	$234.81	$241.77	$221.44	$215.33
Weighted Average		$256.02	$301.36	$342.11	$348.23	$348.67	$380.68	$373.61	$310.13

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.
Kalydeco adjustment not applied to ages under 6 and indicated by shaded rate cells

Virginia Medicaid

Exhibit 9c

FY 2014 Capitation Rate Development
CareNet/Southern Health Services Medallion II Capitation Rates Net of Kalydeco Reinsurance Adjustment
With CDPS Adjustment and Far Southwest

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,659.40	$2,650.06	$2,615.66	$2,683.35	$2,660.32	$2,429.32	$1,872.63	$2,569.00
	1-5	$1,513.02	$1,041.99	$1,040.57	$1,081.65	$1,040.27	$934.21	$1,025.88	$1,028.33
	6-14	$669.70	$473.15	$477.26	$493.27	$544.27	$567.97	$613.26	$503.70
	Female 15-20	$669.70	$473.15	$477.26	$493.27	$544.27	$567.97	$616.22	$505.72
	Female 21-44	$1,143.28	$1,023.85	$1,112.01	$1,058.16	$1,010.76	$864.43	$840.72	$999.16
	Male 15-20	$669.70	$473.15	$477.26	$493.27	$544.27	$567.97	$608.12	$506.08
	Male 21-44	$972.57	$896.71	$909.16	$818.94	$904.47	$742.10	$654.11	$821.98
	Over 44	$1,432.13	$1,509.47	$1,645.25	$1,481.37	$1,611.59	$1,293.34	$1,120.83	$1,420.16
	Average	$1,216.19	$1,123.85	$1,096.00	$1,091.33	$1,284.18	$999.74	$946.35	$1,050.40
Low Income Families with Children	Under 1	$393.64	$485.51	$517.91	$624.66	$572.69	$504.33	$246.37	$481.08
	1-5	$126.61	$118.92	$130.78	$140.44	$131.29	$107.29	$128.23	$127.37
	6-14	$109.74	$109.34	$115.69	$127.87	$124.76	$116.44	$136.45	$119.33
	Female 15-20	$197.76	$274.51	$239.79	$286.11	$251.38	$259.80	$269.74	$253.56
	Female 21-44	$561.31	$494.73	$497.39	$584.05	$484.18	$490.81	$502.77	$501.32
	Male 15-20	$133.17	$133.54	$135.66	$150.04	$141.16	$151.77	$159.19	$143.53
	Male 21-44	$333.47	$360.90	$348.43	$426.37	$340.44	$365.04	$387.90	$367.82
	Over 44	$648.15	$665.24	$665.00	$852.94	$704.93	$654.59	$572.97	$658.02
	Average	$335.43	$221.95	$214.64	$248.60	$225.09	$236.23	$219.57	$220.25
Weighted Average		$338.93	$355.26	$320.12	$372.34	$423.74	$355.58	$365.05	$337.46

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.
Kalydeco adjustment not applied to ages under 6 and indicated by shaded rate cells

Virginia Medicaid

Exhibit 9d

FY 2014 Capitation Rate Development
Optima Family Care Medallion II Capitation Rates Net of Kalydeco Reinsurance Adjustment
With CDPS Adjustment and Far Southwest

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,659.40	$2,538.28	$2,547.98	$2,616.05	$2,690.83	$2,466.85	$1,694.16	$2,597.29
	1-5	$1,513.02	$998.04	$1,013.64	$1,054.53	$1,052.20	$948.64	$928.11	$1,033.09
	6-14	$669.70	$453.18	$464.91	$480.89	$550.51	$576.74	$554.79	$509.49
	Female 15-20	$669.70	$453.18	$464.91	$480.89	$550.51	$576.74	$557.47	$508.61
	Female 21-44	$1,143.28	$980.65	$1,083.23	$1,031.62	$1,022.35	$877.78	$760.57	$1,013.03
	Male 15-20	$669.70	$453.18	$464.91	$480.89	$550.51	$576.74	$550.13	$509.80
	Male 21-44	$972.57	$858.88	$885.63	$798.39	$914.84	$753.57	$591.75	$860.06
	Over 44	$1,432.13	$1,445.79	$1,602.67	$1,444.21	$1,630.07	$1,313.32	$1,013.99	$1,523.24
	Average	$1,216.19	$993.70	$1,110.76	$1,018.16	$1,114.65	$1,006.42	$847.81	$1,065.82
Low Income Families with Children	Under 1	$393.64	$479.36	$528.39	$577.12	$579.57	$494.56	$235.65	$543.17
	1-5	$126.61	$117.41	$133.42	$129.75	$132.87	$105.22	$122.65	$129.56
	6-14	$109.74	$107.95	$118.04	$118.12	$126.27	$114.18	$130.51	$120.95
	Female 15-20	$197.76	$271.03	$244.65	$264.32	$254.40	$254.76	$257.99	$256.34
	Female 21-44	$561.31	$488.45	$507.46	$539.58	$490.01	$481.30	$480.90	$499.95
	Male 15-20	$133.17	$131.84	$138.41	$138.60	$142.86	$148.82	$152.25	$140.63
	Male 21-44	$333.47	$356.32	$355.49	$393.90	$344.53	$357.97	$371.02	$359.51
	Over 44	$648.15	$656.81	$678.46	$788.01	$713.41	$641.90	$548.04	$706.01
	Average	$231.16	$210.61	$219.55	$227.13	$227.92	$229.20	$208.95	$223.59
Weighted Average		$232.04	$319.06	$331.41	$343.84	$333.86	$338.19	$323.23	$333.08

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.
Kalydeco adjustment not applied to ages under 6 and indicated by shaded rate cells

Virginia Medicaid

Exhibit 9e

FY 2014 Capitation Rate Development
Virginia Premier Health Plan Medallion II Capitation Rates Net of Kalydeco Reinsurance Adjustment
With CDPS Adjustment and Far Southwest

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$3,184.71	$2,750.96	$2,787.54	$2,791.59	$2,390.46	$2,674.42	$1,964.37	$2,702.74
	1-5	$1,811.89	$1,081.67	$1,108.94	$1,125.29	$934.75	$1,028.46	$1,076.13	$1,072.45
	6-14	$802.04	$491.17	$508.64	$513.18	$489.03	$625.30	$643.32	$560.71
	Female 15-20	$802.04	$491.17	$508.64	$513.18	$489.03	$625.30	$646.42	$550.56
	Female 21-44	$1,369.17	$1,062.85	$1,185.10	$1,100.86	$908.20	$951.67	$881.91	$1,020.87
	Male 15-20	$802.04	$491.17	$508.64	$513.18	$489.03	$625.30	$637.92	$554.17
	Male 21-44	$1,164.74	$930.86	$968.92	$851.98	$812.69	$817.00	$686.17	$863.60
	Over 44	$1,715.06	$1,566.96	$1,753.37	$1,541.14	$1,448.08	$1,423.85	$1,175.75	$1,479.66
	Average	$1,334.95	$1,124.82	$1,208.22	$1,136.73	$1,007.60	$1,065.20	$1,000.05	$1,100.66
Low Income Families with Children	Under 1	$406.07	$505.93	$537.23	$577.85	$528.49	$526.87	$268.44	$502.02
	1-5	$130.60	$123.92	$135.66	$129.91	$121.16	$112.09	$139.72	$124.58
	6-14	$113.21	$113.95	$120.02	$118.27	$115.11	$121.66	$148.70	$120.69
	Female 15-20	$204.01	$286.07	$248.75	$264.65	$231.96	$271.42	$293.93	$262.49
	Female 21-44	$579.03	$515.54	$515.95	$540.26	$446.80	$512.75	$547.84	$513.45
	Male 15-20	$137.38	$139.16	$140.73	$138.77	$130.24	$158.56	$173.48	$147.26
	Male 21-44	$344.01	$376.09	$361.44	$394.39	$314.14	$381.37	$422.68	$377.03
	Over 44	$668.62	$693.22	$689.82	$789.00	$650.51	$683.85	$624.33	$687.75
	Average	$210.70	$215.25	$226.60	$232.33	$211.18	$215.45	$240.09	$220.41
Weighted Average		$291.32	$339.09	$365.49	$345.73	$302.90	$329.54	$402.80	$340.36

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.
Kalydeco adjustment not applied to ages under 6 and indicated by shaded rate cells

Virginia Medicaid

Exhibit 9f

FY 2014 Capitation Rate Development
MajestaCare Medallion II Capitation Rates Net of Kalydeco Reinsurance Adjustment
With CDPS Adjustment and Far Southwest

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,659.40	$2,659.40	$2,659.40	$2,659.40	$2,659.40	$2,625.35	$1,884.72	$2,378.94
	1-5	$1,513.02	$1,045.67	$1,057.97	$1,072.00	$1,039.91	$1,009.59	$1,032.49	$1,019.73
	6-14	$669.70	$474.82	$485.25	$488.87	$544.08	$613.82	$617.22	$615.71
	Female 15-20	$669.70	$474.82	$485.25	$488.87	$544.08	$613.82	$620.20	$617.32
	Female 21-44	$1,143.28	$1,027.46	$1,130.61	$1,048.72	$1,010.41	$934.20	$846.14	$878.40
	Male 15-20	$669.70	$474.82	$485.25	$488.87	$544.08	$613.82	$612.04	$613.06
	Male 21-44	$972.57	$899.87	$924.37	$811.63	$904.15	$802.00	$658.34	$708.91
	Over 44	$1,432.13	$1,514.80	$1,672.76	$1,468.15	$1,611.03	$1,397.72	$1,128.06	$1,209.86
	Average	$1,216.19	$1,071.46	$1,112.61	$1,065.81	$1,107.14	$1,084.24	$968.43	$1,009.08
Low Income Families with Children	Under 1	$392.97	$493.52	$536.21	$584.18	$572.47	$528.48	$252.99	$390.95
	1-5	$126.39	$120.88	$135.40	$131.34	$131.24	$112.43	$131.67	$123.21
	6-14	$109.55	$111.15	$119.79	$119.57	$124.72	$122.03	$140.12	$133.49
	Female 15-20	$197.42	$279.05	$248.27	$267.56	$251.28	$272.25	$276.99	$275.09
	Female 21-44	$560.35	$502.89	$514.97	$546.19	$484.00	$514.32	$516.29	$515.39
	Male 15-20	$132.94	$135.74	$140.46	$140.30	$141.10	$159.05	$163.47	$161.69
	Male 21-44	$332.91	$366.86	$360.75	$398.72	$340.31	$382.53	$398.33	$393.08
	Over 44	$647.05	$676.22	$688.50	$797.66	$704.67	$685.95	$588.37	$637.49
	Average	$312.45	$335.79	$343.04	$373.19	$343.72	$258.16	$230.35	$241.91
Weighted Average		$764.32	$1,250.88	$1,293.91	$1,279.11	$1,289.66	$398.08	$386.43	$391.13

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.
Kalydeco adjustment not applied to ages under 6 and indicated by shaded rate cells

Virginia Medicaid

Exhibit 9g

FY 2014 Capitation Rate Development
All Health Plans Medallion II Capitation Rates Net of Kalydeco Reinsurance Adjustment
With CDPS Adjustment and Far Southwest

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,590.73	$2,683.61	$2,643.90	$2,700.89	$2,663.99	$2,643.86	$1,793.26	$2,620.58
	1-5	$1,534.70	$1,046.62	$1,056.63	$1,073.31	$1,037.36	$1,021.75	$1,045.56	$1,107.72
	6-14	$685.88	$473.76	$484.76	$488.30	$543.90	$620.15	$622.06	$543.20
	Female 15-20	$682.34	$473.44	$486.06	$488.19	$542.66	$615.97	$624.66	$537.15
	Female 21-44	$1,152.40	$1,027.60	$1,130.90	$1,046.29	$1,012.02	$941.91	$851.87	$1,023.98
	Male 15-20	$680.51	$471.91	$485.72	$488.01	$544.07	$616.49	$615.70	$540.03
	Male 21-44	$973.44	$896.67	$923.95	$812.27	$903.06	$807.02	$660.49	$866.78
	Over 44	$1,423.36	$1,516.57	$1,672.90	$1,468.95	$1,611.20	$1,407.40	$1,136.26	$1,475.32
	Average	$1,212.10	$1,074.08	$1,137.97	$1,069.47	$1,126.33	$1,068.45	$968.03	$1,101.82
Low Income Families with Children	Under 1	$389.97	$493.87	$535.65	$585.41	$571.49	$520.38	$256.01	$489.46
	1-5	$125.77	$120.99	$135.22	$131.49	$131.11	$111.09	$133.02	$128.03
	6-14	$109.85	$111.22	$119.72	$119.59	$124.74	$120.69	$141.76	$119.36
	Female 15-20	$197.83	$279.07	$248.55	$267.07	$251.71	$268.80	$279.70	$248.00
	Female 21-44	$562.79	$502.16	$515.38	$545.77	$484.08	$507.19	$522.29	$514.90
	Male 15-20	$133.19	$135.90	$140.57	$140.14	$141.42	$156.90	$164.99	$142.43
	Male 21-44	$334.94	$366.96	$360.96	$398.35	$340.31	$377.10	$402.35	$366.69
	Over 44	$650.01	$676.58	$689.55	$796.64	$706.10	$676.70	$594.20	$688.16
	Average	$184.69	$214.30	$226.78	$233.42	$228.10	$223.26	$228.68	$217.07
Weighted Average		$255.83	$332.00	$343.33	$346.75	$336.23	$343.43	$382.40	$325.37

Note:
Average is weighted by health plan enrollment distribution as of February 2013. Overall weighted averages include Medically Needy.
Kalydeco adjustment not applied to ages under 6 and indicated by shaded rate cells

Virginia Medicaid

Exhibit 10a

FY 2014 Capitation Rate Development

InTotal Health Medallion II Medicare Enhanced PCP Supplemental Payment

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke/ Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$33.01	$19.12	$56.11	$28.37	$23.70	$71.44	$31.42	$33.02
	1-5	$16.63	$8.54	$12.72	$8.50	$8.08	$13.72	$15.31	$14.94
	6-14	$6.49	$4.79	$5.87	$6.61	$4.32	$6.60	$5.54	$6.26
	Female 15-20	$3.31	$7.20	$5.38	$3.12	$5.46	$7.38	$4.44	$4.23
	Female 21-44	$7.79	$11.28	$11.44	$8.17	$14.24	$11.84	$8.56	$8.56
	Male 15-20	$4.38	$2.99	$3.76	$3.38	$3.35	$4.75	$3.30	$4.06
	Male 21-44	$4.81	$6.94	$7.54	$5.50	$8.49	$7.82	$6.06	$5.60
	Over 44	$11.19	$13.79	$15.69	$9.45	$18.76	$15.84	$11.06	$11.41
	Average	$9.36	$10.51	$15.69	$7.90	$10.80	$11.81	$9.41	$9.50
Low Income Families with Children	Under 1	$30.14	$20.36	$32.51	$27.85	$25.68	$59.83	$28.38	$31.35
	1-5	$12.38	$5.56	$9.48	$7.10	$7.16	$10.01	$10.27	$11.54
	6-14	$6.79	$3.57	$4.93	$4.67	$3.95	$5.92	$5.59	$6.32
	Female 15-20	$4.81	$5.04	$5.04	$5.13	$4.62	$6.25	$5.23	$5.04
	Female 21-44	$6.73	$8.82	$8.54	$6.98	$9.87	$9.88	$7.78	$7.38
	Male 15-20	$4.32	$3.19	$3.60	$3.42	$3.04	$5.25	$4.17	$4.27
	Male 21-44	$5.55	$6.78	$7.55	$5.47	$7.74	$8.48	$6.59	$6.32
	Over 44	$9.84	$11.47	$12.23	$10.77	$15.54	$14.05	$9.87	$10.30
	Average	$10.59	$7.33	$3.66	$7.34	$6.80	$11.95	$8.27	$9.99
Weighted Average		$10.51	$7.69	$9.71	$7.39	$6.81	$11.93	$8.51	$9.94

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.
PMPM in shaded cells are based on all health plan regional rate

Virginia Medicaid

Exhibit 10b

FY 2014 Capitation Rate Development

Anthem Blue Cross and Blue Shield Medallion II Medicare Enhanced PCP Supplemental Payment

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke/ Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$48.98	$16.49	$32.09	$46.96	$26.37	$72.41	$31.42	$40.83
	1-5	$15.66	$8.04	$12.46	$7.02	$7.76	$13.61	$15.31	$11.77
	6-14	$7.51	$2.95	$5.93	$4.16	$3.94	$6.62	$5.54	$5.49
	Female 15-20	$5.54	$4.41	$4.12	$4.26	$3.49	$7.28	$4.44	$4.26
	Female 21-44	$8.21	$7.69	$9.49	$7.39	$6.50	$11.82	$8.56	$8.12
	Male 15-20	$5.63	$1.57	$3.26	$2.01	$2.34	$4.75	$3.30	$3.37
	Male 21-44	$5.97	$2.39	$6.07	$4.09	$5.27	$7.90	$6.06	$5.63
	Over 44	$10.99	$9.18	$12.80	$11.40	$12.64	$15.87	$11.06	$12.02
	Average	$9.42	$6.04	$8.97	$8.05	$8.38	$12.66	$9.45	$8.93
Low Income Families with Children	Under 1	$31.38	$29.43	$33.04	$24.09	$26.66	$59.21	$28.38	$30.61
	1-5	$11.72	$7.03	$10.00	$6.89	$7.24	$9.93	$10.27	$9.93
	6-14	$6.18	$3.05	$5.09	$3.51	$3.90	$5.94	$5.59	$5.23
	Female 15-20	$4.54	$2.96	$4.27	$3.68	$3.37	$6.26	$5.23	$4.18
	Female 21-44	$7.42	$4.81	$6.83	$6.36	$5.66	$9.89	$7.78	$6.67
	Male 15-20	$3.97	$1.95	$3.45	$2.63	$2.56	$5.25	$4.17	$3.46
	Male 21-44	$6.22	$4.87	$6.58	$6.80	$5.47	$8.38	$6.59	$6.29
	Over 44	$11.91	$5.57	$10.68	$10.56	$10.34	$14.01	$9.87	$11.06
	Average	$9.42	$6.18	$8.11	$6.21	$6.52	$11.75	$8.27	$8.21
Weighted Average		$9.42	$6.16	$8.22	$6.45	$6.75	$11.89	$8.52	$8.29

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.

Virginia Medicaid

Exhibit 10c

FY 2014 Capitation Rate Development

CareNet/Southern Health Services Medallion II Medicare Enhanced PCP Supplemental Payment

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke/ Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$40.81	$13.32	$18.50	$46.01	$23.70	$74.62	$31.42	$32.53
	1-5	$15.50	$5.36	$9.62	$12.77	$8.08	$14.03	$15.31	$10.33
	6-14	$7.31	$1.45	$5.15	$4.56	$4.32	$6.63	$5.54	$5.03
	Female 15-20	$5.21	$3.42	$4.22	$3.43	$5.46	$7.39	$4.44	$4.58
	Female 21-44	$8.17	$4.41	$9.08	$9.00	$14.24	$11.79	$8.56	$8.90
	Male 15-20	$5.11	$2.38	$3.49	$8.91	$3.35	$4.82	$3.30	$3.79
	Male 21-44	$5.78	$4.91	$6.26	$3.62	$8.49	$7.84	$6.06	$6.14
	Over 44	$11.43	$7.57	$14.05	$10.16	$18.76	$15.81	$11.06	$12.65
	Average	$12.42	$5.49	$9.25	$8.08	$14.22	$12.24	$9.25	$9.27
Low Income Families with Children	Under 1	$31.05	$11.07	$26.23	$24.48	$25.68	$59.49	$28.38	$30.52
	1-5	$11.80	$3.49	$8.11	$7.91	$7.16	$10.03	$10.27	$8.20
	6-14	$6.26	$1.99	$4.24	$3.93	$3.95	$5.96	$5.59	$4.44
	Female 15-20	$4.57	$2.48	$3.99	$3.88	$4.62	$6.27	$5.23	$4.38
	Female 21-44	$7.31	$5.32	$6.33	$6.33	$9.87	$9.90	$7.78	$6.94
	Male 15-20	$3.99	$2.29	$3.00	$2.55	$3.04	$5.24	$4.17	$3.47
	Male 21-44	$6.23	$4.60	$5.72	$4.70	$7.74	$8.52	$6.59	$6.27
	Over 44	$11.58	$6.53	$9.24	$11.94	$15.54	$14.02	$9.87	$9.87
	Average	$6.80	$3.76	$6.99	$6.49	$7.71	$12.74	$8.24	$7.56
Weighted Average		$6.82	$4.02	$7.26	$6.72	$8.93	$12.66	$8.44	$7.80

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.
PMPM in shaded cells are based on all health plan regional rate

Virginia Medicaid

Exhibit 10d

FY 2014 Capitation Rate Development

Optima Family Care Medallion II Medicare Enhanced PCP Supplemental Payment

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke/ Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$40.81	$12.64	$99.29	$48.01	$25.46	$75.01	$31.42	$36.59
	1-5	$15.50	$9.16	$16.68	$10.16	$9.02	$13.99	$15.31	$10.89
	6-14	$7.31	$5.24	$7.03	$4.86	$5.03	$6.68	$5.54	$5.42
	Female 15-20	$5.21	$10.21	$8.99	$7.91	$7.37	$7.90	$4.44	$8.10
	Female 21-44	$8.17	$14.17	$18.16	$15.49	$21.86	$12.44	$8.56	$18.03
	Male 15-20	$5.11	$3.24	$5.34	$4.68	$4.42	$4.95	$3.30	$4.49
	Male 21-44	$5.78	$7.57	$10.23	$8.04	$11.54	$8.00	$6.06	$9.74
	Over 44	$11.43	$17.01	$21.96	$16.82	$25.61	$16.18	$11.06	$21.10
	Average	$12.42	$11.69	$15.68	$12.13	$16.76	$12.49	$9.13	$14.58
Low Income Families with Children	Under 1	$31.05	$16.85	$34.32	$27.23	$27.35	$59.57	$28.38	$28.91
	1-5	$11.80	$4.89	$10.55	$7.60	$7.96	$10.02	$10.27	$8.20
	6-14	$6.26	$3.56	$5.67	$4.35	$4.46	$5.95	$5.59	$4.64
	Female 15-20	$4.57	$6.38	$7.81	$6.50	$6.10	$6.39	$5.23	$6.49
	Female 21-44	$7.31	$11.39	$15.85	$12.81	$14.98	$10.46	$7.78	$14.05
	Male 15-20	$3.99	$3.32	$4.63	$3.78	$3.68	$5.37	$4.17	$3.91
	Male 21-44	$6.23	$8.40	$12.07	$10.33	$11.25	$8.80	$6.59	$10.47
	Over 44	$11.58	$14.22	$19.70	$14.65	$21.94	$14.81	$9.87	$18.77
	Average	$10.00	$6.22	$10.45	$7.87	$8.54	$12.30	$8.21	$8.63
Weighted Average		$10.00	$6.97	$11.11	$8.50	$9.52	$12.32	$8.38	$9.41

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.
PMPM in shaded cells are based on all health plan regional rate

Virginia Medicaid

Exhibit 10e

FY 2014 Capitation Rate Development

Virginia Premier Health Plan Medallion II Medicare Enhanced PCP Supplemental Payment

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke/ Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$4.20	$27.28	$51.19	$28.85	$17.68	$44.36	$31.42	$31.85
	1-5	$12.71	$8.59	$11.06	$9.91	$5.97	$11.64	$15.31	$10.56
	6-14	$7.21	$4.86	$5.10	$4.11	$2.54	$6.13	$5.54	$5.08
	Female 15-20	$7.47	$5.21	$5.05	$2.69	$3.07	$6.27	$4.44	$4.88
	Female 21-44	$9.13	$10.38	$9.46	$7.76	$7.34	$10.93	$8.56	$9.55
	Male 15-20	$3.11	$2.94	$3.40	$2.84	$1.88	$4.03	$3.30	$3.22
	Male 21-44	$8.36	$7.32	$7.50	$6.49	$7.75	$6.84	$6.06	$7.08
	Over 44	$18.88	$12.60	$14.22	$10.87	$12.67	$14.16	$11.06	$13.02
	Average	$12.15	$9.46	$9.91	$8.17	$8.24	$10.66	$9.35	$9.68
Low Income Families with Children	Under 1	$32.20	$23.01	$34.35	$21.06	$18.65	$42.97	$28.38	$30.29
	1-5	$9.93	$6.11	$8.39	$5.37	$4.54	$8.73	$10.27	$7.49
	6-14	$5.40	$3.78	$4.32	$2.95	$2.15	$5.07	$5.59	$4.21
	Female 15-20	$4.13	$4.52	$4.28	$2.83	$1.85	$5.52	$5.23	$4.33
	Female 21-44	$7.64	$7.52	$5.93	$6.21	$3.51	$9.17	$7.78	$6.94
	Male 15-20	$3.06	$3.33	$3.19	$2.38	$1.55	$4.16	$4.17	$3.32
	Male 21-44	$7.18	$5.95	$5.40	$5.50	$3.13	$7.88	$6.59	$6.35
	Over 44	$13.38	$10.45	$9.51	$9.18	$7.46	$12.52	$9.87	$10.47
	Average	$8.44	$6.22	$7.44	$5.24	$4.17	$8.71	$8.30	$7.08
Weighted Average		$8.71	$6.66	$7.79	$5.61	$4.64	$8.97	$8.53	$7.43

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.

Virginia Medicaid

Exhibit 10f

FY 2014 Capitation Rate Development

MajestaCare Medallion II Medicare Enhanced PCP Supplemental Payment

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke/ Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$40.81	$19.12	$56.11	$41.15	$23.70	$71.03	$31.42	$57.79
	1-5	$15.50	$8.54	$12.72	$9.34	$8.08	$13.70	$15.31	$14.41
	6-14	$7.31	$4.79	$5.87	$4.62	$4.32	$6.70	$5.54	$6.05
	Female 15-20	$5.21	$7.20	$5.38	$5.84	$5.46	$7.30	$4.44	$5.73
	Female 21-44	$8.17	$11.28	$11.44	$11.41	$14.24	$11.89	$8.56	$9.78
	Male 15-20	$5.11	$2.99	$3.76	$3.78	$3.35	$4.70	$3.30	$4.11
	Male 21-44	$5.78	$6.94	$7.54	$6.51	$8.49	$7.82	$6.06	$6.68
	Over 44	$11.43	$13.79	$15.69	$13.45	$18.76	$15.81	$11.06	$12.50
	Average	$12.42	$9.33	$14.81	$12.01	$10.80	$12.35	$9.44	$10.46
Low Income Families with Children	Under 1	$31.05	$20.36	$32.51	$24.81	$25.68	$59.44	$28.38	$43.93
	1-5	$11.80	$5.56	$9.48	$6.84	$7.16	$10.00	$10.27	$10.15
	6-14	$6.26	$3.57	$4.93	$3.83	$3.95	$5.97	$5.59	$5.73
	Female 15-20	$4.57	$5.04	$5.04	$4.78	$4.62	$6.28	$5.23	$5.65
	Female 21-44	$7.31	$8.82	$8.54	$8.96	$9.87	$9.87	$7.78	$8.73
	Male 15-20	$3.99	$3.19	$3.60	$3.13	$3.04	$5.27	$4.17	$4.61
	Male 21-44	$6.23	$6.78	$7.55	$7.44	$7.74	$8.51	$6.59	$7.23
	Over 44	$11.58	$11.47	$12.23	$11.95	$15.54	$14.66	$9.87	$12.28
	Average	$10.35	$8.10	$10.49	$8.97	$9.70	$12.71	$8.43	$10.21
Weighted Average		$11.38	$15.49	$22.49	$18.65	$18.23	$12.65	$8.65	$10.26

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.
PMPM in shaded cells are based on all health plan regional rate

Virginia Medicaid

Exhibit 10g

FY 2014 Capitation Rate Development

All Health Plans Medallion II Medicare Enhanced PCP Supplemental Payment

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$37.66	$22.43	$38.61	$38.23	$24.85	$60.73	$31.42	$35.97
	1-5	$15.62	$8.50	$12.77	$9.39	$8.08	$12.11	$15.31	$11.24
	6-14	$7.32	$4.79	$5.86	$4.61	$4.32	$6.27	$5.54	$5.35
	Female 15-20	$5.31	$7.33	$5.43	$5.85	$5.47	$6.72	$4.44	$5.72
	Female 21-44	$8.20	$11.32	$11.39	$11.43	$14.28	$11.26	$8.56	$11.29
	Male 15-20	$5.11	$2.99	$3.77	$3.71	$3.36	$4.33	$3.30	$3.74
	Male 21-44	$5.84	$6.94	$7.47	$6.45	$8.54	$7.24	$6.06	$7.17
	Over 44	$11.48	$13.74	$15.64	$13.30	$18.62	$14.81	$11.06	$14.45
	Average	$9.72	$9.97	$10.88	$9.90	$12.46	$11.27	$9.36	$10.77
Low Income Families with Children	Under 1	$31.04	$20.43	$32.53	$24.78	$25.66	$49.79	$28.38	$30.48
	1-5	$11.81	$5.55	$9.45	$6.83	$7.16	$9.11	$10.27	$9.02
	6-14	$6.26	$3.57	$4.92	$3.81	$3.94	$5.30	$5.59	$4.88
	Female 15-20	$4.57	$5.04	$5.05	$4.75	$4.60	$5.77	$5.23	$4.91
	Female 21-44	$7.30	$8.78	$8.54	$8.89	$9.79	$9.48	$7.78	$8.82
	Male 15-20	$3.99	$3.18	$3.61	$3.12	$3.02	$4.55	$4.17	$3.62
	Male 21-44	$6.22	$6.78	$7.62	$7.43	$7.75	$8.13	$6.59	$7.29
	Over 44	$11.58	$11.40	$12.23	$11.96	$15.59	$13.20	$9.87	$12.73
	Average	$9.65	$6.09	$8.34	$6.72	$7.16	$9.82	$8.29	$8.18
Weighted Average		$9.65	$6.62	$8.66	$7.15	$7.80	$10.03	$8.52	$8.49

Note:
Average is weighted by health plan enrollment distribution as of February 2013. Overall weighted averages include Medically Needy.
Far Southwest rate cell PMPM is the same for all plans.

Virginia Medicaid

Exhibit 11a

FY 2014 Capitation Rate Development
InTotal Health Medallion II Capitation Rates Net of Kalydeco Reinsurance Adjustment
With CDPS Adjustment, Far Southwest, and Medicare Enhanced PCP Supplemental Payment

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,353.41	$2,669.18	$2,715.76	$2,711.72	$2,683.11	$2,708.61	$1,996.18	$2,353.68
	1-5	$1,336.78	$1,050.54	$1,070.79	$1,090.16	$1,047.99	$1,027.86	$1,091.66	$1,211.50
	6-14	$590.79	$477.94	$491.16	$499.88	$548.40	$623.18	$648.98	$597.89
	Female 15-20	$587.61	$480.35	$490.67	$496.39	$549.54	$623.96	$651.00	$593.95
	Female 21-44	$1,005.30	$1,035.13	$1,142.16	$1,066.33	$1,024.65	$950.25	$890.66	$957.67
	Male 15-20	$588.68	$476.14	$489.05	$496.65	$547.43	$621.34	$641.35	$595.58
	Male 21-44	$853.37	$903.65	$931.99	$824.44	$912.65	$813.43	$692.37	$798.70
	Over 44	$1,260.72	$1,523.26	$1,688.62	$1,490.82	$1,629.79	$1,419.86	$1,187.05	$1,271.91
	Average	$1,094.37	$1,136.18	$1,684.16	$1,142.55	$1,117.95	$1,072.27	$1,016.55	$1,071.88
Low Income Families with Children	Under 1	$386.45	$513.51	$568.67	$671.72	$598.37	$561.87	$288.03	$415.48
	1-5	$126.98	$126.34	$144.86	$151.85	$138.45	$116.81	$145.41	$130.62
	6-14	$106.10	$114.64	$124.70	$136.48	$128.71	$121.84	$149.42	$116.23
	Female 15-20	$183.79	$283.88	$253.28	$300.05	$255.99	$264.86	$289.53	$221.11
	Female 21-44	$514.78	$511.34	$523.46	$609.00	$494.06	$498.46	$537.68	$531.36
	Male 15-20	$124.83	$138.84	$144.05	$158.07	$144.20	$156.33	$171.95	$138.37
	Male 21-44	$307.38	$373.37	$368.27	$444.96	$348.18	$371.86	$415.43	$369.31
	Over 44	$596.49	$687.19	$700.67	$889.95	$720.47	$665.66	$613.75	$638.61
	Average	$176.42	$250.42	$145.71	$260.43	$227.70	$250.02	$239.83	$198.68
Weighted Average		$237.67	$352.18	$918.13	$338.97	$228.51	$377.49	$400.15	$282.77

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.

Virginia Medicaid

Exhibit 11b

FY 2014 Capitation Rate Development

Anthem Blue Cross and Blue Shield Medallion II Capitation Rates Net of Kalydeco Reinsurance Adjustment With CDPS Adjustment, Far Southwest, and Medicare Enhanced PCP Supplemental Payment

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,789.64	$2,666.55	$2,691.82	$2,644.34	$2,741.87	$2,856.13	$1,859.92	$2,755.46
	1-5	$1,574.91	$1,050.03	$1,070.55	$1,054.03	$1,069.61	$1,084.10	$1,017.01	$1,233.78
	6-14	$697.68	$476.10	$491.24	$481.61	$559.50	$657.48	$604.34	$564.85
	Female 15-20	$695.71	$477.55	$489.42	$481.72	$559.05	$658.14	$606.14	$554.34
	Female 21-44	$1,186.44	$1,031.54	$1,140.24	$1,031.65	$1,038.23	$1,002.39	$829.46	$1,080.84
	Male 15-20	$695.80	$474.72	$488.57	$479.47	$557.90	$655.61	$597.08	$556.80
	Male 21-44	$1,008.27	$899.10	$930.55	$796.78	$928.50	$858.29	$644.76	$918.52
	Over 44	$1,486.88	$1,518.65	$1,685.76	$1,445.31	$1,657.66	$1,497.92	$1,105.48	$1,542.59
	Average	$1,239.93	$1,051.68	$1,118.64	$1,076.50	$1,184.07	$1,181.15	$948.60	$1,155.19
Low Income Families with Children	Under 1	$436.38	$519.91	$580.71	$600.77	$606.77	$583.71	$277.60	$516.36
	1-5	$141.98	$127.17	$148.29	$136.54	$140.23	$121.52	$139.98	$141.92
	6-14	$119.09	$113.51	$127.44	$121.54	$130.28	$127.06	$143.63	$124.12
	Female 15-20	$208.01	$280.28	$257.85	$267.79	$258.00	$276.46	$278.10	$240.34
	Female 21-44	$584.93	$504.60	$532.80	$545.53	$496.12	$520.34	$516.38	$535.28
	Male 15-20	$140.99	$136.86	$146.91	$141.13	$145.55	$163.10	$165.20	$144.58
	Male 21-44	$349.33	$369.46	$375.05	$400.39	$350.32	$388.03	$398.99	$366.66
	Over 44	$678.77	$677.62	$713.90	$797.96	$724.41	$694.79	$589.49	$705.41
	Average	$198.50	$224.97	$244.59	$242.35	$241.33	$253.53	$229.71	$223.54
Weighted Average		$265.44	$307.52	$350.33	$354.68	$355.41	$392.57	$382.13	$318.42

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.

Virginia Medicaid

Exhibit 11c

FY 2014 Capitation Rate Development
CareNet/Southern Health Services Medallion II Capitation Rates Net of Kalydeco Reinsurance Adjustment
With CDPS Adjustment, Far Southwest, and Medicare Enhanced PCP Supplemental Payment

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,700.21	$2,663.38	$2,634.16	$2,729.35	$2,684.03	$2,503.94	$1,904.05	$2,601.53
	1-5	$1,528.53	$1,047.35	$1,050.19	$1,094.42	$1,048.35	$948.24	$1,041.19	$1,038.66
	6-14	$677.01	$474.59	$482.41	$497.83	$548.59	$574.60	$618.80	$508.72
	Female 15-20	$674.91	$476.56	$481.48	$496.70	$549.73	$575.36	$620.67	$510.30
	Female 21-44	$1,151.46	$1,028.26	$1,121.09	$1,067.17	$1,025.00	$876.22	$849.28	$1,008.06
	Male 15-20	$674.81	$475.53	$480.76	$502.18	$547.62	$572.78	$611.42	$509.88
	Male 21-44	$978.36	$901.62	$915.42	$822.56	$912.96	$749.94	$660.18	$828.12
	Over 44	$1,443.55	$1,517.04	$1,659.30	$1,491.53	$1,630.35	$1,309.15	$1,131.89	$1,432.81
	Average	$1,228.60	$1,129.34	$1,105.25	$1,099.40	$1,298.39	$1,011.97	$955.60	$1,059.66
Low Income Families with Children	Under 1	$424.70	$496.58	$544.14	$649.14	$598.37	$563.83	$274.74	$511.60
	1-5	$138.41	$122.41	$138.88	$148.34	$138.45	$117.33	$138.50	$135.57
	6-14	$116.00	$111.33	$119.93	$131.81	$128.71	$122.41	$142.04	$123.78
	Female 15-20	$202.33	$276.99	$243.78	$289.99	$255.99	$266.07	$274.96	$257.94
	Female 21-44	$568.61	$500.05	$503.72	$590.38	$494.06	$500.71	$510.55	$508.26
	Male 15-20	$137.16	$135.82	$138.66	$152.58	$144.20	$157.01	$163.35	$147.00
	Male 21-44	$339.70	$365.50	$354.15	$431.06	$348.18	$373.56	$394.49	$374.09
	Over 44	$659.73	$671.76	$674.23	$864.89	$720.47	$668.60	$582.84	$667.88
	Average	$342.23	$225.71	$221.63	$255.09	$232.80	$248.98	$227.81	$227.81
Weighted Average		$345.75	$359.28	$327.38	$379.07	$432.66	$368.24	$373.49	$345.26

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.

Virginia Medicaid

Exhibit 11d

FY 2014 Capitation Rate Development
Optima Family Care Medallion II Capitation Rates Net of Kalydeco Reinsurance Adjustment
With CDPS Adjustment, Far Southwest, and Medicare Enhanced PCP Supplemental Payment

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,700.21	$2,550.93	$2,647.27	$2,664.06	$2,716.29	$2,541.86	$1,725.58	$2,633.88
	1-5	$1,528.53	$1,007.20	$1,030.32	$1,064.68	$1,061.22	$962.64	$943.42	$1,043.98
	6-14	$677.01	$458.42	$471.93	$485.76	$555.54	$583.43	$560.33	$514.90
	Female 15-20	$674.91	$463.39	$473.90	$488.80	$557.88	$584.64	$561.91	$516.72
	Female 21-44	$1,151.46	$994.83	$1,101.39	$1,047.11	$1,044.22	$890.22	$769.13	$1,031.06
	Male 15-20	$674.81	$456.42	$470.25	$485.57	$554.94	$581.70	$553.44	$514.29
	Male 21-44	$978.36	$866.45	$895.86	$806.43	$926.38	$761.57	$597.81	$869.80
	Over 44	$1,443.55	$1,462.80	$1,624.63	$1,461.04	$1,655.68	$1,329.51	$1,025.05	$1,544.34
	Average	$1,228.60	$1,005.39	$1,126.44	$1,030.28	$1,131.41	$1,018.92	$856.94	$1,080.40
Low Income Families with Children	Under 1	$424.70	$496.21	$562.71	$604.34	$606.93	$554.14	$264.03	$572.08
	1-5	$138.41	$122.30	$143.98	$137.35	$140.83	$115.23	$132.92	$137.76
	6-14	$116.00	$111.51	$123.70	$122.47	$130.73	$120.13	$136.10	$125.59
	Female 15-20	$202.33	$277.41	$252.45	$270.81	$260.50	$261.15	$263.22	$262.82
	Female 21-44	$568.61	$499.85	$523.31	$552.39	$504.99	$491.75	$488.67	$513.99
	Male 15-20	$137.16	$135.16	$143.03	$142.38	$146.53	$154.19	$156.42	$144.54
	Male 21-44	$339.70	$364.72	$367.56	$404.23	$355.79	$366.76	$377.61	$369.98
	Over 44	$659.73	$671.03	$698.16	$802.65	$735.35	$656.72	$557.91	$724.78
	Average	$241.16	$216.83	$230.00	$235.00	$236.46	$241.49	$217.16	$232.23
Weighted Average		$242.04	$326.03	$342.52	$352.33	$343.38	$350.51	$331.61	$342.49

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.

Virginia Medicaid

Exhibit 11e

FY 2014 Capitation Rate Development

Virginia Premier Health Plan Medallion II Capitation Rates Net of Kalydeco Reinsurance Adjustment With CDPS Adjustment, Far Southwest, and Medicare Enhanced PCP Supplemental Payment

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$3,188.91	$2,778.25	$2,838.73	$2,820.44	$2,408.14	$2,718.78	$1,995.79	$2,734.59
	1-5	$1,824.60	$1,090.26	$1,120.01	$1,135.20	$940.71	$1,040.10	$1,091.44	$1,083.01
	6-14	$809.24	$496.03	$513.74	$517.29	$491.57	$631.43	$648.85	$565.79
	Female 15-20	$809.51	$496.38	$513.69	$515.87	$492.10	$631.57	$650.87	$555.44
	Female 21-44	$1,378.29	$1,073.23	$1,194.56	$1,108.62	$915.54	$962.59	$890.48	$1,030.42
	Male 15-20	$805.15	$494.11	$512.04	$516.02	$490.91	$629.33	$641.22	$557.38
	Male 21-44	$1,173.10	$938.18	$976.42	$858.47	$820.44	$823.84	$692.23	$870.69
	Over 44	$1,733.94	$1,579.56	$1,767.60	$1,552.02	$1,460.76	$1,438.01	$1,186.81	$1,492.68
	Average	$1,347.10	$1,134.28	$1,218.14	$1,144.90	$1,015.84	$1,075.86	$1,009.40	$1,110.34
Low Income Families with Children	Under 1	$438.27	$528.94	$571.59	$598.90	$547.14	$569.84	$296.82	$532.31
	1-5	$140.54	$130.03	$144.05	$135.28	$125.69	$120.82	$149.99	$132.07
	6-14	$118.61	$117.74	$124.34	$121.22	$117.27	$126.73	$154.29	$124.90
	Female 15-20	$208.14	$290.59	$253.02	$267.48	$233.80	$276.94	$299.16	$266.81
	Female 21-44	$586.66	$523.06	$521.89	$546.47	$450.31	$521.92	$555.62	$520.38
	Male 15-20	$140.44	$142.50	$143.91	$141.15	$131.79	$162.72	$177.64	$150.58
	Male 21-44	$351.19	$382.04	$366.84	$399.89	$317.28	$389.25	$429.27	$383.38
	Over 44	$681.99	$703.68	$699.33	$798.18	$657.96	$696.37	$634.20	$698.22
	Average	$219.14	$221.47	$234.04	$237.57	$215.35	$224.16	$248.39	$227.49
Weighted Average		$300.02	$345.76	$373.28	$351.33	$307.54	$338.51	$411.32	$347.80

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.

Virginia Medicaid

Exhibit 11f

FY 2014 Capitation Rate Development
MajestaCare Medallion II Capitation Rates Net of Kalydeco Reinsurance Adjustment
With CDPS Adjustment, Far Southwest, and Medicare Enhanced PCP Supplemental Payment

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,700.21	$2,678.52	$2,715.51	$2,700.55	$2,683.11	$2,696.38	$1,916.13	$2,436.73
	1-5	$1,528.53	$1,054.21	$1,070.69	$1,081.35	$1,047.99	$1,023.29	$1,047.81	$1,034.14
	6-14	$677.01	$479.61	$491.11	$493.49	$548.40	$620.52	$622.76	$621.76
	Female 15-20	$674.91	$482.02	$490.62	$494.71	$549.54	$621.12	$624.64	$623.05
	Female 21-44	$1,151.46	$1,038.74	$1,142.05	$1,060.14	$1,024.65	$946.09	$854.70	$888.18
	Male 15-20	$674.81	$477.81	$489.01	$492.65	$547.43	$618.52	$615.34	$617.17
	Male 21-44	$978.36	$906.82	$931.90	$818.14	$912.65	$809.82	$664.40	$715.59
	Over 44	$1,443.55	$1,528.59	$1,688.46	$1,481.60	$1,629.79	$1,413.53	$1,139.13	$1,222.36
	Average	$1,228.60	$1,080.79	$1,127.42	$1,077.83	$1,117.95	$1,096.59	$977.87	$1,019.54
Low Income Families with Children	Under 1	$424.03	$513.88	$568.72	$608.99	$598.15	$587.92	$281.36	$434.88
	1-5	$138.19	$126.43	$144.88	$138.18	$138.40	$122.43	$141.94	$133.36
	6-14	$115.81	$114.72	$124.71	$123.40	$128.66	$128.00	$145.72	$139.22
	Female 15-20	$201.99	$284.09	$253.31	$272.34	$255.90	$278.53	$282.22	$280.74
	Female 21-44	$567.66	$511.71	$523.51	$555.15	$493.88	$524.19	$524.06	$524.12
	Male 15-20	$136.93	$138.93	$144.06	$143.42	$144.14	$164.31	$167.64	$166.30
	Male 21-44	$339.13	$373.64	$368.31	$406.16	$348.05	$391.04	$404.92	$400.31
	Over 44	$658.63	$687.69	$700.74	$809.61	$720.21	$700.61	$598.24	$649.77
	Average	$322.80	$343.89	$353.53	$382.16	$353.42	$270.88	$238.78	$252.12
Weighted Average		$775.70	$1,266.38	$1,316.40	$1,297.76	$1,307.88	$410.74	$395.08	$401.39

Note:
Average is weighted by health plan enrollment distribution as of February 2013 excluding Medically Needy.

Virginia Medicaid

Exhibit 11g

FY 2014 Capitation Rate Development
All Health Plans Medallion II Capitation Rates Net of Kalydeco Reinsurance Adjustment
With CDPS Adjustment, Far Southwest, and Medicare Enhanced PCP Supplemental Payment

		Region							
Aid Category	**Age Group**	**Northern Virginia**	**Other MSA**	**Richmond/ Charlottesville**	**Rural**	**Tidewater**	**Roanoke-Alleghany**	**Far Southwest**	**FY 2014 Average**
Aged, Blind, and Disabled	Under 1	$2,628.39	$2,706.03	$2,682.51	$2,739.12	$2,688.84	$2,704.59	$1,824.67	$2,656.55
	1-5	$1,550.32	$1,055.12	$1,069.40	$1,082.70	$1,045.45	$1,033.87	$1,060.88	$1,118.96
	6-14	$693.21	$478.55	$490.62	$492.91	$548.22	$626.42	$627.60	$548.56
	Female 15-20	$687.64	$480.77	$491.49	$494.04	$548.14	$622.69	$629.11	$542.87
	Female 21-44	$1,160.60	$1,038.92	$1,142.30	$1,057.71	$1,026.30	$953.18	$860.43	$1,035.28
	Male 15-20	$685.62	$474.90	$489.49	$491.72	$547.43	$620.82	$619.00	$543.77
	Male 21-44	$979.28	$903.61	$931.42	$818.71	$911.60	$814.25	$666.56	$873.95
	Over 44	$1,434.84	$1,530.31	$1,688.54	$1,482.25	$1,629.82	$1,422.21	$1,147.32	$1,489.77
	Average	$1,221.81	$1,084.05	$1,148.85	$1,079.37	$1,138.79	$1,079.72	$977.39	$1,112.59
Low Income Families with Children	Under 1	$421.02	$514.30	$568.18	$610.19	$597.15	$570.16	$284.38	$519.94
	1-5	$137.58	$126.55	$144.67	$138.32	$138.27	$120.19	$143.29	$137.05
	6-14	$116.12	$114.79	$124.64	$123.41	$128.68	$125.98	$147.35	$124.24
	Female 15-20	$202.40	$284.11	$253.60	$271.82	$256.31	$274.57	$284.93	$252.91
	Female 21-44	$570.09	$510.94	$523.91	$554.66	$493.87	$516.67	$530.07	$523.71
	Male 15-20	$137.18	$139.08	$144.18	$143.26	$144.44	$161.45	$169.16	$146.05
	Male 21-44	$341.16	$373.74	$368.58	$405.78	$348.06	$385.22	$408.94	$373.98
	Over 44	$661.60	$687.98	$701.78	$808.60	$721.69	$689.91	$604.07	$700.90
	Average	$194.34	$220.39	$235.12	$240.15	$235.27	$233.08	$236.98	$225.25
Weighted Average		$265.48	$338.62	$352.00	$353.90	$344.04	$353.46	$390.91	$333.86

Note:
Average is weighted by health plan enrollment distribution as of February 2013. Overall weighted averages include Medically Needy.

Virginia Medicaid

Exhibit 12

FY 2014 Capitation Rate Development
Kaiser Permanente Medallion II Capitation Rates Net of Kalydeco Reinsurance Adjustment
With Medicare Enhanced PCP Supplemental Payment
Rates Effective October 1, 2013 to June 30, 2014

		Northern Virginia			
Aid Category	**Age Group**	**Base Rate**	**Base Rate net Kalydeco**	**PCP Supplemental**	**Cap Rates Eff. 10/1/2013**
Aged, Blind, and Disabled	Under 1	$2,659.40	$2,659.40	$40.81	$2,700.21
	1-5	$1,513.02	$1,513.02	$15.50	$1,528.53
	6-14	$669.97	$669.70	$7.31	$677.01
	Female 15-20	$669.97	$669.70	$5.21	$674.91
	Female 21-44	$1,143.55	$1,143.28	$8.17	$1,151.46
	Male 15-20	$669.97	$669.70	$5.11	$674.81
	Male 21-44	$972.84	$972.57	$5.78	$978.36
	Over 44	$1,432.39	$1,432.13	$11.43	$1,443.55
Low Income Families with Children	Under 1	$392.97	$392.97	$31.05	$424.03
	1-5	$126.39	$126.39	$11.80	$138.19
	6-14	$109.82	$109.55	$6.26	$115.81
	Female 15-20	$197.69	$197.42	$4.57	$201.99
	Female 21-44	$560.62	$560.35	$7.31	$567.66
	Male 15-20	$133.21	$132.94	$3.99	$136.93
	Male 21-44	$333.17	$332.91	$6.23	$339.13
	Over 44	$647.31	$647.05	$11.58	$658.63

Note:
Kalydeco adjustment not applied to ages under 6 and indicated by shaded rate cells
PCP Supplemental PMPM in shaded cells are based on all health plan regional rate

Virginia Medicaid
FY 2014 Capitation Rate Development
County Listing by Region

Exhibit 13

Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural		Tidewater	Roanoke-Alleghany	Far Southwest
Alexandria City	Amherst County	Albemarle County	Accomack County	Norton City	Chesapeake City	Alleghany County	Bland County
Arlington County	Appomattox County	Amelia County	Augusta County	Nottoway County	Gloucester County	Bath County	Bristol City
Clarke County	Bristol City	Caroline County	Bland County	Orange County	Hampton City	Bedford City	Buchanan County
Fairfax City	Campbell County	Charles City County	Brunswick County	Page County	Isle of Wight County	Bedford County	Carroll County
Fairfax County	Danville City	Charlottesville City	Buchanan County	Prince Edward County	James City County	Botetourt County	Dickenson County
Falls Church City	Frederick County	Chesterfield County	Buckingham County	Rappahannock County	Mathews County	Buena Vista City	Galax City
Fauquier County	Harrisonburg, City of	Colonial Heights City	Carroll County	Richmond County	Newport News City	Clifton Forge City	Grayson County
Fredericksburg City	Lynchburg City	Cumberland County	Charlotte County	Russell County	Norfolk City	Covington City	Lee County
Loudoun County	Pittsylvania County	Dinwiddie County	Culpeper County	Shenandoah County	Poquoson City	Craig County	Norton City
Manassas City	Rockingham County	Fluvanna County	Dickenson County	Smyth County	Portsmouth City	Floyd County	Russell County
Manassas Park City	Scott County	Goochland County	Emporia City	Southampton County	Suffolk City	Franklin County	Scott County
Prince William County	Washington County	Greene County	Essex County	Staunton City	Surry County	Giles County	Smyth County
Spotsylvania County	Winchester, City of	Hanover County	Franklin City	Tazewell County	Virginia Beach City	Henry County	Tazewell County
Stafford County		Henrico County	Galax City	Waynesboro City	Williamsburg City	Highland County	Washington County
Warren County		Hopewell City	Grayson County	Westmoreland County	York County	Lexington City	Wise County
		King and Queen County	Greensville County	Wise County		Martinsville City	
		King William County	Halifax County			Montgomery County	
		Louisa County	Lancaster County			Patrick County	
		Nelson County	King George County			Pulaski County	
		New Kent County	Lee County			Radford City	
		Petersburg City	Lunenburg County			Roanoke City	
		Powhatan County	Madison County			Roanoke County	
		Prince George County	Mecklenburg County			Rockbridge County	
		Richmond City	Middlesex County			Salem City	
		Sussex County	Northampton County			Wythe County	
			Northumberland County				

Note:
Highlighted counties were moved to the Far Southwest region.

Virginia Medicaid

FY 2014 Capitation Rate Development
Fee-For-Service Data
Historical Eligibility and Claims - Foster Care and Adoption Assistance

Foster Care Exhibit 1

Child Under 21								
Statewide	Total Claims FY11	Total Claims FY12	Unadjusted PMPM FY11	Unadjusted PMPM FY12	Units/1000 FY11	Units/1000 FY12	Cost/Unit FY11	Cost/Unit FY12
Member Months	146,569	143,603						
Service Type								
DME/Supplies	$995,542	$1,031,590	$6.79	$7.18	636	608	$128.11	$141.74
FQHC / RHC	$331,481	$306,234	$2.26	$2.13	377	351	$72.05	$72.97
Home Health	$63,883	$87,403	$0.44	$0.61	62	88	$83.73	$83.24
IP - Maternity	$178,571	$164,040	$1.22	$1.14	6	6	$2,587.99	$2,448.36
IP - Newborn	$1,390,682	$675,445	$9.49	$4.70	6	6	$19,315.03	$8,772.01
IP - Other	$2,530,597	$2,621,443	$17.27	$18.25	26	23	$7,859.00	$9,567.31
IP - Psych	$3,210,356	$3,043,040	$21.90	$21.19	376	371	$699.73	$685.06
Lab	$953,309	$865,407	$6.50	$6.03	4,838	4,510	$16.13	$16.03
OP - Emergency Room	$1,019,922	$1,139,562	$6.96	$7.94	370	450	$225.55	$211.42
OP - Other	$3,025,467	$2,425,976	$20.64	$16.89	915	792	$270.83	$255.93
Pharmacy	$19,107,746	$18,978,746	$130.37	$132.16	14,188	14,110	$110.26	$112.40
Prof - Anesthesia	$115,608	$108,778	$0.79	$0.76	439	424	$21.55	$21.42
Prof - Child EPSDT	$84,561	$83,176	$0.58	$0.58	628	566	$11.03	$12.28
Prof - Evaluation & Management	$3,697,937	$3,608,688	$25.23	$25.13	4,811	4,635	$62.93	$65.06
Prof - Maternity	$117,224	$105,188	$0.80	$0.73	13	12	$714.78	$720.47
Prof - Other	$1,438,204	$1,688,381	$9.81	$11.76	4,477	4,941	$26.30	$28.56
Prof - Psych	$4,873,983	$5,409,845	$33.25	$37.67	9,528	10,670	$41.88	$42.37
Prof - Specialist	$567,415	$507,947	$3.87	$3.54	345	308	$134.62	$137.73
Prof - Vision	$428,059	$445,254	$2.92	$3.10	746	755	$46.96	$49.31
Radiology	$687,820	$665,748	$4.69	$4.64	1,687	1,686	$33.39	$33.00
Transportation/Ambulance	$100,991	$104,025	$0.69	$0.72	100	97	$83.05	$89.68
Non-ER Transportation	$0	$0	$0.00	$0.00	0	0	-	-
Total	$44,919,358	$44,065,916	$306.47	$306.86				

Virginia Medicaid

FY 2014 Capitation Rate Development
Fee-for-Service Data - Foster Care and Adoption Assistance
Pharmacy Adjustment

Foster Care Exhibit 2a

		Foster Care and Adoption Assistance	Source
1a.	Member Months	290,172	FY11-12 Foster Care and Adoption Assistance FFS Data
1b.	FFS Scripts	342,147	FY11-12 Foster Care and Adoption Assistance FFS Data
1c.	FFS Net Payments	$38,086,492	FY11-12 Foster Care and Adoption Assistance FFS Data
2a.	FFS Annual Utilization per 1000 Members	14,149	= (1b.) / (1a.) * 12000
2b.	All MCO Annual Utilization per 1000 Members	14,725	FY12 MCO Foster Care
3.	FFS Net Cost PMPM	$131.25	= (1c.) / (1a.)
4.	FFS Net Cost per Script	$111.32	= (1c.) / (1b.)
5.	Average FFS Copayment per Script	$0.00	FY11-12 FFS Data
6.	Average FFS value of Dispensing Fees	$3.53	FY11-12 FFS Data
7.	FFS Ingredient Cost per Script	$107.78	= (4.) + (5.) - (6.)
8.	Average MCO Rebate	2.3%	From MCO Plan Data
9.	FFS Ingredient Cost per Script with Rebate	$105.27	= (7.) * (1 - (8.))
10.	Brand-Generic Improvement Adjustment	1.000	Assumes a shift to MCO Brand-Generic Mix in 3 years
11.	Adjusted FFS Ingredient Cost per Script with Brand-Generic Improvement Adjustment	$105.27	= (9.) * (10.)
12.	Managed Care Savings Utilization Reduction	1.000	Assumes a shift to MCO Utilization in 3 years
13.	Adjusted FFS Ingredient Cost per Script with MC Savings Utilization Reduction	$105.27	= (11.) * (12.)
14.	MCO Average Dispensing Fees	$0.99	From MCO Plan Data
15.	Adjusted Cost per Script	$106.26	= (13.) + (14.)
16.	MCO Average PBM Admin Cost PMPM	$0.61	From MCO Plan Data
17.	Adjusted Cost PMPM	125.90	= (15.) * (1b.) / (1a.) + (16.)
18.	**Pharmacy Adjustment Factor**	**-4.1%**	= (17.) / (3.) - 1

Virginia Medicaid

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Exempt Infant Formula Carveout Adjustment

Foster Care Exhibit 2b

		LIFC Age 6-20	Source
1.	Claims Associated with Exempt Infant Formula	$14,123	FY11-12 Health Plan Encounter Data
2.	Total Claims in DME/Supplies Service Category	$6,757,531	FY11-12 Health Plan Encounter Data
3.	% of Claims in DME/Supplies Service Category Associated with Age 6-20	52%	FY11-12 Foster Care and Adoption Assistance FFS Data
4.	**Exempt Infant Formula Carveout Adjustment**	**-0.1%**	= - (1.) / (2.) * (3.)

Virginia Medicaid

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Hospital Inpatient Adjustments

Foster Care Exhibit 2c

	Inpatient Medical/Surgical	Inpatient Psychiatric	Source
1a. FY11 Total Claims in IP Service Categories	$357,840,941	$33,136,381	FY11 Health Plan Encounter Data
1b. FY12 Total Claims in IP Service Categories	$372,743,425	$34,860,616	FY12 Health Plan Encounter Data
2. FY11-12 Hospital Capital Percentage	9.7%	9.7%	Provided by DMAS
3. % Excluded Claims from Freestanding Psych Hospitals	0.0%	12.4%	FY11-12 Health Plan Encounter Data
4a. FY12 Capital Reimbursement Reduction	5.3%	5.3%	Provided by DMAS
4b. Dollar Change	($1,851,330)	($150,251)	= - (1a.) * (2.) * (1 - (3.)) * (4a.)
5a. FY13 Hospital Rate Change	2.6%	2.6%	Provided by DMAS
5b. Dollar Change	$17,152,561	$1,399,155	= ((1a.) + (1b.)) * (1 - (2.)) * (1 - (3.)) * (5a.)
6a. FY14 Hospital Rate Change	4.7%	-7.4%	Provided by DMAS
6b. Dollar Change	$31,601,749	($4,067,655)	= ((1a.) + (1b.)) * (1 - (2.)) * (1 - (3.)) * (1 + (5a.)) * (6a.)
7. Hospital Inpatient Adjustment	**6.4%**	**-4.1%**	= ((4b.) + (5b.) + (6b.)) / ((1a.) + (1b.))

Virginia Medicaid

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Freestanding Psychiatric Hospital Rate Adjustment

Foster Care Exhibit 2d

	Adjustment Values	Source
1a. FY11 Total Claims in IP Service Categories	$33,136,381	FY11 Health Plan Encounter Data
1b. FY12 Total Claims in IP Service Categories	$34,860,616	FY12 Health Plan Encounter Data
2. FY11-12 Hospital Capital Percentage	3.9%	Provided by DMAS
3. % Excluded Claims from Freestanding Psych Hospitals	12.4%	FY11-12 Health Plan Encounter Data
4a. FY12 Capital Reimbursement Reduction	5.3%	Provided by DMAS
4b. Dollar Change	($8,517)	= - (1a.) * (2.) * (3.) * (4a.)
5a. FY13 Hospital Rate Change	2.6%	Provided by DMAS
5b. Dollar Change	$209,941	= ((1a.) + (1b.)) * (1 - (2.)) * (3.) * (5a.)
6a. FY14 Hospital Rate Change	-0.9%	Provided by DMAS
6b. Dollar Change	($74,316)	= ((1a.) + (1b.)) * (1 - (2.)) * (3.) * (1 + (5a.)) * (6a.)
7. FY14 Hospital Rate Change	**0.2%**	Provided by DMAS

Virginia Medicaid

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Hospital Outpatient Adjustment

Foster Care Exhibit 2e

			LIFC	Source
1.	Claims Associated with FY11 Outpatient Services	a. OP - Emergency Room & Related	$99,420,809	FY11 Health Plan Encounter Data
		b. OP - Other	$116,927,184	FY11 Health Plan Encounter Data
2.	Claims Associated with FY12 Outpatient Services	a. OP - Emergency Room & Related	$100,474,340	FY12 Health Plan Encounter Data
		b. OP - Other	$116,962,304	FY12 Health Plan Encounter Data
3.	% ER Triage of Total Outpatient		6.0%	Provided by DMAS
4.	% FY11 OP - Emergency Room & Related of Total Outpatient		46.0%	= (1a.) / ((1a.) + (1b.))
5.	% FY11 Claims Exempt from Fee Reduction		13.1%	= (3.) / (4.)
6.	FY12 Hospital Outpatient Rate Reduction		5.0%	Provided by DMAS
7.	Dollar Change	a. OP - Emergency Room & Related	-$4,321,996	= - (1a.) * (1 - (5.)) * (6.)
		b. OP - Other	-$5,846,359	= - (1b.) * (6.)
8.	**Hospital Outpatient Adjustment**	**a. OP - Emergency Room & Related**	**-2.2%**	= (7a.) / ((1a.) + (2a.))
		b. OP - Other	**-2.5%**	= (7b.) / ((1b.) + (2b.))

Virginia Medicaid

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Behavioral Health Utilization Adjustments

Foster Care Exhibit 2f

		LIFC Age 6 - 20	
1.	Estimated additional annual expenditures effective FY12	$900,000	Provided by DMAS
2.	% Allocation	75.7%	FY11 Health Plan Encounter Data
3.	Estimated additional annual expenditures by Aid Category	$681,165	= (1.) * (2.)
4.	Prof - Psych Service Category - Ages 6 - 20	$8,563,740.22	FY11 Health Plan Encounter Data
5.	% of Claims in Prof - Psych Service Category Ages 6-20	95%	FY11-12 Foster Care and Adoption Assistance FFS Data
6.	**Behavioral Health Utilization Adjustment**	**3.8%**	= (3.) / (4.) * (5.) * (12/24 months)

Virginia Medicaid

FY 2014 Capitation Rate Development
Fee-for-Service Data - Foster Care and Adoption Assistance
Non-ER Transportation Adjustment

Foster Care Exhibit 2g

	Adjustment Value	Source
Non-ER Transportation Rate	**$1.04**	From DMAS - Service Cost Component Only for LIFC Child

Virginia Medicaid

FY 2014 Capitation Rate Development
Fee-for-Service Data - Foster Care and Adoption Assistance
Emergency Transportation Adjustment

Foster Care Exhibit 2h

	Adjustment Value	Source
Emergency Transportation Adjustment	**38.4%**	Provided by DMAS

Virginia Medicaid

FY 2014 Capitation Rate Development
Fee-for-Service Data - Foster Care and Adoption Assistance
Managed Care Savings Adjustment

Foster Care Exhibit 2i

Service Category	Adjustment Value	Source
All Service Categories	-8.5%	Additional expected managed care savings / Excludes Pharmacy

Virginia Medicaid

FY 2014 Capitation Rate Development
Health Plan Encounter Data
Administrative Cost Adjustment

Foster Care Exhibit 2j

		LIFC Child	Source
1.	Administrative allowance as % of Base Capitation Rate	8.51%	As applied for Medallion II Rates
2.	Contribution to Reserves as % of Base Capitation Rate	1.50%	Provided by DMAS
3.	**Administrative Factor as % of Base Capitation Rate**	**10.0%**	= (1.) + (2.)

*Note:
Administrative increases are applied from midpoint of CY2012 to the midpoint of the contract period (18 months) using compound interest calculations.

Virginia Medicaid

Foster Care Exhibit 3

FY 2014 Capitation Rate Development
Fee-For-Service Data
Incurred But Not Reported (IBNR), Policy/Program, and Trend Adjustments - Foster Care and Adoption Assistance

	Foster Care and Adoption Assistance Child Under 21							
	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend	Total Trend Factor
Category of Service	**IBNR**	**Policy/ Program[1]**	**Total Base Data Adjustments**	**Cost Trend**	**Utilization Trend**	**Cost and Utilization Trend**		
Inpatient Medical/Surgical	0.0%	6.4%	6.5%	-1.0%	-3.9%	-4.8%	0.0%	0.9516
Inpatient Psychiatric	0.1%	-4.0%	-3.9%	-3.2%	9.1%	5.6%	1.3%	1.0769
Outpatient Hospital	0.4%	-2.4%	-2.0%	-4.3%	0.1%	-4.2%	0.0%	0.9577
Practitioner	0.2%	1.6%	1.9%	1.3%	8.2%	9.6%	4.9%	1.1782
Prescription Drug	0.0%	-4.1%	-4.1%	2.6%	-0.5%	2.1%	2.6%	1.0616
Other	0.2%	1.4%	1.6%	4.6%	-1.0%	3.6%	1.8%	1.0644
Weighted Average[2]	**0.1%**	**-1.2%**	**-1.0%**	**1.1%**	**2.2%**	**3.3%**	**2.7%**	**1.0761**
Months of Trend Applied				12	12	12	18	

[1] The Policy and Program Adjustments are summarized in this table as weighted averages and are applied at the rate cell level in Exhibit 12. Managed care savings adjustment are excluded.

[2] Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY11-12), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY11-12 Claims)

Trend rates for the Foster Care and Adoption Assistance population are calculated based on regression studies of FFS data.

Trend rates have been calculated separately for the broad service categories shown above. Utilization trend is based on service units per thousand.

Data period trends are applied from the midpoint of the data period to the end of the data period using compound interest calculations; includes FY11-12 incurred claims paid through Dec 2012.

Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes FY10-12 incurred claims paid through Dec 2012.

Total Trend = [(1 + data period trend) ^ (months/12) * (1 + contract period trend) ^ (months/12)]

Virginia Medicaid

FY 2014 Capitation Rate Development
Capitation Rate Calculations - Fee-for-Service Data
Foster Care and Adoption Assistance

Foster Care Exhibit 4

Child Under 21								
Statewide	Total Base Claims FY11-12	Completion Factor Adjustments	Policy and Program Adjustments[1]	Completed and Adjusted Claims FY11-12	Trend Adjustment	Completed & Trended Claims FY14	Managed Care Utilization Adjustment	PMPM FY14
Service Type								
DME/Supplies	$2,027,131	$3,676	($2,222)	$2,028,586	1.064	$2,159,289	0.915	$6.81
FQHC / RHC	$637,715	$1,495		$639,210	1.178	$753,104	0.915	$2.37
Home Health	$151,286	$580		$151,866	0.958	$145,436	0.915	$0.46
IP - Maternity	$342,611	$143	$22,005	$364,758	0.952	$347,087	0.915	$1.09
IP - Newborn	$2,066,127	$861	$132,699	$2,199,687	0.952	$2,093,120	0.915	$6.60
IP - Other	$5,152,040	$2,147	$330,895	$5,485,082	0.952	$5,219,348	0.915	$16.46
IP - Psych	$6,253,396	$3,809	($247,690)	$6,009,516	1.077	$6,471,695	0.915	$20.41
Lab	$1,818,716	$3,298		$1,822,015	1.064	$1,939,408	0.915	$6.12
OP - Emergency Room & Related	$2,159,484	$8,276	($46,870)	$2,120,890	0.958	$2,031,097	0.915	$6.40
OP - Other	$5,451,443	$20,893	($136,788)	$5,335,548	0.958	$5,109,653	0.915	$16.11
Pharmacy	$38,086,492	$78	($1,552,426)	$36,534,144	1.062	$38,785,927	1.000	$133.67
Prof - Anesthesia	$224,386	$526		$224,912	1.178	$264,987	0.915	$0.84
Prof - Child EPSDT	$167,737	$393		$168,130	1.178	$198,088	0.915	$0.62
Prof - Evaluation & Management	$7,306,625	$17,124		$7,323,749	1.178	$8,628,690	0.915	$27.21
Prof - Maternity	$222,411	$521		$222,933	1.178	$262,655	0.915	$0.83
Prof - Other	$3,126,584	$7,327		$3,133,912	1.178	$3,692,310	0.915	$11.64
Prof - Psych	$10,283,828	$24,101	$388,855	$10,696,784	1.178	$12,602,731	0.915	$39.74
Prof - Specialist	$1,075,362	$2,520		$1,077,882	1.178	$1,269,938	0.915	$4.00
Prof - Vision	$873,313	$2,047		$875,360	1.178	$1,031,331	0.915	$3.25
Radiology	$1,353,568	$2,455		$1,356,023	1.064	$1,443,393	0.915	$4.55
Transportation/Ambulance	$205,016	$372	$78,826	$284,214	1.064	$302,526	0.915	$0.95
Non-ER Transportation	$0	$0		$0	1.000	$0	0.915	$1.04
Total	$88,985,274	$102,642	($1,032,716)	$88,055,201		$94,751,813		$311.18
Admin Cost Adjustment								$34.61
Medallion II Capitation Rate								**$345.79**

[1] Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid

Foster Care Exhibit 5

FY 2014 Capitation Rate Development
Fee-for-Service Data - Foster Care and Adoption Assistance
Comparison of FY 2013 and FY 2014 Capitation Rates and Member Months

	Statewide		
Child Under 21	**FY 2013 Foster Care Richmond Pilot**	**FY 2014 Foster Care and Adoption Assistanace**	**% Change**
Capitation Rate	$633.42	$345.79	-45.4%
February 2013 Member Months		154	
Medicare Enhanced PCP Supplemental Payment PMPM *		$8.89	
Capitation Rate Including Medicare Enhanced PCP Supplemental Payment		**$354.69**	**-44.0%**

* Includes 5% Utilization Adjustment